

# 24 HOUR ALCOHOLIC BEVERAGE SALES PERMIT



**Applicant:** \_\_\_\_\_

**Business / Trade Name (D/B/A):** \_\_\_\_\_

**Name of the Event:** \_\_\_\_\_

**Event Location:** \_\_\_\_\_

**Permitted Date(s):** \_\_\_\_\_

**This permit authorizes the Applicant and the Applicant's representatives to sell alcoholic beverages under the permit type designated below for only On-Premises sales and consumption only at the permitted event pursuant to all applicable Wyoming state laws and rules, and all applicable local laws and rules.**

## **TYPE OF PERMIT (CHOOSE ONLY ONE)**

- Malt Beverage Permit** (W.S. 12-4-502(a) / W.S. 12-2-201(b))  
Sale of only Malt Beverage Products obtained from a licensed Malt Beverage Wholesaler
- Catering Permit** (W.S. 12-4-502(b))  
Sale of only the Retail or Resort License Holder's own Alcohol Stock
- Malt Beverage Permit for Microbrewery** (W.S. 12-4-412(j) / W.S. 12-4-502(a))  
Sale of only the Microbrewery's own, Brewed Malt Beverage Products
- Manufacturer's Off-Premise Permit** (W.S. 12-2-203(g)(iii))  
Sale of only the Manufacturer's own, Wyoming Manufactured Products

**The applicant agrees to comply fully with the Saratoga Municipal Code governing the license requested, and further declares that the foregoing information contained in this application is true and correct.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

STATE of WYOMING)

SS

COUNTY of CARBON)

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

My Commission expires: \_\_\_\_\_

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**APPROVAL**

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

Mayor: \_\_\_\_\_

Clerk: \_\_\_\_\_