

# GRAND RAPIDS POLICE DEPARTMENT VICE OFFICE

1 Monroe Center Street NW  
Grand Rapids MI 49503  
Phone: (616) 456-4800 Fax: (616) 456-4839

## *Application for a 24 Hour Liquor License*

Name of Organization	
Address of Organization	
Address of the Event	
Date(s) of Event	Hours of Event From: _____ To: _____
Who will be in charge during the house of the permit?	
Name	
Address	
Home/Cell Phone	Business Phone
What control will be used to prevent persons from removing any alcoholic drinks from the licensed premises?	

If the permit is for sale out-of-doors, a drawing of the area and a description of how persons will be contained in the area while drinking must be submitted.

I, \_\_\_\_\_, understand that any violation of the rules and regulations governing the sale of alcoholic beverages for consumption of the premises or the provisions of the Liquor Control Act will result in a violation report being sent to the Michigan Liquor Control Commission and may result in a stop being placed against the organization for any future permits. Any violations of the City of Grand Rapids Liquor Ordinances may result in the arrest of any persons violating said ordinances.

Today's Date	Signature of Authorized Representative
--------------	--