



LOUISVILLE METRO ALCOHOLIC BEVERAGE CONTROL

Instructions for Temporary Event Application

General Requirements

- You must be at least 21 years of age.
- You must be a Kentucky resident unless applying as a corporation, LLC or Ltd. partnership.
- You must be U.S. citizen unless applying as a corporation, LLC or Ltd. partnership
- Kentucky State Law requires both local ABC Administrator(s) and state ABC Administrator(s) approval to be licensed.
- You must submit a completed application with Louisville Metro ABC and submit to: **444 S. 5th Street Ste. 200 Louisville, KY 40202** and an online application with Kentucky State ABC via www.abc.ky.gov
- Individuals, owners, partners, officers, directors or interested parties may not apply if they have been convicted of any felony within the past five years; or convicted of any alcohol or controlled substance related misdemeanor in past two years.
- If you are a for-profit, sole proprietor, company or limited liability company (LLC) or organization, the event must be part of a bona fide civic event or community sponsored event.
- Event must be held in a wet territory. Temporary licenses cannot be obtained for events held in limited wet, moist or dry territories.

TIME TO PROCESS APPLICATIONS

Completed application must be submitted to Louisville Metro ABC no later than (7 – 10) business days prior to the start date of the requested period of time to cover the event premises. If an applicant chooses to withdraw a license application or your license application is not issued for any reason; you must submit a written request for a refund. The Metro ABC office will keep a \$50 application processing fee.

How to Apply

1. All applicants must list top (3) Officers of the organization (Section C)
2. Pay your application fee(s) by attaching a completed **certified check, cashier's check, or money order, business check made payable to: Metro Finance.**
WE DO NOT ACCEPT CASH UNLESS IN-PERSON PAYMENT
3. Multiple points of sale at the same event must apply for and pay a licensing fee for each point of sale.
4. If applicant is a non-profit charitable organization, attach documentation of your non-profit status and your Federal Tax ID.
5. All applicants must attach a copy of their articles of incorporation, partnership papers, or organizational papers, unless the applicant is a sole proprietor.
6. Attach a copy of the deed, lease, or permit for the real estate premises where you plan to sell alcohol.
7. If applicant is a for-profit sole proprietor, company or limited liability company (LLC), or organization who is qualifying for this license, complete and attach the Civic Event Affidavit to provide written documentation supporting the community benefit and/or civic nature of the event.
8. Provide a detailed description of the event
9. You must provide a copy of the advertisement of the event. (ex: A Flier of the event)
10. Include a layout / floor plan of the event to indicate the points of sale for the event
11. For-Profit applicants must provide proof of compliance with the Louisville Metro Revenue Commission
12. Each application requires a Field Inspection by an ABC Detective prior to issuance. The ABC Detective will contact the applicant to schedule

LOUISVILLE METRO ALCOHOLIC BEVERAGE CONTROL

Department of Codes & Regulations Division of Licensing & Permits

Metro Development Center

444 S. Fifth Street, Suite 200 Louisville, KY 40202

(502) 574-3591



SPECIAL TEMPORARY APPLICATION

A temporary license may be obtained only if the event is located in a wet territory where retail alcoholic beverage sales are permitted. This license cannot be issued in moist or dry territories.

Section A

Check the type of organization that is applying for the temporary license(s):

Non-Profit Charitable Organization

For-Profit Sole Proprietor, Company or LLC

Metro Revenue Commission Account Number: _____

Name of company to be licensed: _____
(applicant's name, if sole proprietor)

Name of Special Event: _____

Address of premises to be licensed: _____

City: _____ State: _____ Zip code: _____ County: _____

E-mail address: _____

Mailing address (if different from above): _____

Contact person: _____ Contact Phone: _____

Section B

1) Amount of fee enclosed (make certified check, cashier's check, or money order payable to Metro Finance): _____

Period to be covered by license beginning: (month) _____ (day) _____ (year) _____

through

(month) _____ (day) _____ (year) _____

2) What are the **date(s)** and **time(s)** of the qualifying event? _____

3) Does the applicant own the premises where the qualifying event is to take place?

If yes, **attach** a copy of the deed.

If no, **attach** a copy of the lease, permit, or letter of permission to use this property, signed by the applicant and the owner of the premises. List the

Premises owner's name and contact information _____

All alcoholic beverages for the event must be obtained through a licensed distributor or wholesaler

Section C

Complete the following for the business proprietor, partner(s), and all persons having an interest in the business to be licensed. List all owners, officers, directors, partners, managing members, members and shareholders. If privately - held show 100% of the ownership. If publicly - traded list the three highest ranking officers and any natural person who owns ten (10) percent or more. If a non-profit organization, list the highest - ranking top director or officer.

Attach additional pages as needed.

NAME AND HOME ADDRESS	ALL PHONE NUMBERS H= HOME W=WORK C=CELL	Direct Email Address	TITLE	U.S Citizen?	DATE OF BIRTH	LIST STATE(S) WHERE PERSON RESIDED IN PAST5 YRS	%OF OWNERSHIP (If applicable)
	H _____ W _____ C _____			<input type="checkbox"/> YES <input type="checkbox"/> No			%
	H _____ W _____ C _____			<input type="checkbox"/> YES <input type="checkbox"/> NO			%
	H _____ W _____ C _____			<input type="checkbox"/> YES <input type="checkbox"/> NO			%

Section D

1. Are the premises to be licensed located within an incorporated city or town?

If yes state the name of the city or town: _____

YES NO

2. Is the applicant a non-profit organization?

NOTE: Applications by legally recognized for-profit entities, in conjunction with civic or community sponsored events, must **attach** supporting evidence of the civic nature of the event (i.e. promotional materials or news articles evidencing the local government's knowledge and support of the event). (804 KAR 4:250)

YES NO

3. Is the applicant a corporation limited partnership, limited liability company (LLC) or other legally recognized entity? If yes, Is the entity in good standing with the Kentucky Secretary of State? (**Attach** documentation showing the applicant's good standing).

