



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

INSTRUCTIONS FOR COMPLETING APPLICATION FOR RETAIL LICENSE-ON PREMISES
PRIVATE HOTEL, PRIVATE RESORT HOTEL, PRIVATE GOLF CLUB & PRIVATE GOLF COURSE

Requirements ---- Private Hotel - \$2,816.67, plus \$100.00 operational fee

- Has at least 2,000 members.
- Offers short-term daily-rate accommodations or lodging for members and their guests of at least 30 separate bedrooms.
- Maintains, at any one time, \$2,500 of fresh food inventory capable of being prepared in the private hotel's kitchen. Such food inventory does not include microwavable, frozen or canned foods.
- Owns or leases, controls, operates and uses 1 acre but fewer than 3 acres, which are all contiguous acres of bounded or fenced real property which would be listed on the licensee's floorplan and would be used for destination hotel and large contracted for group-type events such as weddings, reunions, conferences, meetings, and sporting or recreational events.
- Operates a restaurant and full kitchen with ovens, four-burner ranges, walk-in freezers and other kitchen utensils and apparatus, as determined by the commissioner, on the licensed premises and serves freshly prepared food at least 20 hours per week.
- Lists the entire property and all adjoining buildings and structures on the private hotel's floorplan which would comprise the licensed premises, which would be authorized for the lawful sales, service and consumption of alcoholic liquors and nonintoxicating beer throughout the licensed premises whether these activities were conducted in a building, structure or outdoors while on the private hotel's licensed premises and as noted on the private hotel's floorplan.
- Has an identified person, persons or entity that has right, title and ownership or lease interest in the real property buildings and structures located on the proposed licensed premises.
- Utilizes an age verification system approved by the commissioner for persons under the age of 18.

Requirements ---- Private Resort Hotel - \$5,150 - \$15,150, plus \$100.00 operational fee

- Has at least 5,000 members.
Offers short-term daily-rate accommodations or lodging for members and their guests of at least 50 separate bedrooms.
- Operates a restaurant and full kitchen with ovens, six-burner ranges, walk-in freezers and other kitchen utensils and apparatus, as determined by the commissioner, on the licensed premises and serves freshly prepared food at least 25 hours per week.
- Maintains at any one time, \$5,000 of fresh food inventory capable of being prepared in the private hotel's kitchen. Such food inventory does not include microwavable, frozen or canned foods.
- Owns or leases, controls, operates and uses acreage amounting to 10 or more contiguous acres of bounded or fenced real property which would be listed on the licensee's floorplan and would be used for destination, resort and large contracted for group-type events such as weddings, reunions, conferences, meetings and sporting or recreational events.
- Lists the entire property and all adjoining buildings and structures on the private resort hotel's floorplan which would comprise the licensed premises, which would be authorized for the lawful sales, service and consumption of alcoholic liquors throughout the licensed premises whether these activities were conducted in a building, structure or outdoors while on the private resort hotel's licensed premises and as noted on the private resort hotel's floorplan.
- Has an identified person, persons or entity that has right, title and ownership or lease interest in the real property buildings and structures located on the proposed licensed premises.
- Utilizes an age verification system approved by the commissioner for persons under the age of 18.

Requirements — Private Golf Club (18 hole) - \$2,816.67, plus \$100.00 operational fee

- Has at least 100 members.
- Maintains at least one 18-hole golf course with separate and distinct golf playing holes, not re-using 9 golf playing holes to compromise the eighteen golf playing holes.
- Operates a restaurant and full kitchen with ovens, as determined by the commissioner, on the licensed premises and serves freshly prepared food at least 15 hours per week.
- Owns or leases, controls, operates and uses acreage amounting to 80 contiguous acres of bound or fenced real property which would be listed on the private golf club's floorplan and could be used for golfing events and large contracted group-type events such as weddings, reunions, conferences, meetings and sporting or recreational events. Lists the entire property and all adjoining building and structures on the private golf club's floorplan which would comprise the licensed premises, which would be authorized for the lawful sales, service and consumption of alcoholic liquors throughout the licensed premises whether these activities were conducted, in a building, structure or outdoors while on the private golf club's licensed premises and as noted on the private golf club's floorplan.
- Has an identified person, persons or entity that has right, title and ownership interest in the real property buildings and structures located on the proposed licensed premises.
- Utilizes an age verification system approved by the commissioner for persons under the age of 18.

