



NOTE: ALL APPLICATIONS FOR SPECIAL EVENT ALCOHOL LICENSE SHALL BE MADE FOURTEEN (14) DAYS PRIOR TO DATE OF EVENT AND SHALL INCLUDE APPROVED PERMIT FROM STATE OF KANSAS.

DATE _____
REC. NO. _____
FEE \$ _____
LIC. NO. _____
APPROVED _____

**CITY OF DE SOTO, KANSAS
SPECIAL EVENT ALCOHOL BEVERAGE LICENSE APPLICATION
FEE \$75.00 (PER DAY) OR \$200 (PER EVENT), WHICHEVER IS LESS**

HOURS OF LICENSE: _____ TO _____ EVENT DATE _____

1. Name of Proposed Licensee _____
2. Age _____ Date of Birth _____ Driver's License No. _____
3. Home Phone Number _____ Work Phone Number _____
4. I have been a resident of the State of Kansas _____ Years.
5. The premises for which the license is desired is located at _____
_____ Owner _____
6. Please **X** the following: **I am a citizen of the United States. YES () NO ()**
7. **I have (), have not (),** been convicted of a felony within two years immediately preceding the date of this application.
8. **I have (), have not (),** been convicted of a crime involving moral turpitude within two years immediately preceding the date of this application.
9. **I have (), have not (),** been adjudged guilty of drunkenness within two years immediately preceding the date of this application.
10. **I have (), have not (),** been adjudged guilty or entered a plea, or forfeited bond on a charge of driving a motor vehicle while under the influence of intoxicating liquors within two years immediately preceding the date of this application.
11. **I have (), have not (),** been convicted of a violation of any State or Federal intoxicating liquor law within two years immediately preceding the date of this application.

Date of Application

Signature

This License shall be valid for a period of 18 hours as specified in the license and at the place specified in this application. It shall be unlawful for any person to sell alcohol at a time or place other than as specified in the license application and approved by the Governing Body.

No Special Event License shall be issued unless adequate trash receptacles are provided and sanitation provisions are made. The applicant is responsible for demonstrating that adequate parking is available.

Send to City Administrator/City Engineer Mike Brungardt, P.E.
via email: mbrungardt@desotoks.us, or at 32905 W. 84th St., P.O. Box C, De Soto, KS