



## West Virginia Alcohol Beverage Control Administration

900 Pennsylvania Avenue, Charleston, West Virginia 25302

(304)356-5500

### Instructions for Completing Non-Retail Nonintoxicating Beer License Application

Please read the instructions carefully and answer ***all*** questions completely.

Your accuracy and thoroughness will assist us in processing the application and avoid delays in the licensure process.

1. Check appropriate box that applies to your submission. *Representatives must apply independently of employer.*
2. Answer questions and sections thoroughly for the type of license you wish to obtain. ***100% ownership must be disclosed.***
3. Application must be signed and notarized. Please follow the instructions for signature process.
4. If a "yes" response is noted for questions 9-12, a written explanation must be attached.
5. Federal Approval (Brewer's Notice/Basic Permits) are required.
6. License's are effective July 1st to June 30th, with the exception of Representative Permits; October 1 to September 30th. License fees are prorated from January 1 to June 30 for new applications only.
7. License and Operational fees are noted in appropriate box for the type of license/permit applying for. Permit fees are not required for Representatives. Operational fees are not prorated.
8. New submissions applying as a corporation, association, and/or limited liability company must submit certified copies of supporting documents filed with the state in which that entity was formed. This may include Corporate Charter/Articles; LLC Certificate/Articles of Formation/Organization.
9. Foreign Business' must include Certified copy of Certificate of Authority from the West Virginia Secretary of State (WVSOS) to transact business in West Virginia. You may contact the West Virginia Secretary of States Office at 304-558-8000 for further information.
10. Compliance with the WV State Tax Department is required. You may contact the Tax department at 304-558-0678; 5585-0689, 558-8695, 558-1114 for further information. A Letter of Good Standing may be necessary if our office cannot verify compliance.
11. Resident Brewers must include zoning form, floor plan, estimation of production report and copy of valid lease, if applicable. Wholesalers must include copy of valid lease, if applicable.
12. Please follow the instructions on the enclosed Malt Beverage Label Approval Policy to ensure timely processing of labels and franchise agreements.
13. All license fees must be paid by cashier's check, certified check or money order.

**Representatives should be knowledgeable of W.Va. Code §11-16 and 176 CSR 1.  
Further, Representative must be familiar with trade practice policies, standards and limitations.**

*Mail completed packet and supporting documents to the address above; Attn: Beer Division*

*If you have any questions or need additional assistance, you may contact the number listed above.*



Licensing Period \_\_\_\_\_ to \_\_\_\_\_

Business Type:

- Individual       Limited Liability Co.  
 Partnership     Corporation  
 Limited Partnership    Association

Application or License Number: \_\_\_\_\_

<i>Office Use Only</i> Application Number: _____
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### Non-Retail Nonintoxicating Beer License Application

<input type="checkbox"/> Brewer/Importer License Answer Questions 1-12 Complete Section I Brewer <input type="checkbox"/> Importer <input type="checkbox"/> License Fee: \$1,500.00 Operational Fee: \$100.00	<input type="checkbox"/> Resident Brewer License Answer Questions 1-12 Complete Section III  License Fee: \$1,500 Operational Fee: \$100.00	<input type="checkbox"/> Representative Permit Answer Questions 1-6 & 8-12 Complete Section II  Brewer/Importer Representative <input type="checkbox"/> Resident Brewer Representative <input type="checkbox"/> Distributor Representative <input type="checkbox"/>	<input type="checkbox"/> Distributor License Answer Questions 1-12 Complete Section III  License Fee: \$1,000.00 Operational Fee: \$100.00
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1. Licensee (Entity): \_\_\_\_\_ 4. EIN #: \_\_\_\_\_
2. Trade or DBA Name: \_\_\_\_\_ 5. Business Telephone: \_\_\_\_\_
3. Mailing Address: \_\_\_\_\_ 6. Physical Address: \_\_\_\_\_

City	State	Zip	City	State	Zip
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\* 7. Supply the following information about owners, officers, directors, members and/or managers. **100% Ownership must be disclosed.**

Title	Name	Residence Address	Yrs. WV Residency
Date of Birth	Social Security Number	Telephone Number	% Ownership      **US Citizen
Title <td style="text-align: center;">Name</td> <td style="text-align: center;">Residence Address</td> <td style="text-align: center;">Yrs. WV Residency</td>	Name	Residence Address	Yrs. WV Residency
Date of Birth	Social Security Number	Telephone Number	% Ownership      **US Citizen
Title <td style="text-align: center;">Name</td> <td style="text-align: center;">Residence Address</td> <td style="text-align: center;">Yrs. WV Residency</td>	Name	Residence Address	Yrs. WV Residency
Date of Birth	Social Security Number	Telephone Number	% Ownership      **US Citizen

\*Use a separate sheet if necessary. \*\*If not a US Citizen, please attach a written explanation of when and where naturalized.