Requirements — Private Golf Course (9 hole) - \$1,483.33, plus \$100.00 operational fee

- Has at least 50 members.
- Maintains at least one 9-hole golf course with separate and distinct golf playing holes.
- Operates a restaurant and full kitchen with ovens, as determined by the commissioner, on the licensed premises and serves freshly prepared food at least 15 hours per week.
- Owns or leases, controls, operates and uses acreage amounting to 30 contiguous acres of bound or fenced real property which would be listed on the private golf club's floorplan and could be used for golfing events and large contracted for group-type events such as weddings, reunions, conferences, meetings and sporting or recreational events. Lists the entire property and all adjoining building and structures on the private golf club's floorplan which would comprise the licensed premises, which would be authorized for the lawful sales, service and consumption of alcoholic liquors throughout the licensed premises whether these activities were conducted, in a building, structure or outdoors while on the private golf club's licensed premises and as noted on the private golf club's floorplan.
- Has identified person, persons or entity that has right, title and ownership interest in the real property buildings and structures located on the proposed licensed premises.
- Utilizes an age verification system approved by the commissioner for persons under the age of 18.

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.

PLEASE VISIT THE WVABCA WEBSITE WWW.ABCA.WV.GOV FOR MORE DETAILED INSTRUCTIONS REGARDING "SERVICES" AND LICENSE TYPES IN HB 2025 AND HB 4848.

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

Please find enclosed:

- 1.) Application for Private Hotel, Private Resort Hotel, Private Golf Club, or Private Club Golf Course Class A - Consumption On Premises, (ABCA 192A - RG)
- 2.) Release of Information & Waiver of Confidentiality of Records (ABCA-Lic. RIWCR.2)
- 3.) Alcohol Beverage Control Bond (ABCA-193) and Nonintoxicating Beer Bond (ABCA-194)
- 4.) Floor Plan (ABCA-Lic.FP3), give dimensions of licensed premises and designated outdoor areas
- 5.) Zoning Form (ABCA-Lic.Z.2)

INSTRUCTIONS

- All questions and/or descriptions must be answered. The application must be signed and notarized. If any questions/description cannot be completed in the available space on the application, please submit additional pages as needed. Each additional page submitted must include entity name, DBA name, and indicate which question applicant is answering.

- Applications must be completed correctly, and all necessary paperwork included when mailed to the WVABCA. Failure to do so will result in the application being delayed and/or returned to the applicant for the necessary corrections.
- LEASE — Applicants must provide a copy of a valid lease if not the property owner.
- Deed and/or Survey Plat — Must depicted acreage amounts.
- LICENSE FEES — License fees must be paid by Certified Check, Cashier's Check, or Money Order. Business checks, or Cash will not be accepted. Make checks payable to the WVABCA.
- All retail licenses are valid from issue date to June 30th of the current licensing period. If applying for a license to be issued after December 31st, most license fees are semiannually prorated to half the initial fee.
- LIVE SCAN FINGERPRINTING — All applicant(s) must complete a Live Scan Fingerprint in order to obtain a valid license. IdentoGO by Morpho Trust will provide fingerprinting services for all WVABCA license applicants. Contact IdentoGO at 855-766-7746 or online at Llenrollment.com for information on fingerprinting, locations, scheduling appointments, and fee requirements. Please note due to federal requirements Live Scan Fingerprinting must be performed by all license applicants.
Please contact the WVABCA Licensing Department at 304-356-5500 to obtain the proper service code for the Live Scan Fingerprinting process.
Fingerprint result reports **MUST** be sent to the WVABCA directly from Morpho Trust(L-1).
NO REPORTS WILL BE ACCEPTED DIRECTLY FROM LICENSE APPLICANTS.
- BONDS — Applicants must have a \$1,000.00 Nonintoxicating Beer Bond and a \$5,000.00 Alcohol Beverage Control Bond completed on the form(s) provided by the WVABCA.
- HEALTH PERMIT — Applicants must provide a copy of a valid Health Permit issued in applicant's name for the entire proposed premises. (If an Association, Limited Liability Company, or Corporation, the Health Permit must be issued in the business entity name and list the DBA name.)
- WV SECRETARY OF STATE — All Associations, Corporations and Limited Liability Companies must be duly certified and registered with the WV Secretary of State.

