

**State of Louisiana**  
**Office of Alcohol and Tobacco Control**



Jeff Landry  
GOVERNOR

Jarrod Coniglio  
SECRETARY

CHAD M. BROWN  
ATC COMMISSIONER

**ATC SPECIAL EVENTS**

<b>TYPES OF ACTIVITIES ALLOWED BY SPECIAL EVENT PERMITS</b>						
	<b>Accept Alcohol Product Donations</b>	<b>Accept Cash Donations</b>	<b>Accept Sponsorship</b>	<b>Display Outside Signage</b>	<b>Industry Pricing*</b>	<b>RV Certified Employees</b>
<b>TYPE A</b>	YES	YES	YES	YES	YES	Recommended
<b>TYPE B</b>	Prohibited	YES	YES	YES	YES	Recommended
<b>TYPE C</b>	Prohibited	Prohibited	Limited*	NO*	YES	YES

**\*SEE SPECIAL EVENT GUIDELINES, LAWS, & REGULATIONS FOR ADDITIONAL DETAILS\***

**DOCUMENT CHECKLIST – TYPE A**

- Attach Certification from IRS stating tax-exempt status under either Section 501(c)(3), 501(c)(6), or 501(c)(8).
- Attach copy of local special event permit; or letter from local authority granting authority service of alcohol at event.
- Attach a valid, signed, and dated lease, contract, or written permission from property owner.
- Attach fully completed and notarized application.

**DOCUMENT CHECKLIST – TYPE B**

- Written Proof of non-profit status or Louisiana sales tax exemption.
- Attach copy of local special event permit; or letter from local authority granting authority service of alcohol at event.
- Attach a valid, signed, and dated lease, contract, or written permission from property owner.
- Attach fully completed and notarized application
- Enclosed \$10.00 fee. Acceptable payment form includes money order, cashier check, or certified check.

**DOCUMENT CHECKLIST – TYPE C**

- Attach copy of local special event permit; or letter from local authority granting authority service of alcohol at event.
- Attach a valid, signed, and dated lease, contract, or written permission from property owner.
- Attach fully completed and notarized application.
- Enclosed \$100.00 fee. Acceptable payment form includes money order, cashier check, or certified check.

**State of Louisiana**  
**Office of Alcohol and Tobacco Control**



Jeff Landry  
GOVERNOR

Jarrod Coniglio  
SECRETARY

**CHAD M. BROWN**  
ATC COMMISSIONER

**ATC SPECIAL EVENTS**

PERMIT TYPE		
1) Select permit type and attached appropriate documentation, if applicable.	FEES	
<input type="checkbox"/> TYPE A – Tax exempt non-profit status under IRS Code Sections 501(c)(3), 501(c)(6), or 501(c)(8)	\$0.00	
<input type="checkbox"/> TYPE B – Non-profit Organization	\$10.00	
<input type="checkbox"/> TYPE C – All others persons or organizations not eligible for another type of permit	\$100.00	
<input type="checkbox"/> HOMEBREW Special Event Permit	\$0.00	
APPLICANT INFORMATION		
2) Name of Applicant (name of individual, organization, etc.)		
3) Applicant's Mailing Address:		
Street:	City:	
State:	Zip Code:	Parish:
4) Who is the primary organizer of this event? (company/individual)		
5) Contact Name:		
6) Contact Phone Number:		
7) Contact Driver's License:		
8) Contact Email address:		
9) Has applicant received more than twelve (12) permits in the current calendar year?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
10) How would you like to be notified about permit status?		
<input type="checkbox"/> Phone Number <input type="checkbox"/> Mailing Address <input type="checkbox"/> Email Address		
EVENT INFORMATION		
11) Name of Event:		
12) Event Website (if applicable):		
13) Event Location:		
Street:	City:	
State:	Zip Code:	Parish:
14) Will the event be held at location that holds a permit with ATC? If YES: (Business Name) _____ (Business Permit) _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
15) Where will the event be held?	<input type="checkbox"/> Inside	<input type="checkbox"/> Outside
16) Approximately, how many attendees will attend the event?		
17) Provide the dates of the event: _____/_____/_____ to ____/____/_____  <ul style="list-style-type: none"> <li>Special Event permit(s) may only be issued for a period of up three (3) consecutive days</li> <li>Additional applications must be submitted for events lasting more than 3 days.</li> <li>Wholesalers may ONLY deliver alcoholic beverage products up to two (2) days prior to event address as indicated on special event permit.</li> </ul>		

