City of Gillette
One (1) Day Malt Beverage Permit Application

Applicant Name: _____
(Please use the name in which the Liquor License is issued. Catering permits may only be issued to Retail Liquor License holder.)

Address: _____ Phone Number: _____

_____ Cell Phone Number: _____

Contact Person at the Event* _____
*Must be present at the event at all times.

Contact Phone Number at the Event: _____

Date of the Event: _____ Event Start Time*: _____ Event End Time*: _____
*Please note that applications requesting **outdoor** event times before 8:00 a.m. or after 12:00 a.m. (midnight) will not be approved.

Outdoor Event: ☐ Yes ☐ No Anticipated Occupancy: _____

Location of the Event: _____

Do you, the applicant, own the event location? ☐ Yes ☐ No
If no, please obtain a written statement to include with this application from the landowner permitting the proposed activity, including the consumption and possession of alcoholic or malt beverages, as described in this application.

Short Summary of the Reason for the Event: _____

Detailed Description of Activities/Entertainment at the Event:

Names and Ages of Persons Serving Alcoholic Beverages:

Name: _____ Age: _____ Name: _____ Age: _____
Name: _____ Age: _____ Name: _____ Age: _____
Name: _____ Age: _____ Name: _____ Age: _____

Who is checking IDs? _____

Stamps? ☐ Yes ☐ No Wrist Bands? ☐ Yes ☐ No

Live Band? ☐ Yes ☐ No Other type of outdoor music/sound/P.A. system? ☐ Yes ☐ No

Other Entertainment? ☐ Yes ☐ No Type? _____

Entertainment Start Time: _____ a.m. p.m. Entertainment End Time: _____ a.m. p.m.

Security? ☐ Yes ☐ No By Whom? _____ How Many? _____

Type of fencing or boundary for the sale, consumption and possession area:

Other facilities (i.e. additional parking, trash containers, portable toilets): _____

Provide a detailed description of the area(s) in which the sales, possession and consumption of alcoholic beverages will occur:

Provide a drawing of the area(s) in which the sale, possession and consumption of alcoholic beverages will occur. Please be as specific and detailed as possible.

North

*Please be aware that the consumption of alcohol beyond the approved boundaries is in violation of this permit and City ordinance.

Fees: $50 (non-refundable) for applications submitted at least 3 weeks prior to event date.
$100 (non-refundable) for applications submitted less than 3 weeks prior to event date.

_____ _____
Signature of Applicant Date of Application

For Official Use Only:

Approved ☐ Yes ☐ No Approved ☐ Yes ☐ No

_____ _____ _____ _____
City Clerk/Designee Date Chief of Police/Designee Date

Has Fire Department/Designee Been Notified? ☐ Yes ☐ No Fire Permit Attached ☐ Yes ☐ No