

DAILY LICENSE APPLICATION/AUTHORIZATION - Non Transferable

Instructions: Complete all items. Submit to local ABC District Office with required fee (Cashier's Check or Money Order) payable to ABC. Once license is issued, fee cannot be refunded. For a listing of ABC District Offices please visit <http://www.abc.ca.gov/distmap.html>

Pursuant to the authority granted by the organization named below, the undersigned hereby applies for the license(s) described below.

LICENSE NUMBER	GEO CODE
RECEIPT NUMBER	
FEE	
\$	

1. ORGANIZATION'S NAME El Dorado Hills Friends of the Library CONDITIONS REQUIRED Yes No DIAGRAM REQUIRED Yes No

2. LICENSE TYPE (Check appropriate license type AND organization type)

a. **Daily General (\$25.00)** (Includes beer, wine and distilled spirits)
 Political Party/Affiliate Supporting Candidate for Public Office or Ballot Measure Fraternal Organization in Existence Over Five Years with Regular Membership
 Organization Formed for Specific Charitable or Civic Purpose Religious Organization
 Other: _____ Vessel per Section 24045.10 B&P (\$50.00)
 NUMBER OF DISPENSING POINTS _____

b. **Special Daily Beer (\$25.00)** **Special Daily Beer & Wine (\$50.00)** **Special Daily Wine (\$25.00)**
 Charitable Fraternal Social Political Other: _____
 Civic Religious Cultural Amateur Sports Organization
 NUMBER OF DISPENSING POINTS 2

c. **Special Temporary License (\$100.00)** (Different privileges depending on statute)
 Television Station per Section 24045.2 or 24045.9 B&P Person conducting Estate Wine Sale per Section 24045.8 B&P
 Nonprofit Corporation per Sections 24045.4 and 24045.6 B&P Women's Educational and Charitable Organization per Section 24045.3 B&P
 Other Special Temporary Licenses, per Section
 License number _____ Amount \$ _____

3. EVENT TYPE
 Dinner Dance Wedding Lunch Picnic Barbeque Social Gathering Festival
 Sports Event Concert Birthday Mixer Carnival Dinner Dance Other: _____

4. TOTAL # OF DAYS one 5. ESTIMATED ATTENDANCE 325 6. HOURS OF ALCOHOLIC BEVERAGE SALES, SERVICE AND/OR CONSUMPTION
 From 4pm To 6:30pm

7. EVENT DATE(S) November 13, 2016 8. EVENT IS OPEN TO THE PUBLIC Yes No

9. EVENT LOCATION (Give facility name, if any, street number and name, and city)
El Dorado Hills Library 7455 Silva Valley Parkway, El Dorado Hills 95762

10. LOCATION IS WITHIN THE CITY LIMITS Yes No 11. TYPE OF ENTERTAINMENT wine tasting/food/music 12. SECURITY GUARDS Yes No If yes, how many? _____

13. AUTHORIZED REPRESENTATIVE'S NAME Cecilia Finch 14. REPRESENTATIVE'S TELEPHONE NUMBER 916-933-2111

15. REPRESENTATIVE'S ADDRESS 3459 Patterson Way, El Dorado Hills, CA 95762

16. ORGANIZATION'S MAILING ADDRESS (If different from #15 above)
7455 Silva Valley Parkway, El Dorado Hills CA 95762

17. AUTHORIZED REPRESENTATIVE'S SIGNATURE Cecilia Finch 18. DATE SIGNED 7/6/16

PROPERTY OWNER APPROVAL BY (Name), REQUIRED _____ PHONE NUMBER _____ PROPERTY OWNER SIGNATURE _____ DATE SIGNED _____

LAW ENFORCEMENT APPROVAL BY (Name), IF APPLICABLE Lt. Falkenstein PHONE NUMBER 530-621-5655 LAW ENFORCEMENT SIGNATURE _____ DATE SIGNED 09/19/16

DISTRICT OFFICE APPROVAL BY (Name) _____ ABC EMPLOYEE SIGNATURE _____ ISSUANCE DATE _____

The above-named organization is hereby licensed, pursuant to the California Business and Professions Code Division 9 and California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the above named location for the period authorized above. This license does not include off-sale ("to-go") privileges.

This license may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace and morals of the people of the State.