



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.

Application Date: _____ Type of event: _____

Event Date: _____ Event Time: _____ to _____ (including set up & clean up) _____ hours

Facility: Community Center Pavilion Number attending? _____ Will it be catered? _____

Name of licensed caterer _____ Organization _____

Will alcohol be sold? _____ Will food and beverages be sold? _____

Applicant/Permittee: _____ Phone _____ E-mail _____

Address: Street _____ City _____ State _____ Zip _____

Date of Birth: _____ Alternate contact: (optional) _____

Other pertinent information: _____

ALCOHOL

____ I understand a \$200 refundable deposit is required.

____ I understand only licensed bartenders & caterers can take alcohol into, or serve alcohol in, any Town facility.

____ All designated server/s shall hold an Alcohol License and/or a Certificate of Bartender Training.

____ Photo ID of Servers/Bartenders

____ License or Certificates

____ Liability Insurance from Applicant

____ **Applicant must show host liquor rider on proof of insurance.**

We require \$1,000,000 public liability coverage. The Town of Melbourne Beach must be listed as additional insured. The Town cannot offer recommendations for coverage.

____ **Proof of coverage is due no later than 30 days 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.

APPLICANT SIGNATURE AND AGREEMENT TO TERMS

DATE

Reference: Chapter 53 of the Melbourne Beach Town Code.

For Town Use Only

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

Additional comments: _____

- CHECKLIST:
- _____ PHOTO I.Ds of Servers/Bartenders
 - _____ LICENSE OR CERTIFICATES
 - _____ HOST LIQUOR RIDER included with LIABILITY INSURANCE