

**LARAMIE COUNTY APPLICATION: 24-HOUR CATERING/MALT BEVERAGE PERMIT**

APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PERMIT REQUESTED:  CATERING (\$100/DAY)  MALT BEVERAGE (\$50/DAY)

PERMIT FROM: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ THROUGH: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# \_\_\_\_ DAYS AT \_\_\_\_ / DAY TOTAL FEE ATTACHED: \$ \_\_\_\_\_

PURPOSE OF PERMIT: \_\_\_\_\_

PREMISES FOR WHICH PERMIT IS REQUESTED (PHYSICAL ADDRESS):

**THE UNDERSIGNED, AS APPLICANT OR AGENT, HEREBY AGREES TO COMPLY WITH REGULATIONS OF LARAMIE COUNTY, AND THE PROVISIONS OF WYOMING STATUTES, TITLE 12, ALCOHOLIC BEVERAGES, AS APPLICABLE TO THE REQUESTED PERMIT**

If licensed within another jurisdiction, I affirm by checking this box that I have secured written approval of the licensing authority of that jurisdiction prior to filing this permit application.

/S/ APPLICANT/AGENT \_\_\_\_\_ DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Office Use Only*

**24-HOUR CATERING/MALT BEVERAGE PERMIT (W.S. 12-5-101(a))**

LARAMIE COUNTY, WYOMING, PURSUANT TO W.S. 12-4-502, HEREBY ISSUES CATERING/MALT BEVERAGE PERMIT(S) TO APPLICANT FOR THE APPROVED TWENTY-FOUR (24)-HOUR PERIOD(S) FROM \_\_\_\_ / \_\_\_\_ / \_\_\_\_ TO \_\_\_\_ / \_\_\_\_ / \_\_\_\_ SUBJECT TO OPERATION HOURS SET BY THE LARAMIE COUNTY BOARD OF COMMISSIONERS PURSUANT TO W.S. 12-5-101.

**APPROVED AND ISSUED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_.**

**BOARD OF LARAMIE COUNTY COMMISSIONERS**

\_\_\_\_\_  
TROY THOMPSON, CHAIRMAN

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
DATE

ATTEST: \_\_\_\_\_  
DEBRA K LEE, LARAMIE COUNTY CLERK

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
DATE

**THIS PERMIT MUST BE CONSPICUOUSLY POSTED ON THE PREMISES FOR WHICH ISSUED.**