

City of Kuna | 751 W 4th Street | PO Box 13 | Kuna, ID 83634 | Phone (208) 922-5546 www.KunaCity.ID.gov | CityClerk@KunaID.gov

Alcohol Beverage Catering Permit Application

Liquor Licensee:	Contact Phone #:(Corporation, partnership or individual listed on the state license)					
	(Corporation, p	artnership or indivi	lual listed on the	e state license)		
Licensee Address:		(City, State, Z				
		(City, State, Zi	ip Code)			
State of Idaho Current	Liquor by the Drin	nk License #: _				
Date of Permit Use:		,		Hours:	to	
	Month	Day	Year	Begin		End
Located At:						
(I	ocation Address, Room or S	Suite(s)		Name o	of Party or Conv	ention
Sponsored By:	Name of Organization Con-	D (-)	Nun	nber of attendees e	xpected: _	
(Name of Organization, Gro	up or Person(s)				
The sponsored ofday.	event will be open t days, not to exceed		0			_
			Si	gnature of Liquor	Licensee	
			·	•		
Unless licensee is disqu Idaho Liquor Catering I 23-1.C.						
Kuna City Police Depa	rtment: approved _	deni	ed	Date	,	
Special Terms or Cond	litions:		Signatu	re of Kuna City Po	olice Depar	tment
Fee: Receip	t#	se	al			_
			S	ignature of Kuna	City Clerk	

KCC: 3-2-6, The applicant or the applicant's designee is required to carry, display, or post the original catering permit issued and one or both must be personally present at the approved catering premises at all times during the life of the catering permit. The applicant's designee, if there is one, must be specified on the application and shall also be approved in the same manner as described herein for the applicant.