INSTRUCTIONS FOR SIGNING:

- a) If an Association, by **each** member of the governing board.
 - b) If a Corporation, by **all** officers, or by other persons specifically authorized by corporate resolution (copy of resolution must be enclosed).
 - c) If a Limited Liability Company, by **all** members.
 - d) Manager(s) must sign- a manager should be listed unless owners will be day to day manager.
- All applicants must apply for a "Special Occupation Tax (TTB F 5630.5d)" with the Alcohol and Tobacco Tax and Trade Bureau. Form and instructions are available through download at the following website: <http://www.ttb.gov/forms/f56305d.pdf> or by calling the toll-free number at 1-800-937-8864. A copy of the TBB form must be submitted with application to the WVABCA.

BUSINESS CLOSURE

The license may not be abandoned, rented, leased, given, loaned, or sold to another. Upon sale or closure of the applicant's business, the license must be returned to the WVABCA Licensing Department. Please include reason for closure, date business closed, and signature on back of license.

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

West Virginia Alcohol Beverage Control Administration
 ATTN: Licensing Division
 900 Pennsylvania Avenue, 4th 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.

CHECKLIST OF FORMS/PAPERS TO RETURN TO THE WVABCA, LICENSING DIVISION:

- Application Form
- Release of Information & Waiver of Confidentiality of Records
- Copy of Valid Lease (if not owner)
- Copy of Deed and/or Survey Plat
- License Fee(s)
- Floor Plan (Detailed Map of Buildings, Facilities, and Bounded Outdoor Areas)
- Copy of Valid Health Permit
- Zoning Form completed by Applicant & Municipality if Within City Limits or, Zoning Form
- Completed by Applicant & Letter from County Commission if Outside City Limits
- Copy of TTB Form

WEST VIRGINIA ALCOHOL BEVERAGE CONTROL ADMINISTRATION

APPLICATION FOR RETAIL LICENSE

CONSUMPTION "ON PREMISES"

PRIVATE HOTEL, PRIVATE RESORT HOTEL, PRIVATE GOLF CLUB & PRIVATE GOLF COURSE

CLASS A

FOR FISCAL YEAR _____ TO _____

COUNTY: _____

PLEASE CHECK ALL APPROPRIATE BOXES BELOW. BE SURE TO CHECK THE BOX(ES) BESIDE EACH (ALL) OF THE LICENSES FOR WHICH YOU ARE APPLYING.

<p style="text-align: center;">A. APPLICATION PRIVATE RESORT HOTEL</p> <p><input type="checkbox"/> Private Hotel (up to 3 alcohol designated areas) \$2,816.67</p> <p><input type="checkbox"/> Private Resort Hotel (5 or fewer designated areas)\$5,150.00</p> <p><input type="checkbox"/> Private Resort Hotel (at least six but no more than 10 designated areas) \$8,483.33</p> <p><input type="checkbox"/> Private Resort Hotel (at least 11 but no more than 15 designated areas)\$11,816.67</p> <p><input type="checkbox"/> Private Resort Hotel (no fewer than 16 & no more than 20 designated areas)\$15,150.00</p> <p style="padding-left: 20px;">* Private Hotel (1 to 3 acres with up to 3 alcohol designated locations)</p> <p style="padding-left: 20px;">* These fees include liquor, wine, and beer</p> <p style="padding-left: 20px;">* Private Resort Hotel (10 acres or more and has at least 50 separate bedrooms)</p> <p><input type="checkbox"/> Private Caterer (Private Hotel or Private Resort Hotel)\$666.67</p>	<p style="text-align: center;">B. APPLICATION PRIVATE GOLF CLUB</p> <p><input type="checkbox"/> Private Club Golf Club 18 holes\$2,816.67</p> <p><input type="checkbox"/> Private Club Golf Course 9 holes \$1483.33</p> <p>* 80 acres bound Or fence and 18-hole Golf Course</p> <p>* 30 acres bound or fence and 9-hole Golf Course</p> <p>*These fees include liquor, wine, and beer</p>	<p style="text-align: center;">C. ADDITIONAL RESORT HOTEL AREAS</p> <p><input type="checkbox"/> # day per Designated area \$150</p> <p>(Each additional area must hold a license)</p> <p>* 1-day license only for license with 20 designated areas</p> <p>* These fees include liquor, wine, and beer</p>	<p style="text-align: center;">OPERATIONAL FEE</p> <p style="text-align: center;">Operational Fee \$100</p> <p>*This is a non-refundable and non-prorated fee to be paid with the filing of the application.</p> <hr/> <p style="text-align: center;">D. APPLYING AS: (CHECK ONE)</p> <p><input type="checkbox"/> Corporation</p> <p><input type="checkbox"/> Association</p> <p><input type="checkbox"/> Limited Liability Company</p>
<p>E. SERVICES <input type="checkbox"/> Bottle Sales\$1,000 <input type="checkbox"/> Pre-Mix\$0 (Please attach Pre-mixed Liquor Recipe Submission Form)</p>			

