



Licensing Board for the City of Boston

One City Hall Square, Room 809, Boston, Massachusetts 02201

Telephone: (617) 635-4170; Facsimile: (617) 635-4742; Email: LicensingBoard@boston.gov

INSTRUCTIONS FOR SPECIAL ONE-DAY ALCOHOLIC BEVERAGES LICENSE APPLICATION

(Revised 1/2019)

1. All applications must be received by the Monday **2 weeks** preceding the event to comply with the law. You may submit your application to the Board by mail, electronic mail, facsimile, or in person.
2. Prior to submitting the application to the Board for its approval, you must have the District Police Station complete the police acknowledgement portion of the application.
3. Non-Profit organizations may apply for any type of license (All Alcohol or Malt and Wine). Non-profit organizations may be required to show proof of non-profit status.
4. All profit making enterprises may only apply for a Malt and Wine license, unless holding a not-for-profit event. Applicants hosting a not-for-profit event seeking an All Alcohol license should submit information showing the event is not for profit.
5. Certificates of Inspection must be presented for premises where the Board has not typically placed a license in the past. If the event is being held on the street or in a space owned by a public/governmental entity, you must present something from the owner of the premises showing you have authority to use the space and serve alcohol therein.
6. The fees are: \$150.00/day for an All-Alcoholic Beverages License, \$75.00/day for a Malt and Wine Beverages License.
7. All persons issued a Special License must purchase the alcohol from a wholesaler licensed pursuant to G. L. c. 138, §§ 18, 19, 19B, or 19C, or from a holder of a special permit to sell issued under G. L. c. 138, § 22A. A list of approved sellers can be found at <http://www.mass.gov/abcc/pdf/authorizedsources1-day.pdf>. You cannot obtain the alcohol from a package store and cannot have the alcohol donated to you unless you were granted a Charity Wine/Auction license.
8. If the license is granted, you must, prior to the event date, pick up the license, pay for it, and on the date of the event, post it conspicuously at the event location. You are subject to and must follow the Laws & Rules as any other licensee under G. L. c. 138. You may be subject to discipline or the denial of any future applications if you fail to comply with the Laws/Rules.

ADDITIONAL REQUIREMENTS FOR CHARITY WINE AUCTION OR WINE TASTING:

1. Application and all documents must be submitted **4 weeks** before the event as ABCC approval is necessary.
2. Must provide the following additional documents:
 - (a) Articles of Incorporation (must be registered as a Massachusetts Corporation);
 - (b) Certificate of Exemption;
 - (c) Certificate of Good Standing;
 - (d) Certificate of Solicitation;
 - (e) Floor Plan;
 - (f) Cover letter from place where event will occur disclosing the type of event, date and time of event, number of people attending, and security plan; and
 - (g) Completed ABCC application, which can be found at <http://www.mass.gov/abcc/pdf/forms/Charity%20Wine%20License%20Application%206-07-10.pdf>.



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APPLICATION FOR SPECIAL ONE DAY ALCOHOLIC BEVERAGE LICENSE

(Revised 9/2014)

APPLICANT/HOST'S INFORMATION:

Host's Name: _____

Type of Host (Individual/Non-Profit Corp./For-Profit Corp.): _____

Host's Address: _____

DETAILS OF EVENT:

Type of Event (i.e. banquet/concert/fundraiser/party): _____

Where will it be held: _____

Who owns the premises: _____ Phone # of premises: _____

Date(s) of Event: _____

Hours of Event: _____

Expected # of People: _____ Admission Charge: _____

Type of Alcohol to be Served (check one): Beer & Wine _____ Wine _____ Beer _____ All Alcohol _____

Alcohol will be (check one): Sold _____ Given away _____

Security Arrangements: _____

I hereby certify under the pains and penalties of perjury that the above is true and accurate information, and that I will be responsible for the proper observance of the laws governing the dispensing of such alcoholic beverages.

Signature: _____ Dated: _____

Name: _____ Social Security #: _____

Home Address: _____ Telephone #: _____

Business Address: _____ Telephone #: _____

Title as it Relates to Host: _____ Tax ID #: _____

For Official Use Only

POLICE ACKNOWLEDGEMENT:

Signature: _____ Dated: _____

Name: _____ Position: _____

Security Requests/Concerns: _____

District Area/Location: _____

BOARD'S ACTION:

GRANTED: _____

REJECTED: _____

Restrictions/Conditions/Remarks: _____
