

ABC License Checklist

Application Package Issued To: _____

Date Package Issued: _____

Forms:

Date Returned:

- _____ Application Instructions--City License _____
- _____ Application--City License _____
- _____ Verification of Zoning Compliance _____
- _____ Verification of Food Service Compliance _____
- _____ Verification of Building Code Compliance _____
- _____ Verification of Fire Code Compliance _____
- _____ Bureau of ATF Special Tax Registration _____
- _____ Application for Kentucky State ABC License* _____
- _____ *include Mayfield Messenger Legal Advertisement _____
- _____ *include Affidavit of Advertisement _____
- _____ *include Schedule L _____
- _____ Copy of Ordinance #23-03 ***Applicant to retain*** _____

If Building is Owned by Restaurateur:

_____ Copy of Deed _____

If Building is Leased:

_____ Copy of Lease, Valid Through License Period _____

For Renewal Applications Only:

_____ Application for Renewal _____

_____ Restaurant Drink Affidavit _____

For Office Use Only

Date Forwarded to Alcohol Beverage Control Administrator: _____

Date Mailed to State and Federal Agencies _____