

# APPLICATION



**City of Carbondale**  
234 Main Street  
P.O. Box 70  
Carbondale, Kansas 66414  
Phone: 785-836-7108  
Fax: 785-836-7942

## SPECIAL EVENT CEREAL MALT BEVERAGE (CMB) PERMIT

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

Name of the applicant: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No. \_\_\_\_\_

Group for which the event is planned: \_\_\_\_\_

Location of the event: \_\_\_\_\_

Date and time of the event: \_\_\_\_\_

Anticipated need for police or other municipal services: \_\_\_\_\_

Applicant signature: \_\_\_\_\_

### **Fees: \$75.00 per day to be paid before event begins**

#### Regulations:

- No temporary permit holder shall allow the serving, or consumption of CMB between the hours of 12:00 a.m. and 6:00 a.m. at any event for which a special event permit has been issued.
- No CMB shall be given, sold or traded to any person under 21 years of age.
- No more than four special event permits may be issued in a calendar year to the same applicant.
- No special event permit issued hereunder may be transferred or assigned to any other vendor.
- All local ordinances and state statutes for the sale and consumption of CMB apply to holders of special event permits.

#### OFFICIAL USE:

- State Application
- Ks Sales Tax Number
- Background Check
- Approved
- Not Approved: Reason: \_\_\_\_\_

Fee Paid: \$ \_\_\_\_\_  
 Check # \_\_\_\_\_  
 Cash