



Idaho State Police
ALCOHOL BEVERAGE CONTROL

700 S. Stratford Dr. Ste 115
Meridian, ID 83642
(208) 884-7060

APPLICATION FOR BEER/WINE PERMIT

MUST BE RECEIVED BY ABC NO LESS THAN 14 DAYS PRIOR TO YOUR EVENT

Check one: **Beer Permit (\$20)** **Wine Permit (\$20)** **Both Beer and Wine Permit (\$40)**

Applicant Name: _____ Federal Tax ID # (EIN): _____

Mailing Address: _____
(Address) (City) (State) (Zip Code)

Date(s) of event: _____ (Not to Exceed 3 Days) Hours of Event: _____
(Start/Finish times - include a.m. or p.m.)

Location of event: _____
(Address) (City) (County) (Zip)

Name of Event: _____

Number of attendees expected to attend your event: _____

Is the location of the event inside city limits? Yes _____ No _____

Purpose: _____

Proceeds will be donated to: _____

BEER RECEIVED FROM	DONATED (D) OR PURCHASED (P)	WINE RECEIVED FROM	DONATED (D) OR PURCHASED (P)

THE FOLLOWING IDAHO RETAIL/WINERY/BREWERY LICENSEE(S) WILL BE ASSISTING WITH THE SERVICE, SALE, OR DISTRIBUTION OF ALCOHOLIC PRODUCT DURING THIS EVENT. IF NOT IDENTIFIED BELOW, I UNDERSTAND THAT NO ADDITIONAL RETAILER MAY ASSIST WITH THIS EVENT AND ANY PRODUCT PROVIDED BY THEM MUST BE SERVED BY A REPRESENTATIVE OF THE NON-PROFIT ORGANIZATION.

RETAILER	PREMISES # / LICENSE #	PHONE NUMBER	EMAIL ADDRESS

I HEREBY CERTIFY THAT THE APPLICANT LISTED ABOVE IS NOT OTHERWISE LICENSED IN THE STATE OF IDAHO TO SELL ALCOHOLIC BEVERAGES AND THE PROCEEDS FROM THIS EVENT WILL BE DONATED FOR BENEVOLENT, CHARITABLE, OR PUBLIC PURPOSES. **I ALSO ACKNOWLEDGE THAT ALL DONATED, UNUSED PRODUCT MUST BE RETURNED TO THE DONATING RETAILER/DISTRIBUTOR/WHOLESALE/INDIVIDUAL FOLLOWING THIS EVENT.**

Applicant's Signature _____ Title _____ Date _____

Applicant's Printed Name _____ Phone Number _____

Email Address _____

IDAHO STATE POLICE, ALCOHOL BEVERAGE CONTROL
700 S. Stratford Dr, Meridian, ID 83642
208-884-7060

INSTRUCTIONS FOR BEER AND WINE PERMIT APPLICATION

- Permits are for benevolent, charitable, or public purpose events.
- **All applications** must be received by the Alcohol Beverage Control Office at least **two weeks prior to the event** for processing.
- Permits are issued for one to three (1-3) consecutive days.
- Permits will be mailed to applicants.
- **All first time applicants must provide a copy of their non-profit status from the IRS with Federal ID number (EIN).**
- Applications will be returned if not completed.

1. Mark with an "X" for which permit(s) you are applying.
2. **Applicant Name:** The Non-Profit Organization sponsoring the event. **Include Federal Tax ID Number (EIN).** EIN must match applicant name.
3. Certified checks, money orders, or organizational checks made out to "State of Idaho" **must** accompany application. **Personal checks will not be accepted.** Any application received without appropriate monies will be returned. **NO REFUNDS will be issued.**
4. **Location of event:** Include name of place, street address, city, county, and zip code.
5. **Proceeds will be donated to:** Detail who will receive the proceeds and the percentage of the profits they will receive.
6. All suppliers of beer/wine to be served, sold, or dispensed must be included on the list.
7. All participating Idaho licensees must be identified on application. Wholesalers & distributors are not allowed to serve, sell, or dispense any product.
8. Application must be signed.
9. Any application for an organized industry event (i.e.: celebration, gathering, festival, etc.) needs to be accompanied by a list of industry participants. All out-of-state breweries must be licensed in the state of Idaho by Certificate of Approval under Idaho Code 23-1027. All out-of-state breweries and wineries must ship product through an in-state distributor.
10. **Please contact the local county and municipality where you will hold your event to find out if further permits are required and to ensure you are in compliance with local codes or ordinances.**
11. The applicant must submit, **within 30 days**, a report to the Director subsequent to the benevolent, charitable, or public purpose event showing the disposition of funds from the event.
See Idaho Code 23-1007(2)(f-g) & 23-1336.
12. Should the Director determine that a benevolent, charitable, and public purpose event permit applicant, permittee, or its representative is violating or has in the past violated any law pertaining to Idaho Title 23, IDAPA 11.05.01, or rules and regulations promulgated by the Director or the State Tax Commission, the Director may revoke a current permit or refuse to grant a future permit. When the Director determines to revoke or refuse to renew a permit, the affected permittee may petition the Director requesting that a monetary payment be allowed in lieu of the permit revocation or refusal.



