

Date submitted:

SPECIAL EVENT PERMIT APPLICATION (NON-LICENSE HOLDER)

$\frac{\text{REQUEST FOR APPROVAL TO SELL OR SERVE ALCOHOL FOR A SPECIAL}}{\text{EVENT}}$

1.	Name of not-for-profit corporation
	or other (Charitable or religious organization; other not-for-profit organization)
2.	Mailing address
	Telephone
3.	Date of incorporation:
	(or attach Department of Revenue Tax Exempt Letter)
4.	Will this event be held on City property/City street? Yes ☐ No ☐
5.	Location of event
6.	Date(s) of event
7.	Type of event
8.	Type of event Have you had any other events approved with the last twelve months?
	Yes ☐ No ☐ If yes, how many?
9.	Have you or any officer or director of your corporation ever had a liquor license
	denied? Yes □ No □
10.	Have you or any officer or director of your corporation ever had an application for
	a liquor license suspended or revoked? Yes □ No □
11.	If the event will be held on city property, attach a certificate of insurance naming
11.	the City of O'Fallon as additional insured on general and liquor liability coverage
	in the amount of \$1,000,000 each. If the event is not on City property, attach the
	certificate of liquor liability only.
	certificate of liquor liability offig.
	Applicant signature
Subscr	ibed and sworn to before me this
	day of 20
Notar	y Public