



**STATE OF WEST VIRGINIA  
DEPARTMENT OF REVENUE  
ALCOHOL BEVERAGE CONTROL ADMINISTRATION  
900 Pennsylvania Avenue, 4<sup>th</sup> Floor  
Charleston, WV 25302**

**INSTRUCTIONS FOR NON-RETAIL LIQUOR AND WINE LICENSE APPLICATION FORM ABCC-WS-3**

PLEASE READ ALL THE INSTRUCTIONS CAREFULLY. ALL QUESTIONS ARE TO BE ANSWERED IN FULL. APPLICANT'S ACCURACY AND THOROUGHNESS IN COMPLETING THE APPLICATION FORM WILL ASSIST THIS OFFICE IN PROCESSING THE APPLICATION AND PREVENT UNNECESSARY DELAYS.

**APPLICANTS MUST TYPE OR PRINT, IN INK, ALL ANSWERS ON ALL FORMS**

**INSTRUCTIONS**

False representations made in application or failure to comply with Chapter 60 of the West Virginia Code (State Code of Alcoholic Liquors) and Legislative Rules and regulations promulgated thereunder, may result in denial, revocation or suspension of the license.

Any person holding any interest in a Wine Supplier or West Virginia Licensed Wine Distributor may not hold any interest in a retail wine establishment or private wine restaurant.

Any person holding any interest in a West Virginia Distillery or a West Virginia Mini-Distillery may not hold any interest in a retail liquor outlet, private club or private wine restaurant establishment.

Licensing Periods:

- Wine Supplier, Wine Distributor, Farm Winery, and Direct Shipper license period begins July 1 and ends June 30 of each year.
- Distillery and Mini Distillery license period begins January 1 and ends December 31 each year.

License fees must be paid by Certified Check, Cashier's Check, Company Check or Money Order payable to the West Virginia Alcohol Beverage Control Administration. Personal checks or cash will not be accepted.

If the license is for a Wine Supplier, Wine Distributor or Direct Shipper is issued for less than a full year, the fee may be prorated as follows:

License Application Submitted  
July 1 Through June 30  
January 1 through June 30

License Fee  
Full License Fee  
½ of the Fee

**An additional \$100.00 Operational Fee is to be submitted with your application (This fee does not apply to direct shippers); and may be included with all fees in your Certified Check, Cashier's Check or Money Order. This fee is non-prorated and non-refundable.**

Documents which must accompany the application:

- If an Association – a copy of the Certificate of Authority and Agreement of Association
- If a Limited Liability Company - a copy of the Certificate of Authority and Agreement of Organization
- If a Corporation – a copy of the Certificate of Authority and Agreement of Organization
- A copy of the applicant’s federal permit, as required under the Federal Alcohol Administration Act
- A copy of West Virginia business license registration
- If out-of-state entity, a copy of current wine license from state of domicile
- A letter of Good Standing from the WV State Tax Department and if an out-of-state entity, a letter of good standing from the state of domicile (Forms to request a Letter of Good Standing from WV are included with this packet)
- If applying as a resident Distillery or Mini Distillery – submit copies of all documents which have been submitted to the Trade Tax Bureau (TTB), along with documentation of the inspection report and approval

The application must be signed as follows and all signatures must be notarized:

- If an Individual, by the owner
- If a Partnership/Limited Partnership, all parties
- If an Association, all members
- If a Corporation, president or vice president
- If a Limited Liability Company all members if member managed/manager if manager managed

**\*All Members, Officers, Managers, Individuals and Associates must be U.S. Citizens.**

A farm winery license shall be issued only to, or held by, an applicant qualified to operate or who is operating a winery or wine cellar bonded under the laws and regulations of the United States. Form and instructions are available by calling the toll-free number at 800-937-8864 or available through download at the following website: <http://www.ttb.gov/taxauditpermits.shtml>

All applicants must apply for the “Special Occupation Tax (TTB F 5630.5a)” with the Alcohol and Tobacco Tax and Trade Bureau. Form and instructions are available by calling the toll-free number at 800-937-8864 or available through download at the following website: <http://www.ttb.gov/forms/f5630d.pdf>

Wine Supplier and Distributor Bonds – Please see bond instructions for proper completion:

- Wine Suppliers – Applicants must complete bond form ABCC-WS-3-B in the amount of \$10,000.
- Wine Distributors – Applicants must complete bond form ABCC-WX-1-B in the amount of \$10,000.

