This application must be turned in at least 14 business days prior to the date of the event, as the State of Missouri will need sufficient time to issue their license for this event.

City Facility/Property Alcohol Application

Event: _____

Sponsor/Promoters(s): _____

Sponsor/Promoter(s) Address: _____ Day & Date of Event: _____

Start Time: _____ End Time: _____ Number of Attendees Anticipated for the Event: _____

Approval requested for: □ Beer □ Wine □ Malt Beverages □ All Listed

City Facility / Property to be used: □ Memorial Hall □ Landreth Park □ Main Street □ Other: _____

Non-alcoholic beverages & food to be served: _____

_____

I understand that the following conditions must be met:

- No individual under 21 years of age or persons who appear intoxicated will be served alcohol.
- Alcoholic beverages will be limited to beer, wine, and/or malt beverages.
- All persons serving alcohol shall be 21 years of age.
- Non-alcoholic beverages and food must be available to all guests.
- Applicant must abide by all rules and regulations of the City and the State of Missouri.
- Any applicant wishing to sell alcoholic beverages must provide proof of liability insurance naming the City of Joplin as an additional insured.
- Applicant shall provide a copy of any license issued by the State for the event to the City Attorney's Office.

I have read and agree to abide by the conditions listed above as well as all other policies and procedures set forth by the City of Joplin.

Liquor License Holder Name (printed): _____ **Daytime phone #:** _____

Mailing Address (include City, State Zip): _____

License Holder Signature: _____ **Date:** _____

Cell Phone # to contact you during event: _____

_____

Approved: _____
City Manager, City of Joplin or his Designee Date

☐ Proof of insurance **required** by license holder with City listed as an additional insured provided, submitted with this form.

Official Use (initial all applicable): _____P&R _____PD _____FD _____PW _____HD _____CM _____CA