



PO Box 490630  
 Leesburg, Florida 34749-0630

## EXTENSION OF PREMISES (ALCOHOL) PERMIT APPLICATION FORM

This application is required for those establishments that are requesting a temporary extension of premises for alcohol sales. Applicants must currently possess a permanent alcoholic beverage license and a City of Leesburg issued business tax registration.

This application is in conjunction with and not a substitute for the DBPR ABT 6029 – Division of Alcoholic Beverages and Tobacco Application for Extension of Premises. You must obtain approval from the State of Florida – Division of Alcoholic Beverages and Tobacco (Florida Department of Business and Professional Regulations) for a temporary extension of premises permit.

If the extension of premises (alcohol) request is for any property that is legally designated as public property, the applicant must submit a Special Events Application to the City of Leesburg – Planning and Zoning Division.

**PLEASE COMPLETE ALL INFORMATION - DO NOT LEAVE ANY SPACES BLANK**  
**WRITE N/A IN SPACES THAT DO NOT PERTAIN TO YOUR EVENT**  
**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED**  
**PLEASE PRINT USING BLACK INK OR TYPEWRITER**

Return application to:  
 Community Development Office  
 204 N. 5<sup>th</sup> Street, Leesburg, FL 34748  
 City Contact: Special Events Coordinator - (352) 728-9760

### Section 1 APPLICANT INFORMATION

|   |  |                |  |             |  |
|---|--|----------------|--|-------------|--|
| Name of Applicant (last, first, middle)     |  |                |  |             |  |
| Street Address                              |  |                |  |             |  |
| City  |  | State          |  | Zip         |  |
| Home Phone                                  |  | Work Phone     |  |             |  |
| Cell Phone                                  |  | E-mail Address |  |             |  |
| Website                                     |  | D.L. # / State |  |             |  |
| Corporation/Organization Name or D.B.A.     |  |                |  |             |  |
| State of Incorporation                      |  | Tax ID #       |  | Sales Tax # |  |
| Business Street Address                     |  |                |  |             |  |
| Mailing Address (if different from above)   |  |                |  |             |  |
| Current City of Leesburg Business License # |  |                |  |             |  |

**Section 2**  
**EVENT INFORMATION**

|   |                   |                                |       |                      |                  |                      |    |
|---|-------------------|--------------------------------|-------|----------------------|------------------|----------------------|----|
| Location of Business/Street Address   |                   |                                |       |                      |                  |                      |    |
| Owner of property where extension of premises is to be held (if private property, a letter authorizing use by the owner must be included) |                   |                                |       |                      |                  |                      |    |
| Date(s) of Extension of Premises  |                   | Hours of Extension of Premises |       | Set-up Date and Time |                  | Clean-up Date & Time |    |
|   |                   |                                |       |                      |                  |                      |    |
| Promoter  |                   |                                |       |                      |                  |                      |    |
| Promoter's Address  |                   |                                |       |                      |                  |                      |    |
| Promoter's Phone  |                   |                                |       |                      |                  |                      |    |
| Sponsor(s)  |                   |                                |       |                      |                  |                      |    |
| On-site Manager (if different from above)   |                   |                                |       |                      |                  |                      |    |
| Manager's Home Phone  |                   |                                |       |                      |                  | Cell (required)      |    |
| Manager's E-mail Address  |                   |                                |       |                      |                  |                      |    |
| Manager's Address   |                   |                                |       |                      |                  |                      |    |
| Briefly Describe Event  |                   |                                |       |                      |                  |                      |    |
| Has an extension of premises been granted at this location previously?  |                   |                                |       |                      |                  | Yes                  | No |
| If yes, when?   |                   |                                |       |                      |                  |                      |    |
| Has the applicant/organization ever had a liquor license, extension of premises or event permit denied, revoked, or suspended?            |                   |                                |       |                      |                  | Yes                  | No |
| If yes, explain:  |                   |                                |       |                      |                  |                      |    |
| Will there be an admission charge?  |                   |                                |       |                      |                  | Yes                  | No |
| If yes, how much?   |                   |                                |       |                      |                  |                      |    |
| Expected daily attendance:  |                   |                                |       |                      |                  | Peak attendance:     |    |
|   |                   |                                |       |                      |                  |                      |    |
| Describe audience   |                   |                                |       |                      |                  |                      |    |
| Will there be musical entertainment?  |                   |                                |       |                      |                  | Yes                  | No |
| If yes, what type?  |                   |                                |       |                      |                  |                      |    |
| If yes:   | Number of stages: |                                |       |                      | Number of Bands: |                      |    |
|   |                   |                                |       |                      |                  |                      |    |
| Type of Music:  |                   |                                |       |                      |                  |                      |    |
| Will there be sound amplified entertainment?  |                   |                                |       |                      |                  | Yes                  | No |
| If yes, please indicate:  | Start time        |                                | AM/PM | Finish time          |                  | AM/PM                |    |
| Will there be live entertainment  |                   |                                |       |                      |                  | Yes                  | No |
| Will sound checks be conducted prior to the event   |                   |                                |       |                      |                  | Yes                  | No |
| If yes, please indicate:  | Start time        |                                | AM/PM | Finish time:         |                  | AM/PM                |    |
|   |                   |                                |       |                      |                  |                      |    |
| Please describe sound equipment that will be used for your extension of premises area:  |                   |                                |       |                      |                  |                      |    |
|   |                   |                                |       |                      |                  |                      |    |
|   |                   |                                |       |                      |                  |                      |    |

