

APPLICATION FOR OFF-PREMISES CATERING PERMIT

The undersigned hereby applies for an Off-Premise Catering Permit for calendar year _____

1. Name of Licensee _____ Retail License No. _____

2. Trade Name (if any) _____ LID No. _____

3. Address of Premises _____
(Street, Rural Route, PO Box No.) (Post Office) (State) (Zip)

4. Is there a catered function scheduled at this time?

NO If no, submit this application prior to March 1st with fee.

YES If yes, submit this application and a 2403A "Application for Off-Premises Catered Function" for each function scheduled.

RESOLUTION

At a regular or special meeting held on _____ by the applicant,

it was resolved that said application be filed with the Pennsylvania Liquor Control Board, and that

_____ and/or _____ is/are
Name of Officer/Title Name of Officer/Title

hereby authorized to execute said application, and any other papers required by the Board.

I swear and affirm, subject to the penalties provided by 18 Pa. C. S. §4904 and 47 P. S. §4-403(h) that the foregoing answers and statements provided herein are true and complete to the best of my knowledge and belief.

Signature	Title	Name of Attorney representing you in this matter if any
Home Address	Phone	Address
Signature	Title	Phone
Home Address	Phone	Date Signed
E-mail Address		

INSTRUCTIONS

This form is to be used to apply for an Off-Premises Catering Permit. It must be filed along with a fee of \$500.00 by March 1st of each calendar year, regardless of whether any functions are planned. The fee is non-refundable.

DO NOT WRITE BELOW THIS LINE

