

SPECIAL DISPENSER PERMIT APPLICATION INSTRUCTIONS – PLEASE READ CAREFULLY

ELIGIBILITY: Only New Mexico Licensees that hold a Dispenser, Inter-Local, Rural Dispenser, Lottery, or Canopy License may apply for a Special Dispenser Permit (SDP). The Liquor License must not be in suspension. If the license holder will be serving alcoholic beverages from any place other than the approved liquor licensed premises, a Permit is required. The local governing body of the **local option district (LOD) must grant approval** for the issuance of the permit. The local governing body includes the city council, county clerk, mayor, etc. If the event is to be held on a Sunday, the LOD must have held an election to allow **Sunday Sales** by the drink and the license holder must have a valid Sunday Sales Permit issued by the Alcoholic Beverage Control or must have a special concession issued from the local governing body pursuant to §60-6A-12(F) NMSA, 1978.

THE EVENT must be held within the SAME Local Option District that the Dispenser's License is issued in.

- Event must not exceed a three (3) day maximum unless permission is granted by the Division Director prior to the event.
- The Permit shall be valid for no more than 12 hours per day and the Director may reduce the number of hours allowed.
- Only server certified employees of the Liquor License Holder seeking the SDP, may sell, dispense, or serve alcoholic beverages at the Event. Reminder: *No Sales to Minors or Intoxicated Persons; No Sale, Service or Consumption before or after the times listed on Permit; Licensee and Employees are restricted from consuming alcoholic beverages at the Event; No more than 2 unconsumed drinks may be sold or served to one person at any given time.*
- **MUST POST SPECIAL DISPENSER PERMIT AT EVENT:** After the SDP is issued, the Licensee is required to post the Permit along with the required signage (*i.e., pregnancy, firearms, minors, posters*). The Permit must be prominently posted at the locations where the alcohol will be dispensed, as indicated by the Approved Floor Plan for the Event. Permits are subject to the same requirements and restrictions contained in the Liquor Control Act and are subject to citation for any violation.

LICENSEE PLEASE NOTE: Merely submitting an application does not constitute approval. If the Licensee does not have an Approved Permit for the Event, then the sale, service and/or delivery of alcoholic beverages is prohibited. A complete application, with required attachments must be received by ABC **AT LEAST 10 DAYS PRIOR TO THE EVENT**. All fees submitted are non-refundable, even when the Permit is issued and the Event is postponed and/or cancelled due to unforeseen circumstances.

APPLICATION PROCESS: A complete Application must be received by ABC at least 10 days prior to the Event. Applications must be signed by the Licensee. Faxed Application not accepted and incomplete applications will be returned. Licensee must obtain the Building/Property Owner's permission to allow an Event serving alcohol in their facility. **The following are also required and must be attached:**

- A) **FEES:** Private Event \$25 per day, only open to those with an invitation or known to sponsor, or Public Event \$50 per day, open to public.
Applicable daily fees, must be submitted by business check, Money Order or Cashier's Check
- B) **FLOOR PLAN:** Detailed Floor Plan, include Pictures, designating restricted and unrestricted areas
 - Detailed Floor Plan (on 8 ½ x 11 sheet) must be submitted showing exactly where the event is to be held
 - Total Square Footage for the proposed service area
 - Must show the location of Bars, Security, Serving Areas, Entrances, Exits
 - Enclosed or barricaded serving areas must also be clearly marked
 - If there are any patios or outside areas, indicate how they are enclosed to prevent alcohol from leaving the premises; Describe type and height of enclosure; Must be three (3) feet or higher
 - Placement and Location of Security Personnel; If Security is deemed insufficient, the Director may require additional Security Personnel or may deny permit. The average is 1 security personnel per 100 people, but may be increased depending upon the type of event requested.
- C) **LIST OF SERVERS:** Accurate List of Servers at the Event, including the Full Name of Employee, Server Permit Number and Expiration Date.

