



## PUBLIC CELEBRATION PERMIT APPLICATION: INSTRUCTIONS

**LICENSEE:** Merely submitting an application does not constitute approval. If Licensee does not have the Approved Permit for the Event, than the sale, service and/or delivery of alcoholic beverages is prohibited. A complete application, w/required attachments must be received by AGD **AT LEAST 10 DAYS PRIOR TO THE EVENT**. All fees submitted are non-refundable, even when Permit is issued and the Event is postponed and/or cancelled due to unforeseen circumstances.

**ELIGIBILITY:** Only New Mexico Licensees that hold a Craft Distiller, Small Brewer or Winegrower License may apply for a Public Celebration Permit (PCP). The Master Liquor License must not be in suspension or have pending citations. If the license holder will be serving alcoholic beverages from any place other than the approved and designated liquor licensed premises, a Permit is required. The local governing body of the **local option district must grant approval** for the issuance of the permit. The local governing body includes city council, county clerk, mayor, etc., and they must have authorized **SUNDAYS SALES** by the drink and the Holder of the Dispenser's License must have a Valid Sunday Sales Permit issued by the Alcohol & Gaming Division or must have a special concession issued from the local governing body pursuant to §60-6A-12(E) NMSA, 1978.

**THE EVENT** may be held in any Local Option District.

- **MUST NOT EXCEED 3 DAYS:** three (3) day maximum, unless permission is granted by Division Director prior to the event.
- **12 HOURS PER DAY, MAXIMUM:** Service of alcohol must not occur for more than 12 hours per day.
- **ONLY EMPLOYEES** of the Holder of the NM Craft Distiller, Small Brewer or Winegrower Liquor License with the PCP, THAT ARE CURRENTLY LICENSED SERVERS, MAY SELL, DISPENSE, OR SERVE THE ALCOHOLIC BEVERAGES FOR THE EVENT. *Reminder: No Sale to Minors or Intoxicated Persons; No Sale, Service or Consumption before or after the times listed on Permit; Licensee and Employees restricted from consuming alcoholic beverages at the Special Event; No more than 2 Unconsumed drinks may be in the possession of one person. Servers are not permitted to provide more than the legal amount.*
- **MUST NOT REMOVE BEER, WINE OR SPIRITS FROM AREA OF THE CELEBRATION:** A wine grower, small brewer and/or craft distiller is authorized to dispense New Mexico produced alcohol as allowed by their license type, by the drink for consumption at the celebration. By-the-drink dispensed New Mexico produced products cannot be removed from the area of the event. The licensee is authorized to dispense the alcohol allowed by that license type in unbroken packages. The unbroken packages may be removed from the area of the celebration.
- **MUST POST PUBLIC CELEBRATION PERMIT AT EVENT:** After PCP is issued, Licensee is legally required to Post Permit along with Signage (*i.e., pregnancy, firearms, minors, etc.*) and it must be prominently posted at the locations where the alcohol will be dispensed, as indicated by the Approved Floor Plan for the Event. Permits are subject to the same requirements and restrictions contained in the Liquor Control Act and are subject to citation for any violation.

**APPLICATION PROCESS:** A complete Application must be received by AGD at least 10 days prior to the Event. Application **must be signed by the Licensee, before a Notary**. Faxed Applications not accepted and incomplete applications will be returned. Licensee **MUST** obtain the Building/Property Owner's permission to allow Event serving Alcohol in their facility. **The Following are also required and must be attached:**

- A) **FEES: \$10 per day**, Applicable daily fees must be submitted by business check, Money Order or Cashier's Check
- B) **FLOOR PLAN:** Detailed Floor Plan, include Pictures, designating restricted and unrestricted areas
  - ✓ A Detailed Floor Plan (on 8 ½ x 11 sheet) must be submitted showing exactly where the event is to be held
  - ✓ Total Square Footage for the proposed service area
  - ✓ Must show the location of Bars, Security, Serving Areas, Entrances, Exits
  - ✓ Enclosed or barricaded serving areas must also be clearly marked
  - ✓ If there are any patios or outside areas, indicate how they are enclosed to prevent alcohol from leaving the premises; Describe type and height of Enclosure; Must be four (4) feet or higher
  - ✓ Placement and Location of Security Personnel; If Security is deemed insufficient, the Director may require additional Security Personnel or may deny permit. The average is 1 security personnel per 100 people, but may be increased depending upon the type of event requested.
- C) **LIST OF SERVERS:** Accurate List of Servers at the Event, including the Full Name of Employee, Server Permit Number and Expiration Date

