## **CITY OF LANDER**

## APPLICATION FOR 24 HOUR MALT BEVERAGE/CATERING PERMIT

(Application must be turned in no later than 1 week prior to event)

Jame of Event:	Location:	
Please Designate which application you		
, , , , , , , , , , , , , , , , , , , ,		
Nyoming State Statutes state:		
a malt beverage permit authors assued by the appropriate lice organization for sales at a propriate property of the premises described on the permit of the premises authors and off the premises authors.	ensing authority to any resionic, bazaar, fair, rodeo, person or organization hold ic liquor other than malt be wit, nor shall any malt be well.	sponsible person or special holiday or ding the special beverages on the
catering permit authorizing assued by the appropriate lice or resort retail liquor licens alcoholic and malt beverages, parties and dinners or at other within the licensee's licensee bermit shall sell or permit can be the premises described in the chis subsection, closed-contain an appropriate organization may be comprofit organization may be	ensing authority to any perse authorizing the off-prem for sales at meetings, corer similar gatherings not of d premises. No licensee holonsumption of any alcoholic permit. Notwithstanding ariner items sold at auction taken off-premises.	rson holding a retail nises sale of both nventions, private capable of being held ding a catering or malt beverage of the other provision of
550.00 Fee Per Day Total Fee: \$		
Contact Person:	Phone:	
Organization/Business Location Address	S:	
Duna pination / Duning == 0.4-iliz = 0.4-l	TOWN TO	
Organization/Business Mailing Address:	UMI	
ales Tax #	Liability Insurance Carrier:	
Organization Email Address:		
Organization Email Address:		
The minimum age of attendees will be	e <b>If ALL AGES will be</b>	present the applicant M

Name of Security Person	Name of Security Person
Signature	Signature
* *	eiving anything of value (i.e. money, goods and/or services) ustry representative must answer the following:
A nonprofit corporation orga  Qualified as a tax exempt org	r malt beverage or catering permit, are you: nized under the laws of this state: yes no ganization under the Internal Revenue Code: yes no soperation for not less than two (2) years yes no
	rate in Wyoming under the requirements of W.S. 12-4-502 and all other to file required sales tax reporting documents and taxes.
By signing this application, I acknowledge (organization or business name) that all the Wyoming operating conditions spec	ge for of the information provided is true and correct and that I agree to mee cified above. This application must be signed by an owner, partner,
By signing this application, I acknowledge (organization or business name) that all the Wyoming operating conditions spectorporate officer or LLC/LLP member.  The applicant must be present at the Capplication. If you are NOT present and VERIFICATION OF APPLICATION (State individuals, ALL partners, ONE (1) LLC IV	of the information provided is true and correct and that I agree to mee
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By signing this application, I acknowledge (organization or business name) that all the Wyoming operating conditions spectorporate officer or LLC/LLP member.  The applicant must be present at the Capplication. If you are NOT present and VERIFICATION OF APPLICATION (State individuals, ALL partners, ONE (1) LLC MOfficers. WS12-4-102(b))  Under penalty of perjury and the possible are true and accurate.	of the information provided is true and correct and that I agree to meetified above. This application must be signed by an owner, partner, council meeting in the event there are questions concerning the d there are questions, your application WILL BE DENIED.  of Wyoming requires that signatures must be signed as follows: ALL lember, TWO (2) Corporate Officers/Directors or TWO (2) Organization of the license, I swear the above stated facility of the license, I swear the above stated facility of the license, I swear the above stated facility of the license, I swear the above stated facility of the license, I swear the above stated facility of the license, I swear the above stated facility of the license, I swear the above stated facility of the license, I swear the above stated facility of the license, I swear the above stated facility of the license and the license are considered as follows:
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