CITY OF RAPID CITY
RAPID CITY, SOUTH DAKOTA 57701-5035

Finance Office Department
300 Sixth Street
Telephone: (605) 394-4143
FAX: (605) 394-2232
Web: www.rcgov.org

UNIFORM ALCOHOLIC BEVERAGE LICENSE APPLICATION
ALCOHOL BEVERAGE LICENSING INSTRUCTIONS
FOR
SPECIAL EVENT
(November 27, 2015)

SECTION A: Enter the name, business address and phone number of the non-profit organization in which the license is to be issued. The corporate supplement on the reverse side of the application must be completed with the names of the officers; plus, at least one officer must sign the corporate supplement.

SECTION B: Enter the name of the non-profit organization, the location address where the Special Event will be hosted and a contact phone number.

SECTION C: Mark the class of Special Event license(s) being applied for. Answer all questions at the bottom of Section C.

ON-SALE LICENSES
- Special event malt beverage retailer @ $50 – available to civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A. subsections 1 and 6.
- Special event on-sale wine retailer @ $50 – available to civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A. subsections 1, or 9, or to a person licensed by the Department of Revenue under SDCL ch. 35-12.
- Special event on-sale dealer @ $150 – available to civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A.1.

OFF-SALE LICENSES
- Special event off-sale package wine dealer @ $50 – available in the following situations: a) Any civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A. subsections 5, 8, 9, or licensed pursuant to SDCL 35-4-2(19) or SDCL ch. 35-12 that sells only wine manufactured by a farm winery that is licensed pursuant to SDCL ch. 35-12; or b) Any civic, charitable, educational, fraternal, or veterans organization in conjunction with a special event conducted pursuant to § 5.12.035.E. Certification Required
- Special Event off-sale package malt beverage dealer @ $50 - available to any civic, charitable, educational, fraternal, or veterans organization in conjunction with a special event conducted pursuant to § 12.035.E. Certification Required
- Special Event off-sale package dealer @ $150 - available to any civic, charitable, educational, fraternal, or veterans organization in conjunction with a special event conducted pursuant to § 5.12.035.E. Certification Required

SECTION D: The legal description of the licensed premises is required by law. The questions regarding felony conviction and own/lease of the premises must be completed.
SECTION E: If applicable, the South Dakota State Sales Tax number for the business must be recorded in this section. REMEMBER: The alcohol beverage license and the sales tax license must be in the same name.

SECTION G: Self-explanatory - NEW

SECTION H: If the applicant is a non-profit organization, an officer of the organization must sign this section in the presence of the city auditor, town clerk or Notary Public.

SECTION I: Notary Public for Section H. The City Finance Office can notarize the application when SECTION H is signed in the Finance Office.

SECTION J: The Finance Office will complete this section.

NEW LICENSES: All alcohol license applications must be submitted to the Rapid City Finance Office for approval by the City Council. The appropriate fees must accompany the application.

CLASS OF LICENSE AND FEES:

- On-Sale Licenses
  - Special event malt beverage retailer - $50.
  - Special event on-sale wine retailer - $50.
  - Special event on-sale dealer - $150.

- Off-Sale Licenses
  - Special event off-sale package wine dealer - $50.
  - Special event off-sale package malt beverage dealer - $50.
  - Special event off-sale package dealer - $150

ADDENDUM – SPECIAL EVENT ALCOHOLIC BEVERAGE LICENSE APPLICATION: The application must complete the form in full:
- Type of License(s) applied for: The appropriate box/boxes must be checked indicating the service(s) requested.
- Certification for Licenses 4(b), 5 and 6: The appropriate box/boxes must be checked for service(s) that involve donated alcoholic beverages. The certification must be signed.
- Certification: The appropriate box must be checked indicating the organization’s compliance with the statutory requirements for the class of license(s) requested.

The form must be notarized; the City Finance Office can notarize the form only when the form is signed in the Finance Office. If you have any questions, please contact the City Finance Office at (605) 394-4143.

ROUTING SHEET FOR ALCOHOL LICENSE - CITY OF RAPID CITY: The applicant must complete the form in full. The form must be notarized; the City Finance Office can notarize the form only when the form is signed in the Finance Office. The information required will be used by the Rapid City Police and Fire Departments during their background investigations and structure inspections. If you have any questions, please contact the City Finance Office at (605) 394-4143.
Uniform Alcoholic Beverage License Application

Mail this copy to: Department of Revenue, Special Tax Division 445 East Capitol Ave Pierre, SD 57501-3100.

