



**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 CLASS B LICENSE-OFF PREMISES

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 find enclosed:

- 1.) Application for Retail Outlet License, Consumption Off Premises, (ABCA – 192B)
- 2.) Release of Information & Waiver of Confidentiality of Records (ABCA-Lic. RIWCR.2)
- 3.) Floor Plan (ABCA-Lic.FP3), give dimensions of licensed premises
- 4.) Zoning Form (ABCA-Lic.Z.2)

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

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.

LICENSE FEES – License fees **must** be paid by Certified Check, Cashier's Check or Money Order. Personal checks, business checks, or cash **will not** be accepted. Make 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 semi-annually prorated to half the initial fee.

*** An additional \$100.00 Operational Fee is to be submitted with your application; 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.**

LIVE SCAN FINGERPRINTING – All applicants 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 <http://uenroll.identogo.com> for information on fingerprinting, locations, scheduling appointments, and fee requirements.

Fingerprint result reports MUST be sent to WVABCA directly from IdentoGO (Morpho Trust).

Please contact the WVABCA Licensing Department at 304-356-5500 to obtain the proper service code for the Live Scan Fingerprinting process.

NO REPORTS WILL BE ACCEPTED DIRECTLY FROM LICENSE APPLICANTS.

WV SECRETARY OF STATE – All Associations, Corporations, Limited Liability, Non-Profit Clubs, and Fraternal Organizations must be duly certified and registered with the WV Secretary of State.

INSTRUCTIONS FOR SIGNING:

- a.) If an individual, by the owner
- b.) If a partnership, by each member of the partnership (Copy of Partnership Agreement to be submitted to WVABCA)
- c.) If an association, by each member of the governing board
- d.) If a corporation, by all officers, or by other persons specifically authorized by corporate resolution (copy of resolution must be enclosed)
- e.) If a limited liability company, by all members
- f.) Manager(s) must sign

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/> or by calling the toll-free number at 1-800-937-8864.

WINE APPLICATIONS – Information pertaining to the requirements for some wine applications and licensure are described below:

Wine Retail (\$150.00) – “Wine Retailer” means a person licensed to sell wine at retail to the public at his or her established place of business for off premise consumption.

Wine Specialty Shop (\$250.00)-“Wine Specialty Shop” means a retailer who shall deal principally in the sale of table wine, non-fortified dessert wines, wine accessories and food or foodstuffs normally associated with wine and: (a) who shall maintain representative number of such wines for sale in his/her inventory which are designated by label as varietal wine, vintage, generic and/or according to region of production and the inventory shall contain not less than fifteen percent vintage or vintage-dated wine by actual bottle count: (b) who, any other provisions of this code to the contrary notwithstanding, may maintain an inventory of Port, Sherry, Madeira wines having an alcoholic content not more than twenty-two percent alcohol by volume and which have been matured in wooden barrels or casks.

Wine Specialty Shop Curbside Wine Delivery (\$250) – This license allows a licensed wine specialty shop in good standing, with a grocery store with \$100,000 of fresh produce, saleable food and food products to deliver wine to vehicles in its parking lot. Please see additional requirements below:

- Orders must be made in advance of pickup by a person 21 years of age or older, via a mobile application (app) or web-based software program.
- Must be picked up at the licensed establishment while the vehicle is parked within a WVABCA approved designated parking area that is within 500 feet of the licensed Class B location.
- The curbside delivery area must be designated by signs stating that the area is used solely for curbside delivery pickup.
- The person picking up wine must be verified to be 21 years of age or older.

Wine Specialty Shop Tasting (\$400.00) – This license is a combination of the Wine Specialty Tasting (\$150.00) and the Wine Specialty Shop (\$250.00) licenses. This license allows a wine specialty shop to serve complimentary samples of wine in moderate quantities for tastings. Such wine specialty shop shall organize a wine taster’s club, which has at least fifty duly elected members or approved dues-paying members in good standing. Such club shall meet on the wine specialty shop’s premises not more than one time per week and shall either meet at a time when the premises are closed to the general public or shall meet in a separate segregated facility on the premises to which

the general public is not admitted. *Must have a Wine Specialty Shop license to obtain a Wine Specialty Shop Tasting License.*

Wine Specialty Shop Sampling (\$150.00) – This license allows a wine specialty shop to conduct special wine sampling events at a licensed wine specialty shop location during regular hours of business. The wine specialty shop may serve up to three complementary samples of wine, consisting of no more than one ounce each, to any one consumer in one day. *Must have a Wine Specialty Shop license to obtain a Wine Specialty Shop Sampling License. Note: A Wine Specialty Shop (\$250.00) may add Wine Specialty Shop Tasting (\$150.00) = \$400.00, or add the Wine Specialty Shop Sampling (\$150.00) = \$400.00, or add both for a combined total of \$550.00.*

Wine Specialty Shop (wine with gift basket) Delivery (\$250) – This license allows a licensed wine specialty shop in good standing to deliver wine with a gift basket. Please see additional requirements below:

- Wine must only be delivered within the county where the licensed premises is located.
- Wine must be delivered with a gift basket
- License may not be located within a “dry county” or “dry area”. Deliveries may not be made to a “dry area”. (See <https://abca.wv.gov> for a list of the dry counties and areas).
- May not sell or deliver to a private club, private wine restaurant, wine retailer, private wine bed and breakfast or private wine spa or any other locations where wine is offered for resale.
- The person receiving wine must be 21 years of age or older and must sign for delivery and the wine is only for personal use and not for resale. Deliveries must NOT be left without a signature.
- The initial purchase from a wine specialty shop must be: (a) in-person (face-to-face) transaction; (b) telephone, or (c) electronic, mobile or web-based ordering. In any manner, purchasers age must be verified. Telephone, electronic, mobile or web-based ordering methods must be submitted to the WVABCA for approval prior to use.
- The purchased wine must be delivered by an officer or employee of the wine specialty shop. No unlicensed, contractual or any third-party deliveries may be made.
- Each wine delivery vehicle used by a Licensee must apply and obtain a WVABCA transportation permit (see <https://abca.wv.gov> for this form) in order to deliver wine.
- Wine must be sealed in the original container and the delivery package must be labeled “Contains Alcohol: Signature of Person 21 or Older Required for Delivery”.
- The person receiving the wine delivery, whether or not he or she is the purchaser, the licensee or it's employee must verify that the person receiving the wine is 21 years of age or older and is not noticeably intoxicated prior to completion of wine delivery.
- The Licensee shall not deliver in excess of two cases of wine with a gift basket per month to any person or address.
- The Licensee must maintain records of all wine delivery purchases, including the name, birthdate, age, driver's license number or state issued identification number and address for both the purchaser and person receiving the order, also the receipt, the monthly orders by purchaser and/or person receiving the orders and signature of person receiving the order must be retained for audit purposes. The records should be available at the licensed premises and available upon request by the WVABCA.

Wine Tasting “Farm Winery” (\$150.00) – This License allows a farm winery to attend fairs and festivals they have listed on Wine Tasting at a Festival, Fair or Special Event (ABC-Lic.w.1) form, that has been submitted to and approved by the WVABCA Commissioner. The license allows the approved farm winery to provide samples served in moderate quantities, which serving size will not exceed two ounces and bottles of wine sold for off-premises consumption. All wines, Port, Sherry, or Madeira offered or sold at the fair or festival must be offered or sold by the farm winery which produced the product.

BEER APPLICATIONS – Information pertaining to the requirements for some beer (nonintoxicating beer Class B Retailer) applications and licensure are described below:

Beer (nonintoxicating beer) Curbside Delivery (\$250) – This license allows a Class B beer (nonintoxicating beer) retailer in good standing, with a grocery store with \$100,000 of fresh produce, saleable food and food products to deliver beer to vehicles in its parking lot. Please see additional requirements below:

- Orders must be made in advance of pickup by a person 21 years of age or older, via a mobile application or web-based software program.
- Must be picked up at the licensed establishment while the vehicle is parked within a WVABCA approved designated parking area that is within 500 feet of the licensed Class B location.
- The curbside delivery area must be designated by signs stating that the area is used solely for curbside delivery pickup.
- The person picking up the beer order must be verified to be 21 years of age or older.

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 Division. 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)
- License Fee(s)
- Floor Plan
- 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
- Naturalization Papers (if applicable)

WEST VIRGINIA ALCOHOL BEVERAGE CONTROL ADMINISTRATION

APPLICATION FOR RETAIL LICENSE

CONSUMPTION "OFF PREMISES"

CLASS B

ABCA – 192A

Revised 05/19

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>A. WINE APPLICATION</p> <p><input type="checkbox"/> Wine Retail.....\$150</p> <p><input type="checkbox"/> Wine Specialty.....\$250</p> <p><input type="checkbox"/> Wine Specialty/ Tasting.....\$400</p> <p><input type="checkbox"/> Wine Specialty Gift Basket Delivery*.....\$250</p> <p><input type="checkbox"/> Wine Sampling*.....\$150</p> <p><input type="checkbox"/> Wine Tasting "Farm Winery"\$150</p> <p><input type="checkbox"/> Wine Specialty Curbside Service..... \$250</p> <p><small>* Wine sampling only available to Wine Specialty license holders.</small></p> <p><small>*Wine with a gift basket Specialty Delivery (must also obtain transportation permit).</small></p> <p><small>*Wine Curbside Service (must have at least \$100,000 in groceries)</small></p>	<p>B. BEER APPLICATION</p> <p><input type="checkbox"/> Carry-out.....\$150</p> <p><input type="checkbox"/> Beer Curb Side Service.....\$250</p> <hr/> <p><small>*Beer Curbside Service (must have at least \$100,000 in groceries)</small></p> <hr/> <p>Operational Fee</p> <p>Operational Fee..... \$100</p> <p><small>*This is a non-refundable and non-prorated fee to be paid with the filing of the application.</small></p>	<p>C. APPLYING AS: (CHECK ONE)</p> <p><input type="checkbox"/> Individual</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Limited Partnership</p> <p><input type="checkbox"/> Corporation</p> <p><input type="checkbox"/> Association</p> <p><input type="checkbox"/> Limited Liability Corporation</p>
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1. Email (Required): _____ Fax Number: _____ WV TAXI.D./FEIN: _____

2. Applicant/Entity Name: _____

3. Doing Business As (DBA) Name: _____

4. Business Address: _____
(STREET)

(CITY) (STATE) (ZIP CODE) (TELEPHONE)

5. Mailing Address (required): _____
(STREET)

(CITY) (STATE) (ZIP CODE) (TELEPHONE)

6. SUPPLY THE FOLLOWING INFORMATION ABOUT OWNER(S) AND/OR OFFICER(S) AND MANAGER(S).

_____	_____	_____	_____	US Citizen**
Title	Name (please print)	Residence Address, City, State and Zip Code	% Ownership	Y N
_____	_____	_____	_____	
	Date of Birth	Social Security Num.	Telephone Number	YRS Resident
_____	_____	_____	_____	US Citizen**
Title	Name (please print)	Residence Address, City, State and Zip Code	% Ownership	Y N
_____	_____	_____	_____	
	Date of Birth	Social Security Num.	Telephone Number	YRS Resident
_____	_____	_____	_____	US Citizen**
Title	Name (please print)	Residence Address, City, State and Zip Code	% Ownership	Y N
_____	_____	_____	_____	
	Date of Birth	Social Security Num.	Telephone Number	YRS Resident
_____	_____	_____	_____	US Citizen**
Title	Name (please print)	Residence Address, City, State and Zip Code	% Ownership	Y N
_____	_____	_____	_____	
	Date of Birth	Social Security Num.	Telephone Number	YRS Resident

**** IF NATURALIZED US CITIZEN, MUST SUBMIT COPY OF NATURALIZATION DOCUMENTS.**

NON-CITIZENS MAY BE LISTED AS SHAREHOLDER, OWNER, OR DIRECTOR OF CORPORATION ONLY.

TITLE REFERS TO CORPORATE OFFICERS, PRESIDENT, VICE PRESIDENT, SECRETARY TREASURER, OR MEMBER

7. 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)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

8. STATE NAME AND ADDRESS OF ALL PERSONS HAVING TWENTY PERCENT (20%) OR MORE INTEREST IN THE APPLICANTS' CORPORATION, ASSOCIATION, PARTNERSHIP, LIMITED PARTNERSHIP, 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
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9. HAS ANY OFFICER, MANAGER, OR 20% STOCKHOLDER EVER HELD OR CURRENTLY HOLD A WVABCA LICENSE?

