

Special Permit Application to Sell Beer and Table Wine

V1 1/2020

A copy of your IRS tax-exempt certificate must be attached or on file with the department.

Please send the completed application and the appropriate fees to Alcoholic Beverage Control Division up to 14 days before, but no later than 3 days before the event. For faster processing online submission on our TransAction Portal (TAP) is appreciated at https://mtrevenue.gov/SpecialPermit.

Section 1–General Information

Note: If the applicant is an individual, list the individual's name below. If the applicant is a partnership, limited liability partnership (LLP), corporation, or limited liability company (LLC), list the business' name below.

FFIN/SSN

Applicants	FEIN/SSN
Contact Person	
Telephone	Email
Location of Principal Place of Business_	(Street Address, City, State and ZIP Code)
Name of Event	
Location of Event	
Location of Event	(Street Address, City, State and ZIP Code)
Date(s) for which Special Permit is Reque	ested
one special event per year of up to seven da	aximum of three days, except that each permit holder may have ays for a county, state or regional fair that occurs no more than airgrounds, and is officially sanctioned by a government entity. a and Fees. Please mark one.
\$10 per Day	
501(c)(3) Organization	
Organization operated to raise	e funds for a needy person (limit 3 per year)
	ondary school (limit 3 per year)
	ising organization (limit 12 per year)
501(c)(4) Civic League or Organiz	
	or business league (limit 12 per year) s that hold a liquor license (limit 3 per year)
\$1000 per Season-Please include a copy	, , , , , ,
Junior Hockey Team	of the game sortedate.
Professional Sports Organization	
*Chamber of Commerce or business leag	gue need to provide proof of alcohol liability insurance.
Total Amount Enclosed \$	

Applicar	nts					
Section 3–Local Law Enforcement Please have your local law enforcement official complete this section prior to sending in your application.						
l,	_ , hereby	∏ Ap	prove		Disapprove	
of the premises where the event is to be held.						
Signature	Date					
Title	_					
Section 4–Declaration and Affidavit						
We understand beer and table wine can only be sold and is held and only on the above date(s). We state that the loon the same street as a school or church. A special permit unless the entities in 16-3-306, MCA provide the department	cation of the is subject t	e event is o the pro	not with visions o	in 600 of <u>16-3-</u>	feet and	
We understand that all alcohol, including beer and wine, c	an only be	purchase	d from a	license	ed distributor.	
We will follow all the laws, rules and ordinances relating understand that a violation of any law or rule relating to revoke the permit. Any authorized employee of the depayorally have the right to examine the location of the event a	the sale of artment, its	beer or to	able wir	ne will l	be reason to	
This application needs to be signed by all individuals, pa applicant, it may be signed by one shareholder or office				case of	f a corporate	
I/We declare under penalty of false swearing that the in attachments are true, correct and complete.	formation p	orovided	on this a	ıpplica	tion and its	
Signature	 Date					
Printed Name	Title					
Signature	Date					
Printed Name	Title					
Mail completed application as well as all necessary doc	uments to:					
Montana Department of Revenue Alcoholic Beverage Control Division PO Box 1712 Helena, MT 59604-1712						

Questions? Please call us at (406) 444-6900, or Montana Relay at 711 for hearing impaired.