INDIANA STATE EXCISE POLICE



District 4
651 S Commerce Drive
Seymour, Indiana 47274
812-523-8314
812-522-5681 Fax
dist4@atc.IN.gov

Temporary Beer & Wine Permit Instructions Beer/Wine Authority/Type 118

Step 1- General Information:

Name of Applicant

TM Permit Number (Leave Blank- Excise fills this in)

Address

E-mail address (to send permit to)

Name of person making application

Fax number

Emergency contact telephone number

Printed name of contact person of event

Emergency contact telephone number

Step 2- Event Information:

Beginning Day (Monday-Sunday)

Beginning Date (month/day/year)

Ending Day (Monday-Sunday)

Ending Date (month/day/year)

Time of Event

Start Time (no earlier than 7am)

End Time (no later than 3am)

Type or description of event- (wedding, fundraiser, festival. Etc.)

Exact address of event (street address, city, state, zip code, and County event will be held in)

Step 3- Floor Plan (see Step 4, #2) or attach an 8½ by 11 sheet with floor plan (needs to include bar area)

Step 4- Acknowledgement (Read all information)

Step 5- Community Clearance

- 1. Law Enforcement signature and date (must be original signatures)

 Must be from County where event will take place (If in city limitsChief of Police, If out of city limits- Sheriff) IF NOT SIGNED OR

 DATED WILL BE RETURNED
- 2. Not needed unless event is held in Ft. Wayne
- 3. Must have signature and date of Permitee (must be original signatures) IF NOT SIGNED OR DATED WILL BE RETURNED
- 4. Fee must be included with application

 (ONLY FEE TYPES ACCEPTED ARE: MONEY ORDER, BUSINESS,

 CERTIFIED OR CASHIER'S CHECK)*NO CASH OR PERSONAL CHECKS

 WILL BE ACCEPTED*
- ❖ If you have any additional questions, please contact Christine Deaton at District 4 Office at 812-523-8314



- INSTRUCTIONS: 1. Applicant must complete all requested information.
 - 2. Please type or print clearly.
 - 3. Submit application and payment to the local excise district office.

Send, deliver, or mail to:

DISTRICT 1 52422 County Road 17 Bristol, IN 46507 Telephone: (574) 264-9480

DISTRICT 2

1353 South Governors Drive Columbia City, IN 46725 Telephone: (260) 244-4285

DISTRICT 3 279 West 300 North Crawfordsville, IN 47933 Telephone: (765) 362-8815

DISTRICT 4 651 S. Commerce Dr. Seymour, IN 47274 Telephone: (812) 523-8314

DISTRICT 5 3650 South US Hwy 41 Vincennes, IN 47591 Telephone: (812) 882-1292

DISTRICT 6 6400 East 30th Street Indianapolis, IN 46219 Telephone: (317) 541-4100

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Name of ap	lame of applicant applying for permit (organization, club, corporation, individual) address of applicant (number and street, city, state, and ZIP code)														1	TM Permit number (issued by ATC) E-mail address																						
Address of																																						
Name of pe	erson n	naking	app	licatio	on															F	ax r	num	ber)						9	Emergency contact telephone number ()								
Printed nan	ne of c	ontac	pers	on o	f eve	nt						I		Ī			I		ī										E	Emergency contact telephone number ()								
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										Ending date (month, day, year)									V-710-1																			
Time of event				AM □ PM							End time								AM PM																			
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STEP 4. A	CKNOWLEDGEMENT	
In order to qualify for this authority to serve beer and wine, the following	guidelines must be met:	
 There must be a well defined premises, i.e. building, tent, enclosured. You must have a defined floor plan or diagram. This is to be drawn defined separation between the bar area and family area. (Must be a small be NO carry-out privileges, NO carry-in privileges and No. Each applicant must designate an individual to be responsible for the same and the s	on Page 1, Step 3 of this applicate on floor plan.) NO spirituous beverages allowed, the event and such person shall siblic beverages MUST POSSESS aurements, particularly with regard town board.	ign the authority. a valid ATC employee permit. I to restroom facilities.
CTED 5	COMMUNITY CLEARANCE	
Signature of Sheriff of county, or Chief of Police, or Town Marshall of jurisdiction		Date signed (month, day, year)
2. Signature of the mayor (if the event is held in Fort Wayne)		Date signed (month, day, year)
Note: Please post your approved request in a conspicuous place where the al request is denied, you may be notified either in person or by telephone.		pensed at the location. If for any reason this
I swear or affirm under penalties of perjury that the information is true at		
Signature of permittee I agent (Your signature acknowledges that you have read a	nd will abide by the rules and guideline	es.) Date signed (month, day, year)
FOR DI	ISTRICT USE ONLY	
District number	Date issued (month, day, yea	ar)
Reviewed by Excise Police District Representative	Approved	☐ Denied

