

24 HOUR/DAILY ALCOHOLIC BEVERAGE SALES PERMIT APPLICATION

**PERMIT VALID FOR ONLY ON-PREMISE SALES AND CONSUMPTION AT THE PERMITTED EVENT,
NO PACKAGE (TO-GO) SALES ARE ALLOWED!**

To be completed by City/County Clerk

Date filed with clerk: ____/____/____	Local Permit #: _____
Permit Fee Per Day: \$ _____	(\$50.00 maximum fee per day)
Number of Days: _____	
Total Permit Fee: \$ _____	(Permit fee per day x number of days)
Permit Date: ____/____/____	through ____/____/____

Applicant: _____

Business/Trade Name (DBA): _____

Contact Person: _____ Phone: (____) _____ - _____

Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Business Phone: (____) _____ - _____ Email Address: _____

Event Name: _____

Event Location: _____

Event Sponsor: _____

Event Type: _____

<p><u>FILING IN</u> (CHOOSE ONLY ONE)</p> <p><input type="checkbox"/> CITY OF: _____</p> <p><input type="checkbox"/> COUNTY OF: _____</p>		<p><u>FILING AS</u> (CHOOSE ONLY ONE)</p> <p><input type="checkbox"/> INDIVIDUAL</p> <p><input type="checkbox"/> PARTNERSHIP</p> <p><input type="checkbox"/> LP <input type="checkbox"/> LLP <input type="checkbox"/> LLLP</p> <p><input type="checkbox"/> LLC <input type="checkbox"/> LC</p> <p><input type="checkbox"/> CORPORATION (INC)</p> <p><input type="checkbox"/> LTD PARTNERSHIP</p> <p><input type="checkbox"/> ORGANIZATION</p> <p><input type="checkbox"/> OTHER _____</p>	
<p><u>TYPE OF PERMIT</u> (CHOOSE ONLY ONE)</p>			
<p><input type="checkbox"/> MALT BEVERAGE PERMIT (W.S. 12-4-502(a) / W.S. 12-2-201(b))</p> <p>Malt beverage permit applicants receiving anything of value (i.e. money, goods and or services) from any industry representative must answer the following: (W.S. 12-5-402(a))</p> <p>Nonprofit corporation under the laws of Wyoming? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Tax Exempt Organization under the Internal Revenue Code? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>And has the applicant been in continuous operation for not less than two (2) years? Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p><input type="checkbox"/> CATERING PERMIT (W.S. 12-4-502(b))</p> <p>For currently licensed Retail or Resort license holders only</p>	<p><input type="checkbox"/> MANUFACTURER'S OFF-PREMISE PERMIT (W.S. 12-2-203(g)(iii))</p> <p>For the sale of the manufacturer's own Wyoming Manufactured alcoholic liquor products only</p> <hr/> <p><input type="checkbox"/> MALT BEVERAGE PERMIT FOR MICROBREWERIES (W.S. 12-4-502(a))</p> <p>For the sale of the microbrewery's own Wyoming brewed malt beverage products only</p> <hr/> <p><input type="checkbox"/> WINERY OFF-PREMISE PERMIT (W.S. 12-4-414(g))</p> <p>For the sale of the winery's own Wyoming manufactured wine products only</p>	

By filing this application, the applicant and their representatives agree to sell alcoholic beverages and operate under the requirements of all applicable Wyoming state and local laws and rules and Federal laws, and submit any required sales tax and reports.

Under penalty of perjury, and the possible revocation or cancellation of the permit, I swear the above stated facts, are true and accurate.

Applicant Signature	Printed Name	Date
Signature of Licensing Authority Official	Printed Name	Date