## TOWN OF SYLVA

83 Allen Street Sylva, N.C. 28779

Phone: (828) 586-2719 Fax: (828) 586-8134 E-mail: <a href="mailto:townclerk@townofsylva.org">townclerk@townofsylva.org</a>

## OUTDOOR SPECIAL EVENT PERMIT APPLICATION CONSUMPTION OF ALCOHOL

	Today's Date 8/14/29
	Name of Business Un Complicated Kitchen Innovation Brains
	NC alcohol license holder # 00340279BM/BW/D6
Primar	y Organizer Contact:
	Name Jenna Kranzl Chelsea Brinton
	Phone# 384-795-2469/828-586-9678
	Address 414 w. man street Sylvanic 28779
	Address 414 w. man street Sylvanic 28779  Email Address Jennae uncomplicated wither org  Chelsea @innovation brewing. Com
	Fax #
	ry Event Category: e** 60 Day Advance Notice is Required for Events that will need a Road Closure!!
	Name of Event 4th Agnal (roquet Tournanut & Carnival
	Name of Event 4th Annal (roquet Tournament & Carnival Date(s) of Actual Event 10/5/24
	Date(s) of Actual Event 10/5/24  Estimated Attendance 150 is *determines police presence at \$35/hr/officer*
	Date(s) of Actual Event 10/5/24  Estimated Attendance 150 is *determines police presence at \$35/hr/officer* *minimum of 2 officers required*
	Estimated Attendance 150 is *determines police presence at \$35/hr/officer* *minimum of 2 officers required*  Event Time(s) Opening 4 AM/PM - Closing 5 AM/PM
	Estimated Attendance 150 is *determines police presence at \$35/hr/officer* *minimum of 2 officers required*  Event Time(s) Opening AM/PM - Closing 5 AM/PM  Set-up Date(s) Set-up Time(s) AM/PM AM/PM
	Estimated Attendance 150 is *determines police presence at \$35/hr/officer* *minimum of 2 officers required*  Event Time(s) Opening AM/PM - Closing 5 AM/PM  Set-up Date(s) Set-up Time(s) AM/PM AM/PM  Primary On-Site Contact Lan2
	Estimated Attendance 150 is *determines police presence at \$35/hr/officer* *minimum of 2 officers required*  Event Time(s) Opening

List quantity of structures & equipment on-site (Ex.	Tents: Stakes:	' Generators: Inflatable	s. etc.
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Will streets/sidewalks need to be closed?	Yes No
Will any vehicles/trailers be located in non-parking areas?	Yes No
Are sales by private vendors being planned?  IF YES, how many?	Yes No
Will tents or canopies be used at the event?	YesNo
Will banners or signs be used outside the event area?	Yes No
Does your event require electricity?	Yes No
Will sound amplification be used?	Yes No
Will there be any cooking with grease?	Yes No
Will private grills be in use for food preparation?	Yes No
Will additional trash receptacles be used?	Yes No
Will the event be publicized?	Yes V No
Do you intend to serve alcohol?	Yes No
Do you intend to sell the alcohol?  (If yes, attach a copy of your NC license to sell alcohol)	Yes _ V No
What type of alcohol do you intend to serve? Blecontend (i.e. beer, unfortified wine, etc.)	

A certificate of liability insurance coverage at a level of \$1,000,000 must be held by event organizer and must list the Town of Sylva for the day of the event. Please attach to this application a copy of certificate listing the Town of Sylva.

If the date and/or location requested is not available, or if the requested location is not an appropriate site to conduct your proposed event, the Town of Sylva will contact you and an alternate location will suggested if available. Your confirmation will be in the form of a permit, issued to the organization and/or person responsible for planning the event. Do not publicize your event until approval has been granted by the Town of Sylva Board of Commissioners. The submission of an Outdoor Special Event Permit Application—Alcohol Consumption is NOT approval to hold an event.

List of Fees: *NOTE: All fees must be paid before reservation is approved.
\$30.00 for two hours (Town Residents)
\$50.00 for two hours (non Town Residents)
\$50.00 for four hours (Town Residents)
\$75.00 for four hours (non Town Residents)
\$100.00 for eight hours (Town Residents)
\$125.00 for eight hours (non Town Residents)
\$5.00 per vendor
Everything that I have stated on this application is correct to the best of my knowledge. I have read, understand, and agree to abide by the policies, rules and regulations. The permit, if granted, is not transferable and is revocable at any time at the absolute discretion of the Sylva Town Manager.  I also understand that I am responsible for scheduling with the Town of Sylva Police Department officers to be on duty during event, and that payment for officer presence is due at the time application is submitted.  Name of Applicant
Official Use Only:
Officers Required (\$35/hr/officer) Total Due
Certificate of Liability Insurance Coverage attached
Copy of NC license to sell alcohol attached (if required)
Resolution of Approval dated

Innovation Brewing LLC Innovation Brewing 414-A West Main Street Sylva, NC 28779

ISSUED: 08/01/2024
COUNTY: Jackson
TYPE: LLC Member Man

PERMIT NUMBER	ORIGINALLY ISSUED DESCRIPTION		
00340279BM	08/01/2024	Brewery	
00340279BW	08/01/2024	Malt Beverage Wholesaler	
00340279DG	08/01/2024	Malt Beverage Special Event	



FILE NUMBER:

00340279CM-999

Pursuant to G.S. 18B-903, these permit(s) are valid only for the business listed at this address, are not transferable, and will automatically expire with an ownership change. See authorization(s) on the back.

WILLIAM HENRY BAUER, JR. Chairman



## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 05/06/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

Stanberry Insurance Agency, Inc.			kes	CT Vickie Oa	CONT				PRODUCER	PRO
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NSURER B.  INSURER					ADDR					
INSURER 8:  414 W Main Street    INSURER 8:	NAIC#	Eric Ingurance Evolungo				NC 99770				
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