**\*A Trust cannot hold a percentage of ownership in any license listed on this application other than a Distributors license.**

**MAIL COMPLETED APPLICATION, FEES, AND REQUIRED ACCOMPANYING FORMS TO:**

West Virginia Alcohol Beverage Control Administration  
ATTN: Licensing Division  
900 Pennsylvania Avenue, 4<sup>th</sup> Floor  
Charleston, WV 25302

**IF YOU HAVE ANY QUESTIONS OR NEED ASSISTANCE PLEASE CALL THE ADMINISTRATION AT 1-800-642-8208 OR (304) 356-5500 AND ASK FOR THE LICENSING DIVISION.**



Form ABCC-WS-3  
Revised 06/19

Licensing Period: \_\_\_\_\_ to \_\_\_\_\_

License Number: \_\_\_\_\_

Applying As:

Individual

Partnership

Ltd. Partnership

Ltd. Liability Corp.

Corporation

Association

**West Virginia Alcohol Beverage Control Administration**  
 900 Pennsylvania Avenue, 4<sup>th</sup> Floor Charleston, WV 25302

**Non-Retail Liquor and Wine License Application**

<input type="checkbox"/> Wine Supplier Questions 1 – 15 License Fee .....\$150 *Operational Fee ..... \$100	<input type="checkbox"/> Distillery/Winery Questions 1 – 15 Sections I & III License Fee ..... \$1,500 *Operational Fee ..... \$100	<input type="checkbox"/> Mini Distillery Questions 1 – 15 Sections I & III License Fee ..... \$50 *Operational Fee ..... \$100	<input type="checkbox"/> Farm Winery Questions 1 – 15 Sections I & III License Fee ..... \$50 *Operational Fee ..... \$100	<input type="checkbox"/> Multi Capacity Questions 1 – 15 License Fee ..... \$300 *Operational Fee ..... \$100	<input type="checkbox"/> Wine Distributor Questions 1 – 15 Sections I & III License Fee ..... \$2,500 *Operational Fee ..... \$100	<input type="checkbox"/> Direct Wine Shipper Questions 1 – 15 License Fee <b>\$150</b> to ship < 14% ABV <b>\$250</b> to ship >14% ABV
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1. Business Entity Name \_\_\_\_\_ 2. FEIN \_\_\_\_\_

3. Business DBA Name \_\_\_\_\_ 4. Telephone \_\_\_\_\_

5. Business Physical Address \_\_\_\_\_

(STREET) (CITY) (STATE) (ZIP CODE)

6. Business Mailing Address \_\_\_\_\_

(STREET) (CITY) (STATE) (ZIP CODE)

7. Email \_\_\_\_\_

8. Contact Person \_\_\_\_\_ Telephone \_\_\_\_\_

9. Has applicant or any officer been:

- a. Convicted of a felony? When \_\_\_\_\_ If yes, attach written explanation. Yes  No
- b. Convicted of a violation of federal or state alcohol laws? If yes, attach written explanation. Yes  No
- c. Convicted of a criminal offense (misdemeanor) within the last 5 years? If yes, attach explanation. Yes  No
- d. Refused any type of alcohol license or permit in any state? State \_\_\_\_\_ If yes, attach explanation. Yes  No
- e. Provide certified copies of all arrests.

10. Has applicant or any officer had:

- a. A hearing before the WVABCA Commissioner? If yes, attach written explanation. Yes  No
- b. Any type of WVABCA license or permit sanctioned? If yes, attach written explanation. Yes  No

11. Has applicant been refused any type of alcohol license or permit in any state? Yes  No

If yes, attach written explanation.