**Section 2**  
**EVENT INFORMATION**

|  |  |     |  |    |         |  |
|--|--|-----|--|----|---------|--|
| Will there be signs, banners, decorations, special lighting? |  | Yes |  | No |         |  |
| If yes, please describe                                      |  |     |  |    |         |  |
|  |  |     |  |    |         |  |
| Will there be any items sold?                                |  | Yes |  | No |         |  |
| If yes, please describe                                      |  |     |  |    |         |  |
|  |  |     |  |    |         |  |
| Will there be contracted concessionaires?                    |  | Yes |  | No |         |  |
| If yes, please describe                                      |  |     |  |    |         |  |
|  |  |     |  |    |         |  |
| How close are the nearest residences?                        |  |     |  |    |         |  |
| Will you need water hook-ups?                                |  | Yes |  | No |         |  |
| If yes, please describe                                      |  |     |  |    |         |  |
|  |  |     |  |    |         |  |
| Will you need electrical hook-ups?                           |  | Yes |  | No |         |  |
| If yes, please describe                                      |  |     |  |    |         |  |
|  |  |     |  |    |         |  |
| <b>Will there be:</b>  |  |     |  |    |         |  |
| Tents or canopies?   |  | Yes |  | No | Size(s) |  |
| Open flames or cooking?                                      |  | Yes |  | No | Explain |  |
| Temporary fencing?   |  | Yes |  | No | Explain |  |
| <b>Will there be:</b>  |  |     |  |    |         |  |
| First aid locations?   |  | Yes |  | No |         |  |
| Portable toilets?  |  | Yes |  | No |         |  |
| Spotlights?  |  | Yes |  | No |         |  |
| Description of any other activities at the event:            |  |     |  |    |         |  |
|  |  |     |  |    |         |  |
|  |  |     |  |    |         |  |

**Section 3  
SITE PLAN**

|  |           |
|--|-----------|
| <b>Extension of Premises - Site Plan</b> - Please include with this application a site plan map of the extension of premises area indicating the location(s) of the following - (see attached sample): |           |
| Dimensions (exterior size) of existing building  | Describe: |
| Dimensions of planned extension area   | Describe: |
| Location of controlled, staffed entryway (1 only)  | Describe: |
| Names of adjacent/nearest streets  | Describe: |
| Dimensions (exterior size) of tents  | Describe: |
| Seating plan inside tent, # of tables & chairs   | Describe: |
| Location of portable restrooms   | Describe: |
| Location and size of garbage pick up   | Describe: |

