

Temporary Liquor License Permit

Non-Profit:		Special Event:	
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Organization:	
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Requested By:	
Mailing Address:	
City, State, Zip:	
Telephone:	

Event:					
Event Location:					
Event Date:					
Event Time:					
Type of License (mark one):	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="width: 33%; border: 1px solid black; text-align: center;">Beer & Wine Only</td> <td style="width: 33%; border: 1px solid black; text-align: center;"><input type="checkbox"/></td> <td style="width: 33%; border: 1px solid black; text-align: center;">Full Alcohol</td> </tr> </table>	<input type="checkbox"/>	Beer & Wine Only	<input type="checkbox"/>	Full Alcohol
<input type="checkbox"/>	Beer & Wine Only	<input type="checkbox"/>	Full Alcohol		

Approved by: _____
Parks Superintendent _____
 Date

Approved by: _____
Ronald Pierini, Sheriff _____
 Date

Fee Paid:	
Date of Application:	

**What steps will you take to limit alcohol access to our youth at your event?
 (see attached)**

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