APPLICATION FOR OUTSIDE ALCOHOL SALES PERMIT

City of Madison
116 W. Center Street
Madison, SD 57042
(605) 256-7500

Date_____

I herewith submit my application for an Outside Alcohol Sales Permit. I have attached documentation of the request, along with plans and drawings identifying the design and plan for the orderly sale and service of alcohol.

I also understand and agree to comply with the following rules:

1) Alcohol will be served no later than 9:00 p.m.
2) Alcohol shall only be allowed to patrons seated at tables.
3) At all times leave at least six feet (6') of open and unobstructed sidewalk for pedestrian traffic.
4) License holder derives more than fifty percent of its gross receipts from the sale of prepared food for consumption on the premises.

BUSINESS INFORMATION

Name _____
Address _____
_____
Phone # _____ Cell #_____
E-mail Address_____

_____
Signature of Applicant