



**STATE OF ALABAMA**  
**ALCOHOLIC BEVERAGE CONTROL BOARD**  
**ALCOHOL LICENSE APPLICATION**



**Confirmation Number: 20240520100647418**

Type License: 040 - RETAIL BEER (ON OR OFF PREMISES) State: \$150.00 County: \$75.00

Type License: 060 - RETAIL TABLE WINE (ON OR OFF PREMISES) State: \$150.00 County: \$75.00

Trade Name: **NOVEL ROSE** Filing Fee: \$100.00

Applicant: **NOVEL ROSE LLC** Transfer Fee:

Location Address: 103 W LAUREL AVE FOLEY, AL 36535

Mailing Address: PO BOX 1123 FOLEY, AL 36536

County: BALDWIN Tobacco sales: NO Tobacco Vending Machines:

Product Type: Type Ownership: LLC

Book, Page, or Document info: 001118568

Do you sell Draft Beer?:

Date Incorporated: 01/29/2024 State incorporated: AL County Incorporated:

Date of Authority:

Federal Tax ID: 990998550 Alabama State Sales Tax ID: R012167485

Name:	Title:	Date and Place of Birth:	Residence Address:
LUKE DEMAY	OWNER	10/20/1978	

- Has applicant complied with financial responsibility ABC RR 20-X-5-.14? YES
- Does ABC have any actions pending against the current licensee? NO
- Has anyone, including manager or applicant, had a Federal/State permit or license suspended or revoked? NO
- Has a liquor, wine, malt or brewed license for these premises ever been denied, suspended, or revoked? NO
- Are the applicant(s) named above, the only person(s), in any manner interested in the business sought to be licensed? YES
- Are any of the applicants, whether individual, member of a partnership or association, or officers and directors of a corporation itself, in any manner monetarily interested, either directly or indirectly, in the profits of any other class of business regulated under authority of this act? NO
- Does applicant own or control, directly or indirectly, hold lien against any real or personal property which is rented, leased or used in the conduct of business by the holder of any vinous, malt or brewed beverage, or distilled liquors permit or license issued under authority of this act? NO
- Is applicant receiving, either directly or indirectly, any loan, credit, money, or the equivalent thereof from or through a subsidiary or affiliate or other licensee, or from any firm, association or corporation operating under or regulated by the authority of this act? NO

Contact Person: LUKE DEMAY  
 Business Phone: 251-943-5044  
 Fax:

Home Phone: 517-250-2439  
 Cell Phone:  
 E-mail: LUKEDEMAY@LIVE.COM

PREVIOUS LICENSE INFORMATION:  
 Trade Name:  
 Applicant:

Previous License Number(s)  
 License 1:  
 License 2:



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If applicant is leasing the property, is a copy of the lease agreement attached? **YES**  
 Name of Property owner/lessor and phone number: **LUKE DEMAY 517-250-2439**  
 What is lessors primary business? **RETAIL**  
 Is lessor involved in any way with the alcoholic beverage business? **YES**  
 Is there any further interest, or connection with, the licensee's business by the lessor? **YES**

Does the premise have a fully equipped kitchen? **NO**  
 Is the business used to habitually and principally provide food to the public? **NO**  
 Does the establishment have restroom facilities? **YES**  
 Is the premise equipped with services and facilities for on premises consumption of alcoholic beverages? **YES**

Will the business be operated primarily as a package store? **NO**  
 Building Dimensions Square Footage: **9000** Display Square Footage:  
 Building seating capacity: **30** Does Licensed premises include a patio area? **NO**  
 License Structure: **SHOPPING CENTER** License covers: **PORTION OF**  
 Number of licenses in the vicinity: **3** Nearest: **.25**  
 Nearest school: Nearest church: Nearest residence: **1 blocks**  
 Location is within: **CITY LIMITS** Police protection: **CITY**

Has any person(s) with any interest, including manager, whether as sole applicant, officer, member, or partner been charged (whether convicted or not) of any law violation(s)? **NO**

Name:	Violation & Date:	Arresting Agency:	Disposition:



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**Initial each**

LD

In reference to law violations, I attest to the truthfulness of the responses given within the application.

LD

In reference to the Lease/property ownership, I attest to the truthfulness of the responses given within the application.

LD

In reference to ACT No. 80-529, I understand that if my application is denied or discontinued, I will not be refunded the filing fee required by this application.

