

**INSTRUCTIONS FOR COMPLETING  
DBPR ABT- 6003  
DIVISION OF ALCOHOLIC BEVERAGES AND TOBACCO  
APPLICATION FOR ONE/TWO/THREE DAY PERMIT OR SPECIAL SALES LICENSE**

*If you have any questions or need assistance in completing this application, please contact the Division of Alcoholic Beverages & Tobacco's (AB&T) local district office. Please submit your completed application to your local district office at least seven (7) days prior to the first date of the event to insure the permit is issued by the event date. This application may be submitted by mail, through appointment, or it can be dropped off. A District Office Address and Contact Information Sheet can be found on AB&T's page of the DBPR web site at the link provided below.*

[http://www.myfloridalicense.com/dbpr/abt/district\\_offices/licensing.html](http://www.myfloridalicense.com/dbpr/abt/district_offices/licensing.html)

This application is used for obtaining a One, Two, Three Day Permit to sell alcoholic beverages for consumption on the reported premises only.

A special sales license may also be obtained by the use of this application for the sale of alcoholic beverages for a period of up to three days. This license does not permit the sale of alcoholic beverages for consumption on the premises and only allows package sales in the manufacturer's original sealed containers.

**GENERAL INSTRUCTIONS**

**Submitting Your Application**

The Division of Alcoholic Beverages and Tobacco, Bureau of Licensing, accepts applications for one, two, and three day events and special sales licenses. Please complete all required information. All questions must be answered fully and truthfully. You must provide an original application and supporting documentation that may be required by the local authorities. All signatures must be original.

**Contact Person**

All communications regarding your application will be sent to the applicant at the mailing or email address provided. However, if you would like for us to communicate with someone other than the applicant regarding your application, please provide the name and contact information for that person in the "Permit or License Information" section. Your named contact person will be permitted to make changes to the application paperwork on your behalf and we will communicate directly with them regarding any application issues or deficiencies. You will not be copied by the division with the correspondence.

**APPLICATION REQUIREMENTS AND INSTRUCTIONS FOR COMPLETING THIS APPLICATION**

**Florida Law for One/Two/Three Day Permit**

Per Florida Statute 561.422, upon the filing of an application and payment of a fee of **\$25 per permit**, the division may issue a permit authorizing a bona-fide non-profit civic organization to sell alcoholic beverages for consumption on premises only for a period not to exceed 3 days for a single event, subject to any state law or municipal or county ordinance regulating the time for selling such beverages. Any such civic organization may be issued only three such permits per calendar year except in those counties or cities with special acts governing the number of permits allowed. Any bona-fide non-profit civic organization permitted under this section may purchase alcoholic beverages from a distributor or vendor licensed under the beverage law. The applicable statute can be found at: [http://www.leg.state.fl.us/statutes/index.cfm?App\\_mode=Display\\_Statute&Search\\_String=&URL=0500-0599/0561/Sections/0561.422.html](http://www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0500-0599/0561/Sections/0561.422.html)

The following cities have special acts which permit the issuance of more than three permits per calendar year if the event is held in a specific geographical area:

City of St. Petersburg; City of Tallahassee; City of Leesburg; City of Eustis; City of Tavares; City of Mount Dora; City of Clearwater. The special acts may be viewed at:

<http://www.myfloridalicense.com/dbpr/abt/documents/ODP-SpecialActsallowingmorethan3permits.doc>

All sections of the application must be completed except the section titled Affidavit for Special Sales License.

**Registration of Legal Entity or Proof of Non-Profit Status**

All corporations, domestic or foreign and limited liability companies seeking this permit are required to be registered with the Florida Secretary of State, Division of Corporations, as "non-profit" and the status of the

registered entity must be "active." Organizations NOT incorporated must submit one of the following: a letter outlining the purpose and the goals of the event and who will benefit from the event's profits; organization's National, State, or Local charter; organization's by-laws, 501(c)3 registration, or Minutes of Meeting. If you have not already registered, you will need to contact the Department of State at (850) 488-9000 or [www.sunbiz.org](http://www.sunbiz.org) for further information. Your application will be considered incomplete without this active registration or proof of non-profit status.

