



ABC Licensing and Compliance Division

This Pre-Application packet must be completed in full prior to scheduling an appointment.

In this packet is a list of documents that are REQUIRED to obtain an ABC Alcohol or Tobacco License. Once you have your paperwork together and this packet filled out entirely, you will need to scan and email the packet and supporting documentation, so that it can be reviewed. Once it is reviewed you will be notified of any corrections that need to be made. If no corrections are necessary, an appointment will be scheduled with you to have your application entered into the system. The local ABC Office works with applicants **BY APPOINTMENT ONLY**. The day of your appointment it is imperative that you arrive on time.

Please use the attached checklist (Form LCD-2) to assist you in gathering the necessary documents for your application. If you have any questions, please contact your local ABC Office for assistance.

1. Applicant Name: _____
(Individual or legal entity responsible for this license; i.e. Sole Proprietor, Corporation, Association, Partnership, LLC, LLP)
 2. Doing Business As: _____
 3. Location Address: _____
Street Address (include Suite/Building Number) City County Zip
 4. Governing Jurisdiction: _____
(Where business is physically located - City or County Limits) If business is located in the county, distance to nearest city limits
 5. Police Jurisdiction: _____
(Where business is physically located - City or County Limits)
 6. Mailing Address: _____
Street Address (include Suite/Building Number) City State Zip
Check if same as location address
 7. Type of Ownership: _____
(Individual, Partnership, LLP, LLC, Corporation, Association)
 8. State Incorporated: _____ Date Incorporated: _____
County Incorporated: _____ Date of Authority to do Business in Alabama: _____
 9. Alabama State Sales Tax ID number: _____ 10. Federal Tax ID: _____
 11. Have you ever legally changed your name? _____
 12. Have you ever legally changed your social security number? _____
 13. Please list all known Aliases and Nicknames:
(any other names you have used or currently use)
-
- | | |
|-------------------------------|--|
| Contact Name: _____ | Contact Relationship: _____
<small>(Relationship to business)</small> |
| Contact Primary Number: _____ | Contact Secondary Number: _____ |
| Owner Primary Number: _____ | Owner Secondary Number: _____ |
| Contact E-mail Address: _____ | Owner E-mail Address: _____ |
| Web Address: _____ | |

**** PLEASE NOTE: It is extremely important to notify the ABC Board of any changes to the licensee's contact information for renewal purposes****

The following information is **required** for each and every person with proprietary or profit interest. If the applicant is a corporation, Limited Liability Company, etc. please list every member/officer along with the information requested below. This does not apply to publicly traded corporations but we will still need a list of officers/members of publicly traded companies.

14. Individual or Officer Information

Full Name: _____
First Middle Last

Title: _____ Driver's License/State: _____ Expiration Date: _____
I am: A United States Citizen A Legal Resident of the United States

Social Security Number: _____ - _____ - _____ Home Phone Number: _____ Date of Birth: _____

Place of Birth: _____

Residence Address: _____ / _____
Address (include Suite/Building Number) City State Zip

Full Name: _____
First Middle Last

Title: _____ Driver's License/State: _____ Expiration Date: _____
I am: A United States Citizen A Legal Resident of the United States

Social Security Number: _____ - _____ - _____ Home Phone Number: _____ Date of Birth: _____

Place of Birth: _____

Residence Address: _____ / _____
Address (include Suite/Building Number) City State Zip

Full Name: _____
First Middle Last

Title: _____ Driver's License/State: _____ Expiration Date: _____
I am: A United States Citizen A Legal Resident of the United States

Social Security Number: _____ - _____ - _____ Home Phone Number: _____ Date of Birth: _____

Place of Birth: _____

Residence Address: _____ / _____
Address (include Suite/Building Number) City State Zip

Full Name: _____
First Middle Last

Title: _____ Driver's License/State: _____ Expiration Date: _____
I am: A United States Citizen A Legal Resident of the United States

Social Security Number: _____ - _____ - _____ Home Phone Number: _____ Date of Birth: _____

Place of Birth: _____

Residence Address: _____ / _____
Address (include Suite/Building Number) City State Zip

