Town of Rockland

One Day Liquor License Application

Name of Responsible Party: _____

Address: _____

Contact Name: _____

Organization Holding Event: _____

Location: _____

Date: _____

Rain Date: _____

Hours: _____

Type of Event: _____

_____

Who is serving the alcohol? _____

Have servers had training in Alcohol service? _____

Do you have a Liquor Insurance Policy? _____

I, the undersigned, understand and agree to the restriction and responsibilities of holding a One Day Alcohol License and certify that I am not prohibited from holding such a license. I agree that the Town of Rockland is in no way responsible for the actions of the applicant.

_____ _____

Applicant Signature Date

The applicant named on the One Day application shall, at all times during which alcoholic beverages are being sold shall be available to the licensing authorities during all such times unless some other person similarity qualified, authorized and satisfactory to the licensing authorities and whose authority to act in place of such applicant shall first have been certified to the licensing authorities in the manner aforesaid, is present in the premises and is in acting in the place of such an applicant. The full name, residential address, business and home telephone numbers of said applicant must appear on the One Day application, as well as proof that they are certified to hold such a license. Failure to have such information on file and current shall alone be sufficient cause for revocation or suspension of such license, as well as future licenses.

Licensees are responsible for ensuring that minors are not served alcoholic beverages and are not drinking on the premises. All servers must be at least 18 years of age.

All applicants must be of good moral character to obtain a One Day License hereunder.