**Sales Tax Certification** to be completed by the Florida Department of Revenue. Please take this application form to the **Department of Revenue** for their approval. The address for the office serving your area of interest can be found at <http://www.myfloridalicense.com/dbpr/abt/forms/documents/abtdistrictofficelist.pdf>. Applications must be submitted within **90 days** of receiving this approval.

### **Zoning Approval**

**This section only applies to applications for a One, Two, Three Day Permit.** The city or county zoning authority in which the event or special sale will be held executes zoning approval. Please check with your local authority for their requirements. The address for the zoning office serving your area of interest can be found at <http://www.myfloridalicense.com/dbpr/abt/forms/documents/abtdistrictofficelist.pdf>. Applications must be submitted within **180 days** of receiving this approval.

### **Sketch of Premises**

A complete sketch of the premises, drawn in ink or computer generated (letter size) which includes all permanent walls, doors, windows, counters, labeling each room and area. Include any outside areas where alcoholic beverages will be sold, consumed, or served. **Due to the difficulty of scanning, no blueprints are accepted.** When the event of the non profit organization is being held at a location that is already licensed for the sale of alcoholic beverages, a sketch of the entire premises **must** be submitted. If the event does not include the entire premises, the sketch must identify the area of the licensed premises where the event is to be held and must be a separate room or enclosure. The attestation included with this application must have the original signature of the permanent license holder and must be submitted by the non-profit group as part of the completed application.

### **Affidavit of Applicant for One, Two, Three Day Permit**

Read and sign in the presence of a notary. The affidavit must be signed by an officer of the Non-Profit Civic Organization; or in the case of a church, synagogue, school, or fraternity/sorority, the signature of an authorized representative of the church, synagogue, school, or fraternity/sorority.

### **There are several important points you should be aware of:**

1. The legal drinking age is 21. Please ensure that no one under 21 years of age is served an alcoholic beverage or allowed to consume alcoholic beverages.
2. The purpose of this permit is to provide your *non-profit organization* with a permit to sell alcoholic beverages to generate funds for your civic or charitable cause.
3. **Your organization, as the permit holder, is the ONLY entity that may receive any of the profits from the sale of alcoholic beverages on this permit. You must have responsible members of your organization at the alcoholic beverage sales location at all times. Your event CANNOT involve the SHARING OF ANY PROFITS OR RECEIPTS, or a "DONATION" to your cause if you obtain a temporary permit. Participation in this practice subjects your organization to jeopardy and denial of future alcoholic beverage permits.**
4. All records of alcoholic beverage purchases and sales must be retained for examination by the Division of Alcoholic Beverages and Tobacco personnel.
5. No One, Two, Three Day Permit will be issued to any organization in connection with any type of gambling activity, i.e. Casino Night, Las Vegas Night, Monte Carlo Night, etc.
6. **If your event is cancelled due to acts of nature, and you plan to reschedule, you need to notify the division within 14 days of the cancellation so that you will be eligible for re-issuance of the permit at no fee to you.**
7. **The Division of Alcoholic Beverages and Tobacco will issue One, Two, Three Day Permits to College fraternities and sororities only when the following conditions are met:**
  - a) The permit is being requested for an event that clearly has a designated charitable or civic

- purpose, such as a charity fundraiser.
- b) The Division must have written approval for the holding of such event from a designated school official with responsibility over fraternity or sorority activities, such as the organization's advisor, or the director of student activities or his/her designee.
  - c) The Division must receive a specific written outline from the fraternity or sorority as to where the event will be held, how entry into the event will be controlled so as to prevent the attendance of minors, and how control of the event will be maintained by the fraternity or sorority to prevent such matters as excess consumption, improper distribution of alcoholic beverages and the like.

**Florida Law for Special Sales License**

Florida Statute 561.20(12)(a), upon the filing of an application and payment of a fee of \$25 per permit, the division may issue a license authorizing the sale of alcoholic beverages in sealed containers only, for a period not to exceed 3 days. This license is issued only for the purpose of authorizing a sale pursuant to: levy and execution; bankruptcy sale; a sale by an insurance company in possession of alcoholic beverages; a sale resulting from a license suspension or revocation; a sale of damaged goods by a common carrier; a sale by a bona fide wine collector; or a sale pursuant to part V of chapter 679

[http://www.leg.state.fl.us/Statutes/index.cfm?App\\_mode=Display\\_Statute&URL=0600-0699/0679/0679PartVContentsIndex.html&StatuteYear=2012&Title=%2D%3E2012%2D%3EChapter%20679%2D%3EPart%20V](http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0600-0699/0679/0679PartVContentsIndex.html&StatuteYear=2012&Title=%2D%3E2012%2D%3EChapter%20679%2D%3EPart%20V).

**Registration of Legal Entity**

All corporations, domestic or foreign; general partnerships; limited liability companies; limited liability partnerships; and limited partnerships are required to be registered with the Florida Department of State, Division of Corporations. If you have not already registered, you will need to contact the Department of State at (850) 488-9000 or [www.sunbiz.org](http://www.sunbiz.org) for further information. Your application will be considered incomplete without this active registration.

**Sales Tax Certification** to be completed by the Florida Department of Revenue. Please take this application form to the **Department of Revenue** for their approval. The address for the office serving your area of interest can be found at <http://www.myfloridalicense.com/dbpr/abt/forms/documents/abtdistrictofficelist.pdf>. Applications must be submitted within **90 days** of receiving this approval.

**Affidavit of Applicant for Special Sales License**

Read and sign in the presence of a notary. The affidavit must be signed by the individual applicant, each partner of a general partnership, a general partner of a general partnership of a limited partnership, a managing member, manager, or officer of a limited liability company, each partner of a limited liability partnership, or one of the officers of a corporate applicant. All signatures must be original.

**APPLICATION CHECKLIST**

TRANSACTION	APPLICATION REQUIREMENTS
One/Two/Three Day Permit	<ul style="list-style-type: none"> <li><input type="checkbox"/> Complete DBPR ABT-6003 Division of Alcoholic Beverages and Tobacco Application for One/Two/Three Day Permit or Special Sales License. You may apply for multiple event dates.</li> <li><input type="checkbox"/> Pay \$25 fee for each event (make check payable to the Division of Alcoholic Beverages and Tobacco).</li> <li><input type="checkbox"/> College fraternities and sororities must meet certain conditions which are outlined in the application instructions and requirements.</li> </ul>
Special Sales License	<ul style="list-style-type: none"> <li><input type="checkbox"/> Complete DBPR ABT-6003 Division of Alcoholic Beverages and Tobacco Application for One/Two/Three Day Permits or Special Sales License.</li> <li><input type="checkbox"/> Pay \$25 fee (make check payable to the Division of Alcoholic Beverages and Tobacco).</li> </ul>

**DBPR ABT-6003 – Division of Alcoholic Beverages and Tobacco  
Application for One/Two/Three Day Permit or Special Sales License**

**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**DBPR Form  
ABT- 6003  
Revised 08/2013**

*If you have any questions or need assistance in completing this application, please contact the Division of Alcoholic Beverages & Tobacco's (AB&T) local district office. Please submit your completed application to your local district office at least (7) days prior to the first date of the event to insure the permit is issued by the event date. This application may be submitted by mail, or it can be dropped off. A District Office Address and Contact Information Sheet can be found on AB&T's page of the DBPR web site at the link provided below.*

[http://www.myfloridalicense.com/dbpr/abt/district\\_offices/licensing.html](http://www.myfloridalicense.com/dbpr/abt/district_offices/licensing.html)

SECTION 1 -- CHECK TRANSACTION REQUESTED	
<b>Transaction Type:</b>	
<input checked="" type="checkbox"/> One/Two/Three Day Permit	<input type="checkbox"/> Special Sales License

