CITY OF LAS VEGAS
DEPARTMENT OF PLANNING
BUSINESS LICENSING DIVISION
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Print Form

ALCOHOLIC BEVERAGE TASTING PERMIT APPLICATION

Business Name (dba): _____

Business Location: _____

Mailing Address (if different than above): _____

Phone Number: _____ Approved Key Employee: _____

Alcoholic Beverage License#: _____ Grocery Store License#: _____

The undersigned, on behalf of the above-named applicant, understands that NRS 597.225 authorizes a grocery store that is licensed to sell retail alcoholic beverages is allowed to serve samples of alcoholic beverages on the premises of the grocery store only to persons of legal age and only in such quantities as necessary to provide a sample or taste of the alcoholic beverages.

Alcoholic beverages used for such samples must be purchased from a wholesale dealer of alcoholic beverages who is licensed under chapter 369 of NRS. A wholesale dealer of alcoholic beverages may assist a person who operates a grocery store in serving samples of alcoholic beverages. This assistance is limited to the pouring of such samples or the provision of information, instruction or education regarding the product being sampled, or any combination of those tasks. ***The provision of such assistance does not relieve the person who operates the grocery store from the responsibility of complying with all requirements.***

The applicant understands that any person pouring the samples must maintain on their person a valid health card, alcohol awareness certification card, and a work card issued by the Las Vegas Metropolitan Police Department.

☐ Applicant requests current year permit only.

Applicant Signature: _____ Date: _____

For Office Use Only

APPROVED FOR PERMIT: _____ DATE: _____

INFOR TR#: _____ DATE: _____ AMOUNT PAID: _____