# City of Glasgow Alcoholic Beverage Control



**ALCOHOL BEVERAGE CONTROL** 

# **Application Packet**

#### **ABC Application Instructions**

A. Properly complete all appropriate City Application Forms. All application forms including appropriate payments should be returned to the City of Glasgow, c/o ABC Administrator.

#### The State forms have to be completed online at <u>www.abc.ky.gov</u> with appropriate payment.

#### Separate sets of documentation (discussed below) must be attached to each individual Application Form.

B. Payment of all fees must be in the form of Certified Check, Cashier's Check or Money Order. You must submit with each application a separate payment for each item listed below:

<u>City of Glasgow (non-refundable business license application fee)</u>: Payable to "City of Glasgow" <u>City of Glasgow ABC License</u>: payable to "City of Glasgow"

C. Run a legal advertisement in the Glasgow Daily Times for one (1) day (select the proper format from the example included with the State application packet). You must obtain an Affidavit of Advertisement signed by the newspaper and a copy of the actual advertisement must be attached to each Application Form.

D. If you are purchasing an existing licensed establishment, you must complete an application for Transitional License and have the current owner complete the "Seller Verification section of the State Application. Under State Law, you are not allowed to use the current owner's license in order to keep the business running while your application is being processed. The current owner would have to continue to run the business during that time period unless a Transitional License is obtained.

E. If you do not own the building where you plan to establish your licensed business, you must send a copy of the lease, dated and signed by both the lessee and the lessor. Lessee must be the same party, or parties, as listed on the Application Forms. The lease must be valid and in force through the full license period. City and state license periods end annually on April 30.

F. A city of Glasgow Business License must be presented or purchased and a copy presented with this application. New businesses must complete the business application process through the Occupational Licensing Department at City Hall, 126 East Public Square.

G. The investigative process will normally take from forty-five (45) to sixty (60) days at the state level. If problems or questions arise, the investigation time may increase. For this reason, it is very important that the applicant furnish a telephone number where a responsible party may be reached by the investigating officer assigned to handle the application. The local ABC officer reserves the right to complete a surprise inspection at any time.

H. The City of Glasgow ABC License Fees for Alcohol Licenses are detailed on the following pages. Any licenses issued during a portion of the license period shall be assessed a fee which is based on the pro rata portion of the remainder of the license period; however, the cost of any license shall not be less than that for a period of six (6) months.

Applications for renewal of licenses required by this section shall be made for each fiscal year beginning the first of April and extending through the last day of March of the succeeding year. Applications for renewal are to be filed with the City ABC Administrator thirty (30) days to expiration.

If you have any questions or concerns, contact the City of Glasgow ABC Administrator, Nick Hurt, at (270) 651-5131, or by email at nicholas.hurt@cityofglasgow.gov.

# **ABC License Checklist**

## Forms:

<i>I</i>	Application Instructions—City License
<i>I</i>	Application—City License
V	Verification of Zoning Compliance
V	Verification of Food Service Compliance
	Verification of Building Code Compliance
	Verification of Fire Code Compliance
ł	Kentucky State ABC License Application
×	<sup>k</sup> include Glasgow Daily Times Legal Advertisement
×	<sup>k</sup> include Affidavit of Advertisement
(	Copy of City Ordinance (applicant to retain)
If Building/Prer	nises is owned:

Bullailig/Fit

Copy of Deed

If Building is Leased:

Copy of Lease, valid through entire License period (April 30) \_\_\_\_\_

## ALCOHOLIC BEVERAGE CONTROL APPLICATION FORM

City of Glasgow, Kentucky

126 East Public Square, P.O. Box 278 Glasgow, KY 42142-0278

Phone: (270) 651-5131 Fax: (270) 651-2511

www.cityofglasgow.org

Nick Hurt, ABC Administrator nicholas.hurt@cityofglasgow.gov

## **SECTION A:**

Name of Applicant:		
d/b/a:		
Premises Address:		
Mailing Address:		
Premises Phone No:	Contact Phone No:	
Fax No:	Email address:	