SECTION 2 – PERMIT or LICENSE INFORMATION			
If the applicant is a corporation or other legal entity, enter the name and the document number as registered with the Florida Department of State Division of Corporations on the line below.			
FEIN Number <i>05-0208290</i>	Business Telephone Number <i>305-446-9670</i>	E-Mail Address (Optional) <i>mary@gablesfoundation.org</i>	
Full Name of Applicant(s): (This is the name the permit or license will be issued in) <i>Corral Gables Community Foundation</i>			Department of State Document #
Business Name (D/B/A) or Name of Event <i>Corral Gables Pumpkin Patch</i>			
Location of Event (Street and Number) <i>Pittman Park - 2200 Galiano Street</i>			
City <i>Corral Gables</i>	County <i>Miami-Dade</i>	State <i>FL</i>	Zip Code <i>33134</i>
Mailing Address (Street or P.O. Box) <i>1825 Ponce de Leon Blvd, #447</i>			
City <i>Corral Gables</i>		State <i>FL</i>	Zip Code <i>33134</i>
<b>Contact Person - This section is optional, see application instructions for details</b>			
Contact Person <i>Mary Snow</i>		Telephone Number <i>305-446-9670 ext.</i>	
Email Address (Optional) <i>mary@gablesfoundation.org</i>			
Mailing Address (Street or P.O. Box) <i>1825 Ponce de Leon Blvd. #447</i>			
City <i>Corral Gables</i>		State <i>FL</i>	Zip Code <i>33134</i>
Date(s) Permit Desired <i>10-21-17</i>			

**ABT District Office Received Date Stamp**

**SECTION 3 – SALES TAX  
TO BE COMPLETED BY THE DEPARTMENT OF REVENUE**

**Full Name of Applicant Organization**

The named applicant for a license/permit has complied with the Florida Statutes concerning registration for Sales and Use Tax and has agreed to pay any applicable taxes due.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

Department of Revenue Stamp:

**SECTION 4 - ZONING  
TO BE COMPLETED BY THE ZONING AUTHORITY GOVERNING THE EVENT LOCATION**

Location of Event (Street and Number)

City

County

The location complies with zoning requirements for the temporary sale of alcoholic beverages pursuant to this application for a One/Two/Three Day Permit.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

**Note: College fraternities and sororities must meet certain additional conditions which can be found in the application instructions and requirements.**

**SECTION 5 – DESCRIPTION OF PREMISES TO BE LICENSED  
AB&T AUTHORIZED SIGNATURE REQUIRED**

Business Name (D/B/A) or Name of Event

*Carol Gubler Pumpkin Patch*

Neatly draw a floor plan of the premises in ink, including sidewalks and other outside areas which are contiguous to the premises, walls, doors, counters, sales areas, storage areas, restrooms, bar locations and any other specific areas which are part of the premises where the event will be held. A multi-story building where the entire building is to be licensed must show the details of each floor.



SECTION 6 - AFFIDAVIT OF APPLICANT  
FOR NON-PROFIT CIVIC ORGANIZATION ALCOHOLIC BEVERAGE PERMIT

NOTARIZATION REQUIRED

Full Name of Applicant Organization Corral Gables Community Foundation

"This is to certify that the applicant requesting the permit in the above and foregoing application is a non-profit civic organization and that the permit, if used, will be used only by the organization making application, on the date(s) requested and at the location stated. By acceptance of this permit, we agree that the applicant organization, as the permit holder, is the ONLY entity that will receive any of the profits from the sale of alcoholic beverages on this permit. This is to further certify that the applicant organization has not received more than three (3) permits within the calendar year, unless otherwise authorized by law, and acknowledge that the location may be inspected and searched during the time that the permit is issued and business is being conducted without a search warrant by authorized agents or employees of the Division of Alcoholic Beverages and Tobacco, the Sheriff, his Deputies, and Police Officers for purposes of determining compliance with the alcoholic beverage laws.