A. Owner Name and Address

Owner’s Telephone #: ____________________________

B. Business Name and Address

Business Telephone #: ____________________________

C. Indicate the class of Special Event License(s) being applied for

☐ Special Event Malt Beverage Retailer $50  ☐ Special Event On-Sale Dealer $150
☐ Special Event On-Sale Wine Retailer $50  ☐ Special Event Off-Sale Package Dealer $150
☐ Special Event Off-Sale Package Wine Dealer* $50  ☐ Special Event Off-Sale Package Malt Beverage Dealer* $50
☐ Special Event Off-Sale Package Distiller* $150  ☐ Special Event Off-Sale Package Distiller* $50

☐ *Certification: All donated alcoholic beverages have been purchased by the donor from a licensed South Dakota retailer

(initial)

Number of other Package Liquor Licenses held: ____________

Number of other On-sale Liquor Licenses held: ____________

D. Legal description of licensed premise:

Have you ever been convicted of a felony? ☐ Yes ☐ No

Do you own ☐ or lease ☐ this property? (Check one)

E. State Sales Tax Number: ____________________________

F. Remember to obtain a Federal Alcohol Stamp, for help call TTB at 1-800-937-8864.

G. New license? ☐ Transfer? ($150) ☐ Re-issuance? ☐

H. CERTIFICATE: The undersigned applicant certifies under the penalties of perjury that all statements provided herein are true and correct; that the said applicant complies with all of the statutory requirements for the class of license being applied for and in addition agrees to permit agents of the Department of Revenue access to the licensed premises and records as provided in SDCL 35-2-2.1, and agrees this application shall constitute a contract between applicant and the State of South Dakota enacting the same or any peace officers to inspect the premises, books and records at any time for the purpose of enforcing the provisions of Title 35 SDCL, as amended.

Signed this _____ day of ________________________ Signature: ____________________________

I. Any Application required to be submitted to a local governing board must be signed in the presence of the city or county auditor, the town clerk or notary public. This applies to ALL applications EXCEPT the following: distillers, manufacturers, wholesalers, municipalities, airports, solicitors, dispensers, carriers, transportation companies, and farm wineries.

Place of business is located in a municipality? [ ] Yes [ ] No County: ____________________________

This application was subscribed and sworn to before me this ______ day of ________________________

Approving Officer’s Telephone number ____________________________ Signature: ____________________________

J. APPROVAL OF LOCAL GOVERNING BODY – Notice of hearing was published on ________________________, not less than SEVEN (7) days after official publication. The governing body by majority vote recommends the approval and granting of this license and certifies that requirements as to location and suitability of premises and applicant have been reviewed and conform to the requirements of local and South Dakota law.

Application approved for Sunday on-sale operation? [ ] Yes [ ] No

Amount of fee collected with application ____________________________

Amount of fee retained ____________________________

Are real property taxes paid to date? [ ] Yes [ ] No Forwarded with application ____________________________

Ineligible for video lottery [ ]

Number of video lottery terminals on licensed premise: ____________________________

For Local Government Use

(Seal) ____________________________ Mayor or Chairman

If disapproved, endorse reason thereon and return to applicant

Transferred (State Use)

From: ____________________________

Sales tax approval ____________________________ Date ____________________________

STATE LIQUOR AUTHORITY: APPROVAL ______ REVIEW ______

Please complete reverse side
Company supplement information
(For corporate/partnership/LP/LLC applicants)

Name of corporation/partnership/LP LLC ________________________________

Address of office and principal place of business of corporation/partnership/LP/LLC: ________________________________

Are all managing officers of this corporation/partnership/LP/LLC of good moral character having never been convicted of a felony? □ Yes □ No

Name, title of office, occupation and address of each of the officers/owners of the corporation, partnership, LP or LLC:

<table>
<thead>
<tr>
<th>Name</th>
<th>Office</th>
<th>Address</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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Name of any officers, directors, partners or stockholders of applicant having a financial interest or capital stock in any other alcoholic beverage license:

<table>
<thead>
<tr>
<th>Name</th>
<th>Type of License, License Number, Financial Interest Held, and Address of Business Location</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Where and with whom are all company records kept, such as charter, by-laws, minutes, accounts, notes payable, and notes and accounts receivable, etc?

With signature the applicant agrees to the following:

That the applicant company will comply with all provisions of ARSD chapter No. 64:75:02 of the Department of Revenue, relating to the transfer of stock and prior approval of the transfer of such stock by the Secretary of Revenue and violation of any of the provisions of said regulation or failure to comply therewith, whether by the undersigned corporation, partnership/LP/LLC or by any stockholder thereof, or by anyone interested in said company, shall constitute cause for revocation or suspension of any license issued pursuant to and in reliance on this application, or for refusal to renew such license upon expiration thereof.

We the undersigned officers and directors of the applicant company acknowledge that the within supplement application form is true and correct in every respect and that there exists no financial arrangement concerning this or any other alcoholic beverage license than that expressly set forth above. If company stock is to be transferred we ask for approval of such voluntary stock transfer.

Signature of Authorized Officer/Director/Partner ________________________________ Date ____________________________
ADDENDUM
SPECIAL EVENT ALCOHOLIC BEVERAGE LICENSE APPLICATION
SPECIAL EVENT DATE(S)____________________________________

Owner/Business Name

Owner/Business Address

Owner/Business City/State/ZIP

Owner/Business Phone

Event Location:

Type of License(s) applied for:

☐ 1. Special event malt beverage retailer. Special event malt beverage retailers licenses are available to any civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A. subsections 1 and 6.

☐ 2. Special event on-sale wine retailer. Special on-sale wine retailers licenses are available to any civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A. subsections 1, or 9, or to a person licensed by the Department of Revenue under SDCL ch. 35-12.

☐ 3. Special event on-sale dealer. Special on-sale dealer licenses are available to any civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A.1.

☐ 4. Special event off-sale package wine dealer. Special off-sale package wine dealers licenses are available in the following situations:
   a) Any civic, charitable, educational, fraternal, or veterans organization or any licensee licensed pursuant to § 5.12.030A. subsections 5, 8, 9, or licensed pursuant to SDCL 35-4-219 or SDCL ch. 35-12 that sells only wine manufactured by a farm winery that is licensed pursuant to SDCL ch. 35-12; or
   b) Any civic, charitable, educational, fraternal, or veterans organization in conjunction with a special event conducted pursuant to § 5.12.035.E. Subject to Certification Below

☐ 5. Special Event off-sale package malt beverage dealer. Special off-sale package malt beverage dealer licenses are available to any civic, charitable, educational, fraternal, or veterans organization in conjunction with a special event conducted pursuant to § 5.12.035.E. Subject to Certification Below

☐ 6. Special Event off-sale package dealer. Special off-sale package dealers license is available to any civic, charitable, educational, fraternal, or veterans organization in conjunction with a special event conducted pursuant to § 5.12.035.E. Subject to Certification Below

CERTIFICATION for Licenses 4(b), 5 and 6: The undersigned applicant certifies that the ☐ civic, ☐ charitable, ☐ educational, ☐ fraternal, or ☐ veterans organization has accepted donated ☐ wine, ☐ malt beverages, or ☐ alcoholic beverages, as applicable to the above identified license, from members of the public to be sold at the special event and that said donated alcoholic beverage has been purchased by the donor from a licensed South Dakota retailer.

Dated this ______ day of ____________, 20____ Signature_________________________________________

CERTIFICATION: The undersigned applicant certifies under the penalties of perjury that all statements provided herein are true and correct; that the said applicant complies with all of the statutory requirements for the class of license being applied for as a: ☐ Civic; ☐ Charitable; ☐ Educational; ☐ Fraternal; ☐ Veterans organization; or, ☐ A licensee licensed pursuant to SDCL.

Dated this ______ day of ____________, 20____ Signature_________________________________________

State of South Dakota )
County of Pennington )

Subscribed and sworn to before me this ______ day of _____________ 20______

(seal)  
Signature – Notary Public  
My Commission Expires: ________________________
ROUTING SHEET FOR ALCOHOL LICENSE
Rapid City, South Dakota

City Staff: Please return completed form to the Finance Office by ________________

Name of Business: ____________________________________________________________
PROPERTY TAX IDENTIFICATION NUMBER: ________________________________
Local Manager: _____________________________________________________________
Local Address: ______________________________________________________________
Home Telephone: ___________________ Business Telephone: ___________ Date of Birth: ______________
Social Security Number: ______________ Driver's License No.: ____________________
Employer, Address, Telephone for preceding 3 years (New Applicants Only)
________________________________________________________________________

Previous Criminal Record: ________________________________________________

CONTACT E-Mail: __________________________________________________________

CORPORATE INFORMATION: (If directors of corporation reside outside of Rapid City, fill out above information about local representative or manager.)

Corporate Officers: _______________________________________________________
Date of Birth: ______________________ Social Security Number: ________________
Name: __________________________________________________________
Name: _____________________________________________________________
Name: _____________________________________________________________
Name: _____________________________________________________________

I hereby authorize the Rapid City Police Department to conduct an investigation into my complete history, including former employment together with any and all information concerning my ability, personal character, credit, arrest record, etc. I hereby release any law enforcement agency, company corporation, or individual from all liability for furnishing information concerning me in response to this investigation. I also understand and agree to submit to a polygraph examination if I am requested to do so as a part of my background investigation.

__________________________________________
Signature

Subscribed to before me this __________ day of ______________________ , ______________.

Notary Public
Commission Expires:

__________________________________________
FIRE DEPARTMENT:
Approval
Recommend Denial: ______________________
Date: ______________________________
Fire Department Representative

POLICE DEPARTMENT:
Approval
Disapproval
Fire Department Representative

__________________________________________
Police Chief (or Representative)

(Rev. 10/09/2008)