Email (Required): _____ Fax Number: _____ WV Tax I.D./FEIN: _____

1) Applicant/Entity Name: _____

2) Doing Business As (DBA) Name: _____

3) Business Address: _____
STREET (CITY)

(STATE) (ZIP CODE) (TELEPHONE)

4) Mailing Address (required): _____
STREET (CITY)

(STATE) (ZIP CODE) (TELEPHONE)

5) SUPPLY THE FOLLOWING INFORMATION ABOUT OWNER(S) AND/OR OFFICER(S) AND MANAGER(S). ALL APPLICANTS MUST LIST A MANAGER. U.S. Citizen**

				Y/N
Title	Name	Residence Address, City, State, Zip Code	% Ownership	
	____/____/____	____-____-____	_____	
	Date of Birth	Social Security Number	Telephone Number	YRS Resident of WV

				Y/N
Title	Name	Residence Address, City, State, Zip Code	% Ownership	
	____/____/____	____-____-____	_____	
	Date of Birth	Social Security Number	Telephone Number	YRS Resident of WV

 Title Name Residence Address, City, State, Zip Code % Ownership Y/N
 ____/____/____ - ____ - ____
 Date of Birth Social Security Number Telephone Number YRS Resident of WV

 Title Name Residence Address, City, State, Zip Code % Ownership Y/N
 ____/____/____ - ____ - ____
 Date of Birth Social Security Number Telephone Number YRS Resident of WV

 Title Name Residence Address, City, State, Zip Code % Ownership Y/N
 ____/____/____ - ____ - ____
 Date of Birth Social Security Number Telephone Number YRS Resident of WV

****IF NATURALIZED U.S. CITIZEN, MUST SUBMIT COPY OF NATURALIZATION DOCUMENTS.
 NON-CITIZENS MAY BE LISTED AS OWNER OR DIRECTOR OF A CORPORATION ONLY.**

- 6) CRIMINAL HISTORY- THE FOLLOWING IS A RECORD OF ALL CONVICTED ARRESTS OF THE OWNERS, PARTNERS, OFFICERS, DIRECTORS, MEMBERS AND/OR MANAGERS. ATTACH ADDITIONAL PAGES IF NECESSARY. IF THERE HAVE BEEN NO ARRESTS INSERT THE WORD "NONE".

NAME DATE OF ARREST CHARGE DISPOSITION OF ARREST LOCATION OF COURT (COUNTY STATE)

- 7) STATE NAME AND ADDRESS OF ALL PERSONS HAVING TWENTY PERCENT (20%) OR MORE INTEREST IN THE APPLICANTS' CORPORATION, ASSOCIATION AND/OR LIMITED LIABILITY COMPANY. STATE THE EXACT PERCENTAGE OF OWNERSHIP INTEREST FOR EACH PERSON LISTED. **A TRUST CANNOT HOLD A PERCENTAGE OF OWNERSHIP.**

NAME ADDRESS SOC. SEC. # % OWNERSHIP

- 8) HAS ANY OFFICER, MANAGER, OR 20% STOCK HOLDER EVER HELD OR CURRENTLY HOLD A WVABCA LICENSE?

YES NO IF YES, WHO? _____

DBA NAME? _____

WAS THE LICENSE: REVOKED _____ DATE _____

SUSPENDED _____ DATE _____

SANCTIONED _____ DATE _____

- 9) OWNER OF PREMISES TO BE LICENSED (PROPERTY OWNER'S NAME) _____
 IF NOT PROPERTY OWNER, APPLICANT MUST HOLD A VALID LEASE (ATTACH COPY OF THE LEASE)

****MUST SHOW DEED AND/OR SURVEY PLAT SHOWING ACERAGE FOR THE LOCATION****

10) PLEASE LIST ALL INVESTORS, PERSONS OR ENTITIES PROVIDING LOANS OR FINANCIAL ASSISTANCE (INCLUDING GIFTS), AND ANY PERSON OR ENTITY WITH A FINANCIAL INTEREST IN THE APPLICANT.