Idaho State Police

Alcohol Beverage Control

CREDIT CARD AUTHORIZATION FORM

*****Please note: There is an additional processing fee of 3% of the total transaction plus \$1.00 for all payments made by credit or debit card. Depositing of fees does not guarantee the issuance of a license or permit. Returned payments will result in an incomplete license/permit application.*****

If paying by credit or debit card, please complete the following:

Name of Applicant/Business Name: _____

Doing Business As (DBA) Name: _____

ABC Premises Number (If Issued): _____

Purpose for Payment: _____

Amount: \$ _____

Credit Card Type Visa AmEx

MasterCard Discover

Credit Card Number:

Expiration Date: / CVV: Zip Code (Required):

Name as it appears on card: _____

Phone Number: _____
(Phone number is required in case we need clarification or have questions regarding payment.)

E-mail: _____

Signature of Payee: _____

(Required before faxing, emailing, or mailing)

Phone: (208) 884-7060
 Fax: (208) 884-7096
 700 S. Stratford Dr., Ste. 115
 Meridian, ID 83642



End of Event Report for Beer and Wine Permit for Benevolent, Charitable, and Public Purpose Events

1. Permit Number:

2. Event Date(s):

3. Organization:

4. Event Name:

5. *Person Reporting:

6. Phone Number:

7. E-Mail:

8. Total Funds Collected from Event (\$):

9. ****Expenses** (Itemized breakdown should include all alcohol **AND** non-alcohol expenses. For example: Facility/equipment rental, entertainment, supplies, advertising, items purchased to be raffled/sold, etc.):

10. ****Distribution of Funds** (List the organization(s) that the proceeds from the event were donated to, including the amounts for each):

You must submit this report to ABC NO LATER THAN 30 days after the end of your event. Failure to do so may result in disqualification from future licensing. This form is also available on our website at www.isp.idaho.gov/abc and may be filled out online and e-mailed to our office at abc@isp.idaho.gov.

*The reporting person above certifies that ALL unused donated alcohol product has been returned to the donating entity/entities.

**All expenses must be accounted for in the Expenses section, and all profits must be accounted for in the Distribution of Funds section. Attach additional information as necessary.

Instructions for End of Event Report for Beer and Wine Permit for Benevolent, Charitable, and Public Purpose Events

- 1. Permit Number(s):** If you conducted a series of events, you may enter all of the permit numbers for the event series here. Make sure to submit the report no later than 30 days after the end of the first event in the series. ***Note:** This does not refer to conducting multiple unrelated events. This refers specifically to a series of the same event, such as a summer concert series, Alive After Five, running the same play over multiple weekends, etc.
- 2. Event Date(s):** Please enter the corresponding start **AND** end dates for each Permit Number you listed in #1. **Note:** Only enter end dates if the event lasted multiple consecutive days, such as a county or state fair, Arts in the Park, sports tournament, etc.
- 3. Organization:** Please enter your complete organization name.
- 4. Event Name:** Please enter the complete name of your event.
- 5. *Person Reporting:** Please enter the first and last name of the person reporting. ***See note at bottom of report page regarding the reporting person's responsibilities.**
- 6. Phone Number:** Please enter the phone number with area code of the person reporting. You may enter multiple phone numbers.
- 7. E-Mail:** Please enter the e-mail address of the person reporting. You may enter multiple e-mail addresses.
- 8. Total Funds Collected from Event (\$):** Please enter the dollar amount for ALL alcohol AND NON-alcohol income your event generated, such as beer/wine sales, merchandise sales, admissions, auction/raffle proceeds, etc.
- 9. **Expenses:** Please itemize ALL alcohol AND NON-alcohol expenses, including facility/equipment rental, entertainment, supplies, advertising, items purchased to be raffled/sold, etc. ****See note at bottom of report page about Expenses and Distribution of Funds.**
- 10. **Distribution of Funds:** Please list all organizations you donated funds to from your event, with dollar amounts for each. ****See note at bottom of report page about Expenses and Distribution of Funds.**