



LOS GATOS-MONTE SERENO POLICE DEPARTMENT

ONE-DAY LIQUOR PERMIT APPLICATION INSTRUCTIONS

A process has been implemented in cooperation with the Department of Alcoholic Beverage Control whereby all applicants for a one-day liquor permit will be required to obtain approval from the Los Gatos-Monte Sereno Police Department when the planned event will occur in our jurisdiction.

The application developed for this process is attached and is titled “**LETTER OF APPROVAL FOR A ONE-DAY LIQUOR PERMIT**”.

When submitting your letter, please make sure you attach the ABC permit application. ABC applications require the Chief of Police’s approval prior to submitting to ABC. Applications can be downloaded by visiting www.abc.gov or by contacting the ABC office at (408) 227-1200.

The application for the Letter of Approval shall be filled out by a member of the staff of the permittee organization who will be participating in the event. Complete all of the application and **return it to the Special Event Coordinator**.

The applicant agrees the sale of alcoholic beverages will be in strict accordance with the provisions of the application for the permit issued by the Department of Alcoholic Beverage Control or a permit may be suspended or revoked.

The application shall be signed by the applicant under penalty of perjury.

After approval by the Chief of Police, please take the attached application to the:

DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL
100 Paseo De San Antonio Walk
San Jose, California 95113

The original of the completed application will be issued to the applicant, retained by the Department of Alcoholic Beverage Control, with a copy retained on file with this department.



LOS GATOS-MONTE SERENO POLICE DEPARTMENT

LETTER OF APPROVAL FOR A ONE-DAY LIQUOR PERMIT

Note: Your ABC Application, along with this Letter of Approval, must be submitted to the Chief of Police for signature prior to submitting to ABC for approval.

ORGANIZATION INFORMATION

Name of Organization:		
Address of Organization:		
City:	State:	Zip:

EVENT/ACTIVITY INFORMATION

Event/Activity Name:		Type of Event/Activity:
Location of Event:		Number of Persons Attending Event:
Dates(s)/Time(s) of Event/Activity:	Dates(s)/Time(s) of Set-up:	Dates(s)/Time(s) of Clean-up:

PERMITTEE INFORMATION

Permit Obtained By:		
Permittee Address:		
City:	State:	Zip:
Day Phone:	Cell Phone:	Email Address:

PERSONS RESPONSIBLE FOR THE SALE OF ALCOHOLIC BEVERAGES DURING THE EVENT WILL BE

Name:	Address:	Day/Cell Phone:
Name:	Address:	Day/Cell Phone:
Name:	Address:	Day/Cell Phone:
Name:	Address:	Day/Cell Phone:

It is understood that the permittee will conduct the sale of alcoholic beverages in strict accordance with the provisions of the application for the permit issued by the Department of Alcoholic Beverage Control or this permit may be suspended or revoked.

Signature of Applicant:	Date:
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- We have no objection to the issuance of the One-Day Liquor Permit and waive the alcohol control zone.
- We have no objection to the issuance of the One-Day Liquor Permit and "with the alcohol zone" as specified in the attached Special Conditions.

 Pete Decena, Chief of Police
 Los Gatos-Monte Sereno Police Department
 110 East Main Street, Los Gatos, California 95030

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	
FEE	
\$	

1. ORGANIZATION'S NAME	CONDITIONS REQUIRED <input type="checkbox"/> Yes <input type="checkbox"/> No	DIAGRAM REQUIRED <input type="checkbox"/> Yes <input type="checkbox"/> No
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2. LICENSE TYPE (Check appropriate license type AND organization type)

a. **Daily General (\$25.00)** *(Includes beer, wine and distilled spirits)*

<input type="checkbox"/> Political Party/Affiliate Supporting Candidate for Public Office or Ballot Measure	<input type="checkbox"/> Fraternal Organization in Existence Over Five Years with Regular Membership
<input type="checkbox"/> Organization Formed for Specific Charitable or Civic Purpose	<input type="checkbox"/> Religious Organization
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Vessel per Section 24045.10 B&P (\$50.00)

b. **Special Daily Beer (\$25.00)** **Special Daily Beer & Wine (\$50.00)** **Special Daily Wine (\$25.00)**

<input type="checkbox"/> Charitable	<input type="checkbox"/> Fraternal	<input type="checkbox"/> Social	<input type="checkbox"/> Political	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Civic	<input type="checkbox"/> Religious	<input type="checkbox"/> Cultural	<input type="checkbox"/> Amateur Sports Organization	

c. **Special Temporary License (\$100.00)** *(Different privileges depending on statute)*

<input type="checkbox"/> Television Station per Section 24045.2 or 24045.9 B&P	<input type="checkbox"/> Person conducting Estate Wine Sale per Section 24045.8 B&P
<input type="checkbox"/> Nonprofit Corporation per Sections 24045.4 and 24045.6 B&P	<input type="checkbox"/> Women's Educational and Charitable Organization per Section 24045.3 B&P

Other Special Temporary Licenses, per Section _____

License number _____ Amount \$ _____

3. EVENT TYPE

<input type="checkbox"/> Dinner	<input type="checkbox"/> Dance	<input type="checkbox"/> Wedding	<input type="checkbox"/> Lunch	<input type="checkbox"/> Picnic	<input type="checkbox"/> Barbeque	<input type="checkbox"/> Social Gathering	<input type="checkbox"/> Festival
<input type="checkbox"/> Sports Event	<input type="checkbox"/> Concert	<input type="checkbox"/> Birthday	<input type="checkbox"/> Mixer	<input type="checkbox"/> Carnival	<input type="checkbox"/> Dinner Dance	<input type="checkbox"/> Other: _____	

4. TOTAL # OF DAYS	5. ESTIMATED ATTENDANCE	6. HOURS OF ALCOHOLIC BEVERAGE SALES, SERVICE AND/OR CONSUMPTION From _____ To _____
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7. EVENT DATE(S)	8. EVENT IS OPEN TO THE PUBLIC <input type="checkbox"/> Yes <input type="checkbox"/> No
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9. EVENT LOCATION (Give facility name, if any, street number and name, and city)

10. LOCATION IS WITHIN THE CITY LIMITS <input type="checkbox"/> Yes <input type="checkbox"/> No	11. TYPE OF ENTERTAINMENT	12. SECURITY GUARDS <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many? _____
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13. AUTHORIZED REPRESENTATIVE'S NAME	14. REPRESENTATIVE'S TELEPHONE NUMBER
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15. REPRESENTATIVE'S ADDRESS

16. ORGANIZATION'S MAILING ADDRESS (If different from #15 above)

17. AUTHORIZED REPRESENTATIVE'S SIGNATURE	18. DATE SIGNED
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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 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.