

Please check applicable		
boxes:		
□ Auction		
□ Beer	\$0.00	
□ Wine	\$0.00	

ABCA-192 NPE

WEST VIRGINIA ALCOHOL BEVERAGE CONTROL ADMINISRATION SPECIAL ONE DAY LICENSE WINE AND/OR BEER AUCTIONING EVENT

Pursuant to West Virginia State Code §60-8-3(p), a nonprofit may allow the charitable auctioning of certain sealed bottles of wine for off-premises consumption only, when raising money for athletic, charitable, educational, or religious purposes. Beer may be auctioned at a charitable auction event in sealed bottles or cans for off-premises consumption only, when raising money for athletic, charitable, educational, or religious purposes.

"Auction or auctioning", for the purposes of this subsection, means any silent, physical act, or verbal bid auction, whether or not such auction requires in-presence bidding or online Internet-based electronic bidding through a secure application or website. All beer must be purchased through a licensed WV Beer Distributor.

Please return form, copies of the 501 (c)(3) nonprofit organization documentation, and floor plan for approval

consideration.

Name of Applicant:

Name of Event:

Location of Event:

Address of Event & County:

Event Date:

Detailed Description of Event and the charitable purpose for which the event is being held:

Does the applicant or the physical location currently hold a WVABCA License:

DBA:

*Wine and/or Beer auctions may not be held at venues that currently are licensed by the WVABCA

Are Wines Purchased: □ Yes □ No Purchased From:	
Retailer(s):	

Farm Winery/Winery(s):		
	Donated By:	
•		
Distributor(s):		-
area (no donated beer). All dis	nting beer must be purchased from licensed stributors and resident brewers must be no vance and be presented the opportunity to po	otified in writing by mail, facsimile or
	oceeds of the event will be used to benefit the ne charitable event must be donated directly to	
I, as the applicant(s), do attest, ur	nder penalty of perjury, that at least 80% of t	he net proceeds, from the charitable
event, will be donated directly to	the nonprofit organization on or before	, 20
Signature of Applicant:		Date:
Applicant Name (print):	provided is complete, true and accurate.	
Applicant Name (signature):		
Email:	Telephone #:	
Date:		
Return to the WVABCA: Attn: Licensing Division 900 Pennsylvania Ave. 4 th Floor		
Charleston, WV 25302	Or	ABCA.Licensing@wv.gov
	WVABCA Use Only Approved □ Yes	□ No
	Fredric L. Wooton, Commissioner	
	Date	

The Floor Plan must show the area and dimensions covered by the "Special One Day License".		
Keep one (1) copy at the licensed premises.	(Provide Dimensions)	
Signature	Date	