ALCOHOLIC BEVERAGE CONTROL | SPECIAL DISPENSER PERMIT APPLICATION (§60-6A-12 NMSA)

FEE PER DAY: \$25.00 Private Event (Catered) \$50.00 Public Event, (DO NOT SUBMIT CASH)

Application Must Include:

1. Payment of Fees, per day (listed on top of page)
2. Detailed Floor Plan (on 8 ½ x 11 sheet) must be submitted showing exactly where the event is to be held. Total Square Footage for the proposed service area. Must show the location of Bars, Security, Serving Areas, Entrances, Exits. Enclosed or barricaded serving areas must also be clearly marked. Describe type and height of enclosure; Must be three (3) feet or higher/No rope and No caution tape as a barrier
3. Accurate List of Servers at the Event, including the Full Name of Employee, Server Permit Number and Expiration Date.

LICENSE HOLDER INFORMATION:

Liquor License # _____ Local Option District (LOD): _____
Business Name (DBA): _____ Owner Name: _____
Mailing Address: _____ City, State & Zip: _____
Phone No.: _____ Person to ask for _____ Fax No.: _____
Email Address: _____

EVENT INFORMATION: Description or Explanation of Event: _____
Physical Address of Event: _____

SDP will not be issued for more than three (3) consecutive days

Check all that apply: Indoor Event Only Outdoor Event Only Both

Date of event (Day 1) _____
Time Event Begins: _____ Time Event Ends: _____ Time of Alcohol Service: Begins at: _____ Ends at: _____
Total Number of Attendees Expected at Event: _____ Total Number of Attendees Expected to Consume Alcohol: _____

Date of event (Day 2) _____
Time Event Begins: _____ Time Event Ends: _____ Time of Alcohol Service: Begins at: _____ Ends at: _____
Total Number of Attendees Expected at Event: _____ Total Number of Attendees Expected to Consume Alcohol: _____

Date of event (Day 3) _____
Time Event Begins: _____ Time Event Ends: _____ Time of Alcohol Service: Begins at: _____ Ends at: _____
Total Number of Attendees Expected at Event: _____ Total Number of Attendees Expected to Consume Alcohol: _____

SECURITY: No. of Security: _____
Alcohol Server Certified employed by licensee Server Permit # _____ Expiration Date _____
Alcohol Server Certified employed by licensee Server Permit # _____ Expiration Date _____

NOTE: LICENSEE'S EMPLOYEE(S) ASSIGNED TO WORK SECURITY, MUST WORK THIS EXCLUSIVELY AND MAY NOT SERVE AT THE EVENT.

Licensed Security Company Name _____ Phone # _____
Security: Describe Type: _____

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A copy of all approved permits are sent to the Special Investigations Division of the Department of Public Safety, and DPS will request additional information, if needed.

SPONSOR INFORMATION: Sponsor of Event: _____ Name of Contact: _____ Phone: _____

APPROVAL OF PROPERTY OWNER: Print Name: _____ Signature: _____ Date: _____ Phone: _____

NAME OF BUSINESS, and LOCATION OF PROPERTY: _____

LICENSE HOLDER & SERVER CERTIFICATION: I, _____ (Licensee) hereby certify that this application is signed by Licensee or authorized person under this License. I further certify that all persons providing the service of alcoholic beverages at the Event are currently Server Certified, that they are all my employees, and that ALL the information in this Application and the Attachments, is true and correct. Licensee Agrees that if any statements or representations herein are found to be false, the Director may refuse to issue additional permits. I understand that all fees submitted are non-refundable.

Licensee Name: (print) _____ Signature: _____ Date: _____

LOCAL GOVERNING BODY APPROVAL: Print Name: _____ Title: _____ Date: _____

Signature: _____ Phone: _____ Fax: _____

ALCOHOLIC BEVERAGE CONTROL USE ONLY:

Application Must Include: Payment of Fees, per day (listed on top of page), Floor Plan – (w/photos) & Detailed Server List

Payment| Application Fee \$ _____ Received on: _____ Receipt No. _____ **Clear of Tax Holds:** Yes No

Approved Disapproved Approved By: _____ Date: _____

Assigned Permit Number: _____ Approved Permit Sent on: _____ By: Email Fax Other