

**LIQUOR COMMISSION
CITY AND COUNTY OF HONOLULU**

711 KAPIOLANI BOULEVARD, SUITE 600, HONOLULU, HAWAII 96813-5249
PHONE (808) 768-7300 • FAX (808) 768-7311
INTERNET ADDRESS: www.honolulu.gov/liq

**SUPPLEMENTAL INFORMATION FOR
NON-PROFIT SPECIAL LICENSE**

*Submit this form with the Application for Liquor License form# LIQ-LIC-101
Rule 3-82-32.31*

NON-PROFIT FEIN NO. _____

1. Name of applicant/organization: _____

2. Type of organization or club (check one):

Athletic

Political

Charitable

Social

Educational

Other (Specify): _____

3. Purpose of the event: _____

How will this event benefit the applicant? _____

4. Purpose of your organization: _____

5. Address and location of event: _____

6. The event will be held on _____
Day of the Week Month & Day Year

Hours of the Event: from _____ to _____

7. Number of persons expected to attend: _____

8. Will advanced tickets be sold: Yes No Cost of Tickets: \$ _____ (each)

How will monetary profits be distributed? _____

9. (If applicable) Entertainment will be provided by: _____

Are any entertainers under 18 yrs. of age? Yes No If "yes", please attach a list of minors, their age, birthdates, and parental/guardian consent giving permission for minors to entertain on the premises.

Name of adult responsible for minors during performance on the premises: _____

10. Person in charge of the event: _____
Print Name Position/Title

Will a third party be involved in operating this event? Yes No Phone #: _____

Consent of Landlord. The Landlord Authorization for Sale & Service of Liquor (form# LIQ-LIC-142) is required as part of the application. All applicants must abide by all liquor laws of the State of Hawaii and the Rules of the Liquor Commission of the City and County of Honolulu pertaining to a Special license:

Section 281-71. Posting of license. The Special License must be posted and exposed to view on the premises, convenient for inspection on the day of the event.

SIGNATURE Director/Authorized Agent

Date

PRINT Director/Authorized Agent

Title

Note: If submission by Authorized Agent, please submit a Letter of Authorization or Notification of Authorized Agent (form# LIQ-LIC-106), signed by the Director.

OFFICE USE:

Approved

Denied

Referred

LCIS ENTRY DATE: _____ HLC STAFF Initial: _____
HLC Signature Date

One-Day Special License #: _____