



## Alcoholic Beverage Control License – Local Application

To be able to traffic in Alcoholic Beverages, you must obtain both a state and local issued ABC license in most cases. First, complete the appropriate ABC license application from the state ABC website at [abc.ky.gov](http://abc.ky.gov). Then follow instructions below to submit a complete ABC packet for review by the Flatwoods ABC administrator.

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### Application Instructions

**Step 1** - Complete the Kentucky State ABC license application online. Complete all local forms and email them to [abc@flatwoodsky.gov](mailto:abc@flatwoodsky.gov). A check sheet has been provided with this packet.

NOTE: Supporting documentation must include a criminal background check from each state the applicant has resided in during the past year (1) year. The background check(s) **MUST** be obtained from the approved list in this packet.

**Step 2** – Flatwoods ABC licensing fees **MUST** be paid prior to the submission of an application. Refer to the *ABC License Fee Schedule* to determine your license fees and complete the *Fee Payment Form*.

**Step 3** – The Flatwoods ABC *Final Inspection Form* **MUST** be signed by representatives from the Finance Department prior to the submission of the application. Signatures from a representative of the Flatwoods Fire Department - Fire Marshall Office, Code Enforcement/Building Inspection, and the Greenup County Health Department.

**Step 4** - Include a diagram/floor plan of the establishment including all detached structures and parking areas.

**Step 5** - Include a photocopy of a Driver's License or Photo I. D. for all individuals in which a background check has been conducted during the Basic Application.



## Alcoholic Beverage Control – Basic License Form

Complete this form after submitting your online application to Kentucky ABC

### State ABC information

State application number: Q - \_\_\_\_\_

Approval date: \_\_\_\_\_

### Business information

Business/company name: \_\_\_\_\_  
(applicant's name if sole proprietor)

DBA (Doing Business As): \_\_\_\_\_

Address of premises to be licensed: \_\_\_\_\_

City: Flatwoods State: KY Zip: \_\_\_\_\_ Premises phone: \_\_\_\_\_

County: Greenup Email: \_\_\_\_\_

Mailing address  
(if different from above): \_\_\_\_\_

Contact person: \_\_\_\_\_ Contact phone: \_\_\_\_\_

Liability Insurance

Provider: \_\_\_\_\_ Policy number: \_\_\_\_\_

### Requested license Type

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## Applicant information

Complete the following for the business proprietor, partner(s), and all persons having an interest in the business to be licensed. List all owners, officers, directors, partners, managing members, members, and shareholders. If privately held, show 100% ownership. If publicly traded, list the three highest ranking officers and any natural person who owns ten (10) percent or more. If a non-profit, list the highest-ranking director or officer. Attach additional pages as needed.

<b>1</b>	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth</b> mm-dd-yyyy
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					
<b>2</b>	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth</b> mm-dd-yyyy
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					
<b>3</b>	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth</b> mm-dd-yyyy
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					
<b>4</b>	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth</b> mm-dd-yyyy
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					

**Applicant information (continued)**

5	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth mm-dd-yyyy</b>
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					
6	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth mm-dd-yyyy</b>
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					
7	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth mm-dd-yyyy</b>
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					
8	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth mm-dd-yyyy</b>
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					

**Applicant information (continued)**

9	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth</b> mm-dd-yyyy
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					
10	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth</b> mm-dd-yyyy
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					
11	<b>Name:</b>	<b>Home address:</b>	<b>All phone numbers</b> H: W: C:	<b>US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Last 4 of SSN</b>	<b>Date of birth</b> mm-dd-yyyy
	<b>Title:</b>	<b>List states where person resided over past year:</b>				
	<b>Percent (%) of ownership (if applicable):</b>					

**Criminal History / Background Checks**

Applicants are required to submit a criminal background check from each state they have resided in during the past year.

State	Phone number	Website
Alabama	334-353-4340	<a href="http://background.alabama.gov/">http://background.alabama.gov/</a>
Alaska	907-269-5767	<a href="https://dps.alaska.gov/Statewide/R-I/Background/Home">https://dps.alaska.gov/Statewide/R-I/Background/Home</a>
Arizona	602-223-2222	<a href="https://www.azdps.gov/services/public/records/criminal">https://www.azdps.gov/services/public/records/criminal</a>
Arkansas	501-618-8500	<a href="https://www.ark.org/criminal/index.php">https://www.ark.org/criminal/index.php</a>
California	916-210-6276	<a href="https://oag.ca.gov/fingerprints/record-review">https://oag.ca.gov/fingerprints/record-review</a>
Colorado	303-239-4208	<a href="https://www.cbirecordscheck.com/">https://www.cbirecordscheck.com/</a>
Connecticut	860-685-8480	<a href="https://portal.ct.gov/DESPP/Division-of-Emergency-Service-and-Public-Protection/Forms">https://portal.ct.gov/DESPP/Division-of-Emergency-Service-and-Public-Protection/Forms</a>
Delaware	302-739-5901	<a href="https://dsp.delaware.gov/obtaining-a-certified-criminal-history/">https://dsp.delaware.gov/obtaining-a-certified-criminal-history/</a>
Florida	850-410-8109	<a href="https://cchinet.fdle.state.fl.us/search/app/default?0">https://cchinet.fdle.state.fl.us/search/app/default?0</a>
Georgia	404-244-2639	<a href="https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions">https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions</a>
Hawaii	808-587-3279	<a href="https://ecrim.ehawaii.gov/ahewa/">https://ecrim.ehawaii.gov/ahewa/</a>
Idaho	208-884-7159	<a href="https://isp.idaho.gov/bci/background-checks/">https://isp.idaho.gov/bci/background-checks/</a>
Illinois	815-740-5160	<a href="http://www.isp.state.il.us/crimhistory/chri.cfm">http://www.isp.state.il.us/crimhistory/chri.cfm</a>
Indiana	317-233-2010	<a href="http://www.in.gov/ai/appfiles/isp-lch/">http://www.in.gov/ai/appfiles/isp-lch/</a>
Iowa	515-725-6066	<a href="https://dps.iowa.gov/divisions/criminal-investigation/criminal-history/record-check-forms">https://dps.iowa.gov/divisions/criminal-investigation/criminal-history/record-check-forms</a>
Kansas	785-296-2454	<a href="http://www.kansas.gov/kbi/criminalhistory/">http://www.kansas.gov/kbi/criminalhistory/</a>
Kentucky	502-573-1682	<a href="https://kycourts.gov/AOC/Information-and-Technology/Pages/Background-Checks.aspx">https://kycourts.gov/AOC/Information-and-Technology/Pages/Background-Checks.aspx</a>
Louisiana	225-925-6096	<a href="https://ibc.dps.louisiana.gov/">https://ibc.dps.louisiana.gov/</a>
Maine	207-624-7240	<a href="https://www5.informe.org/online/pcr/">https://www5.informe.org/online/pcr/</a>
Maryland	410-764-4501	<a href="http://www.dpscs.state.md.us/publicservs/bgchecks.shtml">http://www.dpscs.state.md.us/publicservs/bgchecks.shtml</a>
Massachusetts	617-660-4600	<a href="https://www.mass.gov/criminal-record-check-services">https://www.mass.gov/criminal-record-check-services</a>
Michigan	517-241-0606	<a href="https://apps.michigan.gov/">https://apps.michigan.gov/</a>
Minnesota	651-793-2400	<a href="https://dps.mn.gov/divisions/bca/Pages/background-checks.aspx">https://dps.mn.gov/divisions/bca/Pages/background-checks.aspx</a>
Mississippi	601-987-1212	<a href="https://www.dps.ms.gov/investigation/criminal-information-center">https://www.dps.ms.gov/investigation/criminal-information-center</a>
Missouri	573-526-6312	<a href="https://www.machs.mo.gov/MocchWebInterface/home.html">https://www.machs.mo.gov/MocchWebInterface/home.html</a>
Montana	406-444-3625	<a href="https://dojmt.gov/enforcement/background-checks/">https://dojmt.gov/enforcement/background-checks/</a>
Nebraska	402-479-4971	<a href="http://www.nebraska.gov/clickBackground/">http://www.nebraska.gov/clickBackground/</a>
Nevada	775-684-6262	<a href="https://rccd.nv.gov/">https://rccd.nv.gov/</a>
New Hampshire	603-223-3867	<a href="https://www.nh.gov/safety/divisions/nhsp/jib/crimrecords/">https://www.nh.gov/safety/divisions/nhsp/jib/crimrecords/</a>
New Jersey	609-882-2000 ext. 2918	<a href="https://www.njsp.org/criminal-history-records/">https://www.njsp.org/criminal-history-records/</a>
New Mexico	505-827-9181	<a href="https://www.dps.nm.gov/top-links-for-nm-residents/fingerprinting-and-background-checks">https://www.dps.nm.gov/top-links-for-nm-residents/fingerprinting-and-background-checks</a>
New York	212-428-2943	<a href="https://www.criminaljustice.ny.gov/ojis/recordreview.htm">https://www.criminaljustice.ny.gov/ojis/recordreview.htm</a>
North Carolina	919-890-1000	<a href="http://ncsbi.gov/Services/Background-Checks.aspx">http://ncsbi.gov/Services/Background-Checks.aspx</a>
North Dakota	701-828-5500	<a href="https://attorneygeneral.nd.gov/public-safety/criminal-history-records/requesting-criminal-history-record-check">https://attorneygeneral.nd.gov/public-safety/criminal-history-records/requesting-criminal-history-record-check</a>
Ohio	740-845-2000	<a href="https://www.ohioattorneygeneral.gov/Individuals-and-Families/Consumers/Requesting-Your-Own-Criminal-Records">https://www.ohioattorneygeneral.gov/Individuals-and-Families/Consumers/Requesting-Your-Own-Criminal-Records</a>
Oklahoma	405-848-6724	<a href="https://osbi.ok.gov/services/criminal-history">https://osbi.ok.gov/services/criminal-history</a>

