

9031 Quartz Road  
Whitehorse, Yukon Y1A 4P9  
Fax: 867-393-6306  
www.ylc.yk.ca

1. Name of Individual, Organization, or Business: \_\_\_\_\_

2. Name of Applicant: \_\_\_\_\_ Office Held: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ (Home) \_\_\_\_\_ (Business)

3. If not an officer, do you have written permission to act on behalf of the Organization?

No  Yes  (Please attach copy of authorization)

4. Name of person **in charge** and **present** at the function: \_\_\_\_\_

5. Describe the type of function: \_\_\_\_\_

6. Alcoholic beverages may be consumed on the premises known as:

Name of Premises: \_\_\_\_\_

Address: \_\_\_\_\_  
(name and/or location of room or area to be specified)

In the: \_\_\_\_\_

on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, between the hours of \_\_\_\_\_ am/pm and \_\_\_\_\_ am/pm.

on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, between the hours of \_\_\_\_\_ am/pm and \_\_\_\_\_ am/pm.

on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, between the hours of \_\_\_\_\_ am/pm and \_\_\_\_\_ am/pm.

on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, between the hours of \_\_\_\_\_ am/pm and \_\_\_\_\_ am/pm.

on the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, between the hours of \_\_\_\_\_ am/pm and \_\_\_\_\_ am/pm.

7. The **conditions** of this permit are (to be determined by the Liquor Inspector in discussions with the applicant):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

8. The **maximum** number of persons to be allowed at this function at any one time: \_\_\_\_\_

9. Have you the permission of the property owner to serve alcohol on the premises?

No  Yes  (Please attach copy of appropriate contract or authorization)

10. The following food will be available at this function:

Full meal  Buffet  Hors d'oeuvres  Other (specify) \_\_\_\_\_

11. No advertising may be published or broadcast without first having been approved by Yukon Liquor Corporation.

12. No homemade or brew-your-own alcoholic beverages are to be served at this function, unless made for a family event by a family member of the applicant. (Provide details)

13. The applicant must attach a copy of the T15 (invoice/receipt) to the permit for all liquor purchases.

**LIQUOR PURCHASES MAY BE PAID BY CASH, CERTIFIED CHEQUE, CREDIT CARD OR DEBIT CARD.**

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Issuer)

This information is being collected under the authority of the *Liquor Act*, for the purpose of liquor licensing and administration. For further information, contact the Director, Licensing & Social Responsibility at 867-667-5245.