

Date submitted:
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## SPECIAL EVENT PERMIT APPLICATION (NON-LICENSE HOLDER)

## REQUEST FOR APPROVAL TO SELL OR SERVE ALCOHOL FOR A SPECIAL EVENT

1.	or other
	(Charitable or religious organization; other not-for-profit organization)
2.	Mailing address
	Telephone
3.	Telephone Date of incorporation:
	(or attach Department of Revenue Tax Exempt Letter)
4.	Will this event be held on City property/City street? Yes $\Box$ No $\Box$
5.	Location of event
6.	Date(s) of event
7.	Type of event
8.	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
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	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 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.
	Applicant signature
	cribed and sworn to before me this day of 20
Nota	ry Public