	ALCO IOL BEVERA(P. O. Box 7(10), Meridian, 1D 836J7(10 (208) 884-7060	
Applicant Name:	FLOOR PLAN Mike ZEMKE EXALTED RUIER (Name of Individual(s), Registered Partnership, Curporation, Association or LLC)	
Applicant Name:		
Business Name:	REPRESENTATION FOR THE REPORT OF A STATE OF	<u> </u>

Business Location: ______200 West 100 South Rupert, Idaho 83350

(Instructions: Sketch should show the entire area proposed to be licensed, all entrances and exits, location of bar, back bar, bar stools, booths, tables, coin operated amusement devices and the place where licenses are regularly displayed. There should also be indicated in the margin the direction and the distance to the nearest school, church, or other places of worship, measuring from the nearest entrance of the licensed premises to the nearest entrance of the school, church, or other place of worship, if within 300 feet.)

Lodse Room	Covered Dat:0	fro Shop
Pool storage Room Honst Rean Ent South Bar	N Diving Banguit P Diving Banguit Room Room . H BAR H BAR	PRIVATE BANQUET Room
office office	Mess Jor Book Endry Kitchen En	<u> </u>

I HEREBY CERTIFY THAT THE BUILDING WHEREIN IT IS PROPOSED TO SELL BEER AT RETAIL CONFORMS TO ALL LAWS AND REGULATIONS OF THE STATE OF IDAHO AND TO THE ORDINANCES OF THE COUNTY AND CITY RELATING TO HEALTH, SAFETY AND ZONING. (Idaho Code section 23-1010(2)(b).) I FURTHER CERTIFY THAT I HAVE RECEIVED APPROVAL OF THE ABOVE PREMISE FROM THE GOVERNMENT FOR THE FACILITY'S LOCATION. (PLEASE ATTACH APPROVAL NOTIOE.) (Am. 2/90)

Applicant Signature 9th Subscribed and Sworn to before me this _____

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(DISERNALISSIN)

εl Notary Public Residing at Bok

JUN 2 1 2007 IDAHO STATE POLICE ALCOHOL BEVERAGE CONTROL

My Commission Expires 3-24-09

ABC APP4 4/94 NOTE: PLEASE RETURN BOTH-C