APPLICATION FOR EVENT ALCOHOLIC BEVERAGE PERMIT
CITY OF DICKINSON, ND

CITY CODE SECTION 4.08.270

Please mail or drop off the following form at the address below when completed. The undersigned hereby makes application for a license to sell alcoholic beverages at special events, public dances, beer gardens or music festivals, in the City of Dickinson, North Dakota, under the provisions of City Code and ordinances governing alcoholic beverages and alcoholic beverage permits, and submits the following facts in support thereof:

STATE OF NORTH DAKOTA )  
COUNTY OF STARK   ss  

1. Name of licensee: ____________________________________________________________
2. Name of licensed establishment:_________________________________________________
3. Mailing address of licensed establishment:________________________________________
4. Telephone number of licensee: _________________________________________________
5. State alcoholic beverage number: _______________________________________________
6. City alcoholic beverage number: ________________________________________________
7. Name of event coordinator: ____________________________________________________
8. Event coordinator telephone number:_____________________________________________
9. Name of hosting premises:_____________________________________________________  
10. Address of host premises:_____________________________________________________
11. Phone number at event location:_______________________________________________
12. Date(s) of event: ___________________________ Hours of event:___________________
13. Description of event:_________________________________________________________

__________________________________________________________________________

14. Event restricted to those 21 years of age or older?  ( ) Yes   ( ) No

January, 2018
15. Wrist band or hand stamp for 21yo?  ( ) *Yes  ( ) No  *Specify: Band  -  Stamp

16. Live music?  ( ) *Yes  ( ) No  *Band name:__________________________________

17. Anticipated crowd size?_______________________________________________________

18. Is there a dining area?  ( ) Yes  ( ) No
   If so, do you (will you) serve alcoholic beverages in this dining area? ( ) Yes  ( ) No
   *You are hereby given notice that all food items will be sold/served in an area separate from
   area where alcohol is sold.

20. Name of bona fide security company contracted for event: _________________________

21. Number of bona fide security personnel assigned to event: _________________________

22. Number of in-house staff dedicated to security for event:___________________________

23. I hereby verify there will be one entrance, one exit and a person (server trained preferred)
   stationed at the entrance/exit at all times to check ID's. I hereby also acknowledge the Police
   Department will conduct routine inspections to insure that I am in compliance with foregoing
   conditions.

24. Identify the premises to be used and draw a clear and understandable floor plan of premises.
   Show what part of the building/area will be used for the alcoholic beverage business,
   including all exits, bars, dining areas (if any), beverage coolers and beverage storage area.
   Indicate what are solid walls, half walls, dividers, moveable partitions or stanchion controlled
   areas. If event is being conducted outdoors, include the area to be fenced. *Note: Alcohol
   sale areas have to have clear and defined boundaries denoted in diagram showing the
   entrance/exit and establishing a restrictive over the counter sale area. Attach additional
   sheets as needed.
I hereby state that the above information is true to the best of my knowledge and if such permit is granted I agree to comply with all of the ordinances of the City of Dickinson and the laws of the State of North Dakota and the United States.

Dated this ___________ day of _________________________________, 20_______.

_______________________________________________
(Licensee)

BY: _______________________________________________
(Name and title if corporate officer)

Subscribed and sworn to before me this _______day of __________________________, 20___.

(SEAL)    _______________________________________________
Notary Public, _____________________________
______________ County, North Dakota
My Commission Expires:

Application Submission Directions: Standard application fee for applications received 10 business days prior to event is $25. Applications submitted less than 10 business days prior to the event will be assessed an additional $100 expedite fee. No applications will be accepted or considered if submitted less than 3 days prior to the event. Completed applications are $25.00 per day with a maximum 3 consecutive days.

Approved by:          Approved by:
________________________              ____________________
City Administrator                     Police Department

City of Dickinson
c/o Rita Binstock
99 2nd Street East
Dickinson ND 58601