



STATE OF OKLAHOMA  
OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION  
APPLICATION CHECK LIST FOR

BOTTLE CLUB, CATERER, BREWER, DISTILLER, OKLAHOMA WINEMAKER, RECTIFIER, SACRAMENTAL WINE,  
WINEMAKER AND SMALL FARM WINERY LICENSE APPLICANTS

**GENERAL APPLICATION INSTRUCTIONS:**

Complete all items on Check List page 1 and applicable items on Check List page 2. 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, a General or Limited Partnership, a Corporation, or a Limited Liability Company. When an applicant's signature is required, individuals must sign for themselves. **If the applicant is a Partnership, each partner must sign; Limited Partnership, general partner must sign; Corporation, a corporate officer must sign; Limited Liability Company, a manager must sign.**

Mail original application and supporting documents with one additional copy to: Oklahoma ABLE Commission, 3812 North Santa Fe, Suite 200, Oklahoma City, OK 73118. Walk-in application are accepted 7:30 a.m. to 4:00 p.m. Monday - Friday. Questions concerning this application or application process should be directed to the Licensing Division at the above address, Telephone (405) 521-3484; Fax (405) 521-6578.

**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 and sign the oath in the middle of the page and have signature notarized.
- \_\_\_ 2. Application Page 2. Complete both sections: Statement of Main Purpose and Location Affidavit to include the signature of applicant. **To complete the Location Affidavit you must circle is or is not in two places.**
- \_\_\_ 3. Application Page 3. Complete all questions.
- \_\_\_ 4. Application Page 4. Applicant signs.
- \_\_\_ 5. Application Pages 5,6,7,8,9. Each Individual must complete separate pages. Complete all questions, sign and notarize in appropriate places. The individuals required to complete are individual sole proprietors, each partner, limited partner, corporate officer, corporate director, corporate stockholder owning 15% or more of the issued stock, and all limited liability company managers and members.
- \_\_\_ 6. Application Page 10A. Corporations must complete. Limited partnerships must complete on a corporate general partner and any corporate limited partner. If a stockholder in the corporation is another corporation, the corporation that owns the stock must submit a page 10A, Corporate Questionnaire, and a financial statement. If a stockholder in the corporation is a limited liability company, the company that owns the stock must submit a page 10B, Limited Liability Company Questionnaire, and a financial statement.
- \_\_\_ 7. Application Page 10B. Limited Liability Companies must complete. If a member is a corporation the corporation which holds the membership must submit a page 10A, Corporate Questionnaire, and a financial statement. If a member is another limited liability company the limited liability company which holds the membership must submit a page 10B, Limited Liability Company Questionnaire, and a financial statement.
- \_\_\_ 8. Application Page 11. Hand sketch a diagram of the premise that is to be licensed. **Do not submit oversized blueprints.**
- \_\_\_ 9. Application Pages 12 & 13. Complete all sections. Individuals and each partner must complete a personal financial statement, including business. Corporations, limited partnerships, limited liability companies complete for the entity being licensed. Limited partnerships must also submit financial statements for the general partner and any limited partner in the partnership. **Bank addresses, account numbers, account signers, and account types must be listed.**
- \_\_\_ 10. Application Page 14. Complete and take a copy to newspaper. Submit original to Commission. Directions on bottom of page 14.
- \_\_\_ 11. Application Page 15. Complete or attach proof of publication affidavit. Directions on bottom of page 15. **Application must be received within sixty (60) days of the first publication date.**
- \_\_\_ 12. License Fee. Enclose a personal check, business check, 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.
- \_\_\_ 13. Copies. The original, completed application (Pages 1-15) and the required supporting documents with **ONE ADDITIONAL COPY OF ALL** must be submitted to the Commission. Additional documentation may be required during the investigation.

**II. Documentation Supplied by Applicant (complete applicable section only).**

**INDIVIDUAL SOLE PROPRIETORS MUST PROVIDE:**

- \_\_\_ 1. Statement of Financing. Written verification of the amount and source of finances used to start the business. Documentation of source is required. If borrowing funds, you must provide detailed loan information.
- \_\_\_ 2. Proof of Liability Insurance Covering both **bodily injury** and **property damage.**
- \_\_\_ 3. Deed or Lease. A copy of a deed; a lease; a purchase agreement; or a sales contract must be provided for the proposed licensed premise. Documentation must be in the name of the individual.
- \_\_\_ 4. Certificate of Compliance. Written verification of zoning, fire, safety, and health code compliance from the city. If there are no zoning, fire, safety

