

State of Louisiana
Office of Alcohol and Tobacco Control

John Bel Edwards
Governor



Juana Marine-Lombard
Commissioner

SPECIAL EVENTS

Type of Activities Allowed by Special Event Permit						
	Accept Alcohol product Donations	Accept Cash Donations	Accept Sponsorship	Display Outside Signage	Industry Pricing*	RV Certified Employees
TYPE A	YES	YES	YES	YES	YES	Recommended
TYPE B	Prohibited	YES	YES	YES	YES	Recommended
TYPE C	Prohibited	Prohibited	Limited*	NO*	YES	YES

SEE SPECIAL EVENT GUIDELINES, LAWS, & REGULATIONS FOR ADDITIONAL DETAILS

DOCUMENT CHECKLIST	TYPE A
	<input type="checkbox"/> Attach Certification from IRS stating tax-exempt status under either Section 501(c)(3), 501(c)(6), or 501(c)(8). <input type="checkbox"/> Attach copy of local special event permit; or letter from local authority granting authority service of alcohol at event. <input type="checkbox"/> Attach a valid, signed, and dated lease, contract, or written permission from property owner. <input type="checkbox"/> Attach fully completed and notarized application.
	TYPE B
	<input type="checkbox"/> Written Proof of non-profit status or Louisiana sales tax exemption. <input type="checkbox"/> Attach copy of local special event permit; or letter from local authority granting authority service of alcohol at event. <input type="checkbox"/> Attach a valid, signed, and dated lease, contract, or written permission from property owner. <input type="checkbox"/> Attach fully completed and notarized application <input type="checkbox"/> Enclosed \$10.00 fee. Acceptable payment form includes money order, cashier check, or certified check.
	TYPE C
	<input type="checkbox"/> Attach copy of local special event permit; or letter from local authority granting authority service of alcohol at event. <input type="checkbox"/> Attach a valid, signed, and dated lease, contract, or written permission from property owner. <input type="checkbox"/> Attach fully completed and notarized application. <input type="checkbox"/> Enclosed \$100.00 fee. Acceptable payment form includes money order, cashier check, or certified check.

CASH WILL NOT BE ACCEPTED & CREDIT CARD PAYMENT ONLY ACCEPTED ONLINE OR AT AN ATC OFFICE

Mail Completed forms, all supporting documents, and proper fees to:

Office of Alcohol and Tobacco Control
Attn: Special Events Division
P.O. Box 66404, Baton Rouge, LA 70896

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Special Event Permit Application

IMPORTANT NOTE: Failure to complete application or submit all documentation will delay issuance of special event permit. Applications must be submitted at least ten (10) days prior to your event. Application submitted via mail should be submitted earlier to allow time for delivery.

PERMIT TYPE		
1. Select permit type and attached appropriate documentation, if applicable.	Fees	Total Due
<input type="checkbox"/> TYPE A – Tax exempt non-profit status under IRS Code Sections 501(c)(3), 501(c)(6), or 501(c)(8)	\$0.00	
<input type="checkbox"/> TYPE B – Non-profit Organization	\$10.00	
<input type="checkbox"/> TYPE C – All others persons or organizations not eligible for another type of permit	\$100.00	
<input type="checkbox"/> HOMEBREW Special Event Permit	\$0.00	

APPLICANT INFORMATION	
2. Name of Applicant (name of individual, organization, etc.)	
3. Applicant's Mailing Address	
4. Who is the primary organizer of this event? (company/individual)	
5. Contact Name:	
6. Contact Phone number:	
7. Contact Driver's License:	
8. Contact Email address:	
9. Has applicant received more than twelve (12) permits in the current calendar year?	<input type="checkbox"/> YES <input type="checkbox"/> NO
10. How would you like to be notified about permit status?	
<input type="checkbox"/> Phone number <input type="checkbox"/> Mailing Address <input type="checkbox"/> Email Address	

Event Information	
11. Name of Event:	
12. Event Website (if applicable)	
13. Event Location: (Full Address)	
14. Will the event be held at a location that holds a permit with ATC?	<input type="checkbox"/> YES <input type="checkbox"/> NO
➤ If YES: (Business Name) _____ (Business Permit Number) _____	
15. Where will the event be held? <input type="checkbox"/> Inside <input type="checkbox"/> Outside	
16. Approximately, how many attendees will attend the event?	

