

## City of Gillette One (1) Day Catering Permit Application

Applicant Name: Pizza Carrello				
(Please use the name in which the Liquor License is issued. Catering permits may only be issued to Retail Liquor License holders.)				
Address: 601 S. Douglas Highway Phone Number: 307-363-1743				
Gillette WY 82716 Cell Phone Number: 307-689-7950 (Leigh), 307-257-4327 (Ariane)				
Contact Person at the Event*: Leigh Jacobs or Ariane Jimison				
*Must be present at the event at all times.				
Contact Phone Number at the Event: 307-689-7950 (Leigh), 307-257-4327 (Ariane)				
Date of the Event: 7/26/19 Event Start Time*: 5:00 pm Event End Time*: 10:00 pm				
*Please note that applications requesting event times outside of 8:00 a.m. to 12:00 a.m. (midnight), Monday through Saturday and 12:00 p.m. (noon) to 10:00 p.m. Sunday will not be approved.				
Outdoor Event:  Yes  No Anticipated Occupancy: unknown				
Location of the Event: Third Street Plaza				
Do you, the applicant, own the event location? ☐ Yes ☑ No				
If no, please obtain a written statement to include with this application from the landowner permitting the proposed activity, including the consumption and possession of alcoholic or malt beverages, as described in this application.				
Short Summary of the Reason for the Event:				
Detailed Description of Activities/Entertainment Proposed for the Event:				
Street concert with food and beverage vending.				
Names and Ages of Persons Serving Alcoholic Beverages:				
Name: STEUE YOUNT Age: 46 Name: Age:				
Name: TIFFANY KAKENBERGAge: 39 Name:Age:				
Name: Age: Name: Age:				
Who is checking IDs? bartenders				
Stamps? ☐ Yes ☐ No Wrist Bands? ☑ Yes ☐ No				
Live band?   ✓ Yes □ No  Other type of outdoor music/sound/ P.A. system? □ Yes ☑ No				
Other Entertainment?   Yes   No Type:				
5.00				
Entertainment Start Time: 5:00 a.m. p.m. Entertainment End Time: 10:00 a.m. ✓ p.m. Security? ✓ Yes ☐ No By Whom? supplied by GARF How Many? unknown				
Type of fencing or boundary for the sale, consumption and possession area:				
Gates surrounding festival area.				
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Other facilities (i.e. additional parking, trash containers, portable toilets):				
Provide a detailed description the area	(s) in which the sale	s, possession and consumption of alco	holic beverages	
will occur.	- 1966 - 1g (1			
Provide a drawing of the area(s) in whit occur. Please be as specific and details		ion and consumption of alcoholic beve	erages will	
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North				
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(See attached)				
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*Please be aware that the consumption of alcohol beyond the approved boundaries is in violation of this permit				
and City ordinance.				
Fees: \$50 (non-refundable) for applic	ations submitted at	least 3 weeks prior to event date.		
\$100 (non-refundable) for applications submitted less than 3 weeks prior to event date.				
aroo (non-retundable) for appri	ications submitted it	ass than 5 weeks prior to event date.		
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Signature of Applicant		Date of Application		
For Official Use Only:		<b>\</b>		
Approved , ☐ Yes ☐ No		Approved ☐ Yes ☐ No		
IVI HATA II.		14/1		
41/W/////	7-10-19	1 Malna	5-13-19	
City Clerk/Designee	Date	Chief of Police/Designee	Date	