

Department of Business License

Vincent V. Queano, Director

500 SOUTH GRAND CENTRAL PKY, 3RD FLOOR BOX 551810

LAS VEGAS, NEVADA 89155-1810

Phone: (702) 455-4252 Toll Free: (800) 328-4813 Fax: (702) 386-2168

http://www.clarkcountynv.gov/businesslicense

OFF- PREMISE LIQUOR PERMIT APPLICATION – CHARITABLE/ NON-PROFIT ORGANIZATIONS

ALL APPLICATIONS REQUIRE THE FOLLOWING:

This application is supplemental to special event(s) permitting. If you are hosting, or vending, at a special event please ensure that you have (or event management has) also completed the appropriate special event permit application with either <u>Clark County Parks and Recreation</u> or <u>Clark County Comprehensive Planning</u>. *Notice: Incomplete documentation will be returned without being processed*.

- LICENSE TO OPERATE AN OFF-PREMISE EVENT AS A CHARITABLE ORGANIZATION Applicants seeking an Off-Premise Liquor Permit as a Charitable Organization for a special event, you must already hold a valid and current "Certificate of Registration" as a Charitable/ Non-profit organization with our department pursuant to Clark County Code Chapter 8.20.020.360.
- A COMPLETED APPLICATION FOR AN OFF-PREMISE LIQUOR PERMIT- CHARITABLE/ NON-PROFIT ORGANIZATION

A completed *Off-Premise Liquor Permit Application – Charitable/ Non-Profit Organizations* (attached) will contain the following:

- Applicable event information, including:
 - o Charitable Registration number as assigned by this department (required).
 - Event location, date(s), and time(s)
 - Description of event and estimated attendance
 - o Type of permit being requested
 - o Number of service locations at event
 - o On-site Supervisor contact information
 - o List of *all* employees serving or supervising alcohol distribution; including work card number and Alcohol Awareness Training information.
 - If more room is necessary to list all employees for the event, please either include additional copies of this form or provide a list of all employees with all applicable information (work card and training) as required by this permit application.
- Please attach an approval letter from Clark County Department of Parks and Recreation if your event will be held on County property or at a County Parks and Recreation facility.

OTHER ACTIVITIES

If there are other activities conducted with your event you may be required to obtain additional business licenses/permits from Business License or other agencies in conjunction with this application for an Off-Premise Liquor Permit Application – Charitable/ Non-Profit Organizations.

PROCESS & APPROVALS

All Off-Premise Liquor Permit Application – Charitable/Non-Profit Organizations are subject to provisions and prohibitions as outlined in Clark County Code Chapter 8.20.020.360.

Once the Off-Premise Liquor Permit Application – Charitable/ Non-Profit Organizations has been submitted and the payment processed, Clark County Business License will issue an Off-Premise Liquor Permit – Charitable/ Non-Profit Organizations subject to approval by the department and inspecting agencies as necessary, or as required, for the special event. A business license technician will be in contact with any additional necessary information or next steps.

OTHER DEPARTMENT CONTACT INFORMATION

Clark County Planning and Zoning Phone: (702) 455-4314

Email: zoning@ClarkCountyNV.gov

Address: Clark County Govt. Center, 1st Floor 500 S. Grand Central Pkwy

Las Vegas, NV 89155

Clark County Parks and Recreation

Phone: (702) 455-8200

Email: <u>SPERentals@ClarkCountyNV.gov</u>
Address: Clark County Govt. Center, 2nd Floor

500 S. Grand Central Pkwy Las Vegas, NV 89155



Department of Business License

Vincent V. Queano, Director 500 SOUTH GRAND CENTRAL PKY, 3RD FLOOR

BOX 551810

LAS VEGAS, NEVADA 89155-1810

Phone: (702) 455-4252 Toll Free: (800) 328-4813

Fax: (702) 386-2168 http://www.clarkcountynv.gov/businesslicense Please fill out form completely; use black ink only; incomplete, illegible, or altered application forms will be returned. Payments can be made by cash, check, or money order made payable to: Clark County Department of Business License. **BUSINESS INFORMATION** Date of Application: **Charitable Organization Name: Charitable Registration #:** ☐ Yes ☐ No Are you a Charitable Organization? (Check one) **Business Email:** Phone Number: **EVENT INFORMATION Event Sponsor: Associated Business Name: Location/ Address of Event** (Include Suite Number): City/ State: Zip Code: **Event Start Date: Event End Date:** Hours (Start Time): Hours (End Time): **Description of Event: Estimated Attendance: Type of Permit Requested:** ☐ Beer ☐ Beer & Wine ☐ Full Liquor **Number of Liquor Service Locations to be Operated:** EMPLOYEE INFORMATION **On-site Contact Information** Liquor Supervisor at Event: (First, M.I., Last) **Primary Phone: Alternate Phone:** List all employees serving or supervising alcohol distribution Work Card Alcohol Awareness **Work Card Number** Name **Expiration Date Training Expiration Date** If you need more room for more employees, submit the information on an additional form or a separate sheet of paper. **SIGNATURES** (requires signatures of owner, officer, authorized or legal signer)

FOR OFFICIAL USE ONLY

Reviewed by:

Reviewed by:

Reviewed by:

Signed:

Applicant's Signature

☐ Approve

☐ Approve

☐ Approve ☐ Disapprove ☐ N/A

☐ Approve ☐ Disapprove ☐ N/A

☐ Disapprove

☐ Disapprove

Parks and Recreation

Zoning

Business License Staff

CCBL Director

Date:

Date:

Date:

Date:

Applicant's Printed Name and Title