



APPLICATION FOR TEMPORARY PERMIT TO SELL ALCOHOLIC BEVERAGES

APPLICANT (FULL NAME OF ORGANIZATION OR INDIVIDUAL)	
ORGANIZATION ADDRESS	
IF ORGANIZATION, FULL NAME AND ADDRESS OF REPRESENTATIVE	
ORGANIZATION PHONE NUMBER	REPRESENTATIVE PHONE NUMBER
LOCATION OF EVENT (ADDRESS & CITY)	
NAME AND DESCRIPTION OF EVENT	
DATE(S) AND TIME OF EVENT	EMAIL
<p>APPLICANT agrees that he/she/it accepts the sole and full responsibility for the event referenced in this application and all of the activities occurring during this event, including but not limited to all safety, medical and security duties and obligations.</p> <p>APPLICANT further agrees that VERMILION PARISH POLICE JURY shall not be responsible for any claims that may arise related to this event, and acknowledges that VERMILION PARISH POLICE JURY is only granting consent for the temporary sale of alcoholic beverages during t his event on the date (s) aforementioned.</p>	
ABBEVILLE, VERMILION PARISH LOUISIANA ON THIS DATE OF:	
	APPLICANT BY: NAME OF ENTITY/BUSINESS
	SIGNATURE OF INDIVIDUAL/REPRESENTATIVE