



City of Prospect
Alcoholic Beverage Control
License Application

CITY OF PROSPECT
ALCOHOLIC BEVERAGE CONTROL
9200 US HIGHWAY 42, PROSPECT, KY 40059
(502) 228-1121 WWW.PROSPECTKY.COM

Beginning November 1, 2013, the Kentucky Department of Alcoholic Beverage Control will not accept incomplete applications or applications submitted on old forms. To obtain a copy of the Kentucky Department of Alcoholic Beverage Control Application, please visit their website: <http://abc.ky.gov/> or call their office at 502-564-4850.

APPLICATION

City of Prospect Application Information:

- **Application:** Complete and submit a *City of Prospect Alcoholic Beverage Control License Application* in person or by mail to: City of Prospect, 9200 US HWY 42, Prospect, KY 40059. Applications are due NO LATER than June 15th. Applications by fax or email will not be accepted. All applications must be notarized.
- **Fees:** Please include payment when submitting your application. Payments are made payable to: The City of Prospect.
- **License:** Once your City license is approved, you will receive a City of Prospect Alcohol Beverage Control License by mail. Licenses must be displayed in a conspicuous location. The City of Prospect ABC License is good for one year and you must re-apply each year. The State of Kentucky due dates may not mirror the City of Prospects; however, both licenses must remain up to date and valid. A business cannot operate without both a State and local ABC license.
- **Questions:** Please contact City of Prospect ABC Administrator, Holly LeVold at 228-1121 or email Cityclerk@prospectky.com



SECTION ONE:

Name of Applicant: _____

D/B/A: _____

Mailing Address: _____

Premise Address: _____

Premise Phone: _____ Contact Phone: _____

Fax: _____ Email Address: _____

Name & Address of Property Owner:

Section Two:

Types of Licenses and License Fees:

Mark the appropriate box for each type of license(s) for which you wish to apply.

Enclose a check or money order payable to: **City of Prospect.**

Fee Enclosed: _____

Return this form to the address above.

L I C E N S E T Y P E S

Please select all that apply!

S P I R I T S

Distillers License	\$500.00
Rectifier's License.....	\$1500.00
Wholesalers License.....	\$1500.00
Quota Retail <u>Package</u> License (Kroger, Party Source etc.).....	\$600.00
Special Temporary License(weddings, parties).....	\$133.34
NQ-2: Retail <u>drink</u> License (<i>RESTARAUNTS</i> - includes <i>distilled spirits, wine and malt beverages</i>).....	\$300.50
NQ-3: Retail <u>Drink</u> License (<i>Country Club or private club ONLY!</i>).....	\$150.00
Special Sunday Retail <u>Drink</u> License.....	\$300.00
NQ-2 Extended Hours License.....	\$250.00

M A L T B E V E R A G E S

Brewers License.....	\$500.00
Microbrewery License.....	\$250.00
Distributors License.....	\$200.00
NQ-4: Retail <u>Malt Beverage</u> Drink License (<i>RESTAURANT BEER ONLY</i>)	\$200.00
NQ: Retail <u>Malt Beverage</u> Package License (<i>PACKAGE BEER ONLY!</i>).....	\$200.00
NQ-4 Extended Hours License.....	\$50.00

SECTION THREE:

I, _____ do hereby solemnly swear that I am aware that my Kentucky State ABC License application is incorporated and made a part of this application, and that answers contained within are true and correct to the best of my knowledge, information and belief. I confirm that a copy of Chapter 114 -Alcoholic Beverages, of the City of Prospect, Kentucky Code of Ordinances, has been provided to me in electronic format or print, and I hereby consent to the authority of the City's Alcoholic Beverage Control Administrator and his/her investigators for inspection or searches of the licensed premises listed above.

Date Signature of Applicant Applicants Title

STATE OF _____

COUNTY OF _____

This is to certify that the foregoing document was subscribed and sworn to before me this
_____ Day of _____, 20____.

(Seal) _____
Notary Public
My Commission Expires _____

For Office Use Only:

License Prefix: 14- _____

1. _____ 2. _____
3. _____ 4. _____