

check in vault
1/14/19 mm

To Chief Pacheco for
review -
2nd vendor for event



APPLICATION FOR 24 HR MALT BEVERAGE
OR LIQUOR CATERING PERMIT

Permit Time: 6:30pm - 11pm

Name of Event: BOOTLEGGERS BASH

Permit Date(s): 02/22/2019 to 02/22/2019 Times of Event: 5pm to MIDNIGHT

No. of Days Permitted: _____ Fee per day: \$75.00 Total Fee: 5pm

Applicant: SANTA FE TRAIL INC D/B/A: SANTA FE SOUTHWEST GRILL

Contact Person: CATHERINE WITT Phone: (307) 389-1188

Company Location: 1635 EIK ST City: ROCK SPRINGS WY State: WY Zip: 82901

Mailing Address: 1635 EIK ST City: ROCK SPRINGS WY State: WY Zip: 82901

Business Phone: (307) 389-3427 Email address: cwitt41254@gmail.com

Location of Event/Sales: EVENTS COMPLEX

Applicants that are receiving anything of value (i.e. money, goods and/or services) From any industry representative must answer the following:

As an applicant for a 24 hour malt beverage or catering permit, you are:

A nonprofit corporation organized under the laws of this state: YES NO

Qualified as a tax exempt organization under the Internal Revenue Code: YES NO

And have been in continuous operation for not less than two (2) years. YES NO

FILING AS: Individual Partnership Corporation LLC LLP

NOTE: Individual and Partnership filers must be domiciled residents of Wyoming for at least one year and not claimed residence in any other state in the last twelve months.

If a corporation, LLC, or LLP list the full names and residence address of all the officers and directors and of all shareholders owning jointly or severally ten percent (10%) or more of the stock of the corporation, LLC, or LLP. Use back of form if additional space is needed.

For Corp, LLC, LLP Applicants Legal Name	Date of Birth	DO NOT LIST PO BOXES Residence Address St., City, State, Zip	Residence Phone Number	No. of yrs. in Corp. or LLC	% of Stock Held	Have you been convicted of a Felony Violation - YES or NO	Have you been convicted of a Violation Relating to Alcoholic Liquor or Malt Beverages? YES or NO
SHANE M PATTERSON	12/17/76	604 BOBEL ST ROCK SPRINGS WY 82901	389-6733	16	49%	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
JOHN GARDNER	9/11/73	3614 BRICKYARD	389-6733	16	29%	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
MIKE PATTERSON	10/20/75	1753 WALNUT	389-6971	16	10%	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
GWYNETH PATTERSON	8/29/77	1753 WALNUT	389-6971	16	1%	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

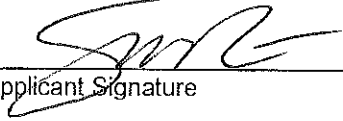
By filing this application, I agree to operate in Wyoming under the requirements of W.S.12-4-502 and all other applicable Wyoming laws and rules, and to file required sales tax reporting documents and taxes.

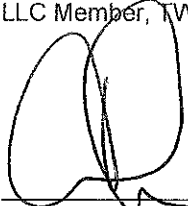
By signing this application, I acknowledge for SANTA FE SUBGRILL (Business Name) that all of the information provided is true and correct, and that I agree to meet the Wyoming operating conditions specified above. This application must be signed by an owner, partner, corporate officer, or LLC/LLP member.

VERIFICATION OF APPLICATION

(Requires signatures by ALL individuals, ALL Partners, ONW (1) LLC Member, TWO (2) Corporate Officers/Directors, or TWO (2) Club Officers. W.S.12-4-102(b))

Dated this 11TH day of JANUARY, 2019


Applicant Signature


Applicant Signature

A Temporary Food Permit may be required for your event, by the Department of Agriculture. Please contact the Sweetwater County Health Officer at 333 Broadway, Suite 10, Rock Springs, or call (307) 352-6709 for further information.

Signature of Licensing Authority Official

Date


Law Enforcement Review Signature

1/17/19
Date

Comments: Security Detail in place and Lena Warner
is in charge.

Malt Beverage/Liquor Catering Permits for events at city facilities are reviewed by the Mayor and may require evidence of security for the event and liquor liability insurance in the amount of \$1,000,000.00 with the city of Rock Springs named as an additional insured.

Security Required? Yes No

Liquor Liability Insurance Required? Yes No

**Santa Fe Southwest Grill
1635 Elk Street
Rock Springs, WY 82901
Banquet Cell: 307-389-1188**

January 11, 2019

Honorable Mayor Kaumo
Rock Springs City Council Members
Rock Springs, Wyoming 82901

Re: Catering Permit

Mayor Kaumo and Rock Springs City Council,

Santa Fe Southwest Grill respectfully requests a Catering Permit for Bootlegger Bash to be held on February 22, 2019 at the Sweetwater County Events Complex from ~~5:00 p.m.~~ to ~~midnight.~~ 11 pm 6:30 pm

Sweetwater County Events Complex will be providing security.

With Kind Regards,


Cathy Witt

Enclosure: Check