12. Does applicant, officers, directors or any blood relative hold any real estate, buildings, or equipment used by any WV retail licensee? If yes, attach a written explanation and provide name, address and interest. Yes  No

13. Does applicant, partner, member, stockholder, director, or any blood relative hold any interest in a licensed retailer in West Virginia? If yes, attach a written explanation and provide name, address and interest. Yes  No

14. Date and state your business incorporate or organized \_\_\_\_\_

Please include corporate charter or organization papers

15. Supply the following information about the owners, officers, directors, individuals, associates and manager:

Title _____	Title _____	Title _____
Name _____	Name _____	Name _____
Res. Address _____ _____	Res. Address _____ _____	Res. Address _____ _____
Telephone _____	Telephone _____	Telephone _____
% Ownership _____ DOB _____	% Ownership _____ DOB _____	% Ownership _____ DOB _____
SSN _____ _____	SSN _____ _____	SSN _____ _____
WV Resident Y / N US CITIZEN* Y / N	WV Resident Y / N US CITIZEN* Y / N	WV Resident Y / N US CITIZEN* Y / N

Use a separate sheet, if necessary.

**\*\* IF NATURALIZED U.S. CITIZEN, MUST SUBMIT COPY OF NATURALIZATION DOCUMENTS. ALL MEMBERS, OFFICERS, MANAGERS, INDIVIDUALS AND ASSOCIATES MUST BE US CITIZENS.**

**\*\*TITLE REFERS TO CORPORATE OFFICERS, PRESIDENT, VICE PRESIDENT, SECRETARY, TREASURER, MEMBER**

**SECTION I: To be completed by Wine Distributors, Wineries, Farm Wineries, Distilleries and Mini Distilleries.**

- A. County which business is located \_\_\_\_\_
- B. Does the applicant own the premises to be licensed?  Yes  No  
 If no, does applicant hold a valid lease?  Yes  No Expiration date of lease \_\_\_\_\_  
 Property owner name/address \_\_\_\_\_  
 \_\_\_\_\_
- C. Attach a Copy of the Lease.
- D. Does the premises to be licensed conform to health, fire and zoning regulations?  Yes  No

**SECTION II: To be Completed by Wine Distributors.**

- A. Has applicant entered into any exclusive franchise agreement with a manufacturer, producer, processor, distributor, or supplier of wine whereby the applicant has been given the exclusive right within West Virginia or any given territory within West Virginia to distribute the product(s) of such manufacturer, producer, processor, distributor or supplier which are to be sold or distributed in West Virginia?  Yes  No  
 If yes, please explain. \_\_\_\_\_

**SECTION III: To be completed by Wine Distributors.**

- A. Annual production capacity is \_\_\_\_\_ gallons.
- B. Is the applicant, directly or indirectly, by means of signs, equipment, money, property or otherwise, giving aid to assistance to the holder of any retail beer or intoxicating liquor permit issued by the authority of this State?  
 Yes  No
- C. Does applicant own or control any real or personal property, which is rented, leased or used by the holder of any retail beer or intoxicating liquor permit issued by the authority of this State?  Yes  No  
If yes, please explain. \_\_\_\_\_
- D. Is your place of business in a section zoned by a county or municipality?  Yes  No
- E. Give number and classification of former beer, wine and spirituous liquor permits. If any. \_\_\_\_\_
- F. Name nearest church (state distance in feet) \_\_\_\_\_
- G. Name nearest school (state distance in feet) \_\_\_\_\_
- H. Is place of business located in business, residential or rural neighborhood? \_\_\_\_\_

Should the applicant fail to fully carry out and fulfill in every respect the laws of West Virginia, then the Commissioner shall have the right to terminate or revoke this license or permit and declare forfeited the penalty of the bond (if a bond is required for the selected license type). However, it is agreed and understood by and between the parties hereto that before such bond shall be forfeited a hearing shall be held in the Office of the West Virginia Alcohol Beverage Control Commissioner in the city of Charleston, West Virginia, after ten (10) days written notice to the applicant, setting forth the charge and the time and place of hearing thereon said notice shall be served the applicant by registered mail at the address hereinabove set forth.