Additional officers/members must be listed on a separate sheet

15. Will you be: Selling Retail Manufacturing/Importing Selling Wholesale
16. Which of the following will you sell: Wine Beer Spirits Tobacco
17. Will you sell: On-Premises Off-Premises On and Off Premises
18. Will the business be operated primarily as a package store? Yes No
19. Display square footage: _____
20. Building dimensions square footage: _____
21. License Structure: Single Structure Shopping Center Single Level Multiple Levels
22. License Covers: Entire Structure Top Floor Bottom Floor Other
- Please explain in detail:
23. Is the physical structure of your business completed (pertains to remodeling, new structures, etc)? Yes No
If no, please explain in detail:
24. Upon issuance of this license, is your business ready for the sell and/or consumption alcohol and/or tobacco? Yes No
If no, please explain in detail:
25. Has applicant complied with Financial Responsibility ABC Rules and Regulations 20-X-5-.14 regarding Liquor Liability? Yes No
Liquor Liability Expiration Date:
26. Does ABC have any pending actions against you or any member of the applying entity? Yes No
If yes, please explain in detail:
27. If a transfer, does ABC have any pending violations against the current licensee? Yes No
If yes, please explain in detail:
28. Has anyone, including the manager or applicant, had a Federal/State permit or license suspended or revoked? Yes No
If yes, please explain in detail:
29. Are the applicant(s) named above the only person(s) interested in the business sought to be licensed (ie. Silent Partner)? Yes No
If no, please explain in detail:
30. Does anyone involved with this license application have any monetary interest in any other ABC licensed/permitted establishment?
Yes No
If yes, please explain in detail:
31. Does applicant own or control, directly or indirectly, hold lien against any real or personal property which is rented, leased or used in the conduct of business by the holder of any vinous, malt or brewed beverage, or distilled liquors permit or license issued under the authority of this act? For example, applicant is applying for a retail beer license but also owns a property that is a licensed premise to manufacture beer. Yes No
If yes, please provide business name and license number:
32. Is the applicant receiving, either directly or indirectly, any loan, credit, money, or the equivalent thereof, from or through a subsidiary or affiliate or any other licensee, or from any firm, association, or corporation operating under or regulated by the authority of this act? For example, applicant is applying for a restaurant license and borrowed money to open their business from the owner of a distillery.
Yes No
If yes, please provide business name and license number:

If the premise is to be used for on-premises service and consumption, please answer the following questions:

33. Have the requirements of Rules and Regulations 20-X-6-.02 (6) and (7) been met? Yes No
34. Service and Consumption area Square Footage: _____ (must be at least 500 sq. ft.)
35. Seating Capacity in Consumption area: _____ (must be enough seating for a minimum of 16)
36. Does the proposed licensed premise contain a fully operational kitchen including a stove, refrigerator and sink? Yes No
37. Is the business used to habitually and principally provide food to the public? Yes No
38. Does the proposed licensed premise have a functioning sink or sanitizing area for dishes? Yes No
39. Does the proposed licensed premise have functioning restroom facilities? Yes No
40. Does the proposed licensed premise include a patio area? Yes No

41. Has any person(s) with any interest, whether as applicant, officer, member or partner been charged (whether convicted or not) with any law violation(s) – Include DUI's but can exclude minor traffic offenses Yes No

If yes, please explain below:

Name	Violation & Date	Arresting Agency	Disposition

**Additional violation history on a separate sheet

SPECIAL EVENTS LICENSE ONLY (TEMPORARY LICENSE)

Will the event be 7 days or less? Yes No
 Will the event be more than 7 days but less than 30 days? Yes No

Event Start Date _____ Event End Date _____

Description of special event location: _____

(tent, city park, parking lot, etc): _____

Type of alcoholic beverages to be sold (Beer, wine, Liquor): _____

Other Restrictions that apply: _____

(031) OR (032) CLUB LIQUOR RETAIL LICENSE ONLY

031- Non-profit Private Club – Do you have a minimum of 150 members? Yes No
 032- Private Club – Do you have a minimum of 100 members? Yes No
 Have you met all requirements as outlined in 20-X-5-.03? Yes No

(See www.abc.alabama.gov under the legal heading)

IMPORTANT FACTS ABOUT AN ABC LICENSE

- The Alabama ABC License must be on the premise before you can order from a distributor or sell alcoholic beverages.
- Alabama ABC licenses are location specific and cannot be moved to any other location without completing a location transfer.
- Your local ABC office must be notified, in writing, of any changes in ownership with-in twenty days. **NO EXCEPTIONS.**
- No alcoholic beverages are allowed on the premises except that which is purchased by the ABC licensee and approved for sale within this state.
- Alabama ABC Licenses operate on a fiscal year and expire annually on September 30th. The License Renewal Period is from June 1st through July 31st of each year. The State of Alabama does NOT pro-rate the license fee.
- ABC licenses will be renewed online annually and printed by the licensee.
- All ABC Licensees are required to provide a valid e-mail address in order to receive their renewal notice and other important announcements.
- Any and **ALL** areas of an ABC licensed/permitted location is subject to inspection for compliance during their regular business hours by any Alabama ABC License Inspectors, any Law Enforcement Agency, and any other appointed agents of the Board.
- Any ABC licensed location is enforced according to and must abide by state laws set forth by Code of Alabama 1975, Title 28, and ABC Rules and Regulations. Both can be found on our website at www.abc.alabama.gov under the legal heading.