LD

In reference to Special Retail or Special Events retail license, Wine Festival and Wine Festival Participant Licenses, and Food or Beverage Truck Licenses, I agree to comply with all applicable laws and regulations concerning this class of license, and to observe the special terms and conditions as indicated within the application.

LD

In reference to the Club Application information, I attest to the truthfulness of the responses given within the application.

LD

In reference to the transfer of license/location, I attest to the truthfulness of the information listed on the attached transfer agreement.

LD

In accordance with Alabama Rules & Regulations 20-X-5-.01(4), any social security number disclosed under this regulation shall be used for the purpose of investigation or verification by the ABC Board and shall not be a matter of public record.

LD

The undersigned agree, if a license is issued as herein applied for, to comply at all times with and to fully observe all the provisions of the Alabama Alcoholic Beverage Control Act, as appears in Code of Alabama, Title 28, and all laws of the State of Alabama relative to the handling of alcoholic beverages.

The undersigned, if issued a license as herein requested, further agrees to obey all rules and regulations promulgated by the board relative to all alcoholic beverages received in this State. The undersigned, if issued a license as herein requested, also agrees to allow and hereby invites duly authorized agents of the Alabama Alcoholic Beverage Control Board and any duly commissioned law enforcement officer of the State, County or Municipality in which the license premises are located to enter and search without a warrant the licensed premises or any building owned or occupied by him or her in connection with said licensed premises. The undersigned hereby understands that he or she violate any provisions of the aforementioned laws his or her license shall be subject to revocation and no license can be again issued to said licensee for a period of one year. The undersigned further understands and agrees that no changes in the manner of operation and no deletion or discontinuance of any services or facilities as described in this application will be allowed without written approval of the proper governing body and the Alabama Alcoholic Beverage Control Board.

LD

I hereby swear and affirm that I have read the application and all statements therein and facts set forth are true and correct, and that the applicant is the only person interested in the business for which the license is required.

Applicant Name (print): **LUKE DEMAY**

Signature of Applicant: *LUKE DEMAY*

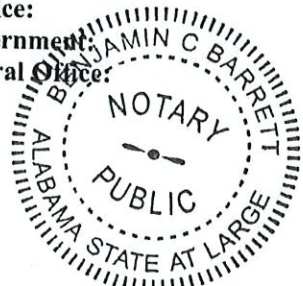
Notary Name (print): **BENJAMIN C BARRETT**

Notary Signature: *B C Barrett*

Commission expires: **10-23-2024**

Application Taken: **App. Inv. Completed:**  
Submitted to Local Government: **Reviewed by Supervisor:**  
Received in District Office:

Forwarded to District Office:  
Received from Local Government:  
Forwarded to Central Office:





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**Private Clubs / Special Retail / Special Events / Wine Festival or Wine Festival**  
**Participants licenses ONLY**

**Private Club**

Does the club charge and collect dues from elected members?

Number of paid up members:

Are meetings regularly held?

How often?

Is business conducted through officers regularly elected?

Are members admitted by written application, investigation, and ballot?

Has Agent verified membership applications for each member listed?

Has at least 10% of members listed been confirmed and highlighted?

Agent's Initials:

For what purpose is the club organized?

Does the property used, as well as the advantages, belong to all the members?

Do the operations of the club benefit any individual member(s), officer(s), director(s), agent(s), or employee(s) of the club rather than to benefit of the entire membership?

**Special Retail**

Is it for 30 days or less?

More than 30 days?

Franchisee or Concessionaire of above?

Other valid responsible organization:

Explanation:

**Special Events / Special Retail (7 days or less)**

Starting Date:                      Ending Date:

Special terms and conditions for special event/special retail:

**Wine Festival / Wine Festival Participant licenses (5 Days or Less)**

Starting Date:                      Ending Date:

Special terms and conditions for special event/special retail:

**Other Explanations**

Is the lessor involved in any way with the alcohol beverage business?: THE LESSOR  
 LUKE DEMAY IS THE SOLE MEMBER OF NOVEL ROSE LLC  
 Is ther any further interest in, or connection with, the licensee's business by the  
 lessor?: THE LESSOR LUKE DEMAY IS THE SOLE MEMBER OF NOVEL ROSE  
 LLC

Receipt Confirmation Page

Receipt Confirmation Number: **20240520100647418**  
Application Payment Confirmation Number: 100345446

