



## ALCOHOL BEVERAGE CATERING PERMIT APPLICATION

Off-Premise Catering; Reference Chamblee Code of Ordinances, Section 6-252

*Please Note: Applications must be received a minimum of 10 business days prior to the event.  
Caterer to maintain all permits and paperwork in vehicle transporting alcohol to function at all times.*

Catering Permit (Beer/Wine/Liquor) - \$50.00

City Sponsored Event – Fee TBD

### Business Information (Alcohol Provider)

Name of Business: \_\_\_\_\_ (Submit Copy of License)

Jurisdiction: \_\_\_\_\_

Physical Address of Business: \_\_\_\_\_

State License Number: \_\_\_\_\_ (Submit Copy of License)

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

### Event Location

Name of Establishment: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Type of Property (check all that apply): \_\_\_\_\_ Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_ Private \_\_\_\_\_

\_\_\_\_\_ Public Streets or Rights-of-Way

### Event & Alcohol Information

Name Event: \_\_\_\_\_ Open to the Public:  yes  no

Event Date(s): From: \_\_\_\_\_ To: \_\_\_\_\_ Event Hours: \_\_\_\_\_ am/pm To: \_\_\_\_\_ am/pm

Type of alcohol to be served at event:  Beer  Wine  Distilled Spirits

Please provide quantity and type of beverage to be transported from licensee's primary location to the event location: \_\_\_\_\_

Dollar amount charged per glass: \$ \_\_\_\_\_ (Beer) \$ \_\_\_\_\_ (Wine) \$ \_\_\_\_\_ (Distilled Spirits)

**Please note: sale of liquor/mixed drinks requires excise reporting (GA Code 3-11-3.)**

Date: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_  Cash  Credit Card  Check # \_\_\_\_\_

**City of Chamblee City Hall**

5468 Peachtree Rd. | Chamblee, GA 30341 | 770-986-5010 | chambleega.gov



**Terms & Conditions:**

I hereby agree that as a condition to the issuance of an Alcoholic Beverage Catering Permit, the business owner/sponsor of the Event shall indemnify and hold the City harmless from claims, demand or cause of action which may arise from activities associated with the event. I hereby solemnly swear, subject to criminal penalties for false swearing, that the statements and answers made by me to the foregoing questions in this application for an Alcoholic Beverage Catering Permit are true, and no false or fraudulent statement or answer is made herein to procure the granting of such permit. I hereby state and understand that should a complaint be filed against the owner/sponsor of the Event for violation of any regulation associated with the application for the City of Chamblee Alcoholic Beverage Catering Permit, the permit issued for the event will immediately become void and will not be reissued for the same location.

Executed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ in  
\_\_\_\_\_ (city), \_\_\_\_\_ (state)

\_\_\_\_\_  
Signature of Licensee

\_\_\_\_\_  
Printed Name of Licensee

SCRIBED AND SWORN BEFORE ME ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

(Seal)

My Commission Expires: \_\_\_\_\_