

LARAMIE COUNTY APPLICATION: 24-HOUR CATERING/MALT BEVERAGE PERMIT

APPLICANT: DeLancey Enterprises, LLC

ADDRESS: 1806 Torrington Rd. Cheyenne, WY 82009

PHONE: 307-331-2115 EMAIL: cldelancey@gmail.com

PERMIT REQUESTED: ☒ CATERING (\$50/DAY) ☐ MALT BEVERAGE (\$50/DAY)

PERMIT FROM: 08 / 28 / 20 THROUGH: 08 / 28 / 20

1 DAYS AT \$50 /DAY TOTAL FEE ATTACHED: \$ 50

PURPOSE OF PERMIT: Weekly Open Rodeo at Archer Complex

PREMISES FOR WHICH PERMIT IS REQUESTED (PHYSICAL ADDRESS):

Archer Complex 3801 Archer Parkway Cheyenne, WY 82009

THE UNDERSIGNED, AS APPLICANT OR AGENT, HEREBY AGREES TO COMPLY WITH
REGULATIONS OF LARAMIE COUNTY, AND THE PROVISIONS OF WYOMING STATUTES, TITLE 12,
ALCOHOLIC BEVERAGES, AS APPLICABLE TO THE REQUESTED PERMIT

☒ If licensed within another jurisdiction, I affirm by checking this box that I have secured written approval of
the licensing authority of that jurisdiction prior to filing this permit application (W.S. 12-4-502(d)).

/S/ APPLICANT/AGENT  DATE 07 / 07 / 20

Office Use Only

24-HOUR CATERING/MALT BEVERAGE PERMIT

LARAMIE COUNTY, WYOMING, PURSUANT TO W.S. 12-4-502, HEREBY ISSUES CATERING/MALT
BEVERAGE PERMIT(S) TO APPLICANT FOR THE APPROVED TWENTY-FOUR (24)-HOUR PERIOD(S) FROM
____ / ____ / ____ TO ____ / ____ / ____ SUBJECT TO OPERATION HOURS SET BY THE
LARAMIE COUNTY BOARD OF COMMISSIONERS PURSUANT TO W.S. 12-5-101.

APPROVED AND ISSUED THIS _____ DAY OF _____ 20____.

BOARD OF LARAMIE COUNTY COMMISSIONERS

CHAIRMAN

____ / ____ / ____
DATE

ATTEST: _____
DEBRA K LEE, LARAMIE COUNTY CLERK

____ / ____ / ____
DATE

THIS PERMIT MUST BE CONSPICUOUSLY POSTED ON THE PREMISES FOR WHICH ISSUED.

020-109(R7/19)



TRUDY L. EISELE
LARAMIE COUNTY Treasurer
MISCELLANEOUS RECEIPT

*** ORIGINAL RECEIPT ***

Misc Receipt Nbr: 64440

Trans Date: 07/09/2020

Received from/Description:
DELANCEY ENTERPRISES LLC

On Account Of:
CATERING PERMIT-7/24/20 CK# 1700

Entered by: brandyc

Batch: 20200709-000389

Amount: 50.00

There are 2 additional receipt(s) paid in this batch with a total of: \$100.00

Payment Type	Doc#	Description	Amount
CHECK	1700	DELANCEY ENTERPRISES LLC	150.00
TOTAL:			150.00