

KAUAI COUNTY

DEPARTMENT OF LIQUOR CONTROL

4444 RICE STREET, SUITE 120, KAUAI, HAWAII 96766
PHONE (808) 241-4699 • EMAIL LIQUOR@KAUAI.GOV
INTERNET ADDRESS: https://www.kauai.gov/Liquor

REQUEST FOR CANCELLATION OR SAFEKEEPING OF LIQUOR LICENSE

HRS §281-41(j)

Check one (1):

Cancellation of Liquor License

The date of cancellation will be determined by the Liquor Commission. A final Gross Liquor Sales Report shall be due and payable no later than 31 days after cancellation.

For Liquor Commission only - Date liquor license Canceled: \_\_\_\_\_

Request to place Liquor License in Safekeeping (Expires June 30)

Any request to renew a liquor license in safekeeping beyond June 30, must be heard and receive Commission approval. Licensee must continue to comply with all Liquor Commission laws and rules, including submission of the Annual Gross Liquor Sales Report by July 31, regardless of the sales amount.

For Liquor Commission only - Date liquor license was placed in Safekeeping: \_\_\_\_\_

Request to remove Liquor License from Safekeeping

Received by (Print Name): \_\_\_\_\_ Phone #: \_\_\_\_\_

For Liquor Commission only - Date liquor license was picked-up and status reverted back to "Active": \_\_\_\_\_

Provide the following information:

Liquor License #: \_\_\_\_\_

Licensee Name: \_\_\_\_\_

Trade Name / DBA: \_\_\_\_\_

Premises Address: \_\_\_\_\_

Check one (1):

Attach the original Liquor License to this request

Unable to return original Liquor License. Explain: \_\_\_\_\_

SIGNATURE Licensee (Owner) / Authorized Agent

DATE

PRINT Licensee (Owner) / Authorized Agent

Forward Correspondence to: \_\_\_\_\_ Contact Name

Mailing Address: \_\_\_\_\_

Bus. #: \_\_\_\_\_ Mobile #: \_\_\_\_\_ Email: \_\_\_\_\_

For KLCD Office Use Only

ENTRY DATE: \_\_\_\_\_

Approved

Denied

KLDC STAFF INITIAL: \_\_\_\_\_

Administrator

Date