- 1. ALL EVENTS ARE \$50.00 PER DAY. BUSINESS CHECKS OR MONEY ORDERS ARE ACCEPTED MADE OUT TO THE INDIANA ALCOHOL AND TOBACCO COMMISSION.
- 2. SERVING PAST MIDNIGHT, NO LATER THAN 3 AM, IS ONE (1) DAY.
- 3. NO RAIN CHECKS ON ANY OF THE ABOVE EVENTS.

INDIANA STATE EXCISE POLICE



District 4 651 S Commerce Drive Seymour, Indiana 47274 812-523-8314 812-522-5681 Fax dist4@atc.IN.gov

Application for Temporary Employee Permit Instructions

1. Step 1 General Information:

Name of applicant

Daytime telephone number

E-mail address

Address

Social Security Number (cannot process permit without this)

Sex (M or F)

Height (ft. in.)

Weight (lbs.)

Date of Birth (month, day, and year)

Age

TM Permit number (Leave Blank- Excise fills this in)

Date(s) of Temporary Permit (month, day, and year)

Location where Temporary Permit Event will take place- Exact address of event (street address, city, state, zip code, and County event will be held in)

2. Step 2 Background Questions- (READ CAREFULLY PRIOR TO ANSWERING): Answer all questions- YES or NO

If you answer Yes to first four questions- You must provide information requested

1-list the month, day, year, and location of your convictions (if more than one attach a separate sheet)

2-provide information requested (use separate sheet if needed)

3-Explain why it was denied, revoked, or suspended

4-If less than 10 years provide a copy of driving record for that state

The remaining 3 questions are to be answered Yes to confirm that you are aware of the alcohol laws.

3. Step 3 Fee and Payment- \$5 (PER EVENT) PAYMENTS ACCEPTED- MONEY ORDER, BUSINESS, CASHIERS, OR CERTIFIED CHECK. (Made out to: Indiana Alcohol and **Tobacco Commission**)

NO CASH OR PERSONAL CHECKS WILL BE ACCEPTED

- 4. Step 4 Signature and Affirmation (Read all information) sign and date
- 5. Any incomplete form will not be processed
 - **❖** If you have any additional questions, please contact Christine Deaton at District 4 Office at 812-523-8314



APPLICATION FOR TEMPORARY EMPLOYEE PERMIT State Form 54632 (R / 4-18) INDIANA ALCOHOL AND TOBACCO COMMISSION

INSTRUCTIONS:

Type or print legibly.

Complete Steps 1 through 4.

Submit this permit application and payment to the Indiana State Excise Police (ISEP) district where the temporary event will be held. Please see the ISEP district addresses at the end of this form.

This permit may be issued for use at the location covered by and during the time period of Temporary permit only.

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	STEP 1. GENERAL INFORMATION														
Name of applicant (first, middle initial, last) Daytime telephone number ()															
Address (nu	Address (number and street, city, state, and ZIP code)														
Social Secu	rity number *		Sex	Height (feet, inches)	Weight (pounds)	Date of birth (month, day, year)	Age								
			☐ Male ☐ Female				mge.								
Temporary p	permit numbe	er		Date(s) of Temp	orary Permit (month, da	y, year)									
Location wh	Location where Temporary Permit is to be used														
	STEP 2. BACKGROUND QUESTIONS - READ CAREFULLY PRIOR TO ANSWERING.														
☐ Yes	Yes No Have you ever been convicted of operating while intoxicated in Indiana or of a similar charge in any other state? If yes, please list the month, day, year, and location of your conviction(s):														
☐ Yes	Yes No Are you currently serving a sentence, including any term of probation for operating while intoxicated in Indiana or a similar crime in another state?														
☐ Yes	□ No	Have you had an application for an alcoholic beverage permit or employee's permit denied, revoked, or suspended within the last five (5) years? If yes, explain:													
☐ Yes	□No	Have you ever had a driver's license in any other state? If so, you must attach a copy of your driving record from that state.													
☐ Yes	□ No	Do you know that it is a Class B Misdemeanor, punishable by up to six (6) months in jail and a \$1,000 fine, for knowingly serving an intoxicated person?													
☐ Yes	□ No	Do you know that an excise officer may enter, inspect, and search a permit premises in which you work without a warrant and you must produce proof of your temporary employee permit on demand?													
☐ Yes	□ No	Do you know that the in the State of Indiana		re part of the criminal	code and are enforce	eable by every law enforcemen	nt officer								
			STEP 3. FEE AN	ND PAYMENT SCHE	DULE										
Temporary	Employee	Permit (Fee \$5.00 p	per IC 7.1-3-18-11(d))												
Payment b	y maii may	be made by money ord	ler, business crieck, cashie	er's checк, or certified	check.										
			STEP 4. SIGNA	TURE AND AFFIRMA	TION										
information	provided o	cation was completed bon this form is true and ealize I may be fined.	y myself. I affirm under pe correct. I understand that	enalties of perjury that it is a felony under Ind	I am at least twenty- liana law to misrepre	one (21) years of age and that sent or falsify any portion of th	all is								
Signature of	applicant				D	ate signed (month, day, year)									
Indiana St	ata Evoica	Police (ISER) district	addresses (Please visit	http://in.gov/ata/isan/2	270 htm to dotormin	o your ISED district \									
District 1	ate Excise	Tolice (IOLT) district	District 3	mtp://m.gov/atc/isep/2	District 5										
52422 Cou Bristol, IN Telephone:	46507		279 W County Road Crawfordsville, IN 4 Telephone: (765) 36	7933	3650 Soul Vincennes										
Fax: (574)	264-9348	0,00	Fax: (765) 362-881		Fax: (812)										
District 2 1353 South	Governors	s Drive	District 4 651 South Commer	ce Drive	District 6 6400 East	District 6 6400 East 30th Street									
Columbia C Telephone:			Seymour, IN 47274 Telephone: (812) 52		Indianapo	lis, IN 46219	N 46219								
Fax: (260)		7203	Fax: (812) 522-568			elephone: (317) 541-4100 ax: (317) 541-4104									

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Temporary Beer & Wine Permit Guidelines

n order to qualify for this authority to serve beer & wine, the following uidelines must be met:

1) The application must be filled out completely.

2) Must have signature and date of Permitee. (if not signed and dated will be returned)

3)Step 5 Community Clearance- must have signature of Local Enforcement Agency in county where event will take place (if in city limits- Chief of Police, if out of city limits- Sheriff) (if not signed will be returned)

4)You must have a defined floor plan or diagram. This can be drawn on Page 1, Step 3 of this application (or attach an 8 ½ by 11 page). If minors are to be present you must have a defined separation between bar/serving area and family area (must be on floor plan).

5) There shall be NO carry-out privileges, NO carry-in privileges, and NO spirituous beverages (Liquor) allowed.

6) Each applicant must designate an individual to be responsible for the

event and such person shall sign authority.

7)<u>ANY</u> and <u>ALL</u> persons dispensing or accepting payment for beer/wine <u>MUST POSSESS a valid ATC employee permit</u> (Temporary Employee Permits are available for \$5 per person per event).

8) Legal hours of dispensing beer/wine (Prevailing Time), Monday through Saturday 7am to 3am the following day. Sunday- 7am to 3am the following day.

9) All application(s) must be received by the district office either in person or by mail at least 5 business days prior to event. Failure to comply will be grounds for denial.

10) This authority must be posted in the most conspicuous place at the location of the event. An Excise Officer or Commissioner, for good cause, has the authority to revoke the authority during the event.

11) The \$50 per day fee must be paid with one of the following:

MONEY ORDER, BUSINESS, CASHIER'S OR CERTIFIED CHECK. MADE
OUT TO: INDIANA ALCOHOL & TOBACCO COMMISSION. NO CASH OR
PERSONAL CHECKS WILL BE ACCEPTED.

12) You can add the Temporary Beer & Wine Permit fee & Temporary Employee Permit fees in one payment.