#### FEE ENCLOSED:

Check the license type(s) for which the applicant is applying. For each license type selected, the applicant affirms that the Requirements for that license type(s) are met.				
<b>RETAIL - QUOTA</b> License FeeLicense FeeFull YearHalf Year				
Quota Retail Package License (KRS 243.230, 804 KAR 4:270) *A quota license must be available prior to applying.	\$1,000	\$500		
Quota Retail Drink License (KRS 243.250, 804 KAR 4:270 * A quota license must be available prior to applying.	\$1,000	\$500		

NQ Retail Malt Beverage Package License (KRS 243.280)	\$200 If applying for both an NQ Retail Malt Beverage Package License and an NQ-4 Retail Malt Beverage Drink License, the total license fee for a full year for both is \$250. \$200 for the primary NQ Malt Beverage License and \$50 discounted fee to add the secondary NQ (KRS 243.070 (18))	\$100
NQ-4 Retail Malt Beverage Drink License (KRS 243.088)	\$200 If applying for both an NQ Retail Malt Beverage Package License and an NQ-4 Retail Malt Beverage Drink License, the total license fee for a full year for both is \$250. \$200 for the primary NQ Malt Beverage License and \$50 discounted fee to add the secondary NQ (KRS 243.070 (18))	\$100

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NQ-1 Retail Drink License (KRS 243.082) Specify the business type:		
Convention Center-Premises capacity of 1,000 persons		
Horse Track- Premises located at a track licensed by the Kentucky Racing Commission (KRS 243.265)	\$2,000	\$1,000
Automobile Race Track- Premises seating capacity of 30,000 persons		
Air or Rail System-Commercial airline system or railroad Company sells alcohol to passengers on scheduled or chartered Trips		
State Park- 9 or 18 hole golf course, or full-service lodge and Dining room without or without a 9 or 18 hole golf course		
NQ-2 Retail Drink License (KRS 243.084)		
Specify the business type		
Restaurant- Minimum 50% of gross annual income from food sales	\$1,000	\$500
Motel/Hotel- Minimum 50 sleeping rooms, 25, 000 square feet Of parking, and maintain a restaurant with 50% food sales and Minimum seating capacity of 50 people at tables		
<ul> <li>Airport- Premises located in a commercial airport through which more than 500,000 passengers arrive or depart annually</li> </ul>		
Riverboat- Capacity to carry more than 100 passengers, and license from U.S. Coast Guard		
NQ-3 Retail Drink License (KRS 243.086) Specify the business type		
Private Club- Nonprofit charitable, civic, social, fraternal organization, or political club which has maintained a room from which the general public has been excluded for at least one (1) year.	\$300	\$150
Dining Car- Railroad or Pullman car company that sells alcohol by package or drink on a train		
Limited Restaurant Drink License LR100 (KRS242.185, KRS 241.010(31)(a)		
LR100- Minimum 70% food sales and minimum seating capacity Of 100 persons at tables	\$1,200	\$600
Limited Golf Course License (KRS 243.038, KRS 243.039)		¢
Nine(9) or eighteen (18) hole USGA regulation golf course	\$1,200	\$600
Caterer's License (KRS 243.033, 804 KAR 4:310 Premises contains Commissary and applicant holds food service permit	\$800	\$400
Special Temporary License (KRS 243.260, 804 KAR 4:250	\$166 per event	
Special Temporary Auction License (KRS 243.036)	\$100 per event	

<b> Distiller's License</b> (KRS 243.120, KRS 243.130, 804 KAR 4:050, 804 KAR 4:240	\$500	\$250

