



Special Event Permit Application Checklist

*The complete application packet must be filed at least 30 days prior to the scheduled event.
Submit completed application to: City Clerk's Office, 1100 10th St., Greeley CO, 80631 or email
Liquor.Licensing@greeleygov.com.*

The following supporting documents must accompany the application for a permit to be accepted:

- ☐ Application for a Special Event Permit
- ☐ City of Greeley Questionnaire
- ☐ City Application Fee (\$100/day if not concurrent)
 - Cash, Card, or Check Payable to City of Greeley
- ☐ Copy of City of Greeley Business License
- ☐ Copy of State Sales Tax License
- ☐ Lease or Letter of Permission for use of the premises naming the applicant
- ☐ Floor diagram of area to be licensed on an 8 ½" x 11" paper. *Doesn't need to be to scale. If multiple floors, use one page per floor.*
 - Address
 - North directional arrow
 - Dimensions
 - Label walls, partitions, entrances, and exits
 - Label seating arrangement, bar location, and alcohol storage
 - Outline in red the area requested to be licensed
- ☐ One of the following
 - Certificate of Good Standing dated within the last 6 months (if incorporated)
 - Non-profit Charter (if not incorporated)
 - Statements filed with the Secretary of State (if a political candidate)

Posting Notice Requirements:

- ☐ Notice shall be posted for 10 consecutive days before the event at the event location. The City Clerk's Office will provide you with the Notice Poster.
- ☐ Complete and return the affidavit of posting, along with photo documentation, after the Notice Poster has been posted for 10 days.



APPLICATION FOR A SPECIAL EVENT PERMIT

IN ORDER TO QUALIFY FOR A SPECIAL EVENT PERMIT, THE APPLICANT MUST BE A NONPROFIT AND ONE OF THE FOLLOWING: (PLEASE MARK ONE)

- | | | |
|--|--|--|
| <input type="checkbox"/> SOCIAL | <input type="checkbox"/> ATHLETIC | <input type="checkbox"/> PHILANTHROPIC INSTITUTION |
| <input type="checkbox"/> FRATERNAL | <input type="checkbox"/> POLITICAL CANDIDATE | <input type="checkbox"/> CHAMBER OF COMERCE |
| <input type="checkbox"/> POLITICAL | <input type="checkbox"/> EDUCATIONAL | <input type="checkbox"/> RELIGIOUS INSTITUTION |
| <input type="checkbox"/> PATRIOTIC | <input type="checkbox"/> MUNICIPALITY | |
| <input type="checkbox"/> CHARTERED BRANCH, LODGE, OR CHAPTER OF A NATIONAL ORGANIZATION OR SOCIETY | | |

TYPE OF SPECIAL EVENT PERMIT APPLICANT IS APPLYING FOR: (PLEASE MARK ONE)

- ☐ MALT, VINOUS AND SPIRITOUS LIQUOR (\$100.00 PER CONSECUTIVE DATE)
- ☐ FERMENTED MALT BEVERAGE (\$100.00 PER CONSECUTIVE EVENT DATE)

NAME OF NONPROFIT:

EVENT NAME:

ADDRESS OF SPECIAL EVENT:

MAILING ADDRESS:

PRESIDENT/ SECRETARY OF NONPROFIT

NAME:

DATE OF BIRTH:

EMAIL ADDRESS:

PHONE:

EVENT MANAGER
NAME:
DATE OF BIRTH:
EMAIL ADDRESS:
PHONE:

1) HAS THE APPLICANT BEEN ISSUED A SPECIAL EVENT PERMIT THIS CALENDAR YEAR?

☐ YES ☐ NO IF YES HOW MANY? _____

2) IS THE PREMISES CURRENTLY LICENSED UNDER THE STATE LIQUOR OR BEER & WINE CODE?

☐ YES ☐ NO

LIST THE EXACT DATE(S) FOR WHICH THIS APPLICATION IS BEING MADE (PLEASE LIST AND NOTE RAIN OUT DATES):

DATE	TIME

OATH OF APPLICANT

I declare under penalty of perjury in the second degree that I have read the foregoing application and all attachments thereto, and that all information therein is true, correct, and complete to the best of my knowledge.

Signature _____

Title _____

Date _____



SPECIAL EVENT PERMIT QUESTIONNAIRE

1. Explain the experience you or the organization has in holding or running an event with alcohol. Has there been any liquor violations? If yes, please describe. (attach a separate sheet if necessary)
2. Provide a detailed explanation of your organization and its function.
3. Who or what organization will be the recipient of funds collected from this event?
4. How many attendees are expected at this event?
5. How many volunteers, members of your organization, or staff will work the event? Have they been trained through Responsible Vendor Training or a safe server program?
6. Are you hiring security personnel for this event? If so, how many and how will they be identified?

7. Describe entertainment, if any, that will occur at this event. During what hours will the entertainment take place?
8. Who will be responsible for checking IDs, monitoring the conduct, and level of intoxication of patrons?
9. What method will be used to identify patrons that are over or under 21 years of age? (i.e. wristband, stamp on hand)
10. Describe what will be served at the event including alcohol, non-alcohol beverages, snacks, and food.
11. How will alcohol be obtained for the event? For example, purchased or donated from wholesaler.
12. How will alcohol be stored between purchasing and the event?

13. Explain how this event will be marketed. Describe what kind of advertising material will be distributed and who the targeted recipients are.

14. How will alcohol be purchased by attendees? For example, alcohol is included with admissions, cash bar, tier ticketing system to include alcohol, etc.

I hereby affirm the information provided to the Greeley Liquor Licensing Authority contained in this questionnaire is true and accurate to the best of my knowledge.

Signature _____

Title _____

Date _____

STOP! THIS PAGE IF FOR OFFICE USE ONLY

REPORT AND APPROVAL OF GREELEY LIQUOR LICENSING AUTHORITY

NAME OF NONPROFIT
EVENT NAME
DATES

The foregoing application has been examined and the premises, business conducted and character of the applicant is satisfactory, and we do report that such permit, if granted, will comply with the provision of Title 12, Article 48, C.R.S, as amended.

THEREFORE THE APPLICATION IS APPROVED:

X

LLA Hearing Officer

X

LLA Secretary