



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

INSTRUCTIONS FOR NON-RETAIL WINE LICENSE APPLICATION FORM ABCA-WS-3W

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 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, private wine restaurant, private wine bed and breakfast or private wine spa.

Licensing Periods:

- Wine Supplier, Wine Distributor, Farm Winery, Multi Capacity and Direct Shipper license period begins July 1 and ends June 30 of each year.
- Winery 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 and 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 License Fee

All other license types must pay a full year fee (licenses are not prorated).

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 WV Secretary of State’s Certificate of Authority
- If a Limited Liability Company - a copy of the WV Secretary of State’s Certificate of Authority
- If a Corporation – a copy of the WV Secretary of State’s Certificate of Authority
- 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)

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 or winery must be bonded and hold the appropriate permit(s) under the laws and regulations of the United States. Forms and instructions are available by calling the toll-free number at 800-937-8864 or on-line forms are available through <https://www.ttb.gov/ponl/customer-support>.

All applicants must apply for the “Special Occupation Tax (TTB F 5630.5d)” 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 an on-line form is available for download at the following website: <https://www.ttb.gov/images/pdfs/forms/f56305d.pdf>

***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, 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.



Applying As:

Individual

Partnership

Ltd. Partnership

Ltd. Liability Company

Limited Liability Company

Corporation

Association

West Virginia Alcohol Beverage Control Administration
 900 Pennsylvania Avenue, 4th Floor Charleston, WV 25302

Non-Retail Wine License Application

<input type="checkbox"/> Wine Supplier	<input type="checkbox"/> Winery	<input type="checkbox"/> Farm Winery	<input type="checkbox"/> Multi Capacity	<input type="checkbox"/> Wine Distributor	<input type="checkbox"/> Direct Wine Shipper
Complete Questions 1 – 15	Complete Questions 1 – 15 Sections I & III	Complete Questions 1 – 15 Sections I & III	Complete Questions 1 – 15	Complete Questions 1 – 15 Sections I & II	Complete Questions 1 – 15
License Fee.... \$150	License Fee ... \$1,500	License Fee \$50	License Fee... \$300	License Fee... \$2,500	License Fee
*Operational Fee \$100	*Operational Fee \$100	*Operational Fee \$100	*Must be licensed as a Winery or Farm Winery *Operational Fee \$100	*Operational Fee \$100	<input type="checkbox"/> \$150 to ship < 14% ABV OR <input type="checkbox"/> \$250 to ship >14% ABV

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 written 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. 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

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

13. Date and state your business incorporate or organized _____

Please include corporate charter or organization papers

14. Supply the following information about the owners, officers, directors, individuals, associates and manager (If you list an entity, provide full detail about the entity):

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, ETC.**

****All entities must list a manager in compliance with State Code.**

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

- A. County in 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 _____

- *Attach a Copy of the Lease.
- C. Does the premises to be licensed conform to health, fire and zoning regulations? Yes No
- D. Does it have a health permit? Yes No
- E. If a WV Winery, have you appointed a WV Distributor(s) for your wine (a supplier must appoint 2 distributors)?
 Yes No
 Name of at least two WV Distributor(s): _____
- F. Prior to a license being granted, **all** WV Winery and WV Farm Winery applicants must complete the attached affidavit (Production Affidavit 6/2020).
- G. All WV Wineries and WV Farm Wineries applicants must complete the attached affidavit (Production Affidavit 6/2020) and submit it with their annual renewal.

*Note no license will be issued to a location that shares a connection with a domicile.

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. Is the applicant, directly or indirectly, by means of signs, equipment, money, property or otherwise furnishing things of value, giving aid to assist the holder of any retail beer, wine or liquor permit issued by the WVABCA?

Yes No

If yes, please explain: _____

B. Does applicant own or control any real or personal property, which is rented, leased or used by the holder of any retail beer, wine or liquor permit issued by the WVABCA? Yes No

If yes, please explain: _____

C. Is your place of business in a location zoned by a county or municipality? Yes No

D. Is place of business located in a business, residential or rural neighborhood? _____

E. Do you have any ownership interest in a winery, farm winery, wine retailer, private wine restaurant, private wine bed and breakfast, private wine spa or private club? Yes No

If yes, please explain: _____

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 at the Offices of the West Virginia Alcohol Beverage Control Administration Commissioner Charleston, West Virginia, after 10 days written notice to the applicant and the notice setting forth the charge and the time and place of hearing.

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:

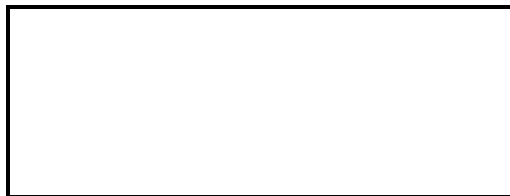
In support of the foregoing application, the undersigned makes oath that the statements contained herein and all attachments are true to the best of his/her knowledge and belief.

Date _____ Signature _____ Title _____

Date _____ Signature _____ Title _____

Date _____ Signature _____ Title _____

Date _____ Signature _____ Title _____



Given under my hand and official seal this _____ day of _____

Signature of Notary Public _____ Commission Expires _____

Seal of Notary

WINE PRODUCTION AFFIDAIT

I _____, that my entity _____, doing business as _____, will comply with the wine production requirements as noted below. I am

applying for a _____ license, to produce wine. I understand that producing wine contrary to the provisions found in Chapter §60-1-1, 60-3-1 et seq, 60-4-1et seq., 60-6-1 et seq, 60-8-1 et seq. and Legislative Rules 175 CSR 3 and 175 CSR4 may result in monetary fines, suspension of licensure or revocation of licensure if a license is granted.

- Farm Winery - May produce no more than 50,000 gallons of wine, non-fortified wine and port, sherry and madeira wine. At least 25% of the raw products used to make the wines mentioned above must be grown on the premises of the farm winery. No more than 25% of the raw products used to make the said wines may be from any source outside WV.

*Note provisions in WV Code Chapter 60 pertaining to exceptions for 25% raw product due to planting of young nonbearing fruit plants and for crop failure in WV.

A farm winery may self-distribute wines manufactured at its farm location when obtaining a supplier license or multicausality license.

- Winery - May produce more than 50,000 gallons of wine, non-fortified wine and port, sherry and madeira wine. A winery may purchase raw product within or outside of WV.

A winery may act as a Supplier with the purchase of a Supplier license or a Multi-capacity license. A winery must appoint at least 2 Distributors in WV, they may not self-distribute.

- Multi-Capacity - Allows a winery or farm winery to act as their own supplier, retailer and direct shipper. A winery or farm winery that does not hold a multi-capacity license must purchase each individual license when acting in one or more of those capacities.

- Complimentary Samples - A winery or farm winery may on its premises give complimentary samples. Samples are not to exceed 2 ounces and no more than 3 such samples may be given to a patron in 1 day.

I hereby estimate wine production to be _____ liters over the course of the upcoming licensing period _____ to _____.

Actual wine production for the previous licensing period _____ to _____ was _____ liters.

*Must be filled out and signed by all individuals, associates, partners, officers and members of the entity.

State of _____,

County of _____, to wit;

In support of the forgoing affidavit, the undersigned makes oath that the statements contained are true in the best of his/her knowledge and belief.

Print Name: _____ Signature: _____

Title: _____ Date: _____



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, 4th 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>

Request for Statement of Good Standing

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:		Phone numbers:
West Virginia State Tax Department ATTN: TPS – Support Unit PO Box 885 Charleston, WV 25323-0885		(304) 558-3333 (800) 982-8297 Follow Prompts for Statement of Good Standing Requests.