

**TOWN OF BERLIN**  
**Community, Recreation and Park Services**  
**DIVISION OF PARKS & RECREATION**

**PERMISSION FOR USE OF ALCOHOLIC BEVERAGES**

ORGANIZATION: \_\_\_\_\_ FACILITY REQUESTED \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_

STREET: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

RENTAL DATE: \_\_\_\_\_ START TIME: \_\_\_\_\_ FINISH TIME: \_\_\_\_\_

NATURE OF ACTIVITY: \_\_\_\_\_

AGE GROUP: \_\_\_\_\_ TOTAL ATTENDANCE: \_\_\_\_\_ MINORS: YES: \_\_\_\_\_ NO: \_\_\_\_\_

TYPE OF ALCOHOL: BEER: \_\_\_\_\_ WINE: \_\_\_\_\_ OTHER (EXPLAIN): \_\_\_\_\_

HOW DISPENSED: CASH BAR: \_\_\_\_\_ OPEN BAR: \_\_\_\_\_ BYOB: \_\_\_\_\_

FOOD: YES: \_\_\_\_\_ NO: \_\_\_\_\_ HOW SERVED: SIT DOWN \_\_\_\_\_ BUFFET \_\_\_\_\_ OTHER \_\_\_\_\_

ENTERTAINMENT: YES \_\_\_\_\_ NO \_\_\_\_\_ TYPE: \_\_\_\_\_

WILL FEES BE ASSESSED TO THOSE ATTENDING: YES \_\_\_\_\_ NO \_\_\_\_\_ EXPLAIN: \_\_\_\_\_

**SECURITY DEPOSIT:** The use of alcoholic beverages in/around the premises is prohibited unless expressly authorized by proper permits. A Security Deposit is required.

**DAMAGE FEES:** Any cost resulting from damage to the premises occurring as a result of the lessee's use of the facility will be borne by the lessee.

**INSURANCE, (TULIP):** Insurance is required by all groups requesting the use of alcoholic beverages.

I certify that the information given above is true and correct under the penalty of law. I understand that refusal to abide by the rules and privileges granted by the permit will lead to revocation, and that a refund of fees and security deposit will not be granted.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

<u>PERMISSION FOR CONSUMPTION OF ALCOHOLIC BEVERAGES:</u>	<u>Approved</u>	<u>Denied</u>
Chief of Police _____	_____	_____
Town Manager _____	_____	_____
Community, Recreation and Park Services Rep. _____	_____	_____
Parks and Recreation Commission _____	_____	_____
Town Council _____	_____	_____

Reason for Denial: \_\_\_\_\_

**State Liquor License required:** Yes \_\_\_\_\_ No \_\_\_\_\_