

Park City Municipal
APPLICATION FOR SPECIAL EVENT TEMPORARY
ALCOHOLIC BEVERAGE LICENSE

1. Organizational Information.

Name of Organization: _____

Address: _____
Street Suite # City State Zip

Business License Number: _____ Date Organization Founded: _____

Mailing Address (if different): _____

Type of organization: (check one)

- Incorporated Association Religious Organization Corporation Partnership
- Non-Profit Corporation Political Organization Limited Liability Company
- Check if a local chapter or sub-unit of any of the above.*
- Utah state agency or political subdivision of the state including a county or a municipality

Please attach a Certificate of Existence and one additional document verifying the existence of business (check all that apply)

- Certificate of Existence (*Required*) Articles of Incorporation
- Partnership Agreement Other: _____

FEDERAL TAX # _____ STATE TAX # _____

Names of all Owners, Officers, and Directors that have power to make decisions for the entity. Include partners, managers, managing agents, stockholders who hold at least 20% of the total issued and outstanding stock of Applicant Corporation, or members who own at least 20% of an applicant limited liability company (attach additional page if necessary).

Name	Home Address	City, State, Zip	Date of Birth & Driver's License #

2. Liquor Liability Insurance Information.

Insurance Company Name and Address: _____

Policy Number: _____ Effective Date: _____

Attach insurance certificate for insurance with a minimum amount of \$1 million per occurrence, \$2 million aggregate.

3. Responsible Party. Please list the name of the person responsible for completing, signing, and submitting this application.

Name: _____ Date of Birth: _____

Mailing Address: _____ , _____ , _____
(Street Address) (City) (State) (Zip Code)

Phone number: _____ Fax: _____

E-mail: _____

Driver's License Number: _____ Issuing State: _____

4. Local Agent. Please list the name and Utah mailing address of a local agent authorized to receive service of process.

Name: _____

Utah Mailing Address: _____ , _____ , UT _____
(Street Address) (City) (Zip Code)

Phone number: _____ Fax: _____

E-mail: _____

5. Event Information.

Name of event: _____

Location of event: _____ Unit # _____

Date of this event: _____ and hours of event: _____

Description of event: _____

Type of alcohol being served: _____

Number of people at event: _____

Admission policy (Admission Charge; Guest List, etc.): _____

6. Liquor License Information.

Please list existing or prior beer or liquor licenses held (include special events licenses): _____

Have you or anyone claiming ownership or directorship had any beer or liquor licenses revoked by a government agency within the past 3 years? YES NO

7. Criminal History. Please list all criminal offenses, other than minor traffic offenses, of which you or any officers, partners, managers, managing agents, directors, stockholders who hold at least 20% of the total issued and outstanding stock of an applicant corporation, members who own at least 20% of an applicant limited liability company, and any person employed in a supervisory or managerial capacity have ever been convicted (also include any pending criminal charges). If none, the undersigned applicant attests that the above persons have not been convicted of any disqualifying criminal offense (attach additional page if necessary).

Name	Criminal Offense	Date of Conviction

By signing below, the above listed Responsible Party attests that:

- The Responsible Party is authorized to act on behalf of the applicant;
- The Responsible Party is responsible to ensure that all actions taken under a license derived from this application comply with state and local laws;
- The Responsible Party may be held liable for any actions taken under a license derived from this application, including, but not limited to, any criminal or civil penalties arising from the misuse of a liquor license or the violation of state and/or local liquor laws;
- The Responsible Party’s acceptance of responsibility, including liability for any criminal or civil penalties stemming from the violation of state and/or local liquor laws, is separate from and in no way limits the duties and liabilities held by directors, officers, managers, or other agents of the above named organization to ensure compliance with state and local liquor laws;
- No one under the age of 21 is a partner or managing agent of the applicant partnership; a managing agent, officer, director, or stockholder who holds at least 20% of the total issued and outstanding stock of the applicant; or a manager or member who owns at least 20% of the applicant limited liability company;
- The Applicant and all officers, partners, and/or directors meet the Licensee qualifications set forth under the Utah Code Annotated and the Park City Municipal Code;

- No person in the alcoholic beverage industry (winery, brewery, distillery, importer, supplier, wholesaler, bottler, or warehouse) holds a partial interest in the ownership of the retail business or in the real or personal property owned, occupied, or used by the applicant in the conduct of the applicant's business.
- No gambling or any other violation of law or ordinance will be allowed on the premises serviced by the single event permittee;
- The applicant does not and will not discriminate against persons on the basis of race, color, sex, religion, ancestry, or national origin at the event;
- He/she has read and abides by the provisions of the relevant parts of Utah Code 32B-9 & 32B-15, all Rules of the Commission and directives of the Department of Alcoholic Beverage Control; and understands that failure to comply with these provisions, including any ongoing eligibility requirements, may result in immediate suspension and/or revocation of the license;
- The applicant gives consent that authorized representatives of the commission, department, or any law enforcement officers will have unrestricted right to enter the premises during the event;
- Responsible Party authorizes the Local Agent listed in this application to accept service of process; and,
- The Responsible Party attests under penalty of perjury that the information contained in this application is true and correct.

Dated this ____ day of _____, _____.

State of _____

County of _____

Subscribed & sworn to before me this _____

day of _____, _____.

Responsible Party's Signature

Notary Public

SEAL:

Name/Title