Rectifier's License (KRS 243.120, 804 KAR 4:050)	\$3,000	\$1,500
Brewer's License (KRS 24.150, KRS 244.606)	\$500	\$250
Microbrewery License (KRS 243.157, KRS 244.606	\$500	\$250
Wholesaler's License (KRS 243.160, KRS 243.170)	\$3,000	\$1,500
Distributor's License (KRS 243.180, KRS 244.606)	\$200	\$100
<b>Bottle House/Bottling House Storage License</b> (KRS 243.350, 804 KAR 4:404)	\$2,000	\$1,000
Supplemental Bar License—Fees are required for the first five (KRS 243.037, KRS 241.010) Select supplemental license type that applies to primary license type:		
Quota Liquor Drink Supplemental Bar	\$1,000	\$500
NQ-2 Supplemental Bar	\$1,000	\$500
Limited Restaurant Supplemental Bar	\$1,200	\$600
Limited Golf Course Supplemental Bar	\$1,200	\$600
_ NQ-3 Private Club Supplemental Bar	\$300	\$150
For how many Supplemental Licenses is the applicant applying?		
Special Sunday Retail License	\$300	\$150
<u>Extended Hours Supplemental License</u> Available only to holders of NQ-1 Retail Drink Licenses, and Qualified Historic Site Licenses (KRS 243.050, 804 KAR 4:230)	\$2,000	\$1,000
Brew on Premises License (KRS 243.040, 804 KAR 4:340	\$100	\$50

## **SECTION C**

I, \_\_\_\_\_\_, do hereby solemnly swear or affirm that I am aware that my state application is incorporated, made a part of this application, and <u>must be included</u> with this application, have received a copy of the current Alcoholic Beverage Control Ordinance of the City of Glasgow, Kentucky, and I hereby consent to the authority of the Alcoholic Beverage Control Administrator and his/hers investigators for: (a) inspections and searches of the licensed premises listed above: (b) confiscation of articles found on said licensed premises in violation of any Ordinance or Statute; and (c) emergency temporary closure of the licensed premises if the public health, safety, morals, and welfare is threatened by multiple violations of any Ordinance or Statute involving disturbance of the peace or public disorder during the course of one day's operation of the licensed premises.

Date of Application:	_ Signature of Applicant:		Title:
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Approved:

Glasgow Alcoholic Beverage Control Administrator

Date

#### VERIFICATION OF ZONING COMPLIANCE City of Glasgow, Kentucky

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This form must be completed by the Glasgow-Barren County Planning and Zoning Commission, 126 East Public Square, Glasgow, Kentucky, Phone: (270) 659-0661, before submitting your application for an Alcoholic Beverage License.

Signed this \_\_\_\_\_\_, 20\_\_\_\_,

\_\_\_\_\_

Kevin Myatt, Director Glasgow-Barren County Planning and Zoning Commission This form must be completed by the Barren County Health Department, 318 West Washington Street, Glasgow, Kentucky, Phone: (270) 651-8321, before submitting your application for an Alcoholic Beverage License.

This is to certify that the property located at	, to be
occupied by an establishment known as	, has obtained
all necessary food service permits in order to comply with the Kentucky Food Service Code, w	vith the
following conditions, if any:	

\*\*Establishment will be required to comply with applicable Kentucky Food Service Establishment Act and State Retail Food code requirements prior to commencing operation that includes limited restaurant alcoholic beverage service.

Signed this \_\_\_\_\_\_, 20\_\_\_\_,

Barren County Health Department Representative

#### THIS FORM DOES NOT VERIFY THAT THE ABOVE NAMED BUSINESS QUALIFIES FOR STATUS AS A "RESTAURANT" UNDER STATUTES, ADMINISTRATIVE REGULATIONS OR GLASGOW CITY CODE PERTAINING TO ALCOHOLIC BEVERAGE CONTROL; THE CITY ALCOHOLIC BEVERAGE CONTROL ADMINISTRATOR MAKES SUCH VERIFICATION.

### VERIFICATION OF BUILDING CODE COMPLIANCE City of Glasgow, Kentucky

This form must be completed by the City Building Inspector, City Hall, 126 East Public Square, Glasgow, Kentucky, Phone: (270) 651-3921, before submitting your application for an Alcoholic Beverage License.

This is to certify that the property located at	, to
be occupied by an establishment known as	_, meets all
applicable Building Codes in order to comply with the Alcoholic Beverage Control Ordinance of	of the City of
Glasgow, Kentucky, with the following conditions, if any:	

Signed this \_\_\_\_\_\_, 20\_\_\_\_,

Jim Griffin City Building Inspector

#### THIS FORM DOES NOT VERIFY THAT THE ABOVE NAMED BUSINESS QUALIFIES FOR STATUS AS A "RESTAURANT" UNDER STATUTES, ADMINISTRATIVE REGULATIONS OR GLASGOW CITY CODE PERTAINING TO ALCOHOLIC BEVERAGE CONTROL; THE CITY ALCOHOLOC BEVERAGE CONTROL ADMINISTRATOR MAKES SUCH VERIFICATION.

