



City of Middletown  
 11803 Old Shelbyville Road  
 Middletown, Kentucky 40243  
 ABC Administrator  
 502-245-2762  
[clerk@cityofmiddletownky.org](mailto:clerk@cityofmiddletownky.org)

# ABC LICENSE APPLICATION

Date of Application: \_\_\_\_\_

Applicant business/company name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Address of premises to be licensed: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Owner (if different from above): \_\_\_\_\_

Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address if different from above: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

List below the business proprietor, partner (s) and all persons having an interest in business to be licensed:

Name & home Address	Cell phone	e-mail	USA Citizen	State of Residence	Percentage of ownership

Has the applicant or any person listed above ever been licensed to sell alcoholic beverages? Y \_\_\_ N \_\_\_

If yes, what type of license: \_\_\_\_\_

Has any person listed above been convicted of any felony, been released from felony custody or felony incarceration, been on felony parole, or had a termination of felony probation within the past five (5) years? Y \_\_\_ N \_\_\_

Has the applicant been convicted of a misdemeanor directly or indirectly related to alcohol or a controlled substance within the past two years (KRS 243.100(1)(b) & (c) Y \_\_\_ N \_\_\_

Has there ever been a suspension, denial or revocation of any KY ABC license held by the applicant or any person above? Y \_\_\_ N \_\_\_ If yes, attach a statement giving an explanation.

# CHECK ALL THAT APPLY

<input type="checkbox"/> NQ2 Retail Drink License                      \$1,800 <i>Includes spirits, wine and malt</i>	<input type="checkbox"/> Limited Restaurant License                      \$1,800
<input type="checkbox"/> Quota Retail Package License                      \$1,200	<input type="checkbox"/> Limited golf course License                      \$1,800
<input type="checkbox"/> Quota Retail Drink License                      \$1,600	<input type="checkbox"/> Malt Beverage Brewer's License                      \$500
<input type="checkbox"/> NQ Retail Malt Beverage Package License                      \$200	<input type="checkbox"/> Microbrewery License                      \$500
<input type="checkbox"/> NQ4 Retail Malt Beverage by the Drink License                      \$200	<input type="checkbox"/> Special Sunday Retail Drink License                      \$300 <i>*only required if sold prior to 1pm</i>
<input type="checkbox"/> NQ3 Retail Drink License                      \$300	<input type="checkbox"/> Malt Beverage Distributor's License                      \$400
<input type="checkbox"/> Extended Hours Supplemental License (2am – 4am)                      \$2,000	<input type="checkbox"/> Distilled Spirits and Wine Special Temporary Auction License, per event                      \$200
<input type="checkbox"/> Special Temporary License, per event                      \$266.66	<input type="checkbox"/> Bottling House/ Bottling House Storage License                      \$1,000
<input type="checkbox"/> NQ1 Retail Drink License                      \$2,000	<input type="checkbox"/> Wholesaler's Distilled Spirits and Wine License                      \$3,000
<input type="checkbox"/> Caterer's License                      \$800	<input type="checkbox"/> Distiller's License                      \$500
<input type="checkbox"/> Rectifier's License                      \$3,000	<input type="checkbox"/> Malt Beverage Brew-On-Premises License                      \$100

Total amount due: \$ \_\_\_\_\_

If paying less than one year, prorate by dividing the annual amount by 12: \$ \_\_\_\_\_

**Note: *You must be in compliance with all City of Middletown Ordinances, including property tax, business license and OCC tax, in order to obtain an ABC license.***

## **Applicant Affidavit**

I, the undersigned state that \_\_\_\_\_ does hereby make application for a new/renewal of my license, indicated on page 1 to cover the period from \_\_\_\_\_ to October 31, 20\_\_.

Signed: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_

## **Notary Documentation**

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

My Commission expires: \_\_\_\_\_

Notary ID: \_\_\_\_\_

Notary Signature: \_\_\_\_\_

## **Approval by the City of Middletown**

Approved by: \_\_\_\_\_, ABC Administrator

Date: \_\_\_\_\_

License #: \_\_\_\_\_