

## ALCOHOLIC BEVERAGE SPECIAL EVENT PERMIT APPLICATION

City of New Port Richey
Development Department
City Hall, 5919 Main Street, 1st Floor
New Port Richey, FL 34652
Phone (727) 853-1039
Fax (727) 853-1052

CASE#	
SET Date:	
Council Date:	
Date Received:	

Phone (727) 853-1039 Fax (727) 853-1052
* Please print legibly or use fillable form *
Submit original signed and notarized application Submit \$250 application fee Submit at least 45 days prior to the proposed special event Submit with separate Special Event application (Case #)
ABSEP GENERAL INFORMATION:
Name of Event: Fitzgerolds St. Patrick's Celebration
Date(s) of Event: 3-15 Thru 3-17 2019 (Limited to three days for alcohol sales)
Location of Event: FItzgeralds Irish Tavern
Applicant: Daniel + Sherry Kuntz
Mailing Address: 5811 Nebraska Ave., New Port Richey, FL 34652
(Street, City, State, Zip Code)
Daytime Phone Number: 727-946-0205/721946-1122 Fax Number:
Email or Alternate Contact Information: Fit zgeralds taverna yahoo com
Authorized Person in Charge: Damel Kuntz / Sherry Kuntz
If an organization, names, addresses, phone numbers of all Officers: (may attach as addendum_
Daniel Kuntz - Pres 727-946-0205 >7032 Grand Blud Sherry Kuntk - VP-SEC 727-946-1122 Hew Port Richey FL 34652
Who is the PRIMARY contact for this application? Sherry Kuntz -
ABSEP SUBMITTAL REQUIREMENTS:
heart was
List Alcohol to be Sold: Deer + Winc
(Limited to beer and wine)  List Alcohol to be Given Away:
Time of Alcohol Sales: 3-15 5pm-11pm 3-16 5pm-11pm 3/17 12pm-11pm Ask for
(Limited to Monday through Saturday, 12:00 noon to 11:00 p.m. and Sunday, 1:00 p.m. to 9:00 p.m.; events limited to three days in duration)
List ABSEP applications approved for your organization this calendar year:
(Limited to three permits per year, per applicant; eight per year total City-wide)
Attach approved alcoholic beverage license from Florida Department of Business and Professional Regulation, Division of Alcoholic Beverages and Tobacco (1313 N. Tampa Road, Suite 909, Tampa, 33602; 813-272-2610.)
Attach general liability and other insurance as required by the provisions of Florida Statutes for the sale or consumption of alcoholic beverages.
□ Attach IRS Tax Exemption Form 501(c)(3) or (6), if nonprofit organization.

AUTHORIZATION FOR OWNER'S REPRESENTATIVE(S):	
Daniel Kuntz	the applicant, hereby
authorize Krijiu McYers to act as my	representative(s) in all matters pertaining to the
authorize Krify Myers to act as my processing and approval of this application, including modifying	ing the project. I agree to be bound by all
representations and agreements made by the designated represer	ntative.
Signature of Applicant(s):	
, , ,	
20 10	
Date:/ - 29 - 19	
Subscribed and sworn to before me this	day of <u>Jahka/y</u> , 20 19
Subscribed and sworn to before me this	as identification.
STATE OF FLORIDA, COUNTY OF PASCO	WHITE PARTIE
	MINIO CESSION ON THE
Notary Public	CHUNRY OF THE STATE OF THE STAT
	** ***
My Commission Expires: 1-26-23	#GG 202003
Wy Commission Express.	onded fire the
APPLICANT'S AFFIDAVIT:	MANUEL STATE OF MINISTER
Daniel Kuntt applica	or authorized representative. have read
and understand the contents of this application. The information	contained in this application, attached exhibits and
other information submitted is complete and in all aspects true and	i correct, to the best of my knowledge.
Signature of Applicant:	
Date:/-29/9	
)	1
Subscribed and sworn to before me this	day of <u>January</u> , 20 / 7
who is personally known to me and/or produced	as toermication.
STATE OF FLORIDA, COUNTY OF PASCO	WILLIAM SEBBIE PATTONIA
Notary Public	comission etc.
1	S. S. Partie B. B. S.
/	#GG 242803
My Commission Expires: /-26-23	To a some me we to
	GG 202803  **GG 202803  **GG 202803  **January 20 30 30 30 30 30 30 30 30 30 30 30 30 30
	*GG 202803

	Date completed application received 1 29 19 Application fee paid
	Cash
	$\frac{250 - \text{Check # 21122}}{250 - \text{Check # 21122}}$
0 0 6	Approval from Business and Professional Regulation need zoning first General liability or other insurance attached No more than three approvals for this applicant verified SET meeting date



## Railroad Square Usage Request

City of New Port Richey Parks and Recreation Department 6630 Van Buren Street New Port Richey, FL 34652

Phone: (727) 841-4560 Fax: (727) 841-4562

Please submit all requests at least 30 days prior to the event.

Name of Event: Fitzgeralds St. Patrick's Day Celebrati	200			
Name of Event: TITZGETAIMS ST. PAINTELS DOS (CIEDTATION)				
Date(s) and Time(s) of Event: 3 15 Thru 3-17 2019	~			
Location of Event: Fitzgerolds Trish Tavern	·			
Applicant: Daniel + Sherry Kuntz	The second secon			
Address (Street, City, State, Zip Code): 5811 Nebras La Ave				
New Port Richey, FL 34652				
Daytime Phone Number: 727-946-0205 727-946-1122				
Email: Fitzgeraldstaverneyahoo, com				
Authorized Person in Charge: Danie Kontz/ Sharry Kuntz				
Estimated number of spectators:				
Will there be food?	No			
Will there be tents over 10' x 10'?	No			
Will alcohol beverages be sold/served/consumed?  Yes	No			
Will there be port-o-lets?	No			
Will public electric outlets be used?	No 🔽			
Will there be amplified music?	No			
Additional Description of Event:				
3/15/19 - Irish Wake-event starts 5:30-10:30				
3/16/19 - Nothing planned normal business.				
3/17/19 - St Pats - Starts 11:00am - ?				

Parkey Aren

Ferice & Pren Dright Morket St. Puts Fencel Aven Outside Bar Walk Back Room Fitz Bitio Open Rir Ables ٨ Rumman as Small moon לו מפוג Ŋ 130148 SMUPE/