**Section 4  
SECURITY (if private security)**

|  |  |                              |    |
|--|--|------------------------------|----|
| Responsible person   |  |                              |    |
| Home or business phone   |  | Cell phone (required)        |    |
| Type of Private Security Personnel and Company Name  |  |                              |    |
|  |  |                              |    |
| Security company address   |  |                              |    |
| Security company phone   |  | Number of security personnel |    |
| Will you be requesting off-duty Leesburg Police Officers?  |  | Yes                          | No |
| If yes, how many?  |  |                              |    |
| *If yes, be sure to complete the appropriate form, <u>Police Service Agreement</u> .                                     |  |                              |    |
| (After reviewing the permit application, the City may <b>require</b> the use of increased security or off-duty officers) |  |                              |    |

**\*\*NOTE: The City of Leesburg is NOT responsible for providing security\*\***

**Section 5  
ALCOHOL**

|   |  |     |       |    |
|---|--|-----|-------|----|
| Selling alcohol?  |  | Yes |       | No |
| Given away?   |  | Yes |       | No |
| (Alcohol shall be served in cups only – no cans or glass)   |  |     |       |    |
| Allowed to be brought into the event by attendees?  |  | Yes |       | No |
| Included in ticket/admission price? *   |  | Yes |       | No |
| *applies to charitable, civic, religious, fraternal, or political groups only.  |  |     |       |    |
| If you answered "Yes" to any of the above, a liquor license is required. Which type of license will be used for the event?  |  |     |       |    |
| Extension of Premises (attach copy of State of Florida application)<br>(must provide approval documentation from the state prior to the date of extension of premises)                    |  |     |       |    |
| Special Events (attach a copy of State of Florida application)  |  |     |       |    |
| If applying for a Special Event Liquor License, the following must be provided:   |  |     |       |    |
| Charity or Organization's Name  |  |     |       |    |
| 501(c) (3) # (if applicable)  |  |     |       |    |
| <i>A letter from the charity or organization agreeing to participate as the agent for the special event liquor license is required and must accompany the original event application.</i> |  |     |       |    |
| Name of Contact at Charity or Organization  |  |     | Phone |    |
| On-Site Agent Responsible for Liquor  |  |     | Phone |    |
| Is the extension of premises within 500' of a church, town park, or school property line?   |  | Yes |       | No |
| How will attendees of legal drinking age (21) be identified?  |  |     |       |    |
| What controls will be used to keep attendees under the age of 21 from obtaining alcohol?  |  |     |       |    |
| Will those drinking be separated from those not drinking?   |  | Yes |       | No |
| Will more than 50% of the gross revenues from the event be derived from alcohol sales?  |  | Yes |       | No |

**Section 6  
INSURANCE**

Copies of all certificates of insurance required must be attached and must show the name of the applicant and dates of the coverage prior to the issuance of the extension of premises permit. Please have your insurance company FAX the certificate to the attention of Community Development 352-326-6617 at least 30 days prior to the date of the requested extension of premises.

General Liability Insurance A certificate of commercial general liability insurance naming the City of Leesburg as an Additional Insured is required for all extension of premises. The certificate must indicate the date, time, and location of the extension of premises. The person/organization listed on the certificate must be the applicant. The commercial general liability policy shall be written on an occurrence basis including person injury, property damage and products liability coverage with limits of at least **\$1,000,000**. Higher limits may be required if event includes hazardous activities.

Automobile Liability Insurance Certificate of insurance with a minimum of **\$500,000** coverage per occurrence is required if automobiles or any other licensed motor vehicles are used as part of the extension of premises and must name the City of Leesburg as an Additional Insured.

Liquor Liability Insurance Certificate of insurance with a minimum limit of **\$1,000,000** is required for the sale or consumption of alcoholic beverages for the extension of premises. Certificate must name the City of Leesburg as an Additional Insured.

