



City of Nebraska City
1409 Central Avenue
Nebraska City, NE 68410
(402) 873-5515

FEE: \$25.00

APPLICATION FOR TOBACCO LICENSE

Application is hereby made to the City of Nebraska City, Nebraska by:

Name Title Telephone

Mailing Address City State Zip Code

For:

Business Name

under the provisions of Section 28-1420 to 28-1423 inclusive, R.R.S. Nebraska 1993, as amended, to sell at retail, **Tobacco, Cigars, Cigarettes, and Cigarette Materials**, at:

Business Address

in Nebraska City, NE 68410.

This license application is for the year ending December 31, 20____

Dated this _____ day of _____, 20____ at Nebraska City, Nebraska.

Applicant Signature

Receipt Number: _____

Date Received: _____

License Number: _____

Date License Sent: _____