

Licensees with an active Caterer's Permit (Type 58) must obtain authorization from ABC for each catered event. Please see our <u>Caterer's Permit</u> page for information on caterer's permits, including who is eligible, how to apply, and legal requirements.

To apply online, you must add your license number with an active Type 58 to your Online Services account with a License Administrator role. Please review the License Administrator Frequently Asked Questions for information about creating an Online Services account with the License Administrator role.

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Apply for a Catering Authorization Application

Log in to services.abc.ca.gov

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🖉 😚 Go to abc.ca.gov							Login
Alcoholic Beverage Control	Online Services						

Select Manage and click Applications.

CALIFORNIA DEPARTMENT OF Alcoholic Beverage Control		
MANAGE	RENEW	
Licenses		
Designees		
Reports		
Applications		

Select your license number from the Catering Authorization dropdown menu.

Applications	
Welcome to ABC's Online Services App	olications
Catering Authorization	You must have an active Caterer's Permit (Type 58) to apply for catering authorizations. Each catered event must be approved by ABC. For more information, please visit Caterer's Permits. Select a license 177348 - Steven Young

After selecting your license number, click New Application.

Applications	
Welcome to ABC's Online Services Appli	ications
Catering Authorization	You must have an active Caterer's Permit (Type 58) to apply for catering authorizations. Each catered event must be approved by ABC. For more information, please visit Caterer's Permits. Select a license 177348 - Steven Young

License Details

Confirm the license details before proceeding with the application. If the information is not correct, contact your local <u>district office</u> to update your information.

Catering Authorization Application	
License Details	
License Administrator:	Steven Young
License Number:	177348
Licensee Name(s):	ABC RESTAURANT
Business Name:	ABC RESTAURANT
Business Address:	3927 LENNANE DRIVE #100, SACRAMENTO, CALIFORNIA, 95834

Event Dates

Select whether your event is a single day or multiday event. An event which ends by 2 a.m. is considered a single day for purposes of your application date and fees. Currently, online applications can only be accept for events with three or fewer consecutive days. If your event is more than three consecutive days, you can submit it as separate events of three or fewer days each.



Select your event dates. Your event must be more than five days but not more than 60 days from the date you apply. For events which are more than three days but not more than five days from the date you apply, contact your local <u>district office</u>. Events which are less than three days from the date you apply may not be processed.

Event Start Date * 02/12/2024	
Event End Date *	
Event attendance and hours must be the same for each day	of the event.

Enter your event start and end time. If it is a multiday event, the start and end time must be the same for each day. If they are not the same, enter each day as a separate event. Alcoholic beverages may not be sold, served, given away, or consumed between the hours of 2 a.m. and 6 a.m. pursuant to Business and Professions Code §§ 25631 and 25632.

Event start time *	Q
Time event begins each day.	
Event end time* 10:00 PM	S
Time event ends each day.	•

Enter the estimated daily attendance. The application fee is calculated based on the number of people expected to attend each day of the event. If it is a multiday event, the attendance must be the same for each day. If it is not the same, enter each day as a separate event.

Expected daily attendance *400	
Attendance for each day of the event.	
Number of Event Days	
3	

Contact Information

The contact person should be the person who can answer application and event questions on behalf of the licensee. The contact name and email are populated with the account information for the person entering the application. The name and email can be changed to another person if the person entering the application is not the contact person. Enter the phone number for the contact person.

If the contact person for the application does not have an Online Services account, they will not be able to manage the application online.

Contact Information	
Name ^① · Steven Young	Phone* (916)555-1212
Email*stevenyoung@abcrestaurant.com	

Sponsoring Organization Details

Enter the name and address of the person or organization that has hired you to cater the event. Club licenses will automatically have the licensee's name entered as the sponsoring organization. If you have a club license and are not the sponsoring organization, contact your local <u>district office</u>.

Sponsoring Organization Details			
Sponsoring Organization's Name*			
California Community Organization			
The person or organization that has hired the lice	nsee to cater the event.		
Sponsoring Organization's Address			
123 Main Street		Address Line 2	
City	State		C Zip
Sacramento	California		95814

Person in Charge

If there is a person in charge of answering event questions on behalf of the sponsoring organization, enter their name and phone number.

Person In Charge	
Name D Bob Day	Phone (916)555-3333

Event Details

Select the event type. If your event type is not listed in the dropdown, you can choose Other and type in the name of your event.

Event Type * Awards Banquet	

Select whether or not the event is open to the public.



Event location

Enter the address of the event location. Club licenses will automatically have their address entered. If you have a club license and are requesting authorization for an event at a different location, please contact your local <u>district office</u>.

Event Location	
C Address Line 1*	
400 Broadway	Address Line 2
City^	Zip Code ^
Sacramento	95814

Enter a description of exactly where the event will be held (parking lot, office building, residence, county/city park, etc.)



Enter the number of events you have catered at this event location within this calendar year. There is a limit of 36 catered events per year at any given location. This limit applies to all Caterer's Permits (Type 58), including those held by club licenses (Type 50, 51, 52, and 57). An exception may be made to exceed 36 catered events if the licensee can clearly establish that additional events are in the best interest of the State and necessary to satisfy substantial public demand. Contact your local <u>district office</u> to request an exception.

```
      Number of events this year*

      12

      Input the number of events that you have catered at this event location within this calendar year.
```

Select whether the event is within the city limits.



Select whether any part of the event is being held outdoors.



Disclaimers

Read the disclaimers and check the box to acknowledge you have read and agree.



Pay Now

Review the fee due and click pay now to submit your payment.

Event Start Date	Event End Date	Event	Attendance	Amount Due
02/12/2024	02/14/2024	Days 3	400	\$300.00

If you do not complete your payment, your application will not be saved.

Warning	×
You will be taken to the payment portal. If you do not complete the paym application will not be saved and you will need to start a new application Are you sure you want to continue?	nent, then your n.
NO	YES

Select your payment method and click **Next**. A 2.99% non-refundable convenience fee will be added to all credit card payments.

Alcoholic Beverage Control	Online Services
Payment Method	
A 2.99% non-refundable convenience fee will be added	d to all credit card payments.
* Indicates requ	uired field
Payment	
Payment ID: 65a5d820897c0)d47c21f4
License Number: 177348	
Licensee Name(s): ABC RESTAUR	ANT
Payment Type: CATA	
Choose Method Of Paymen	it
Pay with new account	
O Pay by electronic check	
O Pay by credit card	
VISA Notes	
Back Ne:	xt Exit

Enter your payment information and click Next.

Alcoholic	Beverage Control	Online Services
Payment Information		
	* Inc	licates required field
	Billing Address	
	Use Business Name	
	First Name: Steven	
	M.I.:	
	Last Name: Young	
	*Street Line 1: 3927 Lennane Drive	
	Street Line 2:	
	*City: Sacramento	
	*State: California	•
	*Zip: 95834	
	*Country: UNITED STATES	~
	Phone: 9165551212	
	*E-Mail: stevenyoung@abcrestaurant.com	
	Payment Details	
	*Dermont Amount: 200.00 USD	
	Convenience Fee: 8.97 USD	
	Payment Method	
	*Name on Card: Steven Young	
	*Card Number: 4111111111111	
	* Month 05	
	*Expiration Date: *Year 2033 V	
		Back Next Exit

CALIFORNIA DEPART	MENT OF Beverage Control	Online Services
Payment Review		
	Address	
	Billing Address: Steven Young 3927 Lennane Drive Sacramento, CA 95834 (916) 555-1212 stevenyoung@abcrestaurant.com	
	Payment Method	
	Credit Card VISA Steven Young ×1111 05/33	
	Payment Amount	
	Amount: 300.00 USD Convenience Fee: 8.97 USD Total: 308.97 USD	
		Back Pay Now Exit

Review your payment information and click **Pay Now**.

When your payment is complete, you can print your payment receipt.

The person who submitted the application and the contact person will receive an email when the application is submitted.

Payment Was Received				
A payment was received and is being proce advise if your event is approved or denied.	essed. Your event is not yet approved. ABC will review your application and will Please read the Next Steps.			
Date:	January 16, 2024			
License Number:	177348			
Licensee Name(s):	ABC RESTAURANT			
Payment Amount:	\$308.97			
Authorization/Confirmation Number:	24011523797635			
Application ID:	93			
PRINT				

Your payment receipt will also include Next Steps.



Manage a Submitted Application

Only a License Administrator or License Administrator Designee with the Manage License permission can view a submitted application. If the contact person for the application does not have an Online Services account, they will not be able to manage the application online.

To view your submitted application as a License Administrator or Designee, select **Manage** and click **Applications**. Select your license number. Click **View Submitted Applications**.

Applications	
Welcome to ABC's Online Services Ap	plications
Catering Authorization	You must have an active Caterer's Permit (Type 58) to apply for catering authorizations. Each catered event must be approved by ABC. For more information, please visit Caterer's Permits. Select a license 177348 - Steven Young
	NEW APPLICATION VIEW SUBMITTED APPLICATIONS

All applications submitted online for events which have not yet occurred will be displayed. The status will be pending until the event is approved, denied, or withdrawn.

ate	ring A	uthoriza	ation	Applic	ation	S
low is a lis	t of recently subm	itted applications. Eve	nts that already o	occurred will not s	show.	
elect a license t	o view pending application	IS				
177348 - Stev	en Young					
Catering A	uthorization Appl	ications				NEW APPLICATIO
App ID 个	License Number	Submitted Date	Event Date	Status	Fee Paid	Actions
93	177348	01/15/2024	02/12/2024	PENDING	\$300.00	:

Select the Actions menu and click View to review your application.

ate	ring A	uthoriz	ation /	Applic	ation	S
	0					
ow is a lis	t of recently submit	ted applications. Eve	nts that already o	ccurred will not s	how.	
elect a license t	o view pending applications					
77348 - Stev	en Young					
Catering A	uthorization Applic	ations				NEW APPLICATION
App ID 个	License Number	Submitted Date	Event Date	Status	Fee Paid	Actions
	477240	01/15/2024	02/12/2024	PENDING	\$300.00	:
93	177340					

You cannot change any of the data you entered once the application is submitted. If you need to change any of the information, please contact your local <u>district office</u>.

Submitted Catering Authorization	×
License Details	UPLOAD DOCUMENTS
License Administrator:	Steven Young
License Number:	177348
Licensee Name(s):	ABC RESTAURANT
Business Name:	ABC RESTAURANT
Business Address:	3927 LENNANE DRIVE #100, SACRAMENTO, CALIFORNIA, 95834
Application Information	
Application ID:	93
Submitted Date:	01/15/2024
Status:	PENDING
Event Dates	
Event Start Date:	02/12/2024
Event End Date:	02/14/2024
Event Start Time:	4:00 PM
Event End Time:	10:00 PM
Expected attendance:	400
Number of Event Days:	3
Contact Information	
Contact Name:	Steven Young
Contact Phone Number:	(916)555-1212
Contact Email:	stevenyoung@abcrestaurant.com
Sponsoring Organization Details	
Sponsoring Organization's Name:	California Community Organization
Sponsoring Organization's Address:	123 Main Street, Sacramento, CA, 95814
Person In Charge Name:	Bob Day
Person In Charge Phone Number:	(916)555-3333

Upload Documents

If you have documents to upload, or if ABC staff requires a document, select the Actions menu and choose **Upload Documents**. You can only upload documents while the application is in pending status.



Click the **Upload** button to upload documents in the appropriate categories. Documents must be less than 2 MB. You can upload the following file types: JPEG Image (.jpg), Microsoft Excel Document (.xls), Microsoft Excel Open XML Document (.xlsx), Microsoft Word Document (.doc), Microsoft Word Open XML Document (.docx), Plain Text File (.txt), and Portable Document Format File (.pdf).

Catering Authorization Docu	ment Uploads	\$
Application Summary		
ID: License Number: Event Type: Date Submitted: Status: Fee Paid:	93 177348 AWARDS BANQUET 01/15/2024 PENDING \$300.00	
Upload Documents	ad documents in the appropriate categories. You can upload the following file	types: JPEG Image (.jpg), Microsoft Excel Document (.xls), Microsoft Excel Open XML Document (.xlsx), Microsoft mat File (.ndf)
Location Diagrams Upload the Supplemental Diagra	am (Form ABC-253) which clearly identifies where the event is being held.	Property Owner Approval Upload the signed approval document by the Property Owner approving the event location. UPLOAD
Law Enforcement Approval Upload the signed approval doc	Lument by the Law Enforcement Agency within the jurisdiction of the event location.	Conditions When the Conditions document is provided to you by ABC, you must upload the signed Conditions document. UPLOAD
Other Documents		
		CANCEL SAVE AND CLOSE

After you have uploaded your documents, click Save and Close.

Catering Authorization Document Uploads X			
Application Summary			
ID: License Number: Event Type: Date Submitted: Status: Fee Paid:	93 177348 AWARDS BANQUET 01/15/2024 PENDING \$300.00		
Upload Documents Click on the UPLOAD button to uplo Word Document (.doc), Microsoft W	ad documents in the appropriate categories. You can upload the following file ord Open XML Document (.docx), Plain Text File (.txt), Portable Document For	types: JPEG Image (.jpg), Microsoft Excel Document (.xis), Microsoft Excel Open XML Document (.xisx), Microsoft mat File (.pdf).	
Location Diagrams Upload the Supplemental Diagram (Form ABC-253) which clearly identifies where the event is being held. D UPLOAD ABC-253.pdf		Property Owner Approval Upload the signed approval document by the Property Owner approving the event location. UPLOAD	
Law Enforcement Approval Upload the signed approval document by the Law Enforcement Agency within the jurisdiction of the event location. UPLOAD		Conditions When the Conditions document is provided to you by ABC, you must upload the signed Conditions document. UPLOAD	
Other Documents			
		CANCEL SAVE AND CLOSE	

A message will confirm your documents were uploaded successfully.



Approval

When ABC's review of your application is complete, the person who submitted the application and the contact person will receive an email that the application was approved or denied.



If the application was approved, an approval document (ABC-218) will be attached. You must print the approval document, as well as any signed conditions, and have them available at your event.

STATE OF DEPARTMENT OF ALCO LICENSE CATERING A	F CALIFORNIA HOLIC BEVERAGE CONTROL UTHORIZATION APPROVAL		
Licensee Names:	ABC RESTAURANT		
License Number:	177348		
Event Start Date: 02/12/2024	Event End Date: 02/14/2024		
Time alcohol service begins: 4:00 PM	Time alcohol service ends: 10:00 PM		
Event Type: AWARDS BANQUET	Other Event Type:		
Expected Daily Attendance: 400			
Event Address: 400 BROADWAY			
SACRAMENTO, CA 958 Specific Location Information:	Northwest end of the park		
Sponsoring Organization Name:	California Community Organization		
Sponsoring Organization Address:	123 Main Street, Sacramento, CA 95814		
Person In Charge:	Bob Day		
Person In Charge Phone Number:	9165553333		
Is this a public event?	No		
Is this event located within the city limits?	Yes		
Does this event have conditions?	No. If yes, then a copy of the signed conditions must be kept with this approval.		
The above catering event is hereby, pursuant to Sections 23320 and 23399 of the Business and Professions Code, and Rule 60.5 of the California Code of Regulations, to engage in the temporary sale of alcoholic beverages for consumption at the below event location for the event dates authorized above. This approval does not include off- sale ("to-go") privileges. This approval may be revoked summarily by the Department if, in the opinion of the Department and/or the local law enforcement agency, it is necessary to protect the safety, welfare, health, peace, and morals of the people of the State.			
Reviewed By:	Wendy Craig		
Approved On:	01/15/2024		