Yes No IF YES, WHO: _____

DBA NAME: _____

WAS THE LICENSE: REVOKED _____ DATE _____

SUSPENDED _____ DATE _____

SANCTIONED _____ DATE _____

10. 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)

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

IF YES, NAME OF LICENSED ESTABLISHMENT: _____

LICENSE #: _____

12. ARE THE APPLICANT'S PREMISES LOCATED:

A. WITHIN AN INCORPORATED MUNICIPALITY OR WITHIN ONE MILE OF THE CORPORATE LIMITS OF ANY MUNICIPALITY: 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) _____

13. WILL TOBACCO PRODUCTS BE SOLD AT THIS ESTABLISHMENT: YES NO

14. IS THE APPLICANT'S LOCATION READY FOR AN INITIAL INSPECTION: YES NO

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

15. ESTIMATED RETAIL SALES PER MONTH OF FOOD AND FOOD PRODUCTS

(FOR THE TABLE): _____

ESTIMATE BASED ON: _____

16. ON WHAT DAY (DATE) WAS THE "SPECIAL TAX REGISTRATION AND RETURN APPLICATION" (TTB FORM) SUBMITTED TO THE ALCOHOL AND TRADE BUREAU? _____

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 §§ 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 WV 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 due to the request for such information.

The undersigned hereby verify that we are all officers and all member 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! 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: _____

NAME: _____ TITLE: _____

SIGNATURE: _____ DATE OF SIGNATURE: _____

State of West Virginia, _____ County, To-Wit:

_____, Being first duly sworn

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

President, Individual or Controlling Member(s)

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

(Applicant Signature) _____

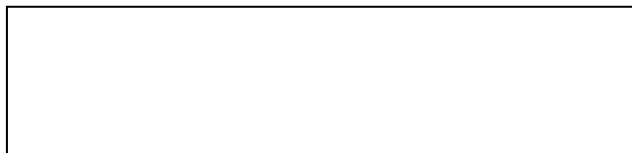
STATE OF WEST VIRGINIA,

COUNTY OF _____, to wit:

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

NOTARY PUBLIC

My Commission Expires: _____



SEAL OF NOTARY

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 applicant must be licensed.

SUBMIT (1) COPY TO WVABCA. MUST GIVE DIMENSIONS. KEEP (1) COPY AT LICENSED PREMISES.

[Empty box for floor plan drawing]

*If there are attached drawings please check: _____

(Additional drawings must include entity & DBA name and must be signed and dated.)

Applicant/Entity Name: _____

Doing Business As (DBA) Name: _____

WEST VIRGINIA ALCOHOL BEVERAGE CONTROL ADMINISTRATION

RELEASE OF 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 Federal Bureau of Investigation 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.

Name: Must include owner's, officer's, member's and manager's printed and written signature(s).	Title	Date

Zoning Form

(Original copy must be submitted to the WVABCA Licensing Department)

Note: If an establishment's location is not situated within a municipality, this office will need a letter from the County Commission stating that the establishment location is zoned properly. All applicants must complete the front portion of the form.

To: Municipal Clerk or Recorder

Under the requirements set forth in W.Va. Code § 11-16-8(a)(5), a person intending to apply for a license to operate a WVABCA licensed Class B establishment at any location within a municipality **must file a notice of such intention with the Clerk or Recorder of such municipality at least ten (10) days prior** to filing an application for such license with the WVABCA. Pursuant to this requirement, **notice** is herein given that the following intends to apply to the WVABCA for a license to operate a Class B licensed establishment issued pursuant to the provisions of § Chapter 11, Article 16 of the W.Va. State Code.

Entity Name: _____

DBA (Doing Business As): _____

Address of Establishment: _____
(Street/Route) (City) (State) (Zip Code)

Applicant's Name(s): _____
(Last) (First) (Middle)

(Last) (First) (Middle)

(Last) (First) (Middle)

(Last) (First) (Middle)

(Last) (First) (Middle)

General Description of Premises: _____

This Notice has been filed with the Clerk or Recorder of the City/Town of _____ on this _____ day of _____, _____.

Applicant's Signature(s): _____ Date: _____

Date: _____

Date: _____

Date: _____

(FOR USE BY MUNICIPAL AUTHORITIES ONLY)

1. Is the proposed location for the Class B "Carry-Out" described consistent with the zoning ordinances of your Municipality as either a permitted use or a conditional use of such premises?

Yes _____ No _____

2. If the answer to the first question was "No" does your Municipality provide within its zoning requirements suitable alternative locations for Class B "Carry-Outs"?

Yes _____ No _____

3. Additional comments to the Alcohol Beverage Control Administration:

4. Is the proposed location situated in a "Dry County" or in a Town/Municipality designated as a "Dry" area.

Yes _____ No _____ Unsure _____

Approved By: Authorized Official Signature and Title

City/Town

Date:

**Return Original To: WVABCA
Licensing Division
900 Pennsylvania Avenue, 4th Floor
Charleston, WV 25302**