



**Please read all instructions prior to completing the application**

Per Sec. 30.06 of the Alcoholic Beverage Code, the holder of a Nonprofit Entity Temporary Event permit may auction alcoholic beverages, for consumption off premises, to raise money to support the stated purpose of the permit holder. For auctions, TABC does not require applicants to obtain preapproval of their event from TABC. Additionally, applicants are not subject to paying a fee for an NT permit as long as the event includes an auction with no other alcohol sales or service to a consumer. To hold an auction, a completed Nonprofit Entity Temporary Event—Auctions form must be submitted to the appropriate TABC region.

Applications should be emailed to the [local TABC office](#) that corresponds to the location of the event.

**Important:** you must include “Nonprofit Entity Temporary Event Auction Application” in the subject line of the email.

**Regional Office Email Addresses:**

Region 1	<a href="mailto:EventsLubbockRegion@tabc.texas.gov">EventsLubbockRegion@tabc.texas.gov</a>
Region 2	<a href="mailto:EventsArlingtonRegion@tabc.texas.gov">EventsArlingtonRegion@tabc.texas.gov</a>
Region 3	<a href="mailto:EventsHoustonRegion@tabc.texas.gov">EventsHoustonRegion@tabc.texas.gov</a>
Region 4	<a href="mailto:EventsAustinRegion@tabc.texas.gov">EventsAustinRegion@tabc.texas.gov</a>
Region 5	<a href="mailto:EventsSanAntonioRegion@tabc.texas.gov">EventsSanAntonioRegion@tabc.texas.gov</a>

**NONPROFIT INFORMATION**

1. **Type of Organization:**       Fraternal       Religious       Charitable       Nonprofit Corporation  
 Nonprofit Historic Preservation       Civic       Political Party/Association       Candidate/Officeholder

2. **Organization/Corporation/Candidate Name:**

3. **Federal Employer’s ID# (FEIN):**

**AUCTION INFORMATION**

4. **Event Dates and Times (Dates and times must include delivery and/or storage of alcohol.)**  
 Start Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM  PM       End Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM  PM

5. **Event Address Street #:**      **Street Name:**

**City:**      **County:**      **Zip Code:**

**CONTACT INFORMATION**

By signing below, you affirm, and represent to TABC, that the above information is true and correct, and that you have the legal authority to request the privilege identified in this application on behalf of the organization named in this application. You also affirm that you have reviewed Sec. 30.06 of the Alcoholic Beverage Code and that the event will comply with Sec. 30.06 and all other applicable TABC laws and rules.

6. **Name of Contact for this Application:**      **Position/Title:**

**Contact Phone No.:**      **Contact Email Address:**

**Mailing Address:**      **City:**      **County:**      **Zip Code:**

**WARNING:** Section 101.69 of the Texas Alcoholic Beverage Code states: “...a person who makes a false statement or false representation in an application for a permit or license or in a statement, report, or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the Texas Department of Criminal Justice for not less than 2 nor more than 10 years.”

I \_\_\_\_\_ swear that I have legal authorization to apply for and receive this permit.  
 Print Name

**SIGN HERE** \_\_\_\_\_ **TITLE** \_\_\_\_\_

Before me, the undersigned authority, on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, the person whose name is signed to the foregoing application personally appeared and, duly sworn by me, states under oath that he or she has read the said application and that all the facts therein set forth are true and correct.

**SIGN HERE** \_\_\_\_\_

**NOTARY PUBLIC**      **SEAL**