**State of Louisiana**  
**Office of Alcohol and Tobacco Control**



Jeff Landry  
GOVERNOR

Jarrod Coniglio  
SECRETARY

CHAD M. BROWN  
ATC COMMISSIONER

**ATC SPECIAL EVENTS**

**EVENT INFORMATION - CONTINUED**

18) Hours of Operation (check only applicable days)		
<input type="checkbox"/> Day 1 – Hours of event: Start: _____ End: _____ for <input type="checkbox"/> Set-up	<input type="checkbox"/> Event	
<input type="checkbox"/> Day 2 – Hours of event: Start: _____ End: _____ for <input type="checkbox"/> Set-up	<input type="checkbox"/> Event	
<input type="checkbox"/> Day 3 – Hours of event: Start: _____ End: _____ for <input type="checkbox"/> Set-up	<input type="checkbox"/> Event	
19) Describe Event and your role in event: (i.e. what type of event; where is alcohol offered or sold, outside, tent, booth etc.)		
20) Is Applicant the exclusive alcohol beverage service provider at event? If "NO," list all other providers.		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
21) Type of Alcohol at Event: (Check all applicable)		
<input type="checkbox"/> Beer/Malt Beverages <input type="checkbox"/> Wine <input type="checkbox"/> Liquor/Distilled Spirits		
22) Will there be a general admission, registration, or ticket fee to attend event?		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
23) Will there be a fee for alcoholic beverages?		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
24) Will alcohol be purchased? If "YES", list. (i.e. name of wholesalers):		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
25) Does applicant understand ALL alcohol (excluding TYPE A) must be purchased under your special event permit and only purchased from a Louisiana authorized wholesale dealer?		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
26) List all brands of alcoholic beverages that will be sold/served/available at event? (excluding samplings conducted in accordance with sample regulations LAC 55:VII:317(c)(2)(h)) – example: Budweiser, Crown Royal, Mondavi Wine.		
27) Will alcohol be donated?		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
28) If alcohol is donated, list all products donated and who donated product: <input type="checkbox"/> check if not applicable		
29) Will alcohol sampling by a retailer, wholesaler, or manufacturer be conducted at event? If "YES," complete Sampling/Homebrew section.		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
30) Will alcohol beverage products produced by a homebrew be available at event? If "YES," complete Sampling/Homebrew section.		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
31) Does this event involve a promoter? If "YES," complete Promoter/Other Organization section.		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
32) Are there other organizations, persons, vendors, or promoters involved with event or receiving proceeds from event? If "YES," complete		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
33) Have you obtained all necessary permits and/or approval from your local jurisdiction? • Local permit and/or letter of approval must be attached to application		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>
34) Have you obtained permission to sell alcohol from the owner of the premise? • If YES, Attach Lease or Letter		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**State of Louisiana**  
**Office of Alcohol and Tobacco Control**



Jeff Landry  
GOVERNOR

Jarrod Coniglio  
SECRETARY

CHAD M. BROWN  
ATC COMMISSIONER

**ATC SPECIAL EVENTS**

35) Will this event be sponsored by an alcohol industry member such as a retailer, wholesaler/distributor or manufacturer/suppliers? Explain. If YES, explain and attach sponsorship contract.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
36) the event receiving any cash or monetary donation from any outside sources? If "YES," explain.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
37) Is the event receiving any alcohol products as part of the sponsorship?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
38) Is the event offering exclusively one manufacturer line of products as a condition of sponsorship? (Example: Only Budweiser or Miller Coors products etc.). If YES, explain.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
39) Is the event receiving tubs, cups, labor, any electric unit, signage, t-shirts, or caps from any wholesaler or manufacturer?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
40) If you answered "YES" to #39, explain in details. (i.e. who, what, and how much) (You must attach invoices). <input type="checkbox"/> check if not applicable	Yes <input type="checkbox"/>	No <input type="checkbox"/>
41) Will event involve any of the following? (check all that applies) <input type="checkbox"/> Booths <input type="checkbox"/> Tents <input type="checkbox"/> Stages <input type="checkbox"/> Outside Banners/Signage <input type="checkbox"/> Refrigerator Truck <input type="checkbox"/> Beer Truck	Yes <input type="checkbox"/>	No <input type="checkbox"/>
42) 42. How many of the following will the event offer (as it applies to applicant only)? <input type="checkbox"/> check if not applicable <input type="checkbox"/> Number of Booths _____ (attach diagram /map of location of booths and/or tents) <input type="checkbox"/> Number of Tents _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>SPONSORSHIP</b>		
43) Did the event rent booths, tents, stages, signage, or alcohol truck from a wholesaler? If YES, how much? _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>PROMOTOR / OTHER ORGANIZATION</b>		
44) Name of other organizations, persons, vendors, or promoters' role in event.		
45) Contact Information of other organizations, persons, vendors, or promoters' role in event.		
46) Explain other organizations, persons, vendors, or promoters' role in event.		
47) How much proceeds/profits of event will other organizations, persons, vendors, or promoters involved receive? Example: percentage, all, or a specific amount		

**State of Louisiana**  
**Office of Alcohol and Tobacco Control**



Jeff Landry  
GOVERNOR

Jarrod Coniglio  
SECRETARY

CHAD M. BROWN  
ATC COMMISSIONER

**ATC SPECIAL EVENTS**

**SAMPLING / HOMEBREW EVENTS**

48) List all retailers, wholesaler, and/or manufacturers conducting sampling at your event and list the product being sampled.

Name of Retailer/Wholesaler/Manufacturer	Product available for sample	Sample size

49) What type of homebrew event will you be hosting?

Homebrew Organized Affair    Club Meeting    Homebrew Exhibition    Homebrew Competition

50) Do you understand that homebrew may not be sold or offered for sale at this event?

Yes       No

**TYPE A AND TYPE B APPLICANTS MAY SKIP FOLLOWING SECTION AND COMPLETE APPLICATION**

**TYPE C – MUST COMPLETE SECTION IN FULL**

51) Does applicant hold a permit with the ATC?

Yes       No

52) If applicable, list all name of businesses and permit number held by applicant.

53) Do you own the premises where the event will be held? If NO, attach lease.

Yes       No

54) Are you a United States citizen?  Born    Naturalized

Yes       No

55) Have you or your spouse ever been convicted of a felony?

• If YES, explain

Yes       No

56) Have you or your spouse ever had an alcoholic beverage permit revoked or been convicted of violating any liquor or beer regulatory, state or local laws or ordinances?

• If YES, explain

Yes       No

57) Have you or your spouse ever been convicted of soliciting for prostitution, pandering, letting premises for prostitution, contributing to the delinquency of a juvenile, keeping a disorderly place or convicted for dealing narcotics?

• If YES, explain

Yes       No

58) Is this application being made by you on behalf of or for the benefit of anyone other than the applicant listed on Page 1?

• If YES, explain

Yes       No

**State of Louisiana**  
**Office of Alcohol and Tobacco Control**



Jeff Landry  
GOVERNOR

Jarrod Coniglio  
SECRETARY

CHAD M. BROWN  
ATC COMMISSIONER

**ATC SPECIAL EVENTS**

<b>TYPE C – MUST COMPLETE SECTION IN FULL</b>		
59) Do you understand that this business must comply with all provisions of the Louisiana Responsible Vendor & Security Personnel training programs? The responsible vendor handbook and amendments are available for download at <a href="http://www.atc.la.gov">www.atc.la.gov</a>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
60) Does the applicant, applicant's spouse or any member of applicant's entity hold an interest in a business that holds a wholesale or manufacturer beer or liquor permit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
61) Do you or your spouse or partner hold any ownership interest and/or receive any profits from an alcoholic beverage wholesaler/distributor or manufacturer/suppliers? • If, YES, explain	Yes <input type="checkbox"/>	No <input type="checkbox"/>
62) Do you understand that manufacturers and/or wholesalers are prohibited from providing a retailer with anything of value unless explicitly enumerated as an exception in the Alcoholic Beverage Control Law or these regulations?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
63) Do you understand that it is prohibited to exclusively offer for sale, sell, or serve alcohol beverage products produced by one manufacturer and/or through a wholesaler?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
64) Do you understand that retailers are prohibited from accepting or requiring any such inducement or other influence; and anyone found in violation of the market practices laws and regulations of the State of Louisiana, the United States or any other state, their permit(s) is subject to suspension, revocation and/or assessment of a fine or other penalty provided by law.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**State of Louisiana**  
Office of Alcohol and Tobacco Control



Jeff Landry  
GOVERNOR

Jarrod Coniglio  
SECRETARY

CHAD M. BROWN  
ATC COMMISSIONER

**ATC SPECIAL EVENTS**

**SWORN STATEMENT OF AUTHENTICITY  
SPECIAL EVENT PERMIT**

<b>WARNING &amp; SIGNATURE</b>	Application must be signed by an owner, officer, or member who is reported to the ATC or to the Secretary of State or person with written authorization by power of attorney.
<p>BY SIGNING BELOW, YOU ARE SWEARING, UNDER OATH, that you have read each of the questions in this application packet, and that all answers are true and correct to the best of your knowledge; that there are no pending applications on this location, and that you are not using this special event permit in place of a bona fide license or for any other unlawful purpose. The responsible vendor handbook and amendments are available for download at <a href="http://www.atc.la.gov">www.atc.la.gov</a>.</p>	
Print Name _____	Title _____
Signature _____	

Notary					
For NOTARY Use Only					
Sworn to and subscribed to me this _____ day of _____, 20_____,					
In the parish/county of _____, State of _____,					
_____			_____		
Notary Public's Signature			Print Name of Notary Public		
Office Use Only	Permit Number	Processed By	Date Received	Approved	Date Approved