



# ALCOHOL BEVERAGE CATERING PERMIT

Please Note: An alcohol beverage catering permit shall be limited to authorization to sell liquor, beer or wine, or any combination thereof, for a period not to exceed (5) five consecutive days. §23-934A

Fee: \$20.00 per day – non refundable fee

Name of Alcohol License Holder & DBA: \_\_\_\_\_

Address of License Holder: \_\_\_\_\_

State License #: Beer # \_\_\_\_\_ Wine # \_\_\_\_\_ Liquor # \_\_\_\_\_

Dates/Times of Use:	Date _____	From _____	(a.m./p.m.)	To _____	(a.m./p.m.)
	Date _____	From _____	(a.m./p.m.)	To _____	(a.m./p.m.)
	Date _____	From _____	(a.m./p.m.)	To _____	(a.m./p.m.)
	Date _____	From _____	(a.m./p.m.)	To _____	(a.m./p.m.)
	Date _____	From _____	(a.m./p.m.)	To _____	(a.m./p.m.)

The sponsored event will be open to the organization(s), group(s), or person(s) and guests for a period of \_\_\_\_\_ days.

Event will serve - *Must match state licensee* **Circle all that apply:**  
Beer, Wine, Liquor

\_\_\_\_\_  
*Signature of Licensee*

Catering For Event Name: \_\_\_\_\_

Name of Organization/Group/Persons Sponsoring Event: \_\_\_\_\_

Phone No: \_\_\_\_\_ Email address: \_\_\_\_\_

Address Where Liquor/Wine/Beer Will Be Served: \_\_\_\_\_

*\*If Public Building indicate rooms or area where alcohol is to be sold, attach map if necessary.*

Applicant's Signature or Designee: \_\_\_\_\_

*Applicant Signature - Must be present during entire event*

**Approved with conditions to ensure public safety §23-934B Circle one- YES or NO**

Describe conditions here:

\_\_\_\_\_  
\_\_\_\_\_

Approval of this permit certifies that the licensee is entitled to hold and use this Idaho Liquor Catering Permit at the above designated premises, subject to provisions of Title 23-I.C.

Approved

Approved

Denied

Denied

By: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_ Date: \_\_\_\_\_

*Police Chief or Designee*

*Fire Chief or Designee*

This application must be received by the City Clerk not less than 14 days prior to the catering dates requested. This catering permit is non-transferable and is valid only under the conditions and terms approved by the Hailey City Council and within the city limits.

By: \_\_\_\_\_ Date: \_\_\_\_\_

*City Clerk or Designee*

Endorsements sent on \_\_\_\_\_ to HPD, HFD & applicant: Mail, email or hand delivered

**THIS PERMIT MUST BE DISPLAYED THROUGHOUT THE ENTIRE EVENT**