

**Summit County Government**  
**REQUEST FOR APPROVAL OF ALCOHOL USE AT THE MEDICAL OFFICE BUILDING, FRISCO COUNTY COMMONS, NORTH BRANCH LIBRARY AND COUNTY COURTHOUSE MEETING ROOM FACILITIES**

APPLICANT'S NAME/ORGANIZATION
CONTACT PERSON'S NAME & PHONE
NAME & PHONE OF STAFF PERSON RESPONSIBLE
DATE INITIALLY ROUTED BY PERSON RESPONSIBLE
DEADLINE FOR APPROVAL

**TYPE OF ORGANIZATION**

- |   |                                    |
|---|------------------------------------|
| <input type="checkbox"/> Non Profit           | <input type="checkbox"/> Religious |
| <input type="checkbox"/> Political/Government | <input type="checkbox"/> Private   |

**Type of request**

- |  |                                     |
|--|-------------------------------------|
| <input type="checkbox"/> Private Party | <input type="checkbox"/> Fundraiser |
| <input type="checkbox"/> Special Event |                                     |

**Date & time of event:**

**Purpose of event:**

**Number of participants:**

**County Requirements**

- Proof of insurance
- Indemnification
- Special Events Liquor License (if alcohol will be sold)

<b>Staff Recommendation:</b> <input type="checkbox"/> approval <input type="checkbox"/> denial
Name _____
Comments: _____
_____
_____
Approved by _____ Date _____

Approved by _____ Date _____
David Rossi, Interim County Manager

- Return signed copy to **MANAGER'S OFFICE**