

# CITY OF DOUGLAS

## ONE DAY MALT BEVERAGE PERMIT APPLICATION

- Authorizes the sale of malt beverages **only** by any responsible person or organization. **No spirituous or fermented alcoholic products may be sold or offered with this permit.**
- Wyoming State Law **requires** applicant to purchase all malt beverages to be sold from a licensed distributor, and requires applicant to collect and remit sales tax.
- If you do not already have a Wyoming sales tax license, a Temporary Business Operations application from the Department of Audit (attached) **must be attached** as well as remitted to the Dept. of Audit. For more information regarding licensed distributors, contact the Wyoming Liquor Division at 307-777-6453, 6449, or 7233. For more information regarding sales tax, contact the Department of Audit/Excise Tax Division at 307-777-5543 or visit <http://revenue.wyo.gov> .
- **Please submit your application to the City Clerk a minimum of 14 calendar days prior to your event to ensure adequate time for processing and mailing. Required permit fees are non-refundable, even if a permit is not approved; deposit fees, if required, are refundable.**

**INFORMATION REGARDING APPLICANT:** Full Name: \_\_\_\_\_

Organization Name (if applicable): \_\_\_\_\_

WY Sales Tax License number: \_\_\_\_\_ Food Permit number (location specific): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_ Cell: \_\_\_\_\_

Primary contact person: \_\_\_\_\_ Phone number(s): \_\_\_\_\_  
*(If different from applicant)*

**INFORMATION REGARDING EVENT:** Type of event to be held: \_\_\_\_\_

Date permit will be used: \_\_\_\_\_ Hours of permit: \_\_\_\_\_ Number of people: \_\_\_\_\_

Location/address of event premise: \_\_\_\_\_

Define Boundaries of permit area and attach a map and diagram showing enclosed consumption and dispensing areas):

Security/control/supervision measures to be used **in addition to** required wrist bands *(e.g. ID scanner; other means to check IDs; monitoring in place; limited number of entrance/exits; clear cups; etc.)* **NOTE that proof of alcohol server training certification is required for the permit holder:** \_\_\_\_\_

**Any person, organization, or licensee who is issued a permit hereunder, shall by operation of the issuance of the permit, indemnify and hold the City, its employees, agents and representatives, including members of the City Council in their representative capacities, harmless from any liability, loss or damage which may be incurred as a result of claims, demands, costs, or judgments arising out of, connected with, or concerning the issuance, use or existence of the permit.**

\_\_\_\_\_  
**SIGNATURE OF APPLICANT**

\_\_\_\_\_  
**DATE OF APPLICATION**

**FOR OFFICE USE ONLY**

**NOTE: DEPOSIT IS REFUNDED UPON CLEANING OF LOCATION**

|  |   |                |                      |                               |
|--|---|----------------|----------------------|-------------------------------|
| Permit fee paid - \$25<br>(check # or cash)  | Receipt #:  | Date received: | Date of approval:    | License # Issued:             |
| Deposit fee - \$100 (check # or cash):<br><i>(Required if using City property)</i> | Condition of location <i>(verified w/Parks)</i> – Date/verified by: |                | Deposit return date: | Manner of return/returned by: |

# STAFF COMMENTS & APPROVALS

**CITY ADMINISTRATOR**

---

---

---

**ADMINISTRATIVE SERVICES DIRECTOR**

---

---

---

**CITY CLERK**

---

---

---

**CHIEF OF POLICE**

---

---

---

**PUBLIC WORKS DIRECTOR**

---

---

---

**COMMUNITY DEVELOPMENT/PLANNING DIRECTOR**

---

---

---



**Wyoming Department of Revenue**  
 Excise Tax Division  
 122 W. 25th Street, Herschler Bldg.  
 Cheyenne, Wyoming 82002-0110  
<http://revenue.wyo.gov>



\*0-0-2015-099\*

Department Use Only  
 RID: \_\_\_\_\_  
 License: \_\_\_\_\_  
 Filing Freq: \_\_\_\_\_

## Temporary Business Operations

1. **Business Name:** \_\_\_\_\_
2. **Ownership Name:** \_\_\_\_\_
3. **Partners:** \_\_\_\_\_ SSN \_\_\_\_\_  
 \_\_\_\_\_ SSN \_\_\_\_\_  
 \_\_\_\_\_ SSN \_\_\_\_\_
4. **Please check one of the following that best describes your ownership (spousal ownership is considered a partnership):**  
 A. \_\_\_\_\_ Association/Club    B. \_\_\_\_\_ Corporation    C. \_\_\_\_\_ Individual  
 D. \_\_\_\_\_ Limited Partnership    E. \_\_\_\_\_ Limited Liability Company    F. \_\_\_\_\_ Partnership  
 G. \_\_\_\_\_ Other(explain) \_\_\_\_\_
5. **Mailing address:** \_\_\_\_\_  
Street or PO Box                      City                      State                      Zip Code
6. **Location Address:** \_\_\_\_\_  
Street                      City                      State                      Zip Code
7. **Contact Phone Number:** \_\_\_\_\_  
Area code and number, please list any toll free numbers used.
8. **Sales Event** \_\_\_\_\_  
(gun show, Frontier Days, church bazaar etc.)
9. **Sales Location** \_\_\_\_\_  
(City and County in Wyoming)
10. **Sales Dates** \_\_\_\_\_  
(List date you will be making temporary sales in Wyoming)

**Print Name:** \_\_\_\_\_ **Signature** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**SSN:** \_\_\_\_\_ **Title** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Signature** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**SSN:** \_\_\_\_\_ **Title** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Signature** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**SSN:** \_\_\_\_\_ **Title** \_\_\_\_\_

Wyoming Laws require all businesses and individuals to register with the Department of Revenue prior to conducting sales in this State. Should you have any questions regarding Wyoming Tax Law Requirements, please contact the Wyoming Department of Revenue, Excise Tax Division, Taxpayer Services Section at 122 West 25th Street, Herschler Building 2nd Floor West, Cheyenne, WY 82002-0110 Phone (307) 777-5200 -- FAX (307) 777-3632 or visit our Website at: <http://revenue.state.wy.us>.