

**CITY OF MIDDLETOWN**



PO. Box 43048  
Louisville, KY 40253

ABC Administrator: Deborah Columbia, 502.245.2762  
deborah@cityofmiddletownky.org

**ABC LICENSE APPLICATION—RENEWAL ONLY**

Date of Application: \_\_\_\_\_

Applicant business/company name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Address of premises to be licensed: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Owner (if different above): \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address if different from above: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

CURRENT LICENSE NUMBER: \_\_\_\_\_

Application must be completed in it's entirety. Incomplete applications will be returned unprocessed.

**CHECK ALL THAT APPLY**

___NQ2 Retail Drink (includes spirits, wine & malt)	\$1,200.00	___Limited Restaurant	\$1,800.00
___Quota Retail Package	\$630.00	___Limited golf course	\$1,800.00
___Quota Retail Drink	\$1,600.00	___Malt Brewer's License	\$500.00
___NQ Retail Malt Package	\$200.00		
___NQ4 Retail Malt by Drink	\$200.00	___Special Sunday *only required if sold prior to 1:00 p.m.	\$300.00
___NQ3 Retail Drink (Private Club)	\$150.00	___Microbrewery License	\$500.00
___Extended Hours Malt (2:00-4:00 a.m.)	\$50.00	___Malt Distributor License	\$400.00
___Temp Spirits Per event or part	\$133.33	___Malt Brew-on-Premises License	\$100.00
___Temp Malt/Wine per event	\$12.50		

___Distilled sprits & wine temp auction	\$200.00
___NQ1 Retail Drink	\$2,000.00
___Wholesaler's Distilled Spirits & Wine	\$1,750.00
___Caterer's License	\$800.00
___Distiller's License	\$500.00
___Rectifier's License	\$3,000.00
___Bottling House/House Storage License	\$1,000.00

Total amount due: \$\_\_\_\_\_

If paying less than one year, prorate by dividing the annual amount by 12 \$\_\_\_\_\_

Applicant Affidavit

I, the undersigned state that \_\_\_\_\_ does hereby make application for a new/renewal of my license, indicated on page 1 to cover the period from \_\_\_\_\_ to October 31, 20\_\_.

Signed: \_\_\_\_\_ Print: \_\_\_\_\_

Date: \_\_\_\_\_

Notary Documentation

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

My Commission expires: \_\_\_\_\_

Notary Signature: \_\_\_\_\_

City of Middletown Approval

Approved by: \_\_\_\_\_, ABC Administrator

Date: \_\_\_\_\_

License #: \_\_\_\_\_