Department of Alcoholic Beverage Control

Oregon	503-378-5470	<a href="https://www.oregon.gov/dhs/business-services/chc/Pages/index.aspx">https://www.oregon.gov/dhs/business-services/chc/Pages/index.aspx</a>
Pennsylvania	888-783-7972	<a href="https://epatch.state.pa.us/Home.jsp">https://epatch.state.pa.us/Home.jsp</a>
Rhode Island	401-274-4400	<a href="http://www.riag.ri.gov/BCI/index.php">http://www.riag.ri.gov/BCI/index.php</a>
South Carolina	803-737-9000	<a href="https://catch.sled.sc.gov/">https://catch.sled.sc.gov/</a>
South Dakota	605-773-3331	<a href="https://atg.sd.gov/LawEnforcement/Identification/backgroundcheckrequirements.aspx">https://atg.sd.gov/LawEnforcement/Identification/backgroundcheckrequirements.aspx</a>
Tennessee	615-744-4057	<a href="https://www.tn.gov/tbi/divisions/cjis-division/background-checks.html">https://www.tn.gov/tbi/divisions/cjis-division/background-checks.html</a>
Texas	855-481-7070	<a href="https://records.txdps.state.tx.us/DpsWebsite/CriminalHistory/">https://records.txdps.state.tx.us/DpsWebsite/CriminalHistory/</a>
Utah	801-965-4445	<a href="https://bci.utah.gov/criminal-records/">https://bci.utah.gov/criminal-records/</a>
Vermont	802-241-5320	<a href="https://secure.vermont.gov/DPS/criminalrecords/">https://secure.vermont.gov/DPS/criminalrecords/</a>
Virginia	804-674-2131	<a href="https://www.vsp.virginia.gov/CJIS_Criminal_Record_Check.shtm">https://www.vsp.virginia.gov/CJIS_Criminal_Record_Check.shtm</a>
Washington	360-534-2000	<a href="https://www.wsp.wa.gov/crime/criminal-history/">https://www.wsp.wa.gov/crime/criminal-history/</a>
West Virginia	304-746-2170	<a href="https://www.wvsp.gov/Criminal%20Records/Pages/default.aspx">https://www.wvsp.gov/Criminal%20Records/Pages/default.aspx</a>
Wisconsin	608-266-7314	<a href="https://recordcheck.doj.wi.gov/">https://recordcheck.doj.wi.gov/</a>
Wyoming	307-777-7181	<a href="http://wyomingdci.wyo.gov/dci-criminal-justice-information-systems-section/criminal-records-section/criminal-history-checks">http://wyomingdci.wyo.gov/dci-criminal-justice-information-systems-section/criminal-records-section/criminal-history-checks</a>