11) DOES THIS LOCATION CURRENTLY HAVE A WVABCA LICENSE? YES NO

IF YES, NAME OF LICENSED ESTABLISHMENT: _____

LICENSE #: _____

12) THE LICENSE APPLIED FOR IS NOT FOR ANY COLLEGE FRATERNITY OR SORORITY, IS NOT ON A COLLEGE CAMPUS AND THE PROPOSED LOCATION OF THE PREMISES HAS NOT BEEN DETERMINED BY LAW TO BE A PUBLIC NUISANSE, EXCEPT AS FOLLOWS:

13) ARE THE APPLICANT'S PREMISES LOCATED:

a. WITHIHN AN INCORPORATED MUNICLIPLIAITY OR WITHIN ONE MILE OF THE CORPORATE LIMITS OF ANY MUNICIPLAITY: YES NO

b. WITHIN ONE MILE OF THE CORPORATE LIMITS OF TWO OR MORE MUNICIPALITIES: YES NO

IF YES, NAME THE MUNICIPALITIES:

(1) _____

(2) _____

(3) _____

14) LIST THE DISTANCE TO THE NEAREST:

a. CHURCH_____

b. SCHOOL_____

c. RESIDENCE_____

d. GOVERNMENT OFFICE_____

15) WILL TOBACCO PRODUCTS BE SOLD AT THIS ESTABLISHMENT? YES NO

16) WILL YOU BE APPLYING FOR A LIMITED VIDEO LOTTERY LICENSE? YES NO

17) IS THE APPLICANT'S LOCATION READY FOR AN INITIAL INSPECTION? YES NO

IF NO, WHAT IS THE PROJECTED DATE FOR THE INITIAL INSPECTION? _____

PRIVATE CATERER (PRIVATE HOTEL OR PRIVATE RESORT HOTEL ONLY) (QUESTIONS 18-26)
(Complete Only if Applying for Private Caterer, Otherwise Skip)

18) DO YOU OPERATE A RESTAURANT IN A PRIVATE HOTEL OR PRIVATE RESORT HOTEL ON A DAILY BASIS?

YES NO WVABCA LICENSE NUMBER: _____

19) PROVIDE THE FOLLOWING:

NAME OF THE UNLICENSED PRIVATE VENUE: _____

BUSINESS ADDRESS OF UNLICENSED PRIVATE VENUE: _____

(NOT MORE THAN 15 PRIVATE CATERING EVENTS MAY BE HELD AT THE SAME UNLICENSED PRIVATE VENUE PER CALENDAR YEAR.)

- 20) HAVE YOU INCLUDED A DETAILED FLOOR PLAN LISTING BUILDING/STRUCTURE WHERE THE UNLICENSED PRIVATE VENUE WILL BE HELD?
YES NO (MUST INCLUDE ADEQUATE RESTROOMS)
- 21) HAVE YOU INCLUDED A DETAILED FLOOR PLAN LISTING OTHER FACILITIES USED TO PREPARE AND SERVE FOOD? YES NO
- 22) HAVE YOU INCLUDED ON THE FLOOR PLAN ANY "EXTENSION" OUTDOOR AREA WITHIN 150 FEET OF THE UNLICENSED PRIVATE VENUE THAT YOU ARE REQUESTING TO UTILIZE? YES NO
- 23) WHAT AGE VERIFICATION SYSTEM DO YOU PLAN TO UTILIZE DURING THE UNLICENSED PRIVATE VENUE EVENT? _____
- 24) PLEASE PROVIDE A COPY OF WRITTEN AGREEMENT WITH ANY UNLICENSED VENUE.
- 25) IS THE UNLICENSED VENUE A PRIVATE HOME? YES NO
- 26) WILL THE EVENT BE IN THE PRIVATE HOME OR OUTDOORS ON OWNER'S PROPERTY? YES NO

***Contracts are required for each event. Please include:**

- 1. Contract for unlicensed venue being used for catered event.**
- 2. Contract between the caterer and person contracting with the caterer. Please include details, such as, services provided, fees, etc.**

The undersigned agree, if a license is issued as herein applied for, to comply at all times and observe all the provisions of West Virginia Code Chapter 11, Article 16 et seq. and Chapter 60, Articles 1 through 8 et seq. and all Federal and State Statutes and all other laws of this State and the rules and regulations promulgated by the Alcohol Beverage Control Administration. I or we certify under penalty of law and disqualification of licensure that all statements are true and complete. I or we release the State of West Virginia and any agent acting on its behalf from any and all liability by reason of the request for such information.