8. Contact Person: \_\_\_\_\_
- Telephone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**If questions 9-12 are answered yes, a written statement must be attached to the application for license.**

9. Has the applicant or any officer been convicted of:
- A) Felony? \_\_\_\_\_ B) Violation of Federal or State Alcohol Laws? \_\_\_\_\_ C) Criminal Offense (misdemeanor) within the last years? \_\_\_\_\_
10. Has applicant been refused any type of alcohol license or permit in any state? \_\_\_\_\_
11. Has applicant or any officer had:
- A) A hearing before the WVABCA Commissioner? \_\_\_\_\_ B) Any type of WVABCA license or permit sanctioned? \_\_\_\_\_
12. Does the applicant, officers, directors or any blood relative own any of the following used by any retail licensee:
- A) Real estate? \_\_\_\_\_ B) Buildings? \_\_\_\_\_ C) Equipment? \_\_\_\_\_

## Section I

*Brewer/Imports located outside of West Virginia*

Date and State Formed: \_\_\_\_\_

Date qualified to transact business in West Virginia: \_\_\_\_\_

*\*Attach Certified copies of Corporate Charter/Articles, LLC Certificate of Formation/Articles of Organization, copy of Certificate of Authority filed with the West Virginia Secretary of State Office; This applies to all entitles formed outside the State of West Virginia.*

## Section II

*Representatives for Brewer/Importers,  
Resident Brewers and Wholesalers*

Employer: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Telephone Number: \_\_\_\_\_

Applicant Telephone Number: \_\_\_\_\_

Applicant E-mail \_\_\_\_\_

Date of current employment: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Applicant Residence Address: \_\_\_\_\_

Have you ever had a license with any other licensed Brewer/Importer or Wholesaler? If yes, name and address of such: \_\_\_\_\_

**Affix 2" x 3"  
color photo of  
Brewer Representative  
Applicant here.**

## Section III

*Distributors and Resident Brewers*

West Virginia County in which business is physically located: \_\_\_\_\_

*\*Attach Certified copies of Corporate Charter/Articles, LLC Certificate of Formation/Articles of Organization.*

Does applicant hold a valid lease? \_\_\_\_\_ Expiration date of lease: \_\_\_\_\_

*\*Attach copy of valid lease.*

Property owner/Leaser name/address and phone number: \_\_\_\_\_

Do the premises conform to all health, fire and zoning regulations? \_\_\_\_\_

*Should the applicant fail to fully carry out and fulfill in every respect the laws of West Virginia, then the Commissioner shall have the right to terminate or revoke this license or permit and declare forfeited the penalty of the bond (if a bond is required for the selected license type). However, it is agreed and understood by and between the parties hereto that before such bond shall be forfeited a hearing shall be held in the Office of the West Virginia Alcohol Beverage Control Commissioner in the City of Charleston, Kanawha County, West Virginia, after ten (10) days written notice to the applicant, setting forth the charge or charges and the time and place of hearing thereon and which said notice shall be served the applicant by registered mail at the address hereinabove set forth.*

### Instructions for signing application (attach additional sheet if necessary)

- 1) Partnership/Limited Partnership: Must be signed by all partners;
- 2) Ltd. Liability Company: Must be signed by all members;
- 3) Association: Must be signed by all members;
- 4) Corporation: Must be signed by an officer in the corporation;
- 5) Individual: Signature of that individual;
- 6) \*Representatives must sign on their own behalf

\_\_\_\_\_  
*Signature(s), Title(s) of applicant(s) thereunto duly authorized*

State of: \_\_\_\_\_ County of: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

(Notary Public) \_\_\_\_\_

My commission expires the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.