

TOWN OF SARATOGA – PERMIT APPLICATION
REQUEST FOR WAIVER OF OPEN CONTAINER LAW



Permit No. _____

Permit Fee: \$25.00

Fee Paid: _____

Receipt No. _____

Pursuant to the Town of Saratoga Municipal Code, the governing body and Town Clerk are authorized to issue a permit which waives the Town's container restrictions as defined in the Town of Saratoga Municipal Code 5.08.210(4)

APPLICANT NAME: Saratoga Days - Joe Elder

NAME OF EVENT: Saratoga Days

ADDRESS (City/State/Zip): PO Box 128, Saratoga, WY 82331

TELEPHONE NO. 307-326-7822

IF APPLICANT IS REPRESENTING AN ORGANIZATION, PLEASE PROVIDE THE FOLLOWING:

ORGANIZATION NAME: _____

ORGANIZATION ADDRESS: See above

ORGANIZATION TELEPHONE NO. _____

IS THE APPLICANT THE CONTACT PERSON FOR THE EVENT: _____

If no, Please provide Name/Telephone Number and Address of contact person:

Scott McElvaine 307-760-9738; Joe Elder 307-321-3960

LOCATION OF EVENT: Bridge Ave between 1st and River

DATE(S) OF EVENT: July 1, 2023

PERMIT HOURS

REQUESTED: 10am → 11pm

The undersigned hereby requests a waiver of the open container provisions pursuant to the Town of Saratoga Municipal Code 5.08.210(4) for the above listed event

Applicant Signature: Joe Elder Date: 4/27/2023

Approval

Date: _____

Mayor: _____

Clerk: _____

Copies to:
Saratoga Police Department