



# SPECIAL EVENTS PERMIT APPLICATION

(A, D, or F LICENSE HOLDERS)

**CITY OF ALTON, ILLINOIS**

**Liquor Commissioner**

101 E Third • Suite 201 • Alton, Illinois 62002

Telephone: (618) 463-3500

Fax: (618) 463-3525

E-mail: [liquor@cityofaltonil.com](mailto:liquor@cityofaltonil.com)

Website: [www.cityofaltonil.com](http://www.cityofaltonil.com)

Name of Applicant: _____
Name of Establishment: _____
Address: _____
Phone: _____

Liquor License Classification: _____
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Description of activity planned: _____
_____
_____
_____

Dates applied for: _____
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Attach certificate of Dram Shop Liability insurance covering sales of liquor outside of permanent structure of the licensed premises as requested by this permit application.

I, understand, do acknowledge and understand the restrictions set upon SPECIAL EVENTS LIQUOR LICENSES established by the City of Alton, Illinois.

- Sales must be made on the license premises as defined in original license application.
- No sales will be permitted or consumption be allowed on any public property.
- Notification must be given at least fourteen (14) days prior to the first day of the scheduled event.
- The area used for special events must be enclosed or designated in some manner to mark boundaries for the special event.
- No liquor of any nature may be removed from the enclosed or designated boundaries for the special events.
- Special events permit shall not exceed an aggregate of ten (10) days per calendar year for any one licensed premise.

I hereby promise to uphold these restrictions knowing that the penalty for breaking such could lead to liquor license revocation.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date