Payment Summary	
Payment Item	Fee
Application Fee for License 040 and License 060	\$100.00
Total Amount to be Charged	\$100.00

License Payment Confirmation Number:

Payment Summary			
Payment Item	County Fee	State Fee	Total Fee
040 - RETAIL BEER (ON OR OFF PREMISES)	\$75.00	\$150.00	\$225.00
060 - RETAIL TABLE WINE (ON OR OFF PREMISES)	\$75.00	\$150.00	\$225.00
Total Amount to be Charged	\$150.00	\$300.00	\$450.00

Application Type

Application Type: APPLICATION

Applicant Information

License Type 1: 040 - RETAIL BEER (ON OR OFF PREMISES)  
License Type 2: 060 - RETAIL TABLE WINE (ON OR OFF PREMISES)  
License County: BALDWIN  
Business Type: LLC  
Trade Name: **NOVEL ROSE**  
Applicant Name: **NOVEL ROSE LLC**  
Location Address: 103 W LAUREL AVE  
FOLEY , AL 36535  
Mailing Address: PO BOX 1123  
FOLEY , AL 36536  
Contact Person: LUKE DEMAY  
Contact Home Phone: 517-250-2439  
Contact Business Phone: 251-943-5044  
Contact Fax:  
Contact Cell Phone:  
Contact Email Address:  
Contact Web Address:  
Contact Relationship to Applicant: MEMBER



040/060 Retail Beer and Wine – On and Off Premises

**\*\*It is MANDATORY that the applicant name and physical location match ALL documentation in the file\*\***  
**\*\*All documents should be color copies and provided as required by ABC Rules and Regulations 20-X-5-.01\*\***

Applicant Name: \_\_\_\_\_ Trade Name: NOVEL ROSE

Location Address: \_\_\_\_\_  New License

Division: A  Location Transfer

Owner Transfer

Yes No

- Confirmation of license payment
- Power of attorney, if applicable (copy of Driver's License)
- If a transfer, signed Transfer Agreement
- If a transfer, copy of current licensee's identification
- If a transfer, copy of current licensee's insurance
- If a transfer, copy of current licensee's license
- Copy of all corporate paperwork
- Certificate of Existence from the AL Secretary of State (only required if original corporation/LLC paperwork was not filed in Alabama)
- Valid Driver's License or State-Issued ID from state of legal residency for every person with 10% or more profit/proprietary interest in the applicant
- Verification of Citizenship for every person with 10% or more profit/proprietary interest in the applicant
  - US Passport or US Birth Certificate
  - Certificate of Naturalization, Permanent Resident Card, or other acceptable document
- SAVE for every person with 10% or more profit/proprietary interest in the applicant – required if no US Passport or US Birth Certificate
- Criminal Background for every person with 10% or more profit/proprietary interest in the applicant, if not publicly traded
- Less than 10% Ownership Affidavit confirming tier compliance and all individuals are 21 years or older, if applicable



Yes No

USPS or E911 Address Verification

Documents showing control of property (lease, deed, use agreement)

Name(s) on the document matches applicant name exactly

Address on the document matches location address on application exactly

If a lease, the document has a valid, reasonable term of at least one year

If a lease, use property limitations (if listed)

If a lease, document is signed by the applicant and the lessor

Approval from local governing authority

Name(s) on the document matches applicant name exactly

Physical location address matches location address on application exactly

License type matches application exactly

CARRY TO CITY

Need

Certificate of Liquor Liability Insurance

Name(s) on the document matches applicant name exactly

Physical location address matches location address on application exactly

States a minimum of \$100,000 in Liquor Liability

Coverage dates are valid

Need

Alabama Department of Revenue Sales Tax ID

Federal Tax ID

Health Permit

Photos of location, interior and exterior (include seating for at least 16, sanitizing area, and restrooms)

Sketch of interior, signed by ABC Inspector

Notes:

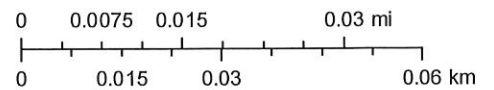
# Viewer Map



May 20, 2024

1:1,128

- |                      |                        |
|----------------------|------------------------|
| Lot Labels           | — Centerlines          |
| Parcel Line Labels   | — Coastal Control Line |
| COGO                 | --- Lot Lines          |
| Parcels              | Conflicts              |
| Conveyance Divisions | County Boundary        |



KCS, Baldwin County, Pictometry  
KCS