### ABC License Fee Schedule

LICENSE TYPE (S)	Full Year Fee	Half Year Fee
Distiller's License, per annum	\$ 500.00	\$ 250.00
Rectifier's License		
a. Class A, per annum	\$ 3,000.00	\$ 1,500.00
b. Class B (craft rectifier), per annum	\$ 960.00	\$ 480.00
Wholesaler's License, per annum	\$ 3,000.00	\$ 1,500.00
Quota Retail Package License, per annum	\$ 1,000.00	\$ 500.00
Quota Retail Drink License: retail drink license; per annum	\$ 1,000.00	\$ 500.00
Special Temporary License, per event	\$ 166.00	\$ 83.00
Non-quota Type 1 Retail Drink License, per annum <i>(includes distilled spirits, wine, and malt beverages)</i>	\$ 2,000.00	\$ 1,000.00
Non-quota Type 2 Retail Drink License, per annum <i>(includes distilled spirits, wine, and malt beverages)</i>	\$ 1,000.00	\$ 500.00
Non-quota Type 3 Retail Drink License, per annum <i>(includes distilled spirits, wine, and malt beverages)</i>	\$ 300.00	\$ 150.00
Special Temporary Alcohol Auction License, per event	\$ 100.00	\$ 50.00
Special Sunday Retail Drink License, per annum	\$ 300.00	\$ 150.00
Extended Hours Supplement License, per annum	\$ 2,000.00	\$ 1,000.00
Caterer's License, per annum	\$ 800.00	\$ 400.00
Bottling House or Bottling House Storage License, pe annum	\$ 1,000.00	\$ 500.00
Brewer's License, per annum	\$ 500.00	\$ 250.00
Microbrewery License, per annum	\$ 500.00	\$ 250.00
Malt Beverage Distributor's License, per annum	\$ 200.00	\$ 100.00
Non-quota Retail Malt Beverage Package License, per annum	\$ 200.00	\$ 100.00
Non-quota Type 4 Retail Malt Beverage Drink License, per annum	\$ 200.00	\$ 100.00
Limited Restaurant License, per annum	\$ 1,200.00	\$ 600.00
Limited Golf Course License, per annum	\$ 1,200.00	\$ 600.00
Authorized Public Consumption License, per annum (if want to allow)	\$ 250.00	\$ 125.00
Qualified Historic Site License, per annum	\$ 1,030.00	\$ 515.00
Other	\$	
EXPIRATION MONTH	Full Year	Half Year
All city licenses, except temporary licenses, shall begin on January 1 of any year and shall expire on December 31.		
Any licenses issued after October 1 of any year shall be assessed a fee which is based on the pro rata portion of the remainder of the license period; however, the cost of any license shall not be less than one-half (1/2) the amount of the full fee for an annual license of that type.		





## Alcoholic Beverage Control License Fee Payment Form

Please submit this form along with a **certified check, cashier's check, or money order** payable to:

City of Flatwoods - Alcohol Beverage Control, 2513 Reed Street, Flatwoods, Kentucky 41139.