**CONTINUED ON CHECK LIST PAGE 2**

CHECK LIST PAGE 2

or health codes, a statement from the city is needed stating no such codes exist. If proposed premise is outside city limits, verification of code compliance must be provided by the Board of County Commissioners. **Cannot be over sixty (60) days old.**

- 5. Tax statement. Statement or receipt proving payment of ad valorem taxes, including real and personal, on **ANY property owned** in the state and from the county where the premise to be licensed is located stating no taxes are owed. Receipts or statements must be in the name of the individual. **Cannot be over sixty (60) days old.\*THIS STATEMENT COMES FROM THE COUNTY TREASURER'S OFFICE**

CORPORATIONS MUST PROVIDE:

- 1. Corporate Documents.
  - A. Certificate of Incorporation
  - B. Certificate of Good Standing from the Secretary of State. (Must be original. Cannot be over sixty days old.)
  - C. Minutes designating current officers and directors.
  - D. Minutes authorizing application for liquor license.
- 2. Statement of Financing. Written verification of the amount and source of finances used to start the business. Documentation of source is required. If borrowing funds, you must provide detailed loan information.
- 3. Proof of Liability Insurance Covering both **bodily injury** and **property damage.**
- 4. Deed or Lease. A copy of a deed; a lease; a purchase agreement; or a sales contract must be provided for the proposed licensed premise. Documentation must be in the name of the corporation.
- 5. Certificate of Compliance. Written verification of zoning, fire, safety, and health code compliance from the city. If there are no zoning, fire, safety or health codes, a statement from the city is needed stating no such codes exist. If proposed premise is outside city limits, verification of code compliance must be provided by the Board of County Commissioners. **Cannot be over sixty (60) days old.**
- 6. Tax statement. Statement or receipt proving payment of ad valorem taxes, including real and personal, on **ANY property owned** in the state and from the county where the premise to be licensed is located stating no taxes are owed. Receipts or statements must be in the name of the corporation. **Cannot be over sixty (60) days old.\*THIS STATEMENT COMES FROM THE COUNTY TREASURER'S OFFICE**

GENERAL & LIMITED PARTNERSHIPS MUST PROVIDE:

- 1. Partnership Agreement. Agreement listing all partners and/or limited partners and detailing each partner's ownership interest in the business.
- 2. Statement of Financing. Written verification of the amount and source of finances used to start the business. Documentation of source is required. If borrowing funds, you must provide detailed loan information.
- 3. Proof of Liability Insurance Covering both **bodily injury** and **property damage.**
- 4. Deed or Lease. A copy of a deed; a lease; a purchase agreement; or a sales contract must be provided for the proposed licensed premise. Documentation provided must be in all partner's names in a general partnership or the partnership name of a limited partnership.
- 5. Certificate of Compliance. Written verification of zoning, fire, safety, and health code compliance from the city. If there are no zoning, fire, safety or health codes, a statement from the city is needed stating no such codes exist. If proposed premise is outside city limits, verification of code compliance must be provided by the Board of County Commissioners. **Cannot be over sixty (60) days old.**
- 6. Tax statement. Statement or receipt proving payment of ad valorem taxes, including real and personal, on **ANY property owned** in the state and from the county where the premise to be licensed is located stating no taxes are owed. All partners must have tax statements for **themselves.** Limited partnerships must have statements for the partnership, the general partner, and all limited partners who own 15% or more interest in the partnership. **Cannot be over sixty (60) days old.\*THIS STATEMENT COMES FROM THE COUNTY TREASURER'S OFFICE**

LIMITED LIABILITY COMPANIES MUST PROVIDE:

- 1. Certificate of Good Standing. Issued by the Secretary of State. (Must be original. Cannot be over sixty days old.)
- 2. Articles of Organization. Filed with the Secretary of State with all amendments and corrections.
- 3. Limited Liability Company Operating Agreement & Issued Certificates of Membership Interest. Copies issued to each member.
- 4. Proof of Liability Insurance Covering both **bodily injury** and **property damage..**
- 5. Statement of Financing. Written verification of the amount and source of finances used to start the business. Documentation of source is required. If borrowing funds, you must provide detailed loan information.
- 6. Deed or Lease. A copy of a deed; a lease; a purchase agreement; or a sales contract must be provided for the proposed licensed premise. Documentation provided must be in the name of the Limited Liability Company.
- 7. Certificate of Compliance. Written verification of zoning, fire, safety, and health code compliance from the city. If there are no zoning, fire, safety or health codes, a statement from the city is needed stating no such codes exist. If proposed premise is outside city limits, verification of code compliance must be provided by the Board of County Commissioners. **Cannot be over sixty (60) days old.**
- 8. Tax statement. Statement or receipt proving payment of ad valorem taxes, including real and personal, on **ANY property owned** in the state and from the county where the premise to be licensed is located stating no taxes are owed. Limited Liability Companies must have statements for the company. **Cannot be over sixty (60) days old.\*THIS STATEMENT COMES FROM THE COUNTY TREASURER'S OFFICE**