Instructions for signing:

- If an individual, by the owner.
- If a Partnership/Limited Partnership, all partners
- If an Association, all members
- If a Corporation, president or vice president
- If a Firm, all members if member managed/manager if manager managed

**NOTE: All changes in ownership interest during the license year must be reported immediately to the WVABCA Commissioner.**

STATE OF \_\_\_\_\_,

COUNTY OF \_\_\_\_\_, to wit:

In support of the foregoing application, the undersigned makes oath that the statements contained herein and all attachments are true to the best of his/her knowledge and belief.

Date \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_



Seal of Notary

Given under my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Commission Expires



**State of West Virginia  
Department of Revenue  
Alcohol Beverage Control Administration  
900 Pennsylvania Avenue, 4<sup>th</sup> Floor  
Charleston, WV 25302**

Every person, company, or corporation intending to do business in West Virginia must register with the West Virginia State Tax Department. Additionally, corporations, limited partnerships and limited liability companies must register with the West Virginia Secretary of State.

Please consult with the appropriate person (s) in your organization about compliance with the business registration requirements in West Virginia. Should further assistance be necessary, you may contact the following sources for registration information:

**West Virginia State Tax Department**

Taxpayer Services Division  
P.O. Box 3784  
Charleston, WV 25337-3784  
(304) 558-3333 or  
1-800-982-8297

<http://www.state.wv.us/taxrev/forms/2009/businessRegistration.booklet.pdf>

**Secretary of State**

Corporations Division  
Capitol Complex  
Building 1, Room 151  
1900 Kanawha Blvd. E.  
Charleston, WV 25305  
(304) 558-8000

<http://www.sos.wv.gov/business-licensing/business/Pages/businessdivision.aspx>

**GSR-01**

Rev.12/18

West Virginia

**Request for Statement of Good Standing**West Virginia  
State Tax  
Department

Taxpayer Identification Number \_\_\_\_\_ Complete Business Name \_\_\_\_\_

Parent Company FEIN (If applicable, this would be the company that business returns are filed under.) \_\_\_\_\_

Business Location \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street City State Zip**PURPOSE FOR REQUEST (CHECK ONE):** ABCA     DMV     DOH     SOS     Bank Loan     Other (specify below) \_\_\_\_\_

I understand that in the event that this business is not in good standing with the Tax Department I will be notified in writing as to what tax returns or tax payments are considered not filed or paid and who to contact with any questions regarding that situation.

By signing this Request for Statement of Good Standing, I certify under penalty of perjury that I am the taxpayer or the taxpayer's authorized representative and am entitled to receive the result of this request.

If you are a CPA or Attorney completing this Request for Statement of Good Standing for a business of which you are not a principle, a principle of the business must ALSO sign this request as the taxpayer.

If you are authorizing release of information for someone who is not a CPA or Attorney, this form must be notarized.

\_\_\_\_\_  
Taxpayer Signature Title Date\_\_\_\_\_  
Print Name Phone E-mail\_\_\_\_\_  
CPA/Attorney Signature Title Date\_\_\_\_\_  
Print Name Phone E-mail\_\_\_\_\_  
Signature of person other than taxpayer, CPA, or attorney (Form must be notarized). Title Date\_\_\_\_\_  
Print Name Phone E-mail

State of West Virginia

County of \_\_\_\_\_, to-wit,

This day appeared before me, the undersigned notary public \_\_\_\_\_, who  
acknowledge under oath the signature above.\_\_\_\_\_  
Notary public

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Date**Send this request to:**West Virginia State Tax Department  
ATTN: TPS – Support Unit  
PO Box 885  
Charleston, WV 25323-0885**Phone Numbers:**(304) 558-3333  
(800) 982-8297  
Follow Prompts for  
Statement of Good Standing Requests.