The undersigned hereby verify that we are all Officers and all Members of the Board of directors on the application and that the statements and answers made in the foregoing application are true and the said writing is the act and deed of said Corporation, Limited Liability Company, Association, Individual, Partnership, Limited Partnership. OFFICERS, INDIVIDUAL, OR MEMBER(S) SIGNATURES MUST BE NOTARIZED! THIS MUST MATCH OFFICERS LISTED WITH THE SECRETARY OF STATE. MANAGERS MUST ALSO SIGN.

PRINT CLEARLY/WRITTEN SIGNATURES REQUIRED

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE OF SIGNATURE: _____

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE OF SIGNATURE: _____

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE OF SIGNATURE: _____

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE OF SIGNATURE: _____

State of West Virginia _____ County, To-Wit:

_____, being first duty sworn

according to law, deposes and says that he/she is _____ of the

President or Controlling Member(s)

_____, authorized by law to do business in the State of West Virginia, and the

Business Entity

statements and answers made in the foregoing application are true and acknowledged the said writing to be the act and deed of said Corporation, Association, or LLC.

(Applicant Signature) _____

STATE OF WEST VIRGINIA,

COUNTY OF _____ to wit:

Sworn to before me and subscribed in my presence this _____ day of _____, _____

NOTARY PUBLIC

My Commission Expires: _____



Seal

Applicant/ Entity Name: _____

Doing Business As (DBA)Name: _____

WEST VIRGINIA
ALCOHOL BEVERAGE CONTROL ADMINISTRATION
RELEASE OF CONFIDENTIAL INFORMATION AND WAIVER OF
CONFIDENTIALITY OF RECORDS

I or we, having made application with the West Virginia Alcohol Beverage Control Administration for issuance of a license to sell alcoholic beverages within the State of West Virginia, hereby waive the benefit of any municipal, county, state, or federal statute, rule, ordinance, regulation or other law prescribing the confidentiality of any records or documents, whether formal or informal, pending or closed, maintained by any public or private agency or organization as those records or documents pertain to residency, business location, business activities, education and/or training, employment, criminal history, civil litigation, or law enforcement investigation.

I or we, hereby authorize and request every public or private agency, organization, or person maintaining such records to furnish to the West Virginia Alcohol Beverage Control Administration, or their agents or representatives, any information contained therein and to permit them to inspect and make copies of such records and documents.

I or we, hereby authorize the West Virginia Alcohol Beverage Control Administration to disclose any information pertaining to the licensure to any municipal, county, state, federal or private agency or organization that has any interest in the licensing of said applicant.

I or we, hereby release the West Virginia Alcohol Beverage Control Administration, their agents and representatives, and any agency, organization, or person furnishing information from all liability arising out of any investigation concerning the applicant. I or we further agree that a copy of this Release and Waiver shall function as an original.

I or we, hereby acknowledge that it is understood that a background check will be completed by both the West Virginia State Police and the Federal Bureau of Investigation. It is further understood that if I or we, dispute an FBI submission under Title 28, C.F.R., 16.34, I or we have the right to challenge the completeness or accuracy of the criminal history record by contacting the FBI directly.

I or we acknowledge that by affixing a signature(s) below gives this document full force, and upon this date all aforementioned information may be received and shared as prescribed.

Must be completed by all owners, officers, members and managers.

