

STATE OF ALABAMA ALCOHOLIC BEVERAGE CONTROL BOARD



ALCOHOL LICENSE APPLICATION
Confirmation Number: 20180823082608959

Type License: 140 - SPECIAL EVENTS RETAIL

State: \$150.00 County: \$212.00

Type License:

State:

County:

Trade Name: 2018 FESTIVAL OF FLAVOR

Filing Fee: \$50.00

Applicant: SOUTH BALDWIN CHAMBER OF COMMERCE

Transfer Fee:

Location Address: ALSTON ST BETWEEN HWY 98 AND VERBENA AVE; AND ORANGE AVE BETWEEN HWY 59 AND OAK ST FOLEY, AL 36535

Mailing Address: PO BOX 1117 FOLEY, AL 36536

County: BALDWIN Tobacco sales: NO

Tobacco Vending Machines:

Type Ownership: CORPORATION

Book, Page, or Document info: BOOK 11 PAGE 467-470

Date Incorporated: 01/08/2002 State incorporated: AL

County Incorporated: BALDWIN

Date of Authority: 01/08/2002

Alabama State Sales Tax ID: R007967026

Federal Tax ID: 63-0241394

Name:	Title:	Date and Place of Birth:	Residence Address:
	PRESIDENT	:	
		'	

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: DONNA WATTS Business Phone: 251-943-3291

PREVIOUS LICENSE INFORMATION:

Home Phone: Cell Phone:

E-mail:

Fax: 251-943-6810

Previous License Number(s)

Trade Name: Applicant:

License 1: License 2:



STATE OF ALABAMA ALCOHOLIC BEVERAGE CONTROL BOARD



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Initial each	<u> </u>	Signature	page	
	In reference to law violatio	ns, I attest to the truthfulness of	the responses given within the application.	
V	In reference to the Lease/	n reference to the Lease/property ownership, I attest to the truthfulness of the responses given within		
	the application.			
	In reference to ACT No. 80	0-529, I understand that if my ap	oplication is denied or discontinued, I will not be	
	refunded the filing fee requ			
			nse, I agree to comply with all applicable laws and	
	regulations concerning this	s class of license, and to observ	re the special terms and conditions as indicated	
$-\sim$ Λ $-$	within the application.			
	In reference to the Club A	pplication information, I attest to	the truthfulness of the responses given	
$-\infty$	within the application.			
			he truthfulness of the information listed on the	
$-\infty$	attached transfer agreeme		makes	
			01(4), any social security number disclosed	
			estigation or verification by the ABC Board	
$\square \Omega \wedge \square$	and shall not be a matter		oplied for, to comply at all times with and to fully	
			rage Control Act, as appears in Code of Alabama,	
			ne handling of alcoholic beverages.	
			, further agrees to obey all rules and regulations	
			es received in this State. The undersigned,	
			ow and hereby invites duly authorized agents of	
			duly commissioned law enforcement officer of	
			mises are located to enter and search without	
			occupied by him or her in connection with	
			tands that he or she violate any provisions of the	
			p revocation and no license can be again issued	
			ed further understands and agrees that no changes	
			ance of any services or facilities as described in this proper governing body and the Alabama	
	Alcoholic Beverage Contr		propor governing body and the Anabasha	
$\Box \Omega \Lambda$	-		and all statements therein and facts set forth are true	
			rested in the business for which the license	
	is required.			
Applicant N	Name (print):			
Signature o	of Applican <u>t</u> :			
Notary Na	me (print):			
Notary Sig	nature:		Commission expires:	
Application	a Taken:	App. Inv. Completed:	Forwarded to District Office:	
	to Local Governmen	~ ~	Received from Local Government:	
Received in	1 District Office:	Reviewed by Supervis	sor: Forwarded to Central Office	



STATE OF ALABAMA ALCOHOLIC BEVERAGE CONTROL BOARD



Agent's Initials:

ALCOHOL LICENSE APPLICATION
Confirmation Number: 20180823082608959

Private Clubs / Special Retail / or Special Events 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?

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: 10/06/2018 Ending Date: 10/06/2018

Special terms and conditions for special event/special retail:

EVENT WILL BE HELD SATURDAY, OCTOBER 6, 2018. LICENSED AREA WILL BE BARRICADED TO CONTROL ENTRANCE/EXIT. ALCOHOLIC BEVERAGES ARE RESTRICTED TO BEER AND WINE IN 16 OUNCE CUPS. NO ALCOHOLIC BEVERAGES ARE ALLOWED TO LEAVE THE LICENSED AREA. THIS IS A NON-RENEWAL LICENSE.

Other Explanations

License Covers: BARRICADED CITY OF FOLEY STREET

Receipt Confirmation Page

Receipt Confirmation Number: 20180823082608959

Application Payment Confirmation Number: 37573450

Payment Summary	
Payment Item	Fee
Application Fee for License 140	\$50.00
Total Amount to be Charged	\$50.00

License Payment Confirmation Number:

Payment Summary						
Payment Item	County Fee	State Fee	Total Fee			
140 - SPECIAL EVENTS RETAIL	\$212.00	\$150.00	\$362.00			
	- F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		\$0.00			
Total Amount to be Charged	\$212.00	\$150.00	\$362.00			

Application Type: APPLICATION

Applicant Information

License Type 1: 140 - SPECIAL EVENTS RETAIL

License Type 2:

License County: BALDWIN

Business Type: CORPORATION Trade Name: 2018 FESTIVAL OF FLAVOR

Applicant Name: SOUTH BALDWIN CHAMBER OF COMMERCE

Location Address; ALSTON ST BETWEEN HWY 98 AND VERBENA AVE; AND ORANGE AVE BETWEEN HWY 59 AND OAK ST

FOLEY, AL 36535

Mailing Address: PO BOX 1117

FOLEY, AL 36536

Contact Person:

Contact Home Phone:

Contact Business Phone:

Contact Fax:

Contact Cell Phone:

Contact Email Address:

Contact Web Address: