



Facility Rental Alcohol Service Release & Waiver Form

City of Seneca, South Carolina • This form must be notarized.

PURPOSE: This waiver is required for any event at which alcoholic beverages will be served, sold, or consumed on City of Seneca property, as referenced in Section 4, Rule 9 of the Facility Rental Application. This completed and notarized form must be submitted to the Seneca Recreation Department along with the applicable permits and insurance documentation before the event will be approved.

Event & Applicant Information

Applicant / Organization Name	Contact Person
Phone Number	Email Address
Facility / Venue	Specific Area / Room
Date(s) of Event	Event Start Time – End Time

How will alcohol be provided? Sold to attendees Provided free of charge (hosted bar)

*Event attendees are not permitted to provide/bring their own alcoholic beverages.

Type(s) of alcohol to be served: Beer Wine Liquor/Spirits Other: _____

Will a licensed bartender or alcohol service provider be used? Yes No

If yes, name of provider: _____

Required Permits & Insurance

The applicant must provide copies of the following documents with this waiver. Check each box to confirm the document is attached:

- SC Department of Revenue Alcohol Permit (Beer & Wine Permit or Liquor License, as applicable)
- Liquor Liability Insurance Policy (*A copy of your liquor liability certificate of insurance must be provided before your rental request is approved.*)
Liquor liability coverage must be in addition to the general liability insurance required by the Facility Rental Application. The policy must name the City of Seneca as an additional insured and must specify the venue, event date, and that liquor liability is included.
- General Liability Insurance (as required by the Facility Rental Application – may be obtained through GatherGuard)
- Copy of valid government-issued photo ID for the applicant

Liquor Liability Insurance Company	Policy Number	Coverage Dates
SC DOR Alcohol Permit Number	Permit Type (Beer/Wine, Liquor, Temporary)	Permit Expiration Date

Acknowledgments & Conditions of Approval

By signing this waiver, the applicant acknowledges and agrees to the following:

1. I acknowledge that the service, sale, or consumption of alcoholic beverages on City of Seneca property is prohibited unless expressly authorized in writing by the City. This waiver, once approved by the City, constitutes that written authorization solely for the event described herein.
2. I assume full and sole responsibility for the service, distribution, sale, and consumption of alcoholic beverages at this event, including the conduct of all attendees, guests, vendors, and service providers.
3. I agree to comply with all applicable federal, state, and local laws governing the sale, service, and consumption of alcoholic beverages, including but not limited to the South Carolina Alcoholic Beverage Control Act (Title 61 of the SC Code of Laws). I understand that it is unlawful to sell or serve alcohol to persons under the age of 21 or to visibly intoxicated persons.
4. I agree to ensure that alcohol service is managed responsibly at all times and that measures are in place to prevent service to minors and intoxicated individuals. I will ensure that valid identification is checked for all individuals who appear to be under the age of 40 before alcohol is served or sold.
5. I hereby release, waive, discharge, and forever hold harmless the City of Seneca, its elected and appointed officials, officers, agents, contractors, employees, representatives, and volunteers from any and all claims, demands, actions, causes of action, damages, losses, costs, expenses (including attorney's fees), and liabilities of every kind and nature arising out of or in any way related to the service, sale, distribution, or consumption of alcoholic beverages at this event.
6. I understand that this waiver does not constitute an assumption of liability by the City of Seneca, nor does it create any duty on the part of the City to supervise, monitor, or control the service or consumption of alcohol at this event.
7. I understand that the City of Seneca reserves the right to revoke this approval and require the immediate cessation of alcohol service at any time if, in the sole judgment of any City official or law enforcement officer, the event poses a risk to public safety, the facility, or the peace and tranquility of the community.
8. I acknowledge that any violation of the terms of this waiver, applicable laws, or the conditions of the Facility Rental Application may result in immediate termination of the event, forfeiture of all deposits and fees, and may affect my ability to rent City facilities in the future.
9. I understand that this approval is specific to the event, date(s), facility, and applicant described in this waiver and is not transferable to any other event, date, facility, or person.
10. I understand that I will be required to pay for and have present for the duration of my event one City of Seneca Police Officer and/or security person approved by the Seneca Police Department for every one- hundred-fifty (150) persons attending the event. Police and/or security must be approved by the Seneca Chief of Police.

Applicant Signature

I, the undersigned, certify that all information provided in this waiver is true and accurate. I have read, understand, and voluntarily agree to all terms, conditions, and acknowledgments set forth above. I understand that this waiver must be notarized to be valid.

Applicant Signature	Date
Printed Name	Organization (if applicable)

Notary Acknowledgment

STATE OF _____

COUNTY OF _____

Before me, the undersigned Notary Public, on this _____ day of _____, 20_____,

personally appeared _____,

who is personally known to me or who produced _____

as identification, and who acknowledged before me that they executed the foregoing instrument freely and voluntarily for the purposes stated therein.

Notary Public Signature

My Commission Expires: _____

[NOTARY SEAL]

6. City of Seneca Approval

FOR CITY USE ONLY

Alcohol service for the event described above is: APPROVED DENIED

If denied, reason: _____

Documents verified:

SC DOR Alcohol Permit Liquor Liability Insurance General Liability Insurance Photo ID

Authorized City Representative Signature

Printed Name / Title	Date