**Section 7  
INDEMNIFICATION**

Applicant/Permittee agrees to indemnify and hold harmless the City of Leesburg and its agencies representatives, employees and officers from and against any and all claims, liabilities, damages or judgments, caused by or arising out of (a) dealings between the Applicant/Permittee and third parties, (b) the issuance of this permit, and (c) the City's approval of security provisions regarding Applicant's proposed extension of premises for which this application is being prepared. This indemnification includes the costs of litigation and counsel fees. Applicant/Permittee agrees, at its own expense, to defend all of the persons to whom this covenant extends against any such claim. The Applicant/Permittee shall have full control of the defense of any litigation and may settle, compromise or adjust the same, provided, however, that the City, on relieving the Applicant/Permittee in writing of indemnification, shall have the right, if it so elects, to conduct any such litigation at its own expense by its own counsel.

|                       |      |
|-----------------------|------|
|                       |      |
| Applicant's Signature | Date |

**Section 8  
CERTIFICATION**

I have read and understand all of the attached policies and will abide by all policies, rules, regulations, and conditions of use as written. This permit is not transferable to any other individual or group.

|                       |      |
|-----------------------|------|
|                       |      |
| Applicant's Signature | Date |

# PROPERTY OWNER & AGENT AFFIDAVIT\*

DATE: \_\_\_\_\_

Before me, the undersigned authority personally appeared \_\_\_\_\_ (property owner's name), who being by me duly sworn on oath, deposes and says:

1. That said authority is the fee-simple owner of the property legally described in this application.
2. That said authority desires an EXTENSION OF PREMISES (ALCOHOL) to allow:

\_\_\_\_\_

3. That said authority (property owner) has appointed \_\_\_\_\_ (agent's name) to act in his behalf to accomplish the above, and before me the undersigned authorized agent personally appeared and, being by me duly sworn on oath, deposes and says:

- A. That he/she affirms and certifies that he/she understands and will comply with all ordinances, regulations, and provisions of the City of Leesburg, Florida, and that all statements and diagrams submitted herewith are true and accurate to the best of his/her knowledge and belief, and further, that this application and attachments shall become part of the Official Records of the City of Leesburg, Florida, and are not returnable.
- B. That the submittal requirements for the application have been completed and attached hereto as part of the application.

\_\_\_\_\_  
PROPERTY OWNER'S SIGNATURE

STATE OF FLORIDA  
COUNTY OF LAKE

Subscribed and sworn to (or affirmed) before me on \_\_\_\_\_ (date) by \_\_\_\_\_ (name of affiant, deponent, or other signer). He/she is personally known to me or has presented \_\_\_\_\_ as identification.

\_\_\_\_\_  
NOTARY PUBLIC  
SEAL:

\_\_\_\_\_  
AGENT'S SIGNATURE

STATE OF FLORIDA  
COUNTY OF LAKE

Subscribed and sworn to (or affirmed) before me on \_\_\_\_\_ (date) by \_\_\_\_\_ (name of affiant, deponent, or other signer). He/she is personally known to me or has presented \_\_\_\_\_ as identification.

\_\_\_\_\_  
NOTARY PUBLIC  
SEAL:

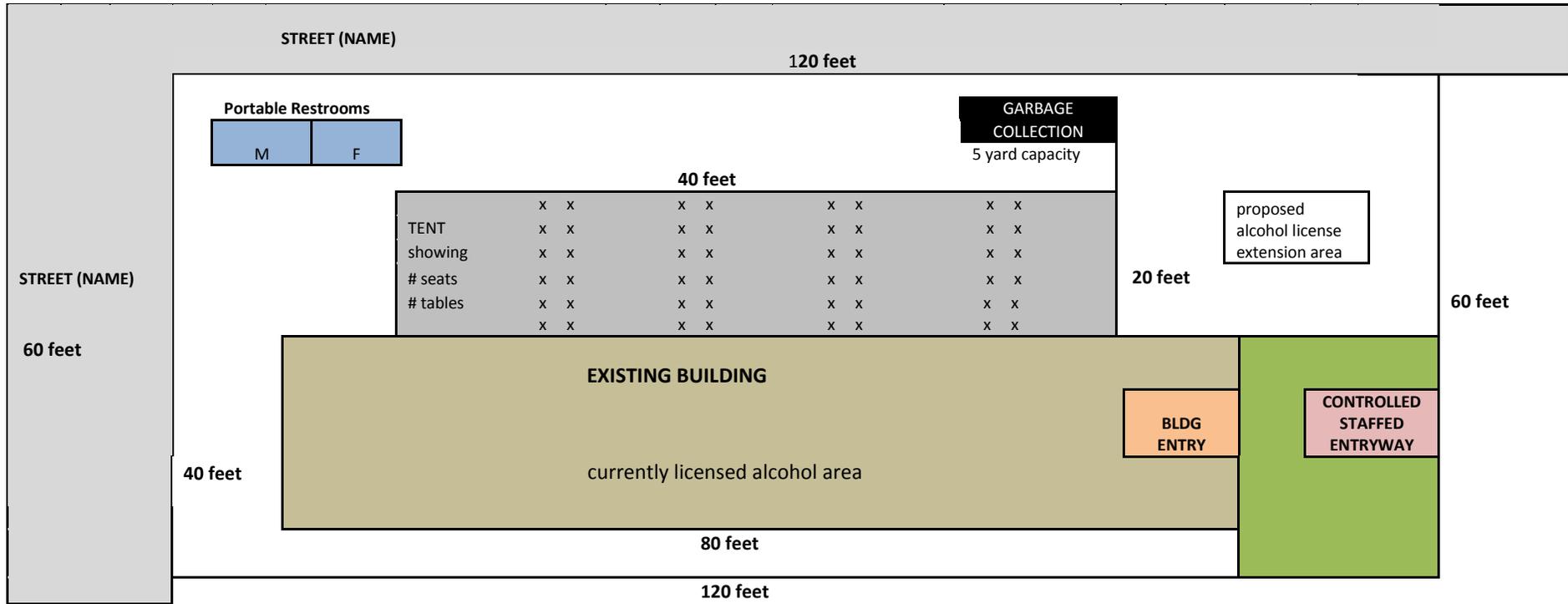
**\*NOTE: PROPERTY OWNER MUST SIGN AFFIDAVIT. WHEN AGENT IS REPRESENTING CASE, BOTH AGENT AND PROPERTY OWNER MUST SIGN AFFIDAVIT.**



**CITY OF LEESBURG**

Sample Site Plan for Special Event Permits\*

\*Required for all Special Event "Extension of Premises" Alcohol Permits



**All site plans are required to show:**

- 1)  Dimensions (exterior size) of existing building.
- 2)  Dimensions of the planned extension area.
- 3)  Location of controlled, staffed entryway (1 permitted).
- 4)  Names of adjacent/nearest streets.
- 5)  Location of the main building entry way.
- 6)  Dimensions (exterior size) of tent if requested.
- 7)  Seating plan inside the tent, including location and number of seat/tables.
- 8)  Location of portable restrooms.
- 9)  Location and size of garbage pickup (roll off or dumpster).

**Conditions per the City of Leesburg Code of Ordinances and the State of Florida:**

- 1)  One access entryway is permitted, and shall be staffed at all times.
- 2)  No alcohol is permitted outside the controlled entryway.
- 3)  Persons serving alcohol should be "TIPS" trained to identify those who should not be served more alcohol.
- 4)  Tents larger than 120 square feet are required to be permitted.
- 5)  Tents must be flame retardant, with proper fire extinguishers available as approved by the Fire Department.
- 6)  Sign shall be posted at entrance indicating "Maximum Occupancy Load" as calculated by the Leesburg Fire Department
- 7)  Signage must indicate "No alcohol permitted outside this area" for extension of premise approved area.
- 8)  Copy of insurance as required by the City of Leesburg must be on file prior to approval.
- 9)  Extension of Permit license is subject to all City of Leesburg Codes and requirements and the Laws of the State of Fla.
- 10)  Alcohol shall be served only in cups - no cans or glass bottles or other glass containers.