Kansas Alcoholic Beverage Control
Licensing Unit
915 SW Harrison Street, Room 214
Topeka, KS 66625-3512
Telephone 785-296-7015 FAX 785-296-7185

Temporary Permit Application and Agreement Instructions

This permit allows the sale and consumption of alcoholic liquor on an unlicensed premise that is open to the public and is located in county that has approved liquor by the drink. The non-refundable fee for the temporary permit is $25 per day. **Permit applications must be received by the ABC at least 14 days prior to the event.** Permits not received at least 14 days prior to the event will be returned.

Who may apply for a Temporary Permit?
Organizations or individuals may apply for a temporary permit provided they meet the qualifications pursuant to K.A.R. 14-23-3. The following permit types are available:
Charitable Auction: Charitable organizations may apply for one (1) permit per calendar year.
On-Premise: Charitable organizations or individuals may apply for four (4) permits per calendar year. Each permit can be for up to three (3) consecutive days.
Special Event: Organizations or individuals may apply for four (4) permits per calendar year. Each permit can be for up to three (3) consecutive days.
Porcelain Container: Individuals may apply for one (1) permit per calendar year.

What are my responsibilities if I am issued a Temporary Permit?
The permit holder is responsible for all violations of the Club and Drinking Establishment Act or Liquor Control Act; associated regulations (K.A.R. 14-23-01) and all applicable city, county, state and federal laws. The applicant or designated person must be present at the event at all times. The permit must be displayed at the event at all times.

Where may I purchase alcoholic liquor to be sold at the event?
You may **only** purchase alcoholic liquor from a licensed Kansas Retailer who also possesses a Federal Wholesale Liquor Dealer permit or from a Kansas Farm Winery.

Liquor Drink Tax:
On-Premise temporary permit holders are required to collect and pay Liquor Drink Tax. The liquor drink tax return is due by the 25th day of the month following your event.

Application Instructions:
1. Check temporary event type.
2. Check the temporary event length.
3. Section 1. Complete the applicant information.
4. Section 2. Complete the event information.
5. Section 3. Complete the purchase information.
6. Section 4. Take your completed form to the appropriate city, township or county clerk to complete the Certificate of City, Township or County Clerk. The application must have the appropriate clerk's seal and approval.
7. Section 5. Complete the Background qualification questions.
8. Section 6. Draw a diagram of your proposed On-Premise or Special Event area.
9. Read the application agreement.
10. Sign the form and print your name. Enter the date and your title.
11. Return the completed form to the ABC Licensing Unit at the address on the form with the correct payment. Payment must be a cashier's check from any bank within Kansas; or, a U.S. Postal Money Order.

To obtain additional information on Temporary Permits, visit our website at: http://www.ksrevenue.org/abctemppermit.htm
You may direct your questions to the Licensing Unit at 785-296-7015 or e-mail to ABC_Licensing_Unit@kdor.state.ks.us.

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Detach and Return with Payment

KANSAS ALCOHOLIC BEVERAGE CONTROL DIVISION

Temporary Permit Fee Voucher

Sponsor Name: _____

☐ Certified or Cashier's check from any bank within Kansas; or, U.S. Postal Money Order enclosed (CLPR)

☐ 1 Day Permit – $25.00 ☐ 2 Day Permit – $50.00 ☐ 3 Day Permit – $75.00

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TEMPORARY PERMIT APPLICATION AND AGREEMENT

Event Type: ☐Charitable Auction ☐On-Premise Temporary Permit ☐Porcelain Container ☐Special Event Permit (On-Premise)
Event Length: ☐1 Day Permit - $25 ☐2 Day Permit - $50 ☐3 Day Permit - $75

SECTION 1 – APPLICANT INFORMATION:

Entity Type: ☐Corporation ☐Individual ☐Organization ☐Partnership ☐Other:_____

Applicant or Organization Name			
Contact Person	Phone	Fax	
Mailing Address	City	County	Zip Code

DESIGNATED PERSON

Designated Person Name	Date of Birth	Social Security Number
Phone	Email Address	

SECTION 2 – EVENT INFORMATION: (You may have up to three consecutive days per permit).

Purpose for which the proceeds from this event will be used:

Event Location Address	City	County	Zip Code

Date of Event	From Time	☐AM ☐PM	To Time	☐AM ☐PM
Date of Event	From Time	☐AM ☐PM	To Time	☐AM ☐PM
Date of Event	From Time	☐AM ☐PM	To Time	☐AM ☐PM

SECTION 3 – PURCHASE INFORMATION:

Kansas Retailer DBA Name	Kansas Retailer License No.	**Retailer's** Federal Wholesale Liquor Dealer Permit No.
Kansas Farm Winery DBA Name	Kansas Farm Winery License No.	

SECTION 4 – CERTIFICATE OF CITY, TOWNSHIP OR COUNTY CLERK:

I HEREBY CERTIFY THAT THE LOCATION DESCRIBED ABOVE IN SECTION 2 IS: (check one box in each section):

CITY LIMITS: ☐ **Inside** the incorporated city limits ☐ **Outside** the city limits
ZONING: ☐ within an area that complies with all applicable zoning regulations required by K.S.A. 41-710
☐ located outside an incorporated city, in a township or county **that is not zoned** (Seal)
LOCATION: ☐ government property ☐ private property ☐ public property

I declare under penalties of perjury that to the best of my knowledge and belief that Section 4 is true, correct and complete.

CLERK SIGNATURE _____ DATE_____ PHONE_____

PRINTED NAME_____ ☐City Clerk ☐Township Clerk ☐County Clerk

SECTION 5 – BACKGROUND QUALIFICATIONS: Applies to yourself and any person in the sponsoring organization.

If the answer to any question is yes, provide explanation on separate page and attach to your application.

1. Have you or any person in the sponsoring organization been convicted of or pled guilty to a felony?	☐Yes ☐No
2. Have you or any person in the sponsoring organization been convicted of or pled guilty to a morals charge? (Morals charge includes: prostitution; procuring any person; solicitation of a child under 18 for immoral act involving sex; possession or sales of narcotics; marijuana; amphetamines or barbiturates; rape, incest; gambling; adultery; bigamy).	☐Yes ☐No
3. Have you or any person in the sponsoring organization had an alcoholic liquor or cereal malt beverage license revoked in Kansas or in any state?	☐Yes ☐No

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Applicant or Organization Name_____ **Event Date(s)**_____

SECTION 6 – DIAGRAM: Complete for On-Premise and Special Events only.

Draw in the space below, in ink, a complete sketch of the premises which you are seeking approval. The diagram must include all entrance and exit doors; and, bar area. **Architectural drawings are not accepted.**

The above named applicant or organization, does hereby make application for a Temporary Permit to sell alcoholic liquor on the specified date(s) and location. In making this application, the above named applicant agrees that:

a. They will display the Temporary Permit at the event entrance along with the name of the designated person of the organization who is in charge, a diagram of the premises covered by the permit; and, if a special event, they must include names of all drinking establishments who have elected to extend their licensed premises into the event.
b. They will not allow anyone under the age of 21 to possess, purchase or consume alcoholic liquor and understand that administrative and/or criminal penalty may result from allowing anyone under the age of 21 to possess or consume alcoholic liquor.
c. They will not deny immediate entry and inspection by the Alcoholic Beverage Control agents or other law enforcement officers.
d. On-Premise applicants must purchase their alcoholic liquor from a licensed Kansas Retailer who possesses a Federal Wholesale Liquor Dealer permit or from a licensed Kansas Farm Winery.
e. On-Premise applicants will retain sales receipts from the Kansas Retailer or Kansas Farm Winery for at least one year.
f. On-Premise applicants will not sell alcoholic liquor for less than the purchase price or for less than the price charged for that drink to all other persons on that day.
g. On-Premise applicants will complete and submit their Business Tax Application and collect Liquor Drink tax, file the Liquor Drink tax return and remit the tax due by the 25th of the following month.
h. On-Premise applicants will not allow consumption of alcoholic liquor between the hours of 2:00 a.m. and 9:00 a.m.
i. They will comply with applicable city and county laws; and, with all the provisions of the Kansas Liquor Control Act, Club and Drinking Establishment Act and the Rules and Regulations promulgated thereunder.

_____ Applicant/Authorized Agent Signature

_____ Date

_____ Printed Name

_____ Title

ABC Office Use Only:

☐ **PERMIT FEE ENCLOSED Amount $**_____ Associate: _____ Date_____
☐ **APPROVED** Date:_____ Associate: _____ Permit #_____
☐ **DENIED** Date_____ Associate:_____ ☐ Denial Letter Sent Date_____

Clear Form