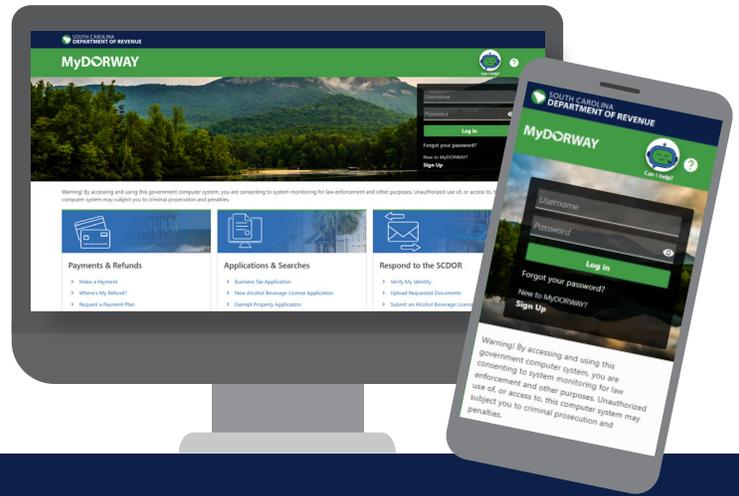


Law Enforcement Notification for Special Event Application

SUBMIT YOUR SPECIAL EVENT LICENSE APPLICATION ON MyDORWAY!

- It's faster and easier than completing a paper application and results in fewer errors.
- Attach your **ABL-100** to your **MyDORWAY** Special Event License application.
- If applying for a license listed on the **ABL-900**, notify SLED at least 24 hours prior to your event by emailing them at ABLSpecialEventPermits@seld.sc.gov Copy ABLCompliance@dor.sc.gov on your email.



Manage your tax accounts online for FREE!

MyDORWAY

Fast. Easy. Secure.

One-stop shop!

Manage your SCDOR accounts all in one place

- Review your payment history
- Immediate access to correspondence
- Easily update your account information

+ more!

Why MyDORWAY?

- Access your account 24/7
- Make ACH debit or credit card payments, **with no convenience fees**
- Receive immediate confirmation for transactions
- Reduce errors with automatic calculations
- Control who has access to your SCDOR accounts
- Always know you're using the most up-to-date forms

Ready to sign up for MyDORWAY?

Visit MyDORWAY.dor.sc.gov to get started.

You'll need your FEIN or SSN, License Number, and a Letter ID or copy of your last return.

Tutorials are available at dor.sc.gov/MyDORWAY

Want more information about Alcohol Beverage Licensing? Visit dor.sc.gov/abl



STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE
**LAW ENFORCEMENT NOTIFICATION FOR
SPECIAL EVENT APPLICATION**

Special event organizers must submit this application to the Chief of Police of the municipality where their event is located. If the special event does not take place within municipal limits, submit this application to the Sheriff of the county where the event is located.

If the Chief of Police or Sheriff is unable to sign, you must include a written statement from the Chief of Police or Sheriff authorizing another law enforcement representative to sign on their behalf.

To be completed by the applicant

Legal entity name or sole proprietor

Physical location of event

Municipality (if applicable)

County

Date(s) of special event

Beginning time

Ending time

To be Completed by the Chief of Police or Sheriff

I have been informed by the applicant above about their application for a Special Event license to sell beer, wine, and/or liquor at the address shown above.

I do not object to the issuance of the Special Event License.

I object to the issuance of the Special Event License.

Signature of authorized law enforcement official

Date

Name and title of authorized law enforcement official

Department

Phone number

If this form is not completely filled out, your application will be returned to you.

The entire application **must** be presented to law enforcement officials with this form. Any alterations of this form will void the agreement.

If you are applying for multiple locations, this form must be submitted for each location.