



**CITY OF FORT PIERCE CITY CLERK DEPARTMENT**  
 100 N. US #1, Fort Pierce, Florida 34954  
 Phone: (772) 460-2200 ext. 364

**APPLICATION FOR  
 ALCOHOL BEVERAGE PERMIT**  
Allowing for Sales / Park Areas

I, \_\_\_\_\_, representing \_\_\_\_\_, request a permit to allow consumption and dispensation and sale of alcoholic beverages at the special event \_\_\_\_\_ to be held at \_\_\_\_\_ on \_\_\_\_\_.

**Criteria for Issuance of Permit:**

1. Applicant must be at least twenty-one years of age.
2. Applicant must possess a valid driver's license or other form of identification.
3. Application for permit must be completed and delivered to the city clerk at least **seven** days prior to the date of the City Commission meeting at which this application will be presented.

**Condition of Permit;**

1. Person signing permit application must be present during the special event.
2. Permittee will be responsible for verifying age of all persons to whom alcoholic beverages are consumed and/or dispensed under the permit.
3. Area of permit use will be confined to the area specified in the permit.
4. Proof of a permit to sell alcoholic beverages, if applicable, issued by the Alcoholic Beverage Commission shall be attached to this application.
5. Alcoholic beverages shall be sold only in conjunction with food sales.
6. Law enforcement officers will be required at the applicant's expense, when alcoholic beverages are sold. (A half an hour before the event until a half an hour after the event.)
7. The permittee shall carry liability insurance naming the City of Fort Pierce as an insured with minimum limits of \$100,000 per person and \$200,000 per event. The City Commission may require additional insurance and may impose other conditions during the approval process.
8. A disclaimer in all advertising stating that the City of Fort Pierce is neither sponsoring or participating in the event.

*By signing, I agree to abide by the laws of the State of Florida as they apply to the consumption of alcoholic beverages, any applicable St. Lucie County or City of Fort Pierce Ordinances, and the conditions of the permit as set out above. I also acknowledge that I have read and understand the provisions of section 12-14 of the Code of Ordinances of the City of Fort Pierce.*

**Print Name:** \_\_\_\_\_  
 \_\_\_\_\_ Signature of applicant \_\_\_\_\_ Date

**Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

Alcoholic Beverage Commission: \_\_\_\_\_ Date Received  
 Insurance Certificate: \_\_\_\_\_ Date Received  
 Special Event or Park Use Permit: \_\_\_\_\_ Date Received