### **TEMPORARY EVENT APPROVAL**



Form L-TEA (10/2021)

# Please Read All Instructions Prior to Completing the Application

Failure to submit your approval form at least 10 BUSINESS DAYS PRIOR to the event will result in late fees as follows:

- > \$300 for forms received 7 to 9 business days prior to the event
- > \$500 for forms received 4 to 6 business days prior to the event
- \$900 for forms received 1 to 3 business day(s) prior to the event

Email the Temporary Event Approval to your local TABC office using the email address below that corresponds to your TABC region. **Important:** If submitting via email you must include "Temporary Event Approval" and the type of event in the subject line of the email. Example: "Temporary Event Approval – Festival."

#### **Regional Office Email Addresses:**

Region 1	EventsLubbockRegion@tabc.texas.gov
Region 2	EventsArlingtonRegion@tabc.texas.gov
Region 3	EventsHoustonRegion@tabc.texas.gov
Region 4	EventsAustinRegion@tabc.texas.gov
Region 5	EventsSanAntonioRegion@tabc.texas.gov

Submission of the Temporary Event Approval and any late filing fees does not guarantee approval.

#### Authorities and Responsibilities

- Submit the following documentation, if applicable:
  - letter of permission from the location's owner authorizing the possession/sale/service of alcoholic beverages on their property (must include property owner contact information, date/time and address of event)
  - o approvals from local officials;
  - sponsorship agreements;
  - o diagram; and
  - o additional documentation may be required to determine qualification.
- A Temporary Event Approval is effective for no more than four consecutive days for each temporary event. No more than ten
  temporary events in a calendar year may be held at the same location by the same licensee/permittee, including both File
  and Use Notifications and Temporary Event Authorizations.
- License/permit holders must maintain exclusive control of all phases of the possession, sale, and service of alcohol at the event
  location. This includes but is not limited to available brands, pricing, inventory purchase, sales, records, transportation, storage,
  hours of operation and employees or volunteers.
- Event hours must adhere to hours of operation authorized by local authorities.
- A copy of the Temporary Event Approval form filed with TABC must be displayed in a conspicuous place at all times during the event.
- After the conclusion of the temporary event, remaining inventory of alcoholic beverages may be returned to the primary licensed location.
   Certain exemptions may apply.
- The Temporary Event Approval must cover the time of receipt of the alcohol as well as its storage.
- It is the responsibility of the license/permit holder to verify and adhere to all state and local laws, ordinances, and regulations, and to obtain all
  necessary local approvals or authorizations. Contact the local office of the Comptroller of Public Accounts for information concerning any
  responsibility to submit state taxes.
- The holder of a Temporary Event Approval may only serve or sell alcoholic beverages for consumption at the location for which this approval
  was granted unless otherwise authorized by statute.
- The signage requirements for a Temporary Event Approval are the same as those for a primary license/permit and may include signs
  required by §§ 5.53, 11.041, 11.042, 61.11, and 61.111 of the Alcoholic Beverage Code and § 31.4 of TABC's Administrative Rules.

For further information contact your local TABC office

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TABC's statutory authority to authorize this event begins Sept. 1, 2021; therefore, this authorization becomes effective on Sept. 1, 2021, even if received prior to that date. This authorization may only be used for an event held on the dates listed on this form.

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PRIMARY LICENSE/PERMIT INFORMATION							
1.	TABC License/Permit No.:	2. Trade Name:					
3.	License/Permit Type:						
	$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	NB) 🗌 Wine/ Malt Bev	verage (BG) 🔲 Ma	lt Beverage  ☐ Winery (G)			
TEMPORARY EVENT INFORMATION							
4.	Event Address Street Number: Street Name	):					
	City: C	County:		Zip Code:			
	Oity.	ounty.		2.p 00d0.			
5.	Event Date(s) & Time(s) Requested (Dates and ti	mes should include del	ivery and/or storage	e of alcohol):			
	Start Date: Time:AM	<del>_</del>		AM 🗌 PM 🗌			
6.	Description of Event Location: (Ex: Festival, North	Side of Park, etc. <b>Note</b>	: Submit site map.)				
7.	Type of Event (festival, picnic):						
	Type of Event (lectival, plenie).						
8.	Does this event involve a promoter or an organizer	r?		☐ Yes ☐ No			
	If "YES," Name of Promoter or Organizer:						
9.	Does this event involve sponsorship from an upper (Brewer, Distillery, Winery, Distributor, and/or Who		lder?	☐ Yes ☐ No			
	If "YES," enter License/Permit number and Trade N	,					
10	10. Other than the permission to sell alcohol on this property (question 12), do you						
	have any other contracts and/or agreements (either verbal or in writing) associated  With this event such as appropriate and/or third party agreements?  Yes \sum No						
	with this event, such as sponsorship and/or third-party agreements?  If "YES," attach copy, as applicable.						
	Do you own or lease the location you are using for By checking "Yes" you confirm you have obtained			☐ Yes ☐ No			
12	☐ Yes						
13	municipality and county that may be required for your By checking "Yes," you have obtained permission		owner of premise.	☐ Yes			
Attach Copy.							
14. By checking "Yes," you confirm the event location address is wet for the sale of alcoholic							
	beverages for which you are requesting approval.			☐ Yes			
This must be confirmed with the County Clerk.							
IF THIS EVENT IS AT A LOCATION WITH A PENDING ORIGINAL APPLICATION THAT IS REQUIRED TO POST A  60-DAY SIGN, STOP. CONTACT YOUR LOCAL TABC OFFICE.							
00-DAT SIGN, STOP. CONTACT TOOK LOCAL TABE OFFICE.							
CONTACT INFORMATION  By signing below, you affirm, and represent to TABC, that the above information is true and correct, and that you have the legal authority to request the privilege identified in this application on behalf of the named license/permit holder.							
Prin	t Name	Signature					
Title		Phone No.:					
Email Address			Click to add date				