



State University of New York
College of Environmental Science and Forestry

APPLICATION FOR PERMISSION TO SERVE USE AND DISTRIBUTE ALCOHOLIC BEVERAGES

1. Sponsoring Organization or Person: _____

2. Application Submission Date: _____

2. Contact Person:

Name

Position

Address

Phone Number and ESF/SYR Email Address

3. Type of Event: _____

Date: _____ Times: From _____ until _____

Location: _____ Estimated Attendance: _____

Event is open to whom?: _____

4. Food and Beverages to be served:

a. Alcoholic Beverages: Type _____ Quantity Available: _____

b. Non-Alcoholic Beverages: Type _____ Quantity Available: _____

c. Food: _____ Quantity Available: _____

5. Financial Arrangements: (Please check appropriate box and explain)

a. ___ Event is free to participants.

b. ___ Event has an associated admission charge. (The service and/or consumption of alcohol is not permitted at events with an associated admission charge, including donations.)

Explanation of event funding: _____

6. If the event is a student club/organization sponsored event, the name and contact information of the faculty/staff advisor or faculty/staff member who endorses the event and who commits to being in attendance for the entirety of the event:

Name

Phone Number and ESF/SYR Email Address

7. Supervision of Serving of Alcoholic Beverages: (Please check appropriate box and explain.)
- a. Event is being catered by Morrisville Auxiliary Corporation (MAC).
 - b. Event is being catered by an outside caterer.

Name of Caterer	Contact Person
Address of Caterer	Phone Number/Email Address
State Liquor Authority License Number	

A copy of the one-day permit to serve beer or wine at the event obtained by the caterer must be provided to the Vice President for Administration (or designee) at least two (2) weeks in advance of the event or the event will be cancelled.

Explanation of process for control of distribution of alcohol only to people of legal drinking age and within the scheduled facility, registration of guests, and advertising:

8. Signatures/Person(s) Responsible:
- a. For all events, the person responsible must be of legal drinking age or older.
 - b. For Undergraduate Student Association and Graduate Student Association sponsored events, three signatures are required:
 - i. The person responsible must be 21 years of age or older and must hold a formal position within the organization that allows him/her to plan events with alcohol.
 - ii. The treasurer or president of the organization must cosign.
 - iii. A faculty/staff advisor or faculty/staff member who must commit to being in attendance for the entirety of the event must cosign.
 - c. All events must be catered by a licensed caterer having the appropriate State of New York permit to serve alcohol as well as adequate liability insurance. In all cases, a one-day permit to serve beer or wine must also be requested from the New York State Liquor Authority at least six (6) weeks in advance of the event. The following signatures are also required:
 - i. For events catered by Morrisville Auxiliary Corporation (MAC), the signature of the appropriate MAC manager.
 - ii. For events catered by an outside caterer, the signature of the appropriate outside catering manager.

Remainder of Page Intentionally Left Blank

I have read the "Policy Governing the Use and Distribution of Alcoholic Beverages on the ESF Campus, on ESF-Owned and/or Associated Properties, and in ESF-Designated Housing Facilities," and understand the department/organization/entity responsibilities and liabilities in regard to ESF's policies and in regard to federal, state, and local laws, rules, regulations, and statutes concerning alcohol and alcoholic beverages and in particular, relative to the use and distribution of alcoholic beverages. I affirm that all information reported on this form is complete and accurate.

A. Person Responsible (See Above):

_____	_____	_____
Name (Printed)	Department/Student Organization	Position
_____	_____	_____
Signature	Phone	ESF/SYR Email Address

B. For Events to be Held in the Gateway Center:

_____	_____	_____
Name (Printed)	For the Physical Plant	Position
_____	_____	_____
Signature	Phone	ESF/SYR Email Address

C. ESF-sanctioned student club/organization approval:

_____	_____	_____
Name (Printed)	Name of Student Organization	Responsible Person
_____	_____	_____
Signature	Phone	ESF/SYR Email Address

_____	_____	_____
Name (Printed)	Name of Student Organization	President/Treasurer
_____	_____	_____
Signature	Phone	ESF/SYR Email Address

_____	_____	_____
Name (Printed)	Name of Student Organization	Advisor
_____	_____	_____
Signature	Phone	ESF/SYR Email Address

D. For events to be hosted by ESF-sanctioned student clubs and organizations, a review by the Dean for Student Affairs (or designee) is required before seeking approval from the Vice President for Administration (or designee)

_____	_____	<u>Dean for Student Affairs</u>
Name (Printed)	Signature and Date	Title

E. Caterer

_____	_____	_____
Name (Printed)	Name of Caterer	Phone
_____	_____	
Signature	Email Address	

F. ESF University Police

_____	_____	<u>Chief, University Police</u>
Name (Printed)	Signature / Date	

G. Review by the Vice President for Administration (or designee):

An initial review will take place when this completed form is submitted. Tentative approval will be granted (or not) by the Vice President for Administration (or designee), and if approved, additional planning by the event sponsor(s) may take place. Advertising for the event should not be undertaken until tentative approval from the Vice President is received.

TENTATIVE APPROVAL: _____

NOT APPROVED: _____

DATE: _____

Upon receipt of the copy of the one-day Caterer's Permit, the Vice President for Administration (or designee) will provide final approval (or not) for the event and will communicate this approval to the appropriate offices on campus.

FINAL APPROVAL: _____

NOT APPROVED: _____

DATE: _____