



CITY OF WHITEFISH CATERING PERMIT

NAME OF SPONSORING BUSINESS ORGANIZATION: _____

LOCATION OF EVENT: _____

DATE & TIME OF EVENT: _____

CONTACT PERSON: _____

PHONE: DAY TIME: _____ EVENING : _____

NAME OF LICENSEE: _____

Reference to Section 16-4-111 MCA "Catering Endorsement"

BUSINESS ADDRESS OF LICENSEE: _____

NAME OF CATERER: _____

CATERING ENDORSEMENT NUMBER: _____

Describe the provisions you have made to provide your own security.

I hereby certify that the above information is accurate to the best of my knowledge.

Signature of Applicant

Date

Fee: \$35.00 Check _____ Cash _____

City Manager: _____ Approve _____ Reject _____

Police Chief: _____ Approve _____ Reject _____