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Event Information

17. Provide the dates of event: [____/____/____] to [____/____/____]	
<ul style="list-style-type: none"> ➤ Special Event permit(s) may only be issued for a period of up three (3) consecutive days ➤ Additional applications must be submitted for events lasting more than 3 days. ➤ Wholesalers may ONLY deliver alcoholic beverage products up to two (2) days prior to event address as indicated on special event permit. 	
18. Hours of Operation (check only applicable days)	
<input type="checkbox"/> Day 1 – Hours of event: Start: _____ End: _____ for <input type="checkbox"/> Set-up <input type="checkbox"/> Event <input type="checkbox"/> Day 2 – Hours of event: Start: _____ End: _____ for <input type="checkbox"/> Set-up <input type="checkbox"/> Event <input type="checkbox"/> Day 3 – Hours of event: Start: _____ End: _____ for <input type="checkbox"/> Set-up <input type="checkbox"/> Event	
19. Describe Event and your role in event: (i.e. what type of event; where is alcohol offered or sold, outside, tent, booth etc.)	
20. Is Applicant the exclusive alcohol beverage service provider at event? If “NO,” list all other providers.	<input type="checkbox"/> YES <input type="checkbox"/> NO
21. Type of Alcohol at Event: (Check all applicable) <input type="checkbox"/> Beer/Malt Beverages <input type="checkbox"/> Wine <input type="checkbox"/> Liquor/Distilled Spirits	
22. Will there be a general admission, registration, or ticket fee to attend event?	<input type="checkbox"/> YES <input type="checkbox"/> NO
23. Will there be a fee for alcoholic beverages?	<input type="checkbox"/> YES <input type="checkbox"/> NO
24. Will alcohol be purchased? If “YES”, list. (i.e. name of wholesalers):	<input type="checkbox"/> YES <input type="checkbox"/> NO
25. Does applicant understand ALL alcohol (excluding TYPE A) must be purchased under your special event permit and only purchased from a Louisiana authorized wholesale dealer?	<input type="checkbox"/> YES <input type="checkbox"/> NO
26. List all brands of alcoholic beverages that will be sold/served/available at event? (excluding samplings conducted in accordance with sample regulations LAC 55:VII:317(c)(2)(h)) – example: Budweiser, Crown Royal, Mondavi Wine	
27. Will alcohol be donated?	<input type="checkbox"/> YES <input type="checkbox"/> NO
28. If alcohol is donated, list all products donated and who donated product: <input type="checkbox"/> check if not applicable	

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Event Information

29. Will alcohol sampling by a retailer, wholesaler, or manufacturer be conducted at event? <u>If "YES," complete Sampling/Homebrew section.</u>	<input type="checkbox"/> YES <input type="checkbox"/> NO
30. Will alcohol beverage products produced by a homebrew be available at event? <u>If "YES" complete Sampling/Homebrew section.</u>	<input type="checkbox"/> YES <input type="checkbox"/> NO
31. Does this event involve a promoter? <u>If "YES," complete Promoter/Other Organization section.</u>	<input type="checkbox"/> YES <input type="checkbox"/> NO
32. Are there other organizations, persons, vendors, or promoters involved with event or receiving proceeds from event? <u>If "YES" complete Promoter/Other Organization section.</u>	<input type="checkbox"/> YES <input type="checkbox"/> NO
33. Have you obtained all necessary permits and/or approval from your local jurisdiction? ➤ Local permit and/or letter of approval must be attached to application	<input type="checkbox"/> YES <input type="checkbox"/> NO
34. Have you obtained permission to sell alcohol from the owner of the premise? ➤ If YES, Attach Lease or Letter	<input type="checkbox"/> YES <input type="checkbox"/> NO

Sponsorship

35. Will this event be sponsored by an alcohol industry member such as a retailer, wholesaler/distributor or manufacturer/suppliers? Explain. If YES, explain and attach sponsorship contract.	<input type="checkbox"/> YES <input type="checkbox"/> NO
36. Is the event receiving any cash or monetary donation from any outside sources? If "YES," explain.	<input type="checkbox"/> YES <input type="checkbox"/> NO
37. Is the event receiving any alcohol products as part of the sponsorship?	<input type="checkbox"/> YES <input type="checkbox"/> NO
38. Is the event offering <u>exclusively</u> one manufacturer line of products as a condition of sponsorship? (Example: Only Budweiser or Miller Coors products etc.) . If YES, explain.	<input type="checkbox"/> YES <input type="checkbox"/> NO
39. Is the event receiving tubs, cups, labor, any electric unit, signage, t-shirts, or caps from any wholesaler or manufacturer?	<input type="checkbox"/> YES <input type="checkbox"/> NO
40. If you answered "YES" to #39, explain in details. (i.e. who, what, and how much)(You must attach invoices). <input type="checkbox"/> check if not applicable	
41. Will event involve any of the following? (check all that applies) <input type="checkbox"/> Booths <input type="checkbox"/> Tents <input type="checkbox"/> Stages <input type="checkbox"/> Outside Banners/Signage <input type="checkbox"/> Refrigerator Truck <input type="checkbox"/> Beer Truck	
42. How many of the following will the event offer (as it applies to applicant only)? <input type="checkbox"/> check if not applicable <input type="checkbox"/> Number of Booths _____ (attach diagram /map of location of booths and/or tents) <input type="checkbox"/> Number of Tents _____	

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Sponsorship

43. Did the event rent booths, tents, stages, signage, or alcohol truck from a wholesaler? • If YES, how much?	<input type="checkbox"/> YES <input type="checkbox"/> NO
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Promoter / Other Organization

check if not applicable and skip to following section

44. Name of other organizations, persons, vendors, or promoters' role in event.
45. Contact Information of other organizations, persons, vendors, or promoters' role in event.
46. Explain other organizations, persons, vendors, or promoters' role in event.
47. How much proceeds/profits of event will other organizations, persons, vendors, or promoters involved receive? Example: percentage, all, or a specific amount