# EFFECTIVE

**May 28, 2010**

In accordance with the passage of House Bill 3383, a surcharge shall be paid in addition to the applicable licensing fee and administrative fee, if required. The surcharge fees are listed below and shall be assessed annually for the following licenses at the time of submitting new and renewal applications. The license fee, surcharge and administrative fee payments can be made in one payment. Failure to submit the license application, license fee, administrative fee and surcharge will cause an application to be delayed or denied.

A copy of the bill can be viewed on our website [www.able.ok.gov](http://www.able.ok.gov).

Please direct questions to the Licensing Division 405-521-3484.

|   |         |
|---|---------|
| Non-Resident Seller   | \$2,500 |
| Wholesale   | \$2,500 |
| Class B Wholesale without an active low-point beer license        | \$1,000 |
| Class B Wholesale with an active low-point beer license           | \$1,500 |
| Package Store for cities and towns over 5,000 population          | \$250   |
| Package Store for cities and towns from 2,501 to 5,000 population | \$200   |
| Package Store for cities and towns from 200 to 2,500 population   | \$150   |
| Mixed Beverage  | \$25    |
| Mixed Beverage/Caterer Combination                                | \$25    |
| Caterer   | \$25    |
| Beer and Wine   | \$25    |

**OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION  
SCHEDULE OF LICENSE FEES**

| <b>TYPE OF LICENSE</b>   | <b>LICENSE FEE/RENEWAL</b>                |
|--|---|
| Add-A-Partner( <b>AAP</b> )  | 10% of Amount of the Original License Fee |
| Airline( <b>AAA</b> )  | 1,005.00/905                              |
| Beer & Wine( <b>BAW</b> )  | 525.00/475                                |
| Bonded Warehouse( <b>BWH</b> )   | 190.00/190                                |
| Bottle Club( <b>BOT</b> )  | 1,000.00/900                              |
| Bottle Club Fraternal( <b>BCF</b> )  | 500.00/500                                |
| Carrier( <b>CAR</b> )  | 23.00/23                                  |
| Caterer( <b>CAT</b> )  | 1,030.00/930                              |
| Caterer/Mixed Beverage Combination( <b>CMB</b> )                                   | 1,525.00/1,525                            |
| Change of Corporate Officers( <b>CCO</b> )   | 100.00                                    |
| Change of Stockholders( <b>COS</b> )   | 100.00                                    |
| Change of Managers(LLC)  | 100.00                                    |
| Change of Members (LLC)  | 100.00                                    |
| Change of Location(MXB, BOT, & CMB ONLY)   | 100.00                                    |
| Charity Games Organization( <b>CGO</b> )   | 100.00/100                                |
| Charity Games Exempt Organization( <b>CXO</b> )                                    | 0.00                                      |
| Charity Games Manufacturer( <b>CGM</b> )   | 2,000.00/2,000                            |
| Charity Games Distributor( <b>CGD</b> )  | 5,000.00/5,000                            |
| Charitable Alcoholic Beverage Event( <b>CAB</b> )                                  | 55.00                                     |
| Charitable Alcoholic Beverage Auction( <b>CAU</b> )                                | 1.00                                      |
| Cider/Wine/Strong Beer Permit( <b>CWP</b> )  | 0.00                                      |
| Class B Wholesaler( <b>CBW</b> )   | 1,625.00/1,625                            |
| Class B Wholesaler-with active low-point beer license( <b>CBW</b> )                | 2,125.00/2,125                            |
| Distiller( <b>DIS</b> )  | 3,125.00/3,125                            |
| Hotel Beverage( <b>HOT</b> )   | 1,005.00/905                              |
| Industrial( <b>IND</b> )   | 23.00/23                                  |
| Manufacturers Agent( <b>MFA</b> )  | 55.00/55                                  |
| Mixed Beverage( <b>MXB</b> )   | 1,530.00/1,430                            |
| Mixed Beverage Fraternal( <b>MXF</b> )   | 500.00/500                                |
| Non-Resident Seller( <b>NRS</b> )  | 3,250.00/3,250                            |
| prorated 7/1 through 6/30  |   |
| Oklahoma Brewer( <b>OKB</b> )  | 125.00/125                                |
| Oklahoma Winemaker( <b>OKW</b> )   | 75.00/75                                  |
| Public Event Annual( <b>PEV</b> )  | 1,030.00/1,030                            |
| Public Event-One (1)Time( <b>PUE</b> )   | 255.00                                    |
| Railroad( <b>RRR</b> )   | 100.00/100                                |
| Rectifier( <b>REC</b> )  | 3,125.00/3,125                            |
| Retail (Population as recorded in the last Federal Decennial Census)( <b>RET</b> ) |   |
| A - 200 to 2,500 population  | 455.00/455                                |
| B - 2,500 to 5,000 population  | 805.00/805                                |
| C - Over 5,000 population  | 1,155.00/1,155                            |
| Special Event Annual( <b>SPE</b> )   | 55.00                                     |
| Special Event Quarterly( <b>SPQ</b> )  | 55.00                                     |
| Storage( <b>STO</b> )  | 23.00/23                                  |
| Small Farm Winery ( <b>SFW</b> )   | 1.00/1.00                                 |
| Wholesaler( <b>WHO</b> )   | 6,000.00/6,000                            |
| Winemaker( <b>WIN</b> )  | 625.00/625                                |
| Winemaker Self-Distribution( <b>WSD</b> )  | 750.00/750                                |



OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

STATEMENT OF MAIN PURPOSE AFFIDAVIT

I, \_\_\_\_\_, certify that the main purpose of the business for which a liquor license is being requested is: (State the type of business or sale which will produce the majority of the income, ie. restaurant, bar, retail store, etc. Terms such as "recreation" or "entertainment"are too vague.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

LOCATION AFFIDAVIT  
(circle correct responses)

I, \_\_\_\_\_, certify that the business location for which a license is being requested is/is not within three hundred(300') feet of a church or public school.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_  
(if sole proprietor), all partners,(if partnership), General Partner (if limited partnership), Manager or Member (if an LLC) or Corporate Officer (if a corporation).

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

**OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION  
INDIVIDUAL HISTORY**

ALL BLANKS MUST BE FILLED IN. PLEASE PRINT. IF THE QUESTION DOES NOT APPLY TO YOU, PLACE N/A (NOT APPLICABLE) IN THE SPACE.

1. Name \_\_\_\_\_  
(Last) (First) (Middle)
2. Other Names Used \_\_\_\_\_  
(Maiden) (Other)
3. Address \_\_\_\_\_  
(Number and Street) (City) (State) (Zip)
4. SSN \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_
5. Drivers Lic.No./State \_\_\_\_\_ Place of Birth \_\_\_\_\_  
(City/State/Country)
6. Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair Color \_\_\_\_\_ Eyes \_\_\_\_\_
7. Sex \_\_\_\_\_ Name of Spouse \_\_\_\_\_
8. Spouses Place of Employment \_\_\_\_\_
9. Spouse Licensed by the Commission? Yes \_\_\_\_\_ No \_\_\_\_\_
10. Home Phone ( ) \_\_\_\_\_ Business Phone ( ) \_\_\_\_\_
11. U.S. Citizen Yes \_\_\_\_\_ No \_\_\_\_\_ If "No" List Alien Reg. No. \_\_\_\_\_
12. If a Naturalized Citizen \_\_\_\_\_  
(When and Where)

**CRIMINAL RECORD**

Note: A criminal records check is made on all license applicants in the normal processing of a license application. The information provided in Questions 1 through 12 below can protect you from an error in the criminal records check.

- 12A. Have you ever been convicted of, pled guilty to, or nolo contendere to a felony? Yes \_\_\_\_\_ No \_\_\_\_\_
- 12B. Have you been convicted of any crime, violation, or infraction of any law? (Do not include minor traffic violations for which a fine or bail forfeiture of \$50 or less was imposed.) Yes \_\_\_\_\_ No \_\_\_\_\_
- 12C. Are there presently pending against you any criminal charges? (Do not include minor traffic violations for which a fine or bail forfeiture of \$50 or less was imposed.) Yes \_\_\_\_\_ No \_\_\_\_\_
- 12D. Have you ever been convicted of a violation of any state or federal law relating to alcoholic beverages, or forfeited any bond while any such charge was pending against you? Yes \_\_\_\_\_ No \_\_\_\_\_
- 12E. If you have answered "Yes" to 12A through 12D, list below:

| Offense | Date | City/County/State | Disposition<br>(Fine, Probation, Incarceration) |
|---------|------|-------------------|---|
|---------|------|-------------------|---|

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(Attach additional sheet if necessary.)



OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

Note: The following questions refer to activity in the liquor industry in Oklahoma or any other State.

1. Are you presently or have you been licensed or employed in the liquor business?

Yes \_\_\_ No \_\_\_ License Type \_\_\_\_\_ License Number \_\_\_\_\_

When \_\_\_\_\_ Location \_\_\_\_\_

2. Have you ever received a warning, a notice of violation, suspension, fine, or revocation as a licensee?

Yes \_\_\_ No \_\_\_ When \_\_\_\_\_ Location \_\_\_\_\_

3. Have you ever been refused a license to sell, serve, or dispense alcoholic beverage?

Yes \_\_\_ No \_\_\_ When \_\_\_\_\_ Location \_\_\_\_\_

4. Have you ever held or do you hold any financial interest in any liquor enterprise (manufacturing, importing, wholesale, or retail)?

Yes \_\_\_ No \_\_\_ When \_\_\_\_\_ Location \_\_\_\_\_

5. Do you owe money to any manufacturer or distributor of wine, beer, or distilled spirits on account of cash or credit advanced?

Yes \_\_\_ No \_\_\_ To Whom? \_\_\_\_\_  
Name

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

6. Is your spouse or any family member(s) working in any area of the liquor industry?

Yes \_\_\_ No \_\_\_ For Whom? \_\_\_\_\_

7. Have you ever held, as an Oklahoma resident, any federal liquor stamp prior to the adoption of Article XXVII of the Oklahoma Constitution?

Yes \_\_\_ No \_\_\_ When \_\_\_\_\_

8. Are you related to any member of the Oklahoma Alcoholic Beverage Laws Enforcement Commission, Director, or Assistant Director by affinity or consanguinity within the third degree?

Yes \_\_\_ No \_\_\_ If "Yes" give name and relationship: \_\_\_\_\_

9. Are you a member of any board or commission, or an agent or an employee of the State of Oklahoma or any political subdivision thereof? (County, City, Town, or School District.)

Yes \_\_\_ No \_\_\_ If "Yes" explain \_\_\_\_\_

CAUTION: FALSIFICATION OR INTENTIONAL OMISSIONS OF INFORMATION MAY BE GROUNDS TO DENY OR REVOKE YOUR APPLICATION FOR A LICENSE!

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION**

**LIST CURRENT AND FORMER EMPLOYERS OR OCCUPATIONS DURING THE PAST TEN YEARS.  
(ATTACH ADDITIONAL SHEET IF NECESSARY.)**

Dates by Month/Year                      Employer or Business                      Address  
 From \_\_\_\_\_ To \_\_\_\_\_  
 Occupation                                      City and State

Dates by Month/Year                      Employer or Business                      Address  
 From \_\_\_\_\_ To \_\_\_\_\_  
 Occupation                                      City and State

Dates by Month/Year                      Employer or Business                      Address  
 From \_\_\_\_\_ To \_\_\_\_\_  
 Occupation                                      City and State

Dates by Month/Year                      Employer or Business                      Address  
 From \_\_\_\_\_ To \_\_\_\_\_  
 Occupation                                      City and State

Dates by Month/Year                      Employer or Business                      Address  
 From \_\_\_\_\_ To \_\_\_\_\_  
 Occupation                                      City and State

Dates by Month/Year                      Employer or Business                      Address  
 From \_\_\_\_\_ To \_\_\_\_\_  
 Occupation                                      City and State

**LIST CURRENT AND FORMER RESIDENCES WHERE YOU HAVE LIVED IN THE PAST TEN YEARS TO INCLUDE ADDRESS (STREET, CITY, STATE).**

Dates by Month/Year                      Street, City and State  
 From \_\_\_\_\_ To \_\_\_\_\_  
 From \_\_\_\_\_ To \_\_\_\_\_  
 From \_\_\_\_\_ To \_\_\_\_\_  
 From \_\_\_\_\_ To \_\_\_\_\_

OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

TIED-HOUSE DISCLOSURE

A. TO BE ANSWERED IF APPLICATION IS FOR ANY LICENSE OTHER THAN MANUFACTURER OR WHOLESALER.

1. Has the business to be licensed been financed with money or property by any manufacturer of or wholesale dