

<b>CITY OF GUNNISON LIQUOR LICENSING AUTHORITY PO BOX 239 GUNNISON, CO 81230-0239 970-641-8140</b>	<b>APPLICATION FOR A SPECIAL EVENT LIQUOR PERMIT</b>		<b>CLERKS USE ONLY</b> Application Rec'd: _____ Posting Dates: _____ Permit Issued: _____ Permit Number: _____	
NAME OF APPLICANT ORGANIZATION OR POLITICAL CANDIDATE			STATE SALES TAX #	
MAILING ADDRESS OF ORGANIZATION OR POLITICAL CANDIDATE		ADDRESS OF SPECIAL EVENT LOCATION		
PRES./SEC'Y OF ORG. or POLITICAL CANDIDATE NAME:  ADDRESS:		BIRTH DATE:	PHONE NUMBER	
		EMAIL:		
EVENT MANAGER, HOME ADDRESS, CITY, ST, ZIP NAME:  ADDRESS:		BIRTH DATE:	PHONE NUMBER	
		EMAIL:		
HAS APPLICANT BEEN ISSUED SPECIAL EVENT PERMITS THIS CALENDAR YEAR?      YES      NO      # PERMITS YTD:				
IS THE EVENT PREMISE LICENSED UNDER STATE LIQUOR CODE?      YES      NO      IF YES, LICENSE TYPE:				
PROOF OF POSSESSION OR WRITTEN PERMISSION FOR USE OF THE PREMISE TO BE LICENSED?      YES      NO				
<b>LIST BELOW THE EXACT DATE(S) AND TIME(S) FOR WHICH APPLICATION IS BEING MADE FOR PERMIT(S)</b>				
DATE:  FROM:      TO:	DATE:  FROM:      TO:	DATE:  FROM:      TO:	DATE:  FROM:      TO:	
ATTENDEES EXPECTED:	ATTENDEES EXPECTED:	ATTENDEES EXPECTED:	ATTENDEES EXPECTED:	
PLEASE PROVIDE A DESCRIPTION OF THE NATURE OF THE EVENT(S):				
WHAT ORGANIZATION WILL DIRECTLY RECEIVE FUNDS DERIVED, IF APPLICABLE, FROM THE EVENT(S):				
WHAT FOOD WILL BE AVAILABLE AT THIS EVENT: (Note: sandwiches/substantial snack-type food must be available while alcohol being served)				
PROVIDE A DESCRIPTION OF THE DRINK MENU AND THE CONTAINER SIZE(S) AND TYPES TO BE USED:				
WHERE WILL ALCOHOL BE STORED BEFORE/AFTER EVENT? (PROVIDE STORAGE PREMISE MAP AND PROOF OF POSSESSION)				
WILL ALCOHOL BE SOLD DURING THE EVENT?      YES      NO      WILL ALCOHOL BE DONATED?      YES      NO				

HOW WILL PREMISE BE CONTROLLED TO ASSURE NO ALCOHOL ENTERS/EXITS THE PREMISE, i.e. LOCATION OF SECURITY, BARRIERS, ETC:

NAMES OF OTHER VOLUNTEERS/STAFF TRAINED IN THE SALE/SERVICE OF ALCOHOL WHO WILL BE ON SITE DURING THE EVENT:

HOW WILL PATRONS OVER 21 BE IDENTIFIED, (i.e. location of ID check, issuance of stamps or wristbands, etc.) AND WHAT MEASURES WILL BE TAKEN TO PREVENT THE SERVING OF ALCOHOL TO MINORS?

**APPLICATION MUST BE RECEIVED AT LEAST 30 DAYS PRIOR TO EVENT IN ORDER FOR PERMIT TO BE PROCESSED**

**THE FOLLOWING SUPPORT DOCUMENTATION MUST BE ATTACHED TO THIS APPLICATION:**

- \_\_\_ **FEE: \$50 PER DAY** If complete application received 30 days prior, payable to **CITY OF GUNNISON**
- \_\_\_ **PREMISE MAP:** 8-1/2"X11" Diagram of the premise outlined in red, reflecting bars, walls, partitions, ingress, egress & dimensions, North arrow, address of premise. (diagram does not need to be drawn to scale).  
Note: If the event is to be held outside, please submit evidence of intended control, i.e., fencing, ropes, barriers, etc.
- \_\_\_ **POSSESSION DOC:** Copy of deed, lease, or written permission of owner for use of the premises.  
(If the event is on City of Gunnison property, copy of signed rental contract and/or approved City Event Permit is required.)
- \_\_\_ **LIQUOR STORAGE PREMISE MAP:** Diagram of storage premise with storage location outlined in red.
- \_\_\_ **LIQUOR TRAINING CERTIFICATION FOR EVENT MANAGER**

**ONE OF THE FOLLOWING:**

- \_\_\_ **CERT OF GOOD STANDING:** Certificate of good corporate standing (NONPROFIT) issued by Sec of State within last 2 yrs
- \_\_\_ **NONPROFIT CHARTER:** If organization is not incorporated
- \_\_\_ **REPORTING:** If a political candidate, attach copies of reports and statements filed with the Secretary of State

**OATH OF APPLICANT**

I declare under penalty of perjury in the second degree that I have read the foregoing application and all attachments thereto, and that all information therein is true, correct, and complete to the best of my knowledge.

SIGNATURE	TITLE	DATE
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**CITY OF GUNNISON LOCAL LICENSING AUTHORITY APPROVAL:**

**GUNNISON CITY CLERK: PO BOX 239; GUNNISON, CO 81230 970-641-8140 gdavidson@gunnisonco.gov**

SIGNATURE	TITLE	DATE
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**CITY OF GUNNISON, COLORADO**  
**SPECIAL EVENT LIQUOR PERMIT EVENT MANAGER TRAINING CERTIFICATION**

The Designated Event Manager, as specified on the City of Gunnison Special Event Liquor Permit Application, is responsible for the safe and legal conduct of the Permitted Special Event. This includes, but is not limited to, ensuring the sale/service of alcohol is conducted according to State of Colorado Rules and Regulations regarding: types of alcohol that can be served/sold; food service requirements for Event; hours alcohol can be sold/served; age requirements of servers; age requirements to purchase/possess/consume alcohol in the State; bringing in outside alcohol to the Event; donation or purchase of alcohol to be provided at the Event; and posting requirements at the Event;

**Attached Special Event Liquor Permit Information:**

- City of Gunnison Special Event Liquor Permit Server Information;
- Valid Proof of Age Information Sheet from Liquor & Tobacco Enforcement Division;
- Sign of Alcohol Intoxication Information Sheet from Liquor & Tobacco Enforcement Division;
- Where Alcohol May be Consumed Information Sheet from Liquor & Tobacco Enforcement Division; and
- Alcohol Intoxication Evaluation Chart

If you are unclear as to the requirements for conducting the Special Event, please do not hesitate to inquire at the City of Gunnison Clerk's Department, 201 W. Virginia Avenue in Gunnison; by calling 970.641.8140; or emailing [gdaavidson@gunnisonco.gov](mailto:gdaavidson@gunnisonco.gov)

**OATH OF DESIGNATED EVENT MANAGER**

**I declare under penalty of perjury in the second degree that I have read and understand the Special Event Permit attachments provided by the City of Gunnison; and the Permitted Special Event will be conducted in compliance with rules and regulations of the State of Colorado Liquor Enforcement Division and the City of Gunnison Municipal Code.**

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**PRINTED NAME**

\_\_\_\_\_  
**DATE**