



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

INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR RETAIL ON PREMISES  
PRIVATE FOOD COURT.

Requirements ---- Private Food Court - \$2,150.00, plus \$100.00 operational fee.

- At least one member of the association must hold a Private Club Restaurant License with a full kitchen (ovens, 4 burner range, refrigerator, and/or freezer or combination).
- Maintains fresh food capable of being prepared.
- Have an association that owns or leases, controls, operates, and uses the facility that is listed on the applicant's floor plan. Must provide documents establishing ownership or lease interest.
- List the entire facility and any inter-connected and adjoining structures on the private food court's floor plan that would comprise the licensed premises.
- Must have at least one separate or unrelated businesses applying for the license.
- Must provide an executed written agreement certifying that all businesses in the association have agreed to the liability and responsibility associated with the private food court license. The executed agreement between the businesses of the association must attest that all the businesses are jointly and severally liable for any violations committed on the licensed premises.
- Provide adequate restrooms to service the private food court.
- Must provide a security plan indicating all businesses that will be selling and serving alcoholic liquors and nonintoxicating beer. The security plan must list all non-licensed businesses selling and serving food. The security plan must list all entrances and exits, must provide procedures to verify ages of members, patrons, and guests, must provide procedures to verify whether a member, patron or guest is intoxicated, and the security plan must provide for the public health and safety of members, patrons, and guests.
- Use an age verification system approved by the commissioner.
- Meet all other private club requirements.

## **INSTRUCTIONS**

All questions and/or descriptions must be answered. The application must be signed and notarized. If any questions/descriptions cannot be completed in the available space on the application, please submit additional pages as needed. Each additional page submitted must include the 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.

**LICENSE FEE:** The Private Food Court application fee must be paid by Certified Check, Cashier's Check, or Money Order. Personal checks, business checks, or cash will not be accepted. Make checks payable to the WVABCA.

**BUSSINESS CLOSURE:** If issued, 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 the closure, date business closed, and signature on the back of the license.

### **MAIL COMPLETED APPLICATION, FEE, AND REQUIRED ACCOMPANYING DOCUMENTS TO:**

West Virginia Alcohol Beverage Control Administration  
Attn: Licensing Division  
900 Pennsylvania Avenue, 4<sup>th</sup> 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 documents to be submitted/returned to the WVABCA Licensing Division:**

- Application Form
- License Fee
- Floor Plan
- Executed Agreement between all association members applying for the Private Food Court License
- Security Plan for Private Food Court
- Written agreement between all the vendors of the association pertaining to liability

WEST VIRGINIA ALCOHOL BEVERAGE CONTROL ADMINISTRATION  
APPLICATION FOR RETAIL LICENSE  
CONSUMPTION "ON PREMISES"  
PRIVATE FOOD COURT

COUNTY: \_\_\_\_\_ FOR FISCAL YEAR: \_\_\_\_\_ TO \_\_\_\_\_

<input type="checkbox"/> PRIVATE FOOD COURT..... \$2,150.00
<input type="checkbox"/> OPERATIONAL FEE.....\$100.00

Email (required): \_\_\_\_\_ Fax Number: \_\_\_\_\_ WV Tax I.D./FEIN: \_\_\_\_\_

1) Entity Name: \_\_\_\_\_

2) DBA Name: \_\_\_\_\_

3) WVABCA License Number: \_\_\_\_\_

4) Business Address: \_\_\_\_\_  
(Street)

(City) (State) (Zip Code) (Telephone)

5) Mailing Address: \_\_\_\_\_  
(Street)

(City) (State) (Zip Code) (Telephone)

6) Supply the following information about the applicants applying for the license (Must match information on the current WVABCA license).

\_\_\_\_\_  
Title Name % of Ownership Telephone Number

7) Please provide the entity and dba of any member of the association that operates a Private Club Restaurant.

Entity \_\_\_\_\_ DBA \_\_\_\_\_ WVABCA License #: \_\_\_\_\_

8) Please list the separate and unrelated businesses in the association (licensed restaurants and un-licensed restaurants) applying for the license (all businesses must sign the application signature page).

Entity \_\_\_\_\_ DBA \_\_\_\_\_ WVABCA License #: \_\_\_\_\_

9) Applicants must provide a copy of an executed written agreement between all the businesses (licensed restaurants and un-licensed restaurants) in the association that states each vendor is jointly and severally liable for any violations within the food court's floor plan. Have you included a copy of the executed agreement?  Yes  No

10) Have you attached a copy of the association's ownership document or lease for the facility?

Yes  No

11) Have you provided a security plan that will be implemented by all members of the association (those serving alcoholic liquor and nonintoxicating beer and the non-licensed members)?

Yes  No

The undersigned agree, if a Private Food Court 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 et seq., and all Federal and State Statutes and all other laws of this State and the rules and regulations promulgated by the 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

Applicant/ Entity Name: \_\_\_\_\_

Doing Business As (DBA)Name: \_\_\_\_\_

**WEST VIRGINIA**

**ALCOHOL BEVERAGE CONTROL ADMINISTRATION**

**RELEASE OF CONFIDENTIAL 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 FBI 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.

**Must be completed by all owners, officers, members and managers.**

Printed Name	Written Signature	Title	Date

# West Virginia Alcohol Beverage Control Administration

## Private Food Court Floor Plan

License Period: \_\_\_\_\_ to \_\_\_\_\_

Applicant Entity Name: \_\_\_\_\_

Doing Business As (DBA) Name: \_\_\_\_\_

Floor plan **must** include **all ingress, egress, and areas within the Private Food Court** where non-intoxicating and alcohol will be stored, served, sold, or consumed. **SUBMIT (1) COPY TO WVABCA. MUST GIVE DIMENSIONS. EEP (1) COPY AT LICENSED PREMISES.**

\*If there are attached drawings please check:

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

I or we hereby certify that the Food Court floor plan above and/or attached is the only area where alcoholic beverages will be carried, consumed. And I or we further understand that any violation of this provision will mean immediate revocation or suspension of my license.

Print: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Facility and Any Inter-connected or adjoining structures	Located on What Floor	Seating Capacity

**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 obverse (front) portion of the form.**

**To: Municipal Clerk or Recorder**

Under the requirements set forth in 60-7-4a and/or 11-16-8(a)(5) of the W. Va. State Code, a person intending to apply for a license to operate an ABCA licensed Private Club, Private Wine Restaurant or Tavern 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 Alcohol Beverage Control Administration. Pursuant to this requirement, **notice** is herein given that the following intends to apply to the WVABCA for a license to operate a Private Club, Private Wine Restaurant, Private Wine Bed and Breakfast, Private Wine Spa, or Tavern issued pursuant to the provisions of §§ Chapter 60, Article 7 and Article 8 and/or 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)

General Description of Premises: \_\_\_\_\_  
\_\_\_\_\_

Food Services to be Offered: \_\_\_\_\_  
\_\_\_\_\_

Patron Capacity: \_\_\_\_\_

**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: \_\_\_\_\_

(FOR USE BY MUNICIPAL AUTHORITIES ONLY)

Is the proposed location for the Private Club, Private Wine Restaurant, Private Wine Bed and Breakfast, Private Wine Spa, or Tavern described consistent with the zoning ordinances or your Municipality as either a permitted use or a conditional use of such premises?

Yes \_\_\_\_\_ No \_\_\_\_\_

If the answer to the first question was "no," does your Municipality provide within its business zones suitable alternative locations for Private Club, Private Wine Restaurant, Private Wine Bed and Breakfast, Private Wine Spa, or Tavern?

Yes \_\_\_\_\_ No \_\_\_\_\_

Is the proposed location for the Private Club, Private Wine Restaurant, Private Wine Bed and Breakfast, Private Wine Spa, or Tavern herein described situated in an area designated for the use of community development block grant funds in the municipality?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, is the planned use of the premises at the location herein described consistent with any plan adopted by the governing body of the municipality for revitalization of the area wherein the premises are situated?

Yes \_\_\_\_\_ No \_\_\_\_\_

Does the municipality have any restrictions or regulations prohibiting Limited Video Lottery?

Yes \_\_\_\_\_ No \_\_\_\_\_

Does the municipality have any restrictions or regulations prohibiting Exotic Dancing establishments?

Yes \_\_\_\_\_ No \_\_\_\_\_

Additional comments to the Alcohol Beverage Control Administration:

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**Approved By: Authorized Official Signature and Title**

**City/Town**

**Date:**

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