

## APPLICATION-SPECIAL LICENSE 3.2 BEVERAGES

Date of Application:	
NAME OF ORGANIZATION:	
PERSON RESPONSIBLE:	
ADDRESS:	PHONE:
DATE OF EVENT:	
TYPE OF EVENT:	
LOCATION OF EVENT:	
NAME OF INSURANCE COMPANY:	
Liability \$25,000/\$50.000	
Property Damage \$5,000 *Copy of Insurance must be attached to application	
SIGNATURE OF APPLICANT:	
***********	*************
FEE: \$25.00	
Receipt #	
Council Approval:	
License # Council Stipulations:	