



1. ORGANIZATION INFORMATION (if applicable):

Organization Name: _____
Address: _____
City/Town: _____ Province: _____ Postal Code: _____
Phone number: _____ Fax #: _____
Organization Email: _____

2. APPLICANT INFORMATION:

Name: _____
Position with organization (if applicable): _____
Address: _____
City/Town: _____ Province: _____ Postal Code: _____
Phone number: _____ Fax #: _____
Email address: _____
Name of person who will be present & responsible at the event: _____

3. LICENSE TYPE and PAYMENT:

- Class 1 \$12.45 per Day
 - Private event for invited guests
 - Liquor is provided free of charge.
 - Event cannot be advertised or open to the public.
 - There is no admission fee or cover charge.

- Class 2 \$24.95 per Day
 - Private event for invited guests.
 - Liquor is being sold.
 - Event cannot be advertised or open to the public.

- Class 3 \$62.30 per Day
 - Only issued to recognized community or charitable organizations for community fundraising purposes.
 - Public event open to anyone who wishes to attend.
 - Liquor is being sold.
 - Admission fee or cover charge may be in effect.
 - Event can be advertised.

Total number of days that the Special Occasion Liquor License is required for this event: _____

Total license fees payable (Total Number of Days x License Class Fee per Day): _____ \$0.00

AGFT will contact you to obtain payment information during processing of this application.

If you are applying by mail, please make Cheques & Money Orders payable to: NS Alcohol, Gaming, Fuel & Tobacco.

4. LIQUOR INFORMATION:

Yes I understand that liquor must be purchased from the Nova Scotia Liquor Corporation, an Agency Store, Winery or Micro-Brewery under authority of the liquor license. Homemade alcoholic beverages or donated liquor is not permitted.

5. EVENT DETAILS:

Event description: _____

Date(s): _____ Start Time: _____ End Time: _____

Estimated Attendance for the licensed area: _____

For a Class 3 application please provide: Number of Security staff: Paid _____ Volunteers: _____

Entertainment? Yes No Admission Yes No Amount \$: _____

6. EVENT LOCATION:

Premises name: _____

Premises address: _____

Area(s), room(s) to be licensed: _____

Note: If the premises holds a Permanent Club/Special Premises license the manager must acknowledge in writing that their Liquor License will be suspended during your event. Managers Name Print: _____ Sign: _____

7. OUTDOOR LIQUOR LICENSED AREA(S) ONLY:

Outdoor liquor licensed area(s)? Yes No **(if "No" move to section 8)**

If yes, will you be using: Tent Canopy Fenced area (4 ft high Minimum)

Other enclosure (e.g., patio, gazebo, etc.)

Note: Additional documents must accompany this application, including:

- 1. A site plan of the area(s) to be licensed including a) dimensions, b) area enclosures, and c) washroom locations.**
- 2. Fire Official Approval with Occupancy: Halifax Regional Municipality Fire (311) or email: fireprevention@halifax.ca, Cape Breton Regional Municipality Fire (902-563-5132) or email: fireprevention@cbrm.ns.ca. For locations outside of HRM & CBRM contact your local municipality to request Fire Official Approval with Occupancy.**
- 3. Security details must include name of hired security company, number of security staff, copy of signed agreement with the security company and number of volunteers.**
- 4. If your outdoor event is in the Halifax Regional Municipality, please email a copy of your completed application to Halifax Regional Police: hrpspecialevents@halifax.ca to obtain a letter confirming Halifax Regional Police are aware of your event.**

8. READ AND SIGN THE DECLARATION:

I, _____ solemnly declare that:
(print name)

1. I am at least 19 years of age, and the information contained in the foregoing is, to the best of my knowledge, true and accurate.
2. I hereby assume full responsibility for any prior costs or obligations incurred in the planning of this proposed licensed event and acknowledge that this is an application for licensing privileges only and does not in any way guarantee the granting of the Special Occasion Liquor License.
3. Permission to hold the event on the premises referred to above has been duly obtained from the appropriate authority. I understand that written authorization may be requested.
4. I hereby assume full responsibility to ensure that the fire safety measures and occupant load as determined by the Fire Marshal's office are adhered to.
5. I hereby assume full responsibility to ensure that the event referred to above is operated within the parameters of the Liquor Control Act and Liquor Licensing Regulations.
6. I hereby agree that Alcohol, Gaming, Fuel & Tobacco Division staff have the authority to enter and inspect the premises at any time during the event.
7. I hereby acknowledge that the Special Occasion Liquor License is subject to terms and conditions that I must adhere to.

Signature

Date

9. PRINT THIS FORM AND ANY SUPPORTING DOCUMENTS. MAIL, EMAIL OR IN PERSON

Alcohol, Gaming, Fuel & Tobacco
Service Nova Scotia
780 Windmill Road, 2nd Floor, PO Box 545 **OR**
Dartmouth NS B2Y 3Y8

Service Nova Scotia
1030 Upper Prince Street, Suite #1
Sydney NS B1P 5P6

10. QUESTIONS OR CONCERNS?

Phone: 1-877-565-0556 - toll-free within Nova Scotia
902-424-6160 - Halifax Regional Municipality
902-563-3495 - Cape Breton Regional Municipality

E-mail: AGDLicense@novascotia.ca

Website: <https://novascotia.ca/sns/access/alcohol-gaming.asp>

ALLOW AT LEAST 10 BUSINESS DAYS FOR PROCESSING

When you submit your Application to Alcohol, Gaming, Fuel and Tobacco Division we collect personal information as authorized by the Freedom of Information and Protection of Privacy (FOIPOP) Act.

We will use the personal information to uniquely identify your application, verify your eligibility, communicate with you, and issue your license. Your personal information will only be used or disclosed for another purpose if we are authorized by law to do so or if we obtain your express consent.

To read more about how the Province of Nova Scotia respects your privacy when interacting with us review our [full privacy statement](#). For questions about how your personal information is handed in relation to this service you may contact: privacy@novascotia.ca.

Nova Scotia's Business Navigator Service
Contact a Business Navigator for help with:

- Determining what licenses or permits are required to operate.
- Understanding inspection requirements.
- Finding resources to assist with financing, taxes and staffing.



Scan the QR code above or contact them directly at:
novascotia.ca/businessnavigators [BizNav@novascotia.ca](mailto: BizNav@novascotia.ca)
Toll Free: 1-833-734-1300