



TOWN OF SENECA FALLS

130 OVID STREET
SENECA FALLS, NY 13148

315-568-8013
www.senecafalls.com

SPECIAL EVENTS PERMIT APPLICATION

NYS LIQUOR AUTHORITY Landlord Authorization Form

| | | | |
|----------------------|----------|-------|---------------------|
| DATE(S) OF EVENT | / | / | DATE OF APPLICATION |
| NAME OF APPLICANT | | | |
| VENUE NAME | | | |
| VENUE STREET ADDRESS | | | |
| Seneca Falls | New York | 13148 | |
| TOWN | STATE | ZIP | |

By my signature, I acknowledge that I am the landlord/owner of the applied for premises, or that I am a duly authorized representative of the landlord/owner, to sign this landlord authorization form. I hereby grant permission for the sale or services of alcoholic beverages by the applicant for consumption on said property.

PRINT NAME OF LANDLORD/OWNER

PRINT NAME & TITLE OF AUTHORIZED PERSON (if different than above)

| | |
|-----------|------|
| SIGNATURE | DATE |
|-----------|------|