

**APPLICATION FOR SPECIAL PERMIT TO SELL ALCOHOLIC BEVERAGES
AT A SPECIAL EVENT AT DESIGNATED PREMISES**

Complete one copy of this application. Submit the copy to local governing body prior to event. Regular council meetings are held on the 1st monday of each month.

STATE OF NORTH DAKOTA
COUNTY OF _____

ANSWER THE FOLLOWING QUESTIONS:

1. Name of Licensee _____
2. Name of Business _____
3. Mailing Address _____
4. State Alcoholic Beverage License Number _____
5. Local License Issued by: City of _____
6. Local License Number (s) _____
7. Date(s) of Special Event _____
8. Describe Special Event Fully _____

9. Indicate premises to be used on reverse side of this application.

LOCAL FEE \$ _____ STATE FEE - NONE

DATED THIS _____ DAY OF _____ 20____

LICENSEE

BY: _____

Subscribed and sworn to before me this _____ day of _____ 20____

(Seal)

Notary Public