CITY OF ADEL
Alcoholic Beverages Catering Event Permit Application

GENERAL INFORMATION

1. Name of Event: _____

2. Date of Event: _____

3. Time Period of Event: _____

4. Location of Event: _____

5. Contact Person: _____

6. Contact information: _____

7. Email address: _____

8. Name of Alcoholic Beverage Caterer:_____

9. Alcoholic Beverage Caterer's License Number:_____

10. Host/Sponsor of Event:_____

11. Estimated # of persons to attend that are of legal age:_____

12. Estimated # of persons to attend that are not of legal age:_____

13. Open or Cash Bar at the Event:____Yes____No

14. Estimated quantities of malt beverages, wine and/or distilled spirits (to extent authorized by license) to be served at event:
    malt beverages_____
    wine_____
    distilled spirits_____

15. Is Facility Public or Private: _____Public_____Private

16. Distilled Spirits: Is event location within 100 yards of any church building or within 200 yards of any school building, educational building, school grounds or college campus?_____Yes_____No

17. Wine/Malt Beverages: Is event location within 100 yards of any school building, school grounds or college campus?____Yes_____No

18. Is event location where distilled spirits, wine, or malt beverages will be provided within 100 yards of an alcoholic treatment center owned and operated by this state or any county or municipal government?_____Yes_____No

OTHER REQUIREMENTS

1. A Plat or sketch shall be submitted showing the service area where alcoholic beverages will be served indicating whether said area is within the building or in an open area
2. Compliance with reporting provisions of O.C.G.A. 3-11-3
3. Provide security and parking enforcement plans and personnel as required.
4. Event permit must be completed in full and submitted to the city manager's office at least fourteen (14) calendar days prior to the scheduled date of the event.
5. $50 Event Permit

Signature: _____ Date: _____

ADMINISTRATIVE:

1. Complete application received: Yes   No   Date_____
2. Proper application fee paid: Yes   No   Date_____
3. Does the applicant have a security plan?   Yes   No
4. Does the applicant meet the legal requirements of the City of Adel's Alcoholic Beverage Ordinance?   Yes   No
5. Does the applicant have a parking/traffic plan?   Yes   No
1. Has the applicant provided for adequate litter collection and disposal at the end of the event?   Yes   No

CITY MANAGER

1. Application is   **Approved**   **Rejected**   Date_____

Comments:_____

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City Manager's Signature