



LIQUOR LICENSING AUTHORITY  
 PO BOX 397  
 TELLURIDE, CO 81435  
 970-728-2159

# Special Event Permit Application

CLERKS USE ONLY

**Events on Town Property**

120 days from event \_\_\_\_\_  
 (If on Town property. This is due date for financial follow-up.)

### LIQUOR LICENSE AUTHORITY MEETINGS

Authority meetings take place on the third Thursday of each month at 3:00pm unless rescheduled for good cause or cancelled due to lack of applications.

**Only complete applications will be accepted by the Clerk's Office. If an application is incomplete, it will be returned to the applicant.**

All applications must be turned in no later than 12:00 noon, fourteen (14) days prior to the regularly scheduled meeting and at least thirty (30) days prior to the proposed event.

Special meetings will not be scheduled. Applications must be turned in by noon at least 14 days prior to the meeting date.

A ten (10) day public notice is required. The Clerk's Office will provide you with the notice to post at the premises. It is your responsibility to pick-up and post the notice. The Clerk's Office will send you one notification when the notice is ready for pick-up.

### APPLICANT/EVENT INFORMATION

**1. Special Event Permit Eligibility. In order to qualify for a permit, you must be a Colorado nonprofit and one of the following:**

<input type="checkbox"/> Social	<input type="checkbox"/> Athletic	<input type="checkbox"/> Municipality, County, Special District
<input type="checkbox"/> Fraternal	<input type="checkbox"/> Religious Institution	<input type="checkbox"/> Branch, Lodge or Chapter of National Org or Society
<input type="checkbox"/> Patriotic	<input type="checkbox"/> Philanthropic Institution	
<input type="checkbox"/> Political	<input type="checkbox"/> Political Candidate	

**2. NAME OF APPLICANT/ORGANIZATION/POLITICAL CANDIDATE**

**3. Sales Tax #**

**4. MAILING ADDRESS OF ORGANIZATION OR POLITICAL CANDIDATE**

**5. STREET ADDRESS OF SPECIAL EVENT LOCATION**

**6. IS PROPOSED LOCATION ON TOWN PROPERTY?**

YES  NO

**\*IF YES, FINANCIAL FOLLOW-UP IS REQUIRED.**

**7. OFFICER OF ORG. or POLITICAL CANDIDATE (Must sign application.)**

NAME:

ADDRESS:

TITLE:

BIRTH DATE:

PHONE NUMBER:

EMAIL:

<b>8. EVENT MANAGER (Must be Responsible Vendor trained.)</b>			
NAME:		ADDRESS:	
BIRTH DATE:		PHONE NUMBER:	
EMAIL:		DATE OF LIQUOR CERTIFICATION:	
<b>9. HAS APPLICANT BEEN ISSUED SPECIAL EVENT PERMITS THIS CALENDAR YEAR (STATE-WIDE)?</b>		<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>10. IF YES, HOW MANY?</b>		# OF PERMITS:	
<b>11. DOES THE PROPOSED EVENT PREMISES HOLD A LIQUOR LICENSE?</b>		<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>12. IF YES, WHAT TYPE?</b>			
<b>13. DO YOU HAVE PROPERTY POSSESSION/WRITTEN PERMISSION FOR PREMISES?</b>		<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>14. LIST BELOW EXACT DATE(S) AND TIME(S) FOR WHICH APPLICATION IS BEING MADE FOR PERMIT(S)</b> (Include enough time for set-up/break-down.)			
DATE:	DATE:	DATE:	DATE:
FROM:	FROM:	FROM:	FROM:
TO:	TO:	TO:	TO:
# ATTENDEES EXPECTED:	# ATTENDEES EXPECTED:	# ATTENDEES EXPECTED:	# ATTENDEES EXPECTED:
<b>15. PROVIDE A BRIEF DESCRIPTION OF THE NATURE OF THE EVENT(S):</b>			
<b>16. WHAT TYPE OF FOOD WILL BE SERVED?</b>		Food:	
<b>17. PROVIDE A DESCRIPTION OF THE DRINK MENU</b>		Drink Menu:	
		Serving Container:	
		Serving Container Size:	
<b>18. WILL ALCOHOL BE SOLD OR OFFERED COMPLIMENTARY?</b>	<input type="checkbox"/> SOLD <input type="checkbox"/> COMPLIMENTARY	<b>19. WILL ALCOHOL BE DONATED?</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>20. SOURCE OF DONATION:</b>		<b>21. IF OTHER, DESCRIBE SOURCE</b>	
		If other, Source:	



	3) State and Local Sales & Excise Tax Licenses	4) "No Alcohol Beyond This Point"
	Persons must be at least 21 years of age to purchase, possess and/or consume alcohol beverages in Colorado.	
	Sandwiches or light snacks must be available any time liquor/beer is served.	
	A Responsible Vendor Liquor trained individual must be present AT ALL TIMES during the event.	
	It is unlawful for ANY PERSON to sell, serve, give away, dispose of, exchange, or deliver alcohol beverages or permit the sale, serving, giving or procuring of any alcohol beverage to a VISIBLY INTOXICATED person.	

**SECTION II: THE FOLLOWING SUPPORTING DOCUMENTATION MUST BE ATTACHED TO THIS APPLICATION:**

- FEE:** \$75/permit if application received 45 days prior to event(s), \$100 between 30-44 days, payable to the Town of Telluride.
- PREMISE MAP:** A 8 ½ x 11 diagram of the premises outlined in **red**, reflecting bars, walls, partitions, ingress, egress & dimensions. Note: If the event is to be held outside, please submit evidence of intended perimeter/premises control, i.e., fencing, ropes, barriers, etc.
- POSSESSION DOC:** Copy of deed, lease, or written permission of owner for use of the premises for exact dates and times. If the event is on Town of Telluride property, copy of signed contract required.
- STORAGE PREMISE MAP:** Diagram of storage premise with storage location outlined in red.
- STORAGE POSSESSION DOC:** Copy of deed, lease, or written permission of owner for use of storage premises with specific dates and times.
- LIQUOR TRAINING CERTIFICATION FOR EVENT MANAGER:** Certification date must be within 2 years of the event.
- IRS LETTER OF DETERMINATION** – For Events On Town Property
- NON-PROFIT CHARTER** (Applicable for Non-Profits, not political committees)
- CERT OF GOOD STANDING:** Certificate of good corporate standing (NONPROFIT) issued by Sec of State. Not more than 2 years old.
- REPORTING:** If a political candidate, attach copies of Candidate Committee registration filed with the Town Clerk or Secretary of State
- DISTANCE FROM SCHOOL:** If event is within 500’ of a school, written permission from the R-1 School District required & a statement that classes will not be in session during the event.

**SECTION III: 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.

		
Printed Name of Officer & Title (same individual section #7, page 1)	Signature	Date