YES NO

4. **Attach** a description of the event. **Attach** copies of any advertising, mailers, invitations or handbills for this event. Include any other information the applicant wishes the Local Administrators to consider.

Note: An ABC licensed caterer may not cater alcoholic beverages at an event covered by a special temporary license. No free samples of alcoholic beverages may be provided at the event.

All alcoholic beverages for the event must be obtained through a licensed distributor or wholesaler.

5. Name of the responsible party/individual who shall be present at the time of event: _____

Contact Phone: _____

6. Does the applicant or any person named in Section C have 10% interest or more in any alcohol license type? (804 KAR 4:015)

If yes, please list or explain _____

YES NO

7. Has the applicant or any person named in Section C 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? (KRS 243.100(1)(a))

YES NO

8. Has the applicant or any person named in section C been convicted of a misdemeanor directly or indirectly related to alcohol or controlled substance within the past two (2) years? (KRS 243.100(1) (b) and (c))

YES NO

Section E

Check the type(s) of license(s) for which the applicant is applying. For each license type selected, the applicant affirms that the requirements for that license type have been met. **How many Points of sale will there be?** _____

A separate licensing fee is required for each point of sale where alcohol will be sold.

License Type	Licensing Fee	License Applied for
Special Temporary Liquor Drink, Beer, & Wine License	\$266.66	<input type="checkbox"/>
Special Temporary Auction License (Non-Profit Organizations ONLY)	\$100	<input type="checkbox"/>
Temporary Wine License (WINE ONLY)	\$50	<input type="checkbox"/>
Temporary Malt Beverage (BEER ONLY)	\$25	<input type="checkbox"/>

LOCAL ABC ADMINISTRATOR APPROVAL

I certify under oath that the applicant(s) has been approved for the equivalent local license type(s) applied for herein for the identified premises, and that the applicant satisfies all local ordinances.

The premises to be licensed is located in the following WET/ MOIST PRECINCT: _____

APPLICANT NAME: _____ ADDRESS: _____

SIGNATURE OF LOCAL ABC ADMINISTRATOR: _____ DATE: _____

PRINTED NAME OF LOCAL ABC ADMINISTRATOR : _____

City of _____ Administrator

APPLICANT AFFIDAVIT

I, (print your name here) _____ do hereby swear or affirm under penalty of perjury that all statements contained in this application and any attachments are true and correct to the best of my knowledge, information, and belief. I hereby swear or affirm that I shall not engage in any activity involving alcoholic beverages at the premises described herein until I have been issued the appropriate license(s) by the Kentucky Department of Alcoholic Beverage Control. I hereby swear or affirm that if the license(s) is issued, I shall abide by all state and local statutes, regulations, and ordinances relating to the manufacture, sale, use, and trafficking in alcoholic beverages. I hereby swear or affirm that no persons listed in Section (C) of this application are in default of a repayment obligation under any financial program administered by Kentucky Higher Education Assistance Authority (KHEAA) such as a student loan repayment.

Signature of Applicant: _____ Title: _____ Date: _____

AFFIDAVIT FOR APPLICANT REQUESTING SPECIAL TEMPORARY ALCOHOLIC BEVERAGE LICENSES

KRS 241.060 provides for the issuance of a distilled spirits and wine special temporary license or a special temporary wine license to any regularly organized fair, exposition, racing association or other party, when, in the opinion of the State Alcoholic Beverage Control Board, a necessity therefore exists. [KRS 243.290 provides for the issuance of a malt beverage special temporary license for any regularly organized fair, race or race meeting conducted by the association, or for special temporary occasions such as picnics, bazaars and carnivals subject to administrative regulations.] 804 KAR 4:250, Special Temporary License, establishes application procedures and requirements for these special temporary licenses. Such licenses may be issued when a regularly organized fair, exposition, racing association, party, picnics, bazaars and carnivals, or similar event is being organized by a recognized non-profit entity.

As the event sponsor / producer, I (print name here) _____
am acknowledging that I am the sponsor / producer of (print name of event here)
_____. As the sponsor / producer of the event associated with an
application for a Special Temporary Alcoholic Beverage License, I further acknowledge (check
applicable box below):

The applicant is a charitable or civic organization, as determined by the Internal Revenue Service or the Kentucky Department of Revenue, and is a bona fide tax-exempt organization; or a person or organization defined under KRS 367.650(2).

The applicant is not a bona fide tax-exempt organization, person or organization, but the event for which this Special Temporary Alcoholic Beverage License is requested is an organized civic or community-sponsored event or public gathering of broad appeal where citizens are invited and encouraged to attend without significant cost of admission and which is sponsored or acknowledged by Louisville Metro Government, including but not limited to, conventions, conferences, celebrations, pageants, parades, festivals, fairs, public displays, commemorations, or other type of public assemblies conducted for the benefit and enjoyment of the general public. Furthermore, and in accordance with the aforementioned definition, I am describing and confirming the civic and community-sponsored characteristics of the event are as follows:

Furthermore, I do hereby swear or affirm that all statements contained in this affidavit and any attachments hereto are true and correct to the best of my knowledge, information and belief.

Signature of event sponsor / producer _____ Date _____

Sworn or affirmed before me this _____ day of _____, year of _____

My Commission expires: _____ Notary Public _____ County of _____

State of _____