



Capitol Campus Restricted Use Alcohol Permit

Related Enterprise Services Policy: [Alcohol Use Restricted on the Capitol Campus](#)

INSTRUCTIONS

You must be at least 21 years of age to submit this application. By making this application, you assume full responsibility for your function.

Washington State law prohibits the dispensing or consumption of alcohol except in specifically designated areas. The Department of Enterprise Services restricts alcohol use on a case by case basis only in areas of the state capitol buildings and grounds where access by the public is restricted. We may also require that alcohol use only occur after business hours.

In signing this form, you agree to satisfy all applicable Washington State Liquor Control Board (www.liq.wa.gov) regulations. You must also obtain a Banquet Permit from the Liquor Control Board.

As an addition to the terms and conditions of your Campus Use Permit, the applicant will only be permitted to serve alcohol at the scheduled event as follows:

Applicant Name: _____ Phone Number: _____

Day of Contact Phone Number (if different than above): _____

Email: _____

Address (including City, State and Zip): _____

Event Details

Event Name: _____

Description of Event (Please provide an overview of the event including the **type of event**, its **purpose** and a description of the **intended attendees**):

Location of Event(s): _____

Location of Alcohol Consumption: _____

Date of Event: _____

Beginning Time(s): _____

Ending Time(s): _____

Beverage Description(s) and Quantities: _____

Method of Dispensing: _____

Means of Identifying under-age attendees: _____

Means of Ensuring Alcohol is Consumed in Authorized Areas:

Type of Alcohol Served – check all that apply

- Beer
- Wine
- Hard Liquor

Applicant agrees to comply with all Washington State Laws regarding the distribution and consumption of alcoholic beverages, including not allowing the possession or consumption of alcohol by minors or by anyone who is apparently intoxicated, and the prevention of disorderly conduct at the event. Alcoholic beverages are to be consumed only in the location listed above.

The event and the premises will be subject to inspection by any law enforcement officer at any time.

I have read the [Alcohol Use Restricted on the Capitol Campus](#) Policy and understand that I am responsible for conducting this event in compliance with these policies and all state and local laws and regulations.

SIGNATURE OF OFFICIAL IN CHARGE OF EVENT: _____
TODAY'S DATE: _____

Please email this completed permit request to campusevents@des.wa.gov. Incomplete permit application may result in denial of alcohol permit. Please note that the submittal of this permit application does not guarantee approval. A confirmation will be sent to you for final approval/denial of your request.

[Applicant does not fill this section out] The following is approval or denial for the Alcohol Permit Request to be completed by the Department of Enterprise Services.

- Permit Approved Permit Denied

Name: _____ Title: _____ Date: _____

Signature: _____

Comments: