

TOWN OF SARATOGA – PERMIT APPLICATION
MALT BEVERAGE PERMIT

Permit No. _____

Fee Paid: \$25.00 Receipt No. _____

A malt beverage permit authorizing the sale of malt beverages may only be issued by the Town of Saratoga to any responsible person or organization for sale at a picnic, bazaar, fair, rodeo, special holiday or at *other similar* gatherings within the municipal boundaries of the Town of Saratoga, and under W.S. § 12-4-502(b) and Town of Saratoga Municipal Code 5.08.210(2)

No person or organization holding a special permit shall sell any alcoholic liquor other than malt beverages on the premises described in the permit, nor shall any malt beverage be sold or consumed off the premises authorized by the permit.

A temporary license shall be denied by the clerk and referred to the town council for action if one or more of the following facts or circumstances are found to exist:

- A. The application is for a location within the town that is not located in a park or other location that has been designated for the use of malt beverages;
- B. The application is for use of an outside location in or near a residential area and is **requesting a use later than ten p.m.**;
- C. The circumstances given to the clerk are such as to indicate a significant problem for the residents in the area, or an adjacent area, which problems may include traffic, noise, light, odor or other significant annoyances;
- D. The town has received complaints about previous licenses for substantially the same circumstances as are present in the current application. (Ord. 608 (part), 1996)

NAME OF EVENT: _____

APPLICANT NAME: _____

ADDRESS/CITY/STATE/ZIP: _____

TELEPHONE NO. _____

ORGANIZATION: _____

ORGANIZATION ADDRESS: _____ **TELEPHONE NO:** _____

LOCATION FOR MALT BEVERAGE PERMIT: _____

DATE(S) PERMIT REQUESTED: _____

TIME: _____

The applicant agrees to comply fully with the Saratoga Municipal Code governing the license requested, and further declares that the foregoing information contained in this application is true and correct.

Applicant Signature: _____ Date: _____

STATE of WYOMING)

ss

COUNTY of CARBON)

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

Notary Public

My Commission expires: _____

Approval

Date: _____

Mayor: _____

Clerk: _____