I, the undersigned individual, hereby swear or affirm that I am an officer or authorized representative and am duly authorized to make the above and foregoing statements on behalf of the applicant organization. Furthermore, I swear under oath or affirmation under penalty of perjury as provided for in Sections 559.791, 562.45, and 837.06, Florida Statutes, that the foregoing information is true to the best of my knowledge."

STATE OF Fla

COUNTY OF Dade

Mary Snow  
APPLICANT/ AUTHORIZED REPRESENTATIVE NAME

[Signature]  
APPLICANT/ AUTHORIZED REPRESENTATIVE SIGNATURE

The foregoing was ( ) Sworn to and Subscribed before me this 29 Day

of Sep, 20 17, By MARY SNOW who is (  ) personally known to me  
(print name(s) of person making statement)

OR ( ) who produced \_\_\_\_\_

[Signature]  
Notary Public

as identification  
 **PONY RODRIQUEZ**  
MY COMMISSION # FF 101492  
EXPIRES: June 20, 2018  
Bonded Thru Budget Notary Services

Commission Expires \_\_\_\_\_

SECTION 7 - AFFIDAVIT OF APPLICANT  
FOR SPECIAL SALES LICENSE

NOTARIZATION REQUIRED

Full Name of Applicant Organization

*Corral Gables Community Foundation*

"I, the undersigned individual, or if a corporation, its authorized representative, hereby swear or affirm that I am duly authorized to make the above and foregoing application for a special sales license which authorizes the sale of alcoholic beverages for period of up to three (3) days. I understand this license does not permit the sale of alcoholic beverages for consumption on the premises and only allows package sales in sealed containers and acknowledge that the location may be inspected and searched during the hours that the special sale is being conducted without a search warrant by authorized agents or employees of the Division of Alcoholic Beverages and Tobacco, the Sheriff, his Deputies, and Police Officers for purposes of determining compliance with the beverages laws.

I swear under oath or affirmation under penalty of perjury as provided for in Sections 559.791, 562.45, and 837.06, that the foregoing information is true to the best of my knowledge and that no other person or entity except as indicated herein has an interest in the special sales license and that all of the above listed persons or entities meet the qualifications necessary to hold this special sales license."

STATE OF *Kla*

COUNTY OF *Dade*

*Mary Snow*

APPLICANT/ AUTHORIZED REPRESENTATIVE NAME

*[Signature]*

APPLICANT/ AUTHORIZED REPRESENTATIVE SIGNATURE

The foregoing was ( ) Sworn to and Subscribed before me this *29* Day

of *Sep*, 20 *17*, By *MARY SNOW* who is () personally known to me  
(print name(s) of person making statement)

OR ( ) who produced \_\_\_\_\_ as identification.

*Tony Rodriguez*

Notary Public

Commission Expires: \*



TONY RODRIGUEZ  
MY COMMISSION # FF 101492  
EXPIRES: June 20, 2018  
Bonded Thru Budget Notary Services



## ATTESTATION

This form is to be completed by the alcoholic beverage license holder **ONLY** when the event of the non profit organization is being held at a location that is licensed by the Division of Alcoholic Beverages & Tobacco for the sale of alcoholic beverages.

Note: This attestation must have the original signature of the alcoholic beverage license holder (only persons on file with the division may sign) and must be submitted by the non-profit group along with the application for the One/Two/Three Day Permit.

Licensee:		
Business Name (DBA):		
License #:	Series of Permanent License: Type:	
Contact Person	Telephone Number ext.	
E-Mail Address (Optional)		
Name of Non-Profit Group:		
Date(s) of Event		

## IMPORTANT

A One/Two/Three Day permit is being requested for an event to be held on your licensed premises. During the event, no sales or service of alcoholic beverages may be made under your alcoholic beverage license in the area identified for use by the non-profit organization. Failure to comply will result in administrative charges being filed against your license.

Signature of Licensee: \_\_\_\_\_

Date: \_\_\_\_\_