Printed Name	Written Signature	Title	Date

West Virginia Alcohol Beverage Control Administration

Floor Plan

License period: _____

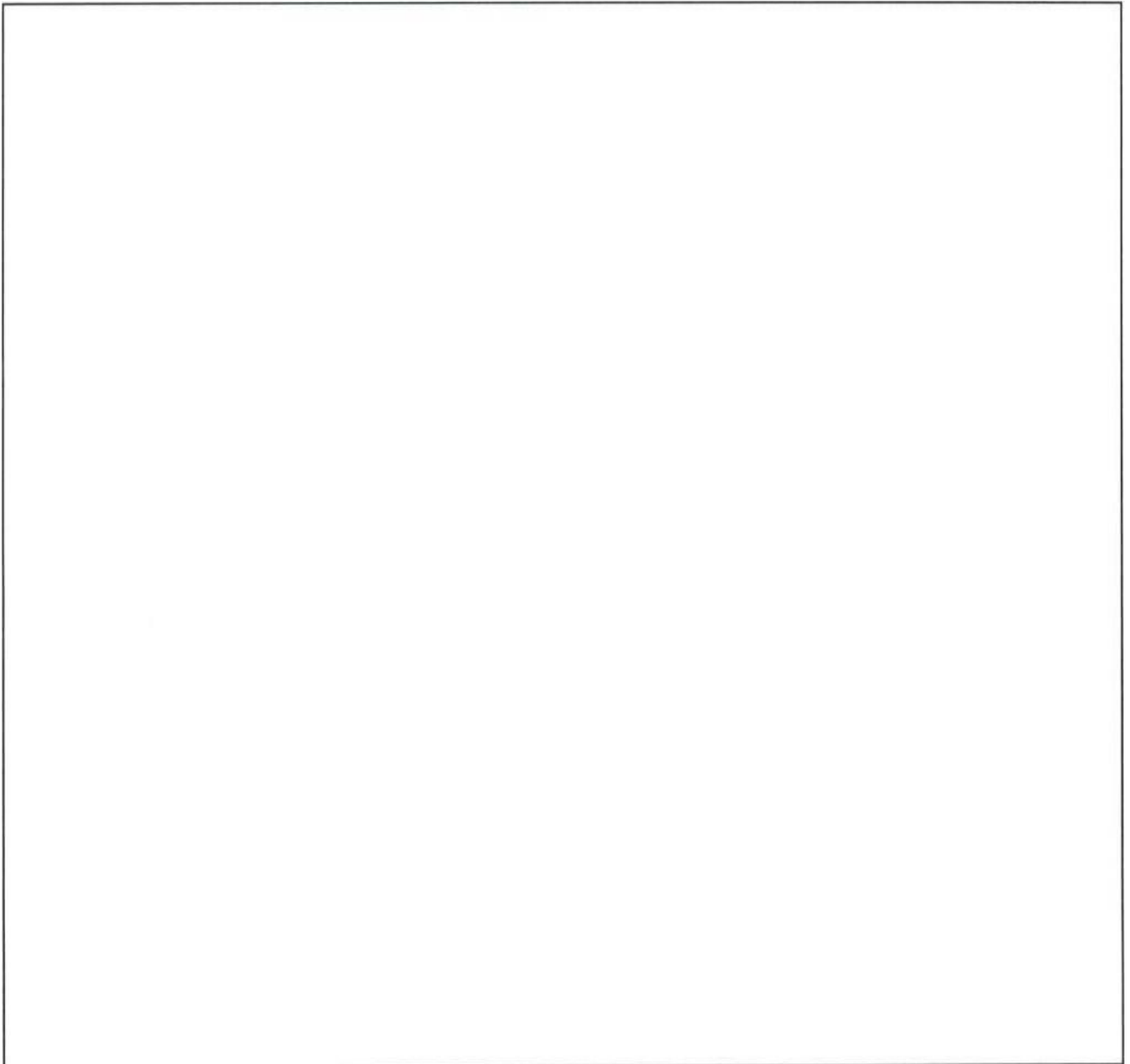
Applicant Entity Name: _____

Doing Business As (DBA) Name: _____

County: _____

Floor plan must include all areas under the control or lease of the applicant where alcohol is to be stored, sold, or consumed. All areas under control or lease of the license must be licensed. Must list all Private Resort Hotel, Private Golf Club, Private Hotel, or Private Golf Course designated areas.

Submit (1) copy to WVABCA. Must Give Dimensions. Keep (1) copy at licensed premises. LIST ENTIRE PROPERTY AND ALL OUTSIDE STRUCTURES(Licensed premises must be a minimum of 500 square feet)



*If there are attached drawings please check: _____ (additional drawings must be signed).

Room, Outside Area, Outside Structure (Width,Length) (Example: 24' X 36')	Located on What Floor	Seating Capacity	Location (Serving, Kitchen, Storage, Etc...)

I or we hereby certify that the floor plan above and/or attached is the only area where alcoholic beverages will be sold, dispensed, consumed, and/or stored. I or we further understand that any violation of this provision will mean immediate revocation or suspension of my license.

Signature: _____ Title: _____ Date: _____

Signature: _____ Title: _____ Date: _____

Signature: _____ Title: _____ Date: _____

Signature: _____ Title: _____ Date: _____

Signature: _____ Title: _____ Date: _____