**If you hand deliver this form, you will also have the option to pay in cash.**

Name of Licensee or Company: \_\_\_\_\_

Business Name (DBA): \_\_\_\_\_

Premises Address: \_\_\_\_\_

Total Fees: \$ \_\_\_\_\_

*Leave blank- For Finance Department use only*

Date: \_\_\_\_\_

Account #: \_\_\_\_\_

## Alcoholic Beverage Control Final Inspections Form

To complete our investigation into the issuance of an Alcoholic Beverage Control license, it is necessary that the business location meets certain structural, zoning, and health code requirements. Please submit this form to each of the departments listed below for their inspection and notification that such requirements have been met. This form must be submitted to the local ABC office with your application upon obtaining all the approvals.

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**THIS SECTION IS TO BE COMPLETED BY THE APPLICANT**

Licensee Name: \_\_\_\_\_

DBA: \_\_\_\_\_

Premises Address: \_\_\_\_\_ Flatwoods, KY

1. Are you applying for a license at a location that is currently licensed?  YES  NO
2. Is the license being transferred to you?  YES  NO

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**THIS SECTION IS TO BE COMPLETED BY EACH DIVISION**

**Finance Department - Business/Tax Office**

2513 Reed Street

PHONE: (606) 836-9661

Account No. \_\_\_\_\_

Transfer: YES  NO

Account Status: CURRENT  NOT CURRENT

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Reviewing Authority

**Fire Department - Fire Marshall Office**

804 Powell Lane

(606) 836-7177

Total Occupancy: \_\_\_\_\_ Additional Occupancy Area: \_\_\_\_\_

Notes \_\_\_\_\_

Inspected/Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Inspecting Authority

**Code Enforcement/Building Inspection**

2513 Reed Street

PHONE: (606) 836-9661

Building Permit Required: YES  NO

Permit Issued Date: \_\_\_\_\_

Inspected/Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Inspecting Authority

**Greenup County Health Department - Environmental Services**

US 23 Greenup

PHONE: (606) 473-9838

Inspected by: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Inspecting Authority



## Application Review Process

**Site Inspection** - An inspection of the premises will be conducted by ABC personnel after the application packet has been reviewed.

**Processing Time** - It will take 7-10 business days to process a completed application. A license **CANNOT** be issued prior to 30 days past the date of the legal publication. (KRS 243.360)

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## Completed Packet Checklist

Make sure you include the following items in your packet to the local ABC office for review:

- Publication and newspaper clipping or advertisement
- Criminal background check(s) from the approved list provided in this packet
- Flatwoods ABC Basic License Form
- Fee payment form
- Final Inspection Form
- Diagram / Floor plan
- Photocopy of driver's license / Photo I.D.



### Example of Newspaper Advertisement

Your company name, d/b/a Name hereby declares its intention(s) to apply for a \_\_\_\_\_ license (list all license types applied for) no later than \_\_\_\_\_ (date you intend on submitting the application to ABC). The licensed premises will be located at \_\_\_\_\_ (business address). The sole owner and president is \_\_\_\_\_ (list all owners/officers to show 100% ownership, including a contact address). Any person, association, corporation, or body politic may protest the granting of the license(s) by writing the Department of Alcoholic Beverage Control, 500 Mero St 2NE33, Frankfort, Kentucky, 40601, within thirty (30) days of the date of legal publication.

#### **\*Example\***

ABC Company, Inc. d/b/a Your Liquor Place hereby declares its intention(s) to apply for a Quota Retail Package license and NQ Retail Malt Beverage Package license no later than September 30, 2019. The licensed premises will be located at 123 Only Street, Somewhere, Kentucky, 40000. The sole owner and president is Sally Smith, 456 Lone Alley, Anywhere, Kentucky, 40001. Any person, association, corporation, or body politic may protest the granting of the license(s) by writing the Department of Alcoholic Beverage Control, 500 Mero St 2NE33, Frankfort, Kentucky, 40601, within thirty (30) days of the date of legal publication.