Sampling / Homebrew Events

check if not applicable and skip to following section

48. List all retailers, wholesaler, and/or manufacturers conducting sampling at your event and list the product being sampled.		
Name of Retailer/Wholesaler/Manufacturer	Product available for sample	Sample size
49. What type of homebrew event will you be hosting? <input type="checkbox"/> Homebrew Organized Affair <input type="checkbox"/> Club Meeting <input type="checkbox"/> Homebrew Exhibition <input type="checkbox"/> Homebrew Competition		
50. Do you understand that homebrew may not be sold or offered for sale at this event?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
51. Do you understand that homebrew may only be served to attendees of the event and cannot be served to patrons of a retail establishment or to the general public?	<input type="checkbox"/> YES <input type="checkbox"/> NO	

TYPE A and TYPE B applicants may skip following section & complete application

TYPE C – MUST COMPLETE SECTION IN FULL

52. Does applicant hold a permit with the ATC?	<input type="checkbox"/> YES <input type="checkbox"/> NO
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TYPE C – MUST COMPLETE SECTION IN FULL

53. If applicable, list all name of businesses and permit number held by applicant.	
54. Do you own the premises where the event will be held? If NO, attach lease.	<input type="checkbox"/> YES <input type="checkbox"/> NO
55. Are you a United States citizen? <input type="checkbox"/> Born <input type="checkbox"/> Naturalized	<input type="checkbox"/> YES <input type="checkbox"/> NO
56. Have you or your spouse ever been convicted of a felony? ➤ If YES, attach copy of disposition	<input type="checkbox"/> YES <input type="checkbox"/> NO
57. Have you or your spouse ever had an alcoholic beverage permit revoked or been convicted of violating any liquor or beer regulatory, state or local laws or ordinances? ➤ If YES, explain.	<input type="checkbox"/> YES <input type="checkbox"/> NO
58. Have you or your spouse ever been convicted of soliciting for prostitution, pandering, letting premises for prostitution, contributing to the delinquency of a juvenile, keeping a disorderly place or convicted for dealing narcotics? ➤ If YES, explain.	<input type="checkbox"/> YES <input type="checkbox"/> NO
59. Is this application being made by you on behalf of or for the benefit of anyone other than the applicant listed on Page 1? ➤ If YES, explain.	<input type="checkbox"/> YES <input type="checkbox"/> NO
60. Do you understand that this business must comply with all provisions of the Louisiana Responsible Vendor & Security Personnel training programs? The responsible vendor handbook and amendments are available for download at www.atc.la.gov .	<input type="checkbox"/> YES <input type="checkbox"/> NO
61. Does the applicant, applicant's spouse or any member of applicant's entity hold an interest in a business that holds a wholesale or manufacturer beer or liquor permit?	<input type="checkbox"/> YES <input type="checkbox"/> NO
62. Do you or your spouse or partner hold any ownership interest and/or receive any profits from an alcoholic beverage wholesaler/distributor or manufacturer/suppliers? ➤ If YES, explain.	<input type="checkbox"/> YES <input type="checkbox"/> NO
63. Do you understand that manufacturers and/or wholesalers are prohibited from providing a retailer with anything of value unless explicitly enumerated as an exception in the Alcoholic Beverage Control Law or these regulations?	<input type="checkbox"/> YES <input type="checkbox"/> NO
64. Do you understand that it is prohibited to exclusively offer for sale, sell, or serve alcohol beverage products produced by one manufacturer and/or through a wholesaler?	<input type="checkbox"/> YES <input type="checkbox"/> NO
65. Do you understand that retailers are prohibited from accepting or requiring any such inducement or other influence; and anyone found in violation of the market practices laws and regulations of the State of Louisiana, the United States or any other state, their permit(s) is subject to suspension, revocation and/or assessment of a fine or other penalty provided by law.	<input type="checkbox"/> YES <input type="checkbox"/> NO

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**Sworn Statement of Authenticity
Special Event Permit**

<i>WARNING & SIGNATURE</i>	Application must be signed by an owner, officer, or member who is reported to the ATC or to the Secretary of State or person with written authorization by power of attorney.
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BY SIGNING BELOW, YOU ARE SWEARING, UNDER OATH, that you have read each of the questions in this application packet, and that all answers are true and correct to the best of your knowledge; that there are no pending applications on this location, and that you are not using this special event permit in place of a bona fide license or for any other unlawful purpose. The responsible vendor handbook and amendments are available for download at www.atc.la.gov.

Print Name

Title

Signature

FOR NOTARY USE ONLY

NOTARY	<p><i>Sworn to and subscribed to me this _____ day of _____, 20_____, In the parish/county of _____, State of _____.</i></p> <p>_____</p> <p style="display: flex; justify-content: space-around;"> Notary Public's Signature Print Name of Notary Public </p>
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For Office Use Only	Permit Number:	Processed By	Date Received	Approved by:	Date approved:
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