



Idaho State Police
 Alcohol Beverage Control Bureau
 700 S. Stratford Dr. Ste 115
 Meridian, ID 83642
 Phone (208) 884-7060 Fax (208) 884-7096
 www.isp.idaho.gov/abc

Premises File Number: _____
 License Number: _____
 Opening Date: _____
See Instruction Sheet

Certificate of Approval License Application

1. Application Type

- New Transfer Applicant Location]
 Change Current Application 'Doing Business As' Name (See #3)]

2. License Type and Fees

- Certificate of Approval - \$100.00

3. Applicant Information

A. Applicant Name: _____
(Individual, Corporation, LLC, Partnership or other business entity)

'Doing Business As' Name: _____ Business Phone No.: _____

Business Physical Address: _____

City: _____ State: _____ Zip: _____

Do you produce beer or malt based beverages at this location? No Yes

Mailing Address: _____
(Include City, State, Zip)

Alternative Phone No.: _____ E-Mail Address: _____

Former Business Name (Transfers Only): _____

B. Applicant's Federal Employee Identification Number (EIN): _____

C. Applicant's Financial Information

Business Bank Name and Address (Branch): _____

Persons Authorized to Sign on Account: _____ Title: _____

4. List sole proprietor(s) or all partners, corporate officers, directors, ten primary stockholders, LLC/LLP members/partners of the applicant. Attach a separate sheet of paper following the format below.

Name: _____ Address: _____

Title: _____ SSN: _____ Date of Birth: _____

Idaho Resident: (Y/N) _____ If 'YES' length of residency: _____

B. Has Applicant or anyone listed on #4 ever had any alcohol license suspended, denied or revoked?

- No Yes (If yes, attach explanation)

C. Has Applicant or anyone listed on #4 ever been convicted of any felony or any alcohol-related misdemeanor or facing any pending criminal charges?

- No Yes (If yes, attach explanation)

5. Has Applicant or anyone listed on #4 ever held any interest in any other business licensed for the sale of alcoholic beverages? No Yes [If yes, attach explanation - Include Premises Number]

6. Does anyone have any financial interest in the Applicant's business not previously listed on #4, including silent partners, private financial loans, etc.? No Yes [If yes, attach explanation]

7. Affirmation: *The applicant(s) hereby swears or affirms under oath that the applicant is the bona fide owner of the business which is applying for this license and will be engaged in the sale or dispensing of liquor by the drink, beer and/or wine by the bottle and/or glass. The applicant(s) hereby affirms that the applicant and/or each person indicated on this application or*

attachments thereto is/ or eligible and has none of the disqualifications for a license as provided by Title 23, Chapter 9, 10, 11, 12, 13 and 14, Idaho Code, IDAPA 11.05.01 or any amendments thereto.

An application for and acceptance of a license by the applicant(s) shall constitute consent to, and be authority for, entry by the Director or his authorized agents, upon any premises related to the licensee's business, or wherein are or should be kept, any of the licensee's books, records, ledgers, supplies or other property related to said business, and to make the inventory, check and investigations aforesaid with relation to said licensee or any other licensee. The application shall also constitute consent given to the Director, his agents, the sheriff of any county or other law enforcement officer, upon any premises related to the licensee's business or wherein are or should be kept, any of the licensee's books, records, ledgers, supplies or other property related to said business, and to make the inventory, check and investigations aforesaid with relation to the said licensee or any other licensee. The application shall also constitute consent given to the Director or his authorized agents to view, copy or investigate any documents, including state and federal income and sales tax returns and any documents, associated with the person or business that are exercising the privilege of the license, as per Idaho Code sections 23-907, 23-1006 and 23-1314 and IDAPA 11.05.01.

Applicant(s) hereby acknowledges that falsifying this document or submitting any false documents for record can result in a felony conviction under Idaho Code sections 23-905 or 18-3203. Applicant(s) further acknowledges that they and/ or each person indicated on this application or attachments understand that state law controlling alcohol beverage licensing is found at Title 23, Idaho Code (<http://legislature.idaho.gov/idstat/Title23/T23.htm>) and the Alcohol Beverage Control administrative rules, IDAPA 11.05.01 (<http://adminrules.idaho.gov/rules/current/11/0501.pdf>), and that any violation of these laws or rules can result in criminal and/ or administrative sanctions, and up to and including license revocation.

8. Signature Attestation:

I/we, the applicant(s) of this license, have read all of the above and declare under penalty of perjury that the information that I/we have provided is true and correct to the best of my/our knowledge. I/we, the applicant(s) of this license, acknowledge and understand Idaho Code Title 23 and IDAPA that regulate licenses provided by the Idaho liquor act and do hereby agree to operate the licensed premises in conformity with these statutes and regulations.

Authorized Agent/Applicant's Signature Title Date

Authorized Agent/Applicant's Printed Name

Subscribed and sworn to before me this _____ day of _____, 20_____.

(NOTARY SEAL)

Notary Public's Signature
Residing At: _____
My Commission Expires: _____

ALCOHOL BEVERAGE CONTROL BUREAU
700 S. Stratford Dr. Ste 115 Meridian, ID 83642
Phone: (208) 884-7060 E-Mail: abc@isp.idaho.gov

INSTRUCTIONS FOR CERTIFICATE OF APPROVAL LICENSE APPLICATION

- Complete this application if:
 - You will be shipping malt-based product to an Idaho Wholesaler

- For information regarding ABC licensing, laws, and rules visit our website: www.isp.idaho.gov/abc

Forms must be legible (printed or typed). Applications must be signed and notarized.

Licenses will not be released until the following business day after the license has been issued.

All blanks must be completed. Follow all instructions printed on each form. Any incomplete application will be returned to applicant. **Alcohol Beverage Control Bureau has 90 days to process and investigate any application received.**

Express mail envelopes for return service will be used only when provided by the applicant. The applicant must be listed as both the sender and receiver with the postage pre-paid.

Completing the application:

* Applications for transfer or change current application only, complete the information in the box in the upper right-hand corner.

1. Application Type: Mark the appropriate type of application.
2. License Type and Fees: License fee is \$100. Make checks payable to "State of Idaho".
3. Complete applicant information. The applicant is the Individual(s), partnership, corporation, LLC, or association that will be conducting the business.
4. 4-6. Complete all items as indicated.

Return application, check and **letter of appointment (designating the Idaho Wholesaler that your product will be shipped to within our state). Make sure you submit the entire application, signed and notarized, to ABC at the above address.**

NOTE: YOU ARE RESPONSIBLE TO MAINTAIN DOCUMENT COPIES. FAXED COPIES OF APPLICATIONS WILL NOT BE ACCEPTED.