# FAYETTE COUNTY

# SPECIAL EVENTS PERMIT

**140 W. STONEWALL AVE., FAYETTEVILLE, GA. 30214**

Date: _____

Fee: _____

Check/Cash: _____

*Office Use Only*

**LOCATION (Where event will take place):** _____

**PERMITTED LOCATION PERMIT #:** _____

| SPECIAL EVENT FEES | APPLICANT INFORMATION |
|---|---|
| **Malt Beverage— $75.00** _____ | **Applicant Name:** _____ |
| **Wine— $50.00** _____ | **Address: Street** _____ |
| **Distilled Spirits— $125.00** _____ | **City**_____ **State** _____ **Zip** _____ |
| **All the above— $200.00** _____ | **Telephone:** _____ **Cell** _____ |
| | **Email:** _____ |
| | **Name of Primary Contact (Must be on site during event):** _____ |
| | **Phone # of Primary Contact:** _____ |

**DATES REQUESTED** _____/_____/_____ **thru** _____/ _____/ _____

| EVENT TYPE | ACTIVITY DESCRIPTION | CHECK ALL THAT APPLY TO THIS ACTIVITY |
|---|---|---|
| _____ **Party/Festival** | _____ | _____ **Catered Food with Alcohol** |
| _____ **Reception/Wedding** | _____ | (Must be Permitted Location) |
| _____ **Fundraiser** | _____ | _____ **Amplified Sound/Music** |
| _____ **Other (describe:)** | _____ | (Art. II, Sec. 16-35 — 16-72) |
| _____ | _____ | _____ **Tents/Canopies** |
| _____ | _____ | _____ **Other (describe)** |
| _____ | _____ | _____ |
| | _____ | _____ |
| | _____ | _____ |
| | _____ | |

| Alcohol Provider | Caterer Information | |
|---|---|---|
| **Special Event Applicant —**_____ | **Name of Caterer :** _____ | **Alcohol License #s State:** _____ |
| | **Business Address of Caterer:** | **Local:** _____ |
| **Licensed Alcohol Beverage Caterer—**_____ | _____ | **Licensed Alcohol Beverage Caterer Signature:** |
| | _____ | _____ |
| | _____ | |
| | **Phone:** _____ | |

| ATTENDANCE | ANTICIPATED SPECTATORS | ANTICIPATED PARTICIPANTS | EVENT DATE/TIME DATE | |
|---|---|---|---|---|
| Estimated Total | | | | |
| Estimated at Peak Time | | | EVENT START DATE: | EVENT START TIME: |
| Total Attendance | | | EVENT END DATE: | EVENT END TIME: |
| | | | | |

| SIGNATURE OF APPLICANT OR | | DATE: |
|---|---|---|