



# APPLICATION FOR ALCOHOLIC BEVERAGE POSSESSION, CONSUMPTION OR SALE

Town of Melbourne Beach

507 Ocean Avenue, Melbourne Beach, Florida 32951

Phone: (321) 724-5860

Fax: (321) 984-8994

Please complete this form and return it to the Melbourne Beach Town Hall at the above address:

## APPLICANT INFORMATION

1. Date: \_\_\_\_\_
  2. Name of applicant: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
(I.D. required)
  3. Name of licensed caterer: \_\_\_\_\_
  4. Organization: \_\_\_\_\_
  5. Address: \_\_\_\_\_
  6. Phone: (mandatory) \_\_\_\_\_ E-mail: (optional) \_\_\_\_\_
  7. Alternate contact: (optional) \_\_\_\_\_
  8. Phone: \_\_\_\_\_ E-mail:(optional) \_\_\_\_\_
  9. Type of event: \_\_\_\_\_ Date of event: \_\_\_\_\_
  10. Hours of event: From \_\_\_\_\_ to \_\_\_\_\_ (Including set-up and clean-up times).
  11. Number of people expected to attend event: \_\_\_\_\_
  12. Number of vehicles expected (approximate): \_\_\_\_\_
  13. Which Melbourne Beach facility or park will you use? \_\_\_\_\_
  14. Will there be admission fee or prizes given? YES \_\_\_\_\_ NO \_\_\_\_\_ If YES, what are the dollar amounts? \_\_\_\_\_
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15. Other pertinent information: \_\_\_\_\_

- **You must have a permit from the town for the sale, possession or consumption of alcoholic beverages** (see Chapter 53 of the Melbourne Beach town code.)
- Only licensed bartenders and caterers are allowed to take alcohol into a municipal facility.
- **You must provide liability insurance and you must show proof of insurance.** We require \$1,000,000 public liability coverage. You must shop for coverage; we cannot offer recommendations. The Town of Melbourne Beach must be listed as additional insured.
- **Proof of coverage is due no later than two weeks prior to the date of the event.**

As the applicant, I hereby certify that the information I have provided on the form is complete and accurate to the best of my knowledge. I agree to abide by the Terms set forth in this application, and the Ordinances of the Town of Melbourne Beach. I understand that failure to do so may lead to the cancellation of the event, the denial of future permit applications, and/or other legal action.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT SIGNATURE AND AGREEMENT TO TERMS

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***For Town Use Only***

<b>APPROVAL OR DENIAL</b>	<b><i>Approval signatures required</i></b>	<b>COMMENTS</b>
_____ DATE	_____ CHIEF OF POLICE – Recommend	_____
_____ DATE	_____ PARKS BOARD CHAIRMAN – Recommend	_____
_____ DATE	_____ PUBLIC WORKS – Recommend	_____
_____ DATE	_____ FIRE CHIEF/ FIRE MARSHAL – Recommend	_____
_____ DATE	_____ TOWN MANAGER – Approval or Denial	_____

Additional comments: \_\_\_\_\_  
\_\_\_\_\_

- CHECKLIST:      \_\_\_\_\_      PHOTO I.D  
                         \_\_\_\_\_      LIABILITY INSURANCE (ALCOHOL)