



DEPARTMENT OF NATURAL AND CULTURAL RESOURCES  
**NORTH CAROLINA DIVISION OF PARKS AND RECREATION**  
**Special Activity Permit Alcohol Supplement Application**

The purpose of the Alcohol Supplement Application is to gather details from event sponsors requesting to serve alcohol at a North Carolina State Park. The application fee is \$200. The Alcohol Supplement application, the Special Activity Permit request, and fees associated with the permits shall be submitted at least 14 days in advance of the scheduled event. Alcohol supplements include special conditions that must be met by the applicant in order for the permit to be approved and valid. These include:

1. Obtain an Alcoholic Beverage Control (ABC)-issued permit;
2. Obtain a certificate of liability insurance for the event;
3. Submit payment for any park staff service and fees for the event.

Park/Recreation Area Name: \_\_\_\_\_

Name of Group/Applicant: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Name of event/activity: \_\_\_\_\_ Location of event/activity : \_\_\_\_\_

Date of event: \_\_\_\_\_ Start and end times of event: \_\_\_\_\_ Total Expected Attendance: \_\_\_\_\_

What type of alcohol will be served? Check all that apply. Include inventory amounts for each.

- |                                     |   |                               |                                 |
|-------------------------------------|---|-------------------------------|---------------------------------|
| <input type="checkbox"/> Draft Beer | <input type="checkbox"/> Can/Bottled Beer | <input type="checkbox"/> Wine | <input type="checkbox"/> Liquor |
| > Inventory: _____                  | > Inventory: _____                        | > Inventory: _____            | > Inventory: _____              |

Location(s) alcohol will be served and consumed: \_\_\_\_\_

Time alcohol will be served and consumed: Start time: \_\_\_\_\_ End Time: \_\_\_\_\_

Applicant fully acknowledges, understands and appreciates the risks and dangers associated with the service, use and consumption of alcohol by themselves, their agents, and/or attendees at the event noted above, including, but not limited to, any and all risks of injury (including death) or property damage or loss therefrom. Furthermore, Applicant fully agrees to be responsible for any injury (including death), loss or damage, to any person, property or otherwise, of any kind, whether present or future, known or unknown, arising from or as a result of the service, use and consumption of alcohol by themselves, their agents, and/or attendees at the event noted above.

Applicant hereby acknowledge their full and complete understanding of the General Conditions required by the North Carolina Division of Parks and Recreation, and any and all special conditions with which this event must comply, and agrees to comply with all such conditions.

Signature of responsible party/official: \_\_\_\_\_

Title of responsible party/official: \_\_\_\_\_

FOR OFFICE USE ONLY	
Supplement number: _____	Date of issue: _____
Special provision, conditions of issuance: _____	
_____	
_____	
<input type="checkbox"/> See attached sheet	<b>Fees:</b> Supplement: \$ _____ Additional charges: \$ _____ Total: \$ _____
Signature of approving official	

## SPECIAL CONDITIONS

1. All fees must be paid prior to the scheduled event date. Approval to serve alcohol is contingent upon providing all required supporting documentation listed as attachments on this form.

### ATTACHMENTS

- ABC Permit                       Certificate of Liability Insurance                       Security Staffing/Park Overtime fees if applicable  
 Check (*Make check payable to N.C. State Parks*)                       Map of Event                       Other \_\_\_\_\_

2. Applicant is responsible for ensuring that all required alcoholic beverage permits have been obtained and for ensuring compliance with all applicable statutes, rules, permits, and policies related to alcohol or the North Carolina Alcohol Beverage Commission.
3. Alcohol must be kept in approved designated area(s) only. ABC permit rules and regulations must be followed at all times. ABC permit must be openly and conspicuously displayed where alcohol is served.
4. Temporary fencing may be required for outdoor areas where alcohol distribution and consumption occur. Applicant shall provide the required fencing at their own expense. Temporary fencing must be approved by the Division prior to use.
5. Applicant must provide adequate security and staffing for the event, as approved by the Division. Applicant shall provide personnel to ensure that NO alcohol will be served by or to, or possessed or consumed by, anyone under the legal drinking age of 21 years. Self-service of alcoholic beverages is prohibited. Open containers of alcoholic beverages may not leave the facilities or designated space.
6. Based on the size and nature of the event, additional park staff presence may be necessary to support the event, at the Division's sole discretion. The applicant shall be responsible for all additional staffing and overtime costs associated with the event.
7. The applicant agrees to procure and maintain the following insurance coverages and limits at their own sole cost and expense:
  - a. General Liability insurance with minimum amount of \$1,000,000.00 per single occurrence and \$3,000,000.00 aggregate. Defense costs shall be in excess of the limit of liability.
  - b. Host Liquor Liability insurance:
    - i. Events hosted by a private individual or non-profit that are single-day or less, fewer than 200 people, and not a wedding: minimum amount of \$1,000,000.00; or
    - ii. Corporate events, weddings, events with 200+ people, or multi-day events: minimum amount of \$5,000,000.00.

All such insurance shall meet all laws of the State of North Carolina. Such insurance coverage shall be obtained from companies that are authorized to do business in North Carolina. The applicant shall at all times comply with the terms of such insurance policies, and all requirements of the insurer under such insurance policies.

The applicant shall provide documentation of adequate insurance coverage with a certificate of insurance **listing the NC Division of Parks and Recreation as Additional Insured.**

**The name and address on the certificate shall read:**

NC Division of Parks and Recreation  
121 West Jones Street  
1615 Mail Service Center  
Raleigh, NC 27699-1615

8. All N.C. Division of Parks and Recreation rules and Special Activity Permit considerations apply.