DAILY LICENSE APPLICATION/AUTHORIZATION - Non Transferable

Instructions: Complete all items. Submit to local ABC District Office with required fee (Cashier's Check or Money Order) payable to ABC. Once license is issued, fee cannot be refunded. For a listing of ABC District Offices please visit http://www.abc.ca.gov/distmap.html Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the license(s) described below.			LICENSE NUMBER	GEO CODE
			RECEIPT NUMBER	
ucense(s) described below.			FEE \$	
1. ORGANIZATION'S NAME	CONDIT	ONS REQUIRED	DIAGRAM REQUIRED	
1. ONGANIZATION STRAINE	Ye		Yes	No
2. LICENSE TYPE (Check appropriate license type	oe AND organization type)			
a. Daily General (\$25.00) (Includes bee	er, wine and distilled spirits)			
Political Party/Affiliate Supporting Candid Public Office or Ballot Measure	raternal Organization in Existence Over Five Years rith Regular Membership			
Organization Formed for Specific Charitable or Civic Purpose		eligious Organization		
Other:	essel per Section 24045.10 B&P (\$50.00)			
<u> </u>			NUMBER OF DISPENSI	NG POINTS
b. Special Daily Beer (\$25.00)	Special Daily Beer & Wir	e (\$50.00)	Special Dail	y Wine (\$25.00)
Charitable Fraternal Social	Political	her:		
Civic Religious Cultural	Amateur Sports Organiz	ration	NUMBER OF DISPENSI	NG POINTS
c. Special Temporary License (\$100.00)	(Different privileges dep	ending on statute)		
Television Station per Section 24045.2 or 24045.9 B&P				
Nonprofit Corporation per Sections 24045.4 and 24045.6 B&P Women's Educational and Charitable Organization per				
Other Special Temporary Licenses, per S		ection 24045.3 B&P		
License number Amount \$				
3. EVENT TYPE Dinner Dance Wedding	Lunch Picnic Ba	arbeque Social G	Sathering	Festival
Sports Event Concert Birthday		nner Dance Other:	au ioinig	
4. TOTAL # OF DAYS 5. ESTIMATED ATTENDANCE	6. HOURS OF ALCOHOLIC BEVERAGE SA		PTION	
	From	То	_	
7. EVENT DATE(S)	8. EVEN	T IS OPEN TO THE PUBLIC PS No		
9. EVENT LOCATION (Give facility name, if any, street number and name, and city)				
10. LOCATION IS WITHIN THE CITY LIMITS 11. TYPE OF ENTER	TAINMENT 12. SEC	URITY GUARDS	If yes, how m	2201/2
13. AUTHORIZED REPRESENTATIVE'S NAME		ino	14. REPRESENTATIVE'S TELEPHONE NUMBER	
15. REPRESENTATIVE'S ADDRESS				
16. ORGANIZATION'S MAILING ADDRESS (If different from #15 above)				
17. AUTHORIZED REPRESENTATIVE'S SIGNATURE			18. DATE SIGNED	
PROPERTY OWNER APPROVAL BY (Name), REQUIRED	PHONE NUMBER	PROPERTY OWNER SIGNATURE		DATE SIGNED
LAW ENFORCEMENT APPROVAL BY (Name), IF APPLICABLE	PHONE NUMBER	LAW ENFORCEMENT SIGNATURE		DATE SIGNED
DISTRICT OFFICE APPROVAL BY (Name)		ABC EMPLOYEE SIGNATURE		ISSUANCE DATE

The above-named organization is hereby licensed, pursuant to the California Business and Professions Code Division 9 and California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above named location for the period authorized above. This license does not include off-sale ("to-go") privileges.

This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace and morals of the people of the State.