# ALCOHOL & GAMING DIVISION | PUBLIC CELEBRATION PERMIT APPLICATION

(§60-6A-11 / 60-6A-26.1 NMSA)

**FEE PER DAY:**  \$10.00, **No. of Days:** \_\_\_\_\_ (DO NOT SUBMIT CASH) **Date Application Filed:** \_\_\_\_\_

A copy of all approved permits are sent to the Special Investigations Division of the Department of Public Safety, and DPS will request additional information, if needed.

**LICENSE HOLDER INFORMATION:** *Check boxes that apply*

Liquor License # \_\_\_\_\_ Type of License:  Craft Distiller  Small Brewer  Winegrower

Business Name (DBA): \_\_\_\_\_ Owner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State & Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax No.: \_\_\_\_\_ Email Address: \_\_\_\_\_

**EVENT INFORMATION:**

Date(s) /Duration of Event: \_\_\_\_\_

Description and Name of Event: \_\_\_\_\_

Physical Address of Event: \_\_\_\_\_

**Type of Event:**  Indoor Event Only  Outdoor Event Only  Beer Garden  All Ages Event  Wrist Bands and/or Stamps

**Type of Celebration:**  State Fair  County Fair  Community Fiesta  Cultural / Artistic Performance  Athletic

**TIME:**

Event Begins at: \_\_\_\_\_ Event Ends at: \_\_\_\_\_ Total Number of Attendees Expected at Event: \_\_\_\_\_

Alcohol Service Begins at: \_\_\_\_\_ Alcohol Service Ends at: \_\_\_\_\_ Total # of Attendees Expected to Consume Alcohol: \_\_\_\_\_

**SECURITY:** Describe Type: \_\_\_\_\_ Number of Security: \_\_\_\_\_

Security Contact Name: \_\_\_\_\_ Contact Telephone #: \_\_\_\_\_

**Note: Licensee's employee(s) assigned to work security, must work this exclusively and may not serve at the Event.**

**SPONSOR INFORMATION:** Sponsor of Event: \_\_\_\_\_

Name of Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**APPROVAL OF PROPERTY OWNER:** Phone Number: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Your Business and Location of Property: \_\_\_\_\_

**LICENSE HOLDER & SERVER CERTIFICATION:** I, \_\_\_\_\_ (Licensee) hereby certify that this application is signed by Licensee or authorized person under this License, *that Event is not within 300 feet of a church or school* unless alcoholic beverages were sold there prior to July 1, 1981 or a waiver is obtained from the local governing body.

I further certify that all persons providing the service of alcoholic beverages at the Event are currently Server Certified, that they are all my employees, and that ALL the information in this Application and the Attachments, is true and correct. Licensee Agrees that if any statements or representations herein are found to be false, the Director may refuse to issue additional permits. I understand that all fees submitted are non-refundable. **Must sign before a Notary:**

Licensee Name: (print) \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTARY PUBLIC USE ONLY:** (State of \_\_\_\_\_, County of \_\_\_\_\_)

SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By: \_\_\_\_\_ Notary Public: \_\_\_\_\_

**SEAL**

My Commission Expires: \_\_\_\_\_

**LOCAL GOVERNING BODY APPROVAL:** Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**AGD USE ONLY: Application Must Include:** Payment of Fees, per day (listed on top of page), Floor Plan – (w/photos) & Detailed Server List

FINANCE| Application Fee \$ \_\_\_\_\_ Received on: \_\_\_\_\_ Receipt No. \_\_\_\_\_

Clear of Citations/Holds:  Yes  No, \_\_\_\_\_  Approved  Disapproved, \_\_\_\_\_

Processed By: \_\_\_\_\_ Date: \_\_\_\_\_

Assigned Permit Number: \_\_\_\_\_ Approved Permit Sent on: \_\_\_\_\_ By:  Email  Fax