## ALCOHOLIC BEVERAGE CLEARANCE REQUEST FORM

California State University, Long Beach

Under an Operating Agreement with the California State University Trustees, Forty Niner Shops, Inc. (hereinafter Shops) is responsible to the University and the California Department of Alcoholic Beverage Control for the proper storage, sale, service and distribution of all alcoholic beverages on the campus, regardless of how the alcohol is procured. Alcohol may not be stored by anyone in campus buildings, offices, or classrooms. Shops, or their authorized agents, must supervise the service or sale of alcohol at all events on University property; supervision is provided for a fee. Shops Dining Services acknowledges review and approval by signature below.

Requestor (name of department or individual).

3.

4. 5. 6.

requestor (name or departi	, –					
Day & Date of Event: Location:		Type of Function:				
Event Hours:	Serving Hours: _		Approval	Requested for: _	_BeerWine	Distilled
Estimated Attendance by N	umber: Students	Faculty	Staff	Guests	-	
EMS# for EvenTd ()Tj /P We shall provide adequate of shall abide by all California alcoholic beverages. A prohomay be exchanged for drink an individual. For any event at which alcowe understand that non-alcomber danger or potential	controls to ensure that Laws and CSULB Urnibited sale would income or other methods who is served, the serupholic beverages much the serupholic beverages much be serupholic beverages and be serupholic beverages and better the serupholic beverages and better the serupholic better the serupholic beverages and better the serupholic beverages and better the serupholic better the serupholic beverages and better the serupholic better the seruphol	at all persons some an inversity regular clude forms of of charging where the period is to be available at the available at t	served beer of ations regarding indirect sales nich are determed shall not ear for the dura	r wine are at least ng the serving, sa s, such as selling rmined by the nur exceed 4 hours.	t 21 years of ag ale, or consump tickets or chits mber of drinks	ge. We otion of , which
Where danger or potential	_			nion of alcohol sel	ivice.	
Phone (s) Home: ( )	or Ce	II: ( )		Work: (	)	
THE FOLL	OWING SIGNATURI	ES ARE REQI	JIRED, IN TH	IIS ORDER, FOR	APPROVAL	
University Approval						
Printed Name		Signatu	ıre		Date	<b>!</b>
University Police Approv	<sup>'</sup> al					
Printed Name		Signatu	ire		Date	!
Forty Niner Shops Appro	val					
Printed Name		Signatu	ıre		Date	<b>;</b>

(REVISED 05/07/2018, Forty Niner Shops, Dining Services)

## **FORM INSTRUCTIONS**