### VERIFICATION OF FIRE CODE COMPLIANCE City of Glasgow, Kentucky

This form must be completed by the City of Glasgow Fire Marshal, 203 South Broadway, Glasgow, Kentucky, Phone: (270) 651-5170, before submitting your application for an Alcoholic Beverage License.

This is to certify that the property located at	, to
be occupied by an establishment known as	, meets Fire
Codes in order to comply with the Alcoholic Beverage	ge Control Ordinance of the City of Glasgow, Kentucky,
with the following conditions, if any:	

Signed this \_\_\_\_\_\_, 20\_\_\_\_, 20\_\_\_\_.

Glasgow Fire Department City of Glasgow Fire Marshal

THIS FORM DOES NOT VERIFY THAT THE ABOVE NAMED BUSINESS QUALIFIES FOR STATUS AS A "RESTAURANT" UNDER STATUTES, ADMINISTRATIVE REGULATIONS OR GLASGOW CITY CODE PERTAINING TO ALCOHOLIC BEVERAGE CONTROL; THE CITY ALCOHOLIC BEVERAGE CONTROL ADMINISTRATOR MAKES SUCH VERIFICATION.

## LEGAL NOTICE-ADVERTISEMENT EXAMPLE

<u>Name of Applicant</u>, mailing address of

hereby declares intention(s) to apply for a <u>type of license(s) applying for</u> no later <u>than date</u> <u>application to be turned in</u>, the business to be licensed will be located at <u>address</u> <u>of business</u> doing business as <u>name of business</u>. The owners/corporate officers are as

follows: <u>name and address of owner or all corporate officers</u>. Any person, association, corporation, or body politic may protest granting of the license(s) by writing the Dept of Alcoholic Beverage Control, 500 Mero Street, Frankfort, KY 40601, within 30 days (KRS 243.430) of the date of this legal publication.

The City of Glasgow requires Mandatory Responsible Beverage Service Training for all Alcohol Licensee's under our Alcohol Ordinance Article XII, which states:

(1) All persons employed in the selling <u>and/or</u> serving of alcoholic beverages shall participate in and complete the Kentucky S.T.A.R. program, or such other certified and approved server training course provided by the Kentucky Department of Alcoholic Beverage Control which is at least equivalent to the requirements of the S.T.A.R. program.

(2) All persons required to complete training under provision (1) above shall complete that training within thirty (30) days of the date on which the person first becomes subject to the training requirement. When a new business is licensed to serve alcoholic beverages all employees must be trained prior to the opening of the business.

(3) Each licensee shall be responsible for compliance with the training requirements and shall maintain for inspection by the City ABC Administrator a record or file on each employee that shall contain the pertinent training information. Each premise licensed hereunder must at all times when alcoholic beverages are being served have at least one person currently certified in responsible beverage service training on duty as described herein.

(4) All persons completing the training required by this section shall be re-certified not less than once every three (3) years thereafter.

To register for the server training course (S.T.A.R.) provided by the Kentucky Department of Alcoholic Beverage Control, visit their website: <u>http://ww.abc.ky.gov</u> or contact them at 888-847-7222

City of Glasgow, Alcohol Servicer Training List Note: All columns must be completed for licensing or renewals, or it will be returned to you as incomplete.

Business Name: \_\_\_\_\_

Premise Address: \_\_\_\_\_

Hire Date	Employee's Full Name	DOB	Course Name	Class Date	Expiration Date

I certify that the above list of employees have completed a server trainer courts that meets the requirements of Glasgow Municipal Ordinance, Article XII, Section A. (Recertification is required not less than once every three (3) years thereafter). Attach additional sheets if needed.

Printed Name:	Signature:
Title:	Date:
Contact Number:	**This form must be signed or it will be returned as incomplete