APPLICATION FOR TEMPORARY EMP Complete this form and mail it WITHOUT ANY MONEY by August 30, 2021 to: RECTIONS ONLY -**INDY IRISH FEST SE FORM BELOW** ATTN: VOLUNTEER MANAGER P.O. BOX 44197 FOR SUBMITTING INDIANAPOLIS, IN 46244 vment to the lresses at th Permits will be processed in the order in which they are received and This permit may be issued for use at the location covered by and during the slots will be verified at that time. Late arrivals cannot be validated by lame of applicant (first, middle initial, last) ddress (number and street, city, state, and ZIP code) ISING THE FORM BELOW ех Date of birth (month, day, year) Age ☐ Female Male Temporary permit number Date(s) of Temporary Permit (month, day, year) SEPTEMBER 24 & 25, 2021 89684 Location where Temporary Permit is to be used GARFIELD PARK - 2505 CONSERVATORY DRIVE, INDIANAPOLIS, IN 46203 STEP 2. BACKGROUND QUESTIONS - READ CAREFULLY PRIOR TO ANSWERING. nave you ever been convicted or operating while intoxicated in indiana or or a similar charge in any other state; es ☐ No If yes, please list the month, day, year, and location of your conviction(s): Are you currently serving a sentence, including any term of probation for operating while intoxicated in Indiana or a similar crim ☐ No es another state? Have ou had an applitation to apulo five (5) years? If yes, explain: ove ne oyees primit ten ed T es □ No Have you ever had a driver's license in any other state? If so, you must attach a copy of your driving record from that state. es Do you know that it is a Class B Misdemeanor, punishable by up to six (6) months in jail and a \$1,000 fine, for knowingly serving an □ No es intoxicated person? Bo your know that is a chast of Mistam can are purish at easy 11 to six (6 in or the in juit and a \$1,000 fire, for reskless y knowin or intentionally selling or turnishing alcoholic beverages to a minor? ly, es Do you know that an excise officer may enter, inspect, and search a permit premises in which you work without a warrant and □ No es must produce proof of your temporary employee permit on demand? Do you know that the alcoholic beverage laws are part of the criminal code and are enforceable by every law enforcement offic ☐ No es STEP 3. FEE AND PAYMENT SCHEDULE (Fee \$5.00 per IC 7.1-3-18-11(d)) Temporary Employee Permit You may work on your receipt at the Temporary event noted on this application. Payment by mail may be made by money order, business check, cashier's check, or certified check. Cash accepted only if hand delivered to ATC office. STEP 4. SIGNATURE AND AFFIRMATION certify that this application was completed by myself. I affirm under penalties of perjury that I am at least twenty-one (21) years of age and that all information to vide on this prints trae and correct application in also rial zero may have the sa fony u de noia row o ni rapresantor (a siy Signature of applicant Printed name of applicant Date signed (month, day, year) Indiana State Excise Police (ISEP) district addresses (Please visit https://in.gov/atc/isep/contact-us/ to determine your ISEP district.) District 1 District 3 **District 5** 52422 County Road 17 41 W 300 N 3650 South US 41 Bristol, IN 46507 Crawfordsville, IN 47933 Vincennes, IN 47591 Telephone: (574) 264-9480 Telephone: (812) 882-1292 Telephone: (765) 362-8815 Fax: (574) 264-9348 Fax: (765) 362-8817 Fax: (812) 882-1386 District 2 **District 4 District 6** 1353 South Governors Drive 651 South Commerce Drive 6400 East 30th Street Columbia City, IN 46725 Seymour, IN 47274 Indianapolis, IN 46219 Telephone: (260) 244-4285 Telephone: (812) 523-8314 Telephone: (317) 541-4100

Fax: (812) 522-5681

Fax: (317) 541-4104

Fax: (260) 244-3830

APPLICATION FOR TEMPORARY EMPLOYEE PERMIT

State Form 54632 (R2 / 4-21) INDIANA ALCOHOL AND TOBACCO COMMISSION

INSTRUCTIONS: 1.

District 2

1353 South Governors Drive

Columbia City, IN 46725

Fax: (260) 244-3830

Telephone: (260) 244-4285

- Type or print legibly.
- Complete Steps 1 through 4. 2.
- Submit this permit application and payment to the Indiana State Excise Police (ISEP) district where the temporary event will be held. Please see the ISEP district addresses at the end of this form.

District 4

651 South Commerce Drive

Telephone: (812) 523-8314

Seymour, IN 47274

Fax: (812) 522-5681

| This permit may be issued for use at the location covered by and during the time period of Temporary permit only.  |              |   |  |                             |   |  |
|--|--------------|---|--|-----------------------------|---|--|
| STEP 1. GENERAL INFORMATION  |              |   |  |                             |   |  |
| Name of applicant (first, middle initial, last)  |              |   |  |                             |   |  |
|  |              |   |  |                             |   |  |
| Address (number and street, city, state, and ZIP code)   |              |   |  |                             |   |  |
| Daytime telephone number (   |              |   | E-mail address                         |                             |   |  |
| Sex  |              |   | Date of birth (month, day, year)  Age  |                             |   |  |
| ☐ Male ☐ Female  |              |   | , , ,                                  |                             |   |  |
| Temporary  | permit numb  | er<br>89684   |  | Date(s) of Temporary Permit | (month, day, year) TEMBER 24 & 25, 2021 |  |
| Location w   | here Tempora | ary Permit is to be used  |  | OLI                         | TEMBER 24 & 25, 2021                    |  |
| GARFIELD PARK - 2505 CONSERVATORY DRIVE, INDIANAPOLIS, IN 46203  |              |   |  |                             |   |  |
| STEP 2. BACKGROUND QUESTIONS - READ CAREFULLY PRIOR TO ANSWERING.  |              |   |  |                             |   |  |
| Have you ever been convicted of experiting while intevigated in Indiana or of a similar charge in any other state?   |              |   |  |                             |   |  |
| Yes  | ☐ No         | If yes, please list the month, day, year, and location of your conviction(s):   |  |                             |   |  |
| Yes  | ☐ No         | Are you currently serving a sentence, including any term of probation for operating while intoxicated in Indiana or a similar crime in another state?   |  |                             |   |  |
| Yes  | ☐ No         | Have you had an application for an alcoholic beverage permit or employee's permit denied, revoked, or suspended within the last five (5) years? If yes, explain:  |  |                             |   |  |
| ☐ Yes  | ☐ No         | Have you ever had a driver's license in any other state? If so, you must attach a copy of your driving record from that state.  |  |                             |   |  |
| Yes  | □No          | Do you know that it is a Class B Misdemeanor, punishable by up to six (6) months in jail and a \$1,000 fine, for knowingly serving an intoxicated person?   |  |                             |   |  |
| Yes  | □No          | Do you know that is a Class B Misdemeanor, punishable by up to six (6) months in jail and a \$1,000 fine, for recklessly, knowingly, or intentionally selling or furnishing alcoholic beverages to a minor? |  |                             |   |  |
| Yes  | ☐ No         | Do you know that an excise officer may enter, inspect, and search a permit premises in which you work without a warrant and you must produce proof of your temporary employee permit on demand?             |  |                             |   |  |
| Yes  | □No          | Do you know that the alcoholic beverage laws are part of the criminal code and are enforceable by every law enforcement officer in the State of Indiana?  |  |                             |   |  |
| STEP 3. FEE AND PAYMENT SCHEDULE   |              |   |  |                             |   |  |
|  |              |   |  |                             |   |  |
| Temporary Employee Permit (Fee \$5.00 per IC 7.1-3-18-11(d)) You may work on your receipt at the Temporary event noted on this application. Payment by mail may be made by money order, business check, cashier's check, or certified check. Cash accepted only if hand delivered to ATC office.                   |              |   |  |                             |   |  |
| STEP 4. SIGNATURE AND AFFIRMATION  |              |   |  |                             |   |  |
| I certify that this application was completed by myself. I affirm under penalties of perjury that I am at least twenty-one (21) years of age and that all information provided on this form is true and correct. I understand that it is a felony under Indiana law to misrepresent or falsify any portion of this |              |   |  |                             |   |  |
| application, and also realize I may be fined.  |              |   |  |                             |   |  |
| Signature of applicant   |              |   | Printed name of application            | ant                         | Date signed (month, day, year)          |  |
| Indiana State Evoice Police (ISED) district addresses. (Please visit https://is.gov/eta/isen/centest vo/ to determine your ISED district.)   |              |   |  |                             |   |  |
| Indiana State Excise Police (ISEP) district addresses (Please visit <a href="https://in.gov/atc/isep/contact-us/">https://in.gov/atc/isep/contact-us/</a> to determine your ISEP district.)  |              |   |  |                             |   |  |
| District 1   |              |   |  |                             | District 5                              |  |
| 52422 County Road 17<br>Bristol, IN 46507  |              |   | 41 W 300 N<br>Crawfordsville, IN 47933 | 1                           | 3650 South US 41<br>Vincennes, IN 47591 |  |
| Telephone: (574) 264-9480  |              |   | Telephone: (765) 362-88                |                             | Telephone: (812) 882-1292               |  |
| Fax: (574) 264-9348  |              |   | Fax: (765) 362-8817                    |                             | Fax: (812) 882-1386                     |  |

District 6

6400 East 30th Street

Indianapolis, IN 46219

Fax: (317) 541-4104

Telephone: (317) 541-4100