

STATE OF OKLAHOMA



OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

CHECK LIST FOR INDUSTRIAL LICENSE

The documents requested below are required for a license application. All documents indicated must be provided. All documents must be legible and complete. Applicant may be an individual, partnership, or corporation (Joint ventures cannot be accepted). The original application pages and the required supporting documents will be submitted to the Commission. If you have any questions concerning the application, you may contact us at (405) 521-3484.

I. Application packet Supplied by the Commission to be completed by Applicant.

- ___ 1. Application Page 1. Complete the top of the page. Mark the license for which you are applying. Only one license per application. Complete oath in the middle of the page.
- ___ 2. Application Page 3. Complete all questions.
- ___ 3. Application Page 4. Applicant signs. If the applicant is a corporation, a duly authorized officer must sign. If a partnership, each partner must complete this page. If a limited liability company, a manager or member must sign.

II. Documentation Supplied by Applicant.

- ___ 1. License Fee. Enclose a cashier's check or money order in the correct amount with the application made payable to the ABLE Commission. Fee amounts are listed on the back of the check list. Personal checks are not accepted.
- ___ 2. Copies. Mail original application with one (1) copy to: Oklahoma ABLE Commission, 3812 N. Santa Fe, Suite 200 Oklahoma City, Oklahoma 73118. Walk-in applications are accepted 7:30 a.m. - 4:00 p.m., Monday - Friday.

OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION
SCHEDULE OF LICENSE FEES

TYPE OF LICENSE	AMOUNT
Add-A-Partner	10% of Amount of Original License Fee
Additional Hours*	\$ 25.00/day
Agent	55.00
Airline/Railroad Beverage	1,005.00 905.00 Renewal
Beer & Wine	500.00 450.00 Renewal
Bonded Warehouse	190.00
Bottle Club**	1,000.00 900.00 Renewal
Bottle Club Fraternal Brewer***	500.00 1,250.00
Carrier	23.00
Caterer	1,005.00 905.00 Renewal
Caterer/Mixed Beverage Combination	1,250.00 Annually
Administrative Fee for Caterer/Mixed Beverage Combo	250.00/250.00 New/Renewal
Change of Corporate Officers****	100.00
Change of Managers or Members****	100.00
Change of Location*****	100.00
Charity Wine Auction/Event	1.00
Class B Wholesaler***	625.00
Distiller	3,125.00
Employee	30.00/2 years
Hotel Beverage	1,005.00 905.00 Renewal
Industrial	23.00
Manufacturers Agent	55.00
Mixed Beverage**	1,005.00/905.00 Renewal
Administrative Fee	500.00/500.00 New/Renewal
Mixed Beverage Fraternal	500.00
Non-Resident Seller	750.00 prorated 7/1 through 6/30
Oklahoma Winemaker	75.00
Rectifier	3,125.00
Retail (Population as recorded in the last Federal Decennial Census)	
A - 200 to 2,500 population	305.00
B - 2,500 to 5,000 population	605.00
C - Over 5,000 population	905.00
Sacramental Wine Supplier	100.00
Special Event	55.00/Annually or Quarterly
Storage	23.00
Wholesaler	3,500.00
Winemaker	625.00

OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

APPLICATION

The filing of this application does not commit the Commission to the granting of the license that you are applying for, nor does it permit you to operate the business named below before the granting of the license.

LICENSEE NAME _____ DOING BUSINESS AS NAME _____

PREMISE LOCATION _____

Check the type of application:

- Add-A-Partner Class B Wholesaler Retail Store
Airline/Railroad Distiller Sacramental Wine
Beer & Wine Industrial Storage
Bonded Warehouse Mixed Beverage Wholesaler
Bottle Club NonResident Seller Winemaker
Brewer Oklahoma Winemaker Winemaker Self
Carrier Rectifier Distribution
Caterer Caterer/Mixed Beverage Combo
Change of Corporate Officers
Change of Managers or Members

OATH

State of Oklahoma)
ss.
County of _____)

_____, being first duly sworn upon oath deposes and says: That he is the applicant who makes the above and foregoing application; that he has read and signed the same, knows the contents thereof and that all statements therein contained are true. Applicant(s) certifies that the statements and representations made herein are true and correct and consents that if any statements or representations herein are found to be false or omitted, that the Director may refuse to issue said license or may cause such license to be revoked forthwith at any time. He further agrees that he has filed all appropriate property with the County Assessor and that all ad valorem taxes assessed on his property, both real and personal, and wherever situated in the State of Oklahoma, have been paid.

Signature of Applicant(s)

Subscribed in my presence and sworn to before me this ___ day of _____, 20__.

My commission expires: _____ Notary Public

DO NOT WRITE IN THIS SECTION - CITY/COUNTY USE ONLY

In accordance with Title 37, Section 517, this notice is being mailed to you for recommendations as to whether or not this applicant should be issued a license in your city/county, by the ABLE Commission. You have twenty (20) days to respond. Please complete the following and submit a notarized copy of this page only to: ABLE COMMISSION, 3812 N. Santa Fe, Suite 200, Oklahoma City, Oklahoma 73118 (Attach additional page, if necessary.) Grant _____ Deny _____ Reasons for denial _____

Signature of City/County Official

Title

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

My commission expires: _____ Notary Public

OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

1. Name(s) of Individual Applicant, Partners, Limited Partnership, Corporation, or Limited Liability Company (include social security number or federal employer identification number):

1. _____
 (Name) (Address) (City, State) (Zip) (SSN/FEI)

2. _____

3. _____

4. _____

2. Is License to be Issued to: Individual _____ Partnership _____
 Corporation _____ Limited Liability Company _____

3. Doing Business Name of Premises: _____

4. Premises Address: _____
 (Number, Street, Rural Route)

_____ (City) (County) (State) (Zip)

5. Business Mailing Address: _____
 (If different than #4 above) (P.O.Box, No., Street, R.R.)

_____ (City) (State) (Zip)

6. Was Premises Previously Licensed by the Commission: _____ Yes _____ No

7. If Yes, to Whom? _____ Type of License: _____

8. Former Premises Name: _____

9. The Local Governing Body Where the Premises is Located: _____
 (Name of City or County)

10. Application Contact Person: _____

_____ (Address) (Tel.No: Home/Business/Message)

SIGNATURE OF APPLICANT(S) 1. _____
 (Individual, Partners, General
 Partner of a Limited Partnership,
 Authorized Corporate Officer, 2. _____
 Manager of a Limited Liability
 Company) 3. _____

4. _____

DATE _____

OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

CONFIDENTIAL DISCLOSURE

I, _____ (PLEASE PRINT) hereby authorize any person or organization listed in this application to provide information about me to an Agent of the Oklahoma Alcoholic Beverage Laws Enforcement Commission on a confidential basis, including bank and financial records, criminal history records, driving records, tax records and any other information relating to character or fitness for a liquor license.

Authorized Signature of Applicant

Title