

BUSINESS NAME: _____

DATE: _____

ABC APPLICATION CHECKLIST

**Please include a copy of this form and check the items completed with your application.
Mark any item not applicable with an "X."**

KENTUCKY DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL CHECKLIST

****Go to <http://abc.ky.gov/Pages/applicationschedules.aspx> to print the appropriate schedule application.****

- Affidavit of Publication/Copy of Advertisement
 - State Basic Application / Schedule Application / License Fee(s)
 - Background Checks
 - Citations Pending
 - Articles of Incorporation
 - Deed or Copy of Lease
 - Sales Tax ID Number – Permit from the state
 - Fire Marshal's Certificate of Seating Capacity
 - Bond/Expiration Date if required by the state
 - EPPC Final Inspection/Certificate of Occupancy if required by the state
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CITY OF HURSTBOURNE ACRES CHECKLIST

- Completed State Application (to include all of the above)
 - City of Hurstbourne Acres ABC Application with Affidavit/License Fee
 - Fire Code Compliance Form
 - Health Code Compliance Form
 - Agreements (Initial):
 - Agree to Quarterly reports _____
 - Understand Mandatory Server Training _____
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FOR OFFICE USE ONLY:

State ABC License with Premises Address Site ID # _____