



# City of Caldwell Alcohol Beverage Catering Permit Application

Complete this permit and remit with PAYMENT to the City Clerk's Office, 411 Blaine Street, Caldwell, ID 83605 or send to: Caldwell City Hall, ATTN: City Clerk, P.O. Box 1179, Caldwell, ID 83606 **Submit application at least 5 working days prior to the event.**

## PLEASE PRINT THE INFORMATION BELOW

Alcohol Licensee Holder: \_\_\_\_\_  
(Business name as listed on Idaho State Alcohol License)

Address: \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_

Idaho State Alcohol License No. \_\_\_\_\_ Expires \_\_\_\_\_  
(If applicant does not hold an alcohol beverage license with the City of Caldwell, a copy of their Idaho State Alcohol Beverage License must be provided with the application.)

Permit to be used: Month \_\_\_\_\_, Date(s) \_\_\_\_\_ Hours: \_\_\_m, \_\_\_\_\_m

Location: \_\_\_\_\_  Beer  Wine  liquor  
(Premises, Rooms, Suites, Address)

Catering for: \_\_\_\_\_  
(Type of Event: Private Party, Convention, Wedding, Reception, Festival, etc.)

Name of party or convention sponsoring the event: \_\_\_\_\_  
Expected attendance at the event: \_\_\_\_\_

- Alcohol Inside (dispensed and consumed inside a building)
- Alcohol Outside (dispensed and consumed outside in the open). *Attach a detailed site plan of the area to be used in relation to adjacent properties, show location of dispensing area (beer garden).*

This sponsored event will be open to the named organization(s), group(s), or person(s) and guests for a period of \_\_\_\_\_ days, not to exceed five (5) consecutive days at the fee of twenty dollars (\$20.00) per day.

Responsible Licensee Name: (print please) \_\_\_\_\_

Official Title: \_\_\_\_\_

Date: \_\_\_\_\_ Email Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

E-mail: [cityclerk@cityofcaldwell.org](mailto:cityclerk@cityofcaldwell.org) Phone: (208) 455-4656 Fax: (208) 455-3003

Office Use Only:

Approved  Denied Caldwell Police Chief: \_\_\_\_\_

Approved  Denied Caldwell Fire Chief: \_\_\_\_\_