

**BLAINE COUNTY
ALCOHOL BEVERAGE CATERING PERMIT APPLICATION**

State of Idaho License Number _____ - _____ Blaine County License Number _____ - _____

**THE UNDERSIGNED HEREBY MAKES AN APPLICATION FOR AN ALCHOL BEVERAGE CATERING PERMIT TO
SELL AND OR SERVE,** (Please check all that apply)

Beer Wine Liquor

FOR A FEE OF TWENTY DOLLARS (\$20.00) PER DAY, AND FOR NO MORE THAN FIVE (5) CONSECUTIVE DAYS.

Number of Days Serving _____

Total Fees Due _____

**THE SERVICE OR SALE OF ALCOHOL BEVERAGES CATERED WITHIN BLAINE COUNTY, IDAHO, IS SUBJECT
TO BLAINE COUNTY ORDINANCES AS WELL AS PROVISIONS OF IDAHO CODE TITLE 23.**

APPLICANT'S AND BUSINESS' INFORMATION

NAME _____

ADDRESS _____

PHONE _____

EVENT INFORMATION

NAME OF ORGANIZATION, GROUP OR PERSON(S) WHO IS (ARE) SPONSORING EVENT:

EVENT ADDRESS _____

EVENT DATES _____ EVENT PHONE _____

TIME OF ALCOHOL SALES FROM _____ TO _____

SPECIAL CONDITIONS

EXTENSION INFORMATION

EXTENSION FROM _____ TO _____ FOR _____ DAYS.

EXTENSION FEE \$ _____ PAID

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I AM FAMILIAR WITH THE ORDINANCES OF BLAINE COUNTY APPLICABLE TO ALCOHOL BEVERAGE LICENSES AND CATERING PERMITS, AND THAT IN CONSIDERATION OF THE ISSUANCE TO ME OF THE LICENSE HEREIN ABOVE APPLIED FOR, I AGREE TO ACCEPT AND ABIDE BY EACH AND EVERY PROVISION OF SAID ORDINANCE .

APPLICANT'S SIGNATURE

DATE

SUBSCRIBED AND SWORN TO ME, THIS _____ DAY OF _____, _____

NOTARY PUBLIC

(NOTARY SEAL)

RESIDING AT: _____

MY COMISSION EXPIRES: _____

OR

CLERK/DEPUTY CLERK

(CLERK SEAL)

THIS HAS BEEN EXAMINED BY THE BOARD AND ORDERED:

REJECTED DATE _____

FILED

APPROVED DATE _____

COMMISSIONER

COMMISSIONER

COMMISSIONER

ATTEST:

CLERK OF THE BOARD OF COMMISSIONERS