



COUNTY OF LEXINGTON
TEMPORARY ALCOHOL BEVERAGE LICENSE FEE
APPLICATION
FY 2022/23

1. Name of Festival:

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2. Type of Organization (please select one):

<input type="checkbox"/>	County Government
<input type="checkbox"/>	Municipal
<input type="checkbox"/>	Non-Profit Organization
<input type="checkbox"/>	Community Service Club, Church, etc.
<input type="checkbox"/>	Other

3. Sponsoring Organization

Name of Organization:	
Mailing Address:	

4. Director of Festival

Name & Title:	
Contact Number(s):	
Email:	

5. Festival Website Address:

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6. Festival Category (check one):

<input type="checkbox"/>	Festival
<input type="checkbox"/>	Other – Pursuant to State Statute Section 61-6-2010

7. Festival Timeline

Actual Dates of Festival:

8. Location of Festival:

9. How many people do you expect to attend?

Expected Number:

10. Festival Budget: Request for funds must meet the requirements of Chapter 61, Section 61-6-2010, SC Code of Laws, 1976, as amended.

a. Estimated Total Cost of Festival:	\$	<input type="text"/>
b. Amount of funds requested for the Festival:	\$	<input type="text"/>
c. This Request Equals What Percent of the Total Festival Budget:		<input type="text"/> %

11. Has your Project/Event or Organization previously received Temporary Alcohol Beverage License Fee Funding?

Yes

No

If you answered yes, please answer items a-e below.

a. Year(s):	<input type="text"/>
b. Amount(s):	<input type="text"/>
c. Source(s):	<input type="text"/>
d. Purpose(s)	<input type="text"/>
e. For each award year, did you expend 100% of the Temporary Alcohol Beverage License Fee funds you received?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If you answered no, please explain:</i> <input type="text"/>

12. Festival Description – Please use *Attachment A* to complete the following information that is required by the *Tourism Expenditure Review Committee* to be sure that the Festival is in accordance to Chapter 61, Section 61-6-2010, of the S.C. Code of Laws, 1976 as amended.

a. General description of the festival and brief history of the organization	<i>Please use Attachment A to complete answers a-f.</i>
b. State the benefits that this festival will serve toward promoting tourism and the Community of Lexington County.	
c. Total attendance to the festival versus the number of total tourists in attendance.	
d. Economic impact generated by tourism towards the festival	
e. Overall description of how the festival attracts and promotes tourists to the area and specifically how the Temporary Alcohol Beverage License Fee funds were used to accomplish this.	
f. Additional Comments.	

ORIGINAL APPLICATION DUE BY:

FRIDAY, JANUARY 7, 2022

FY 2022/23 Festival Application

Lexington County Council

212 South Lake Drive, Suite 601

Lexington, SC 29072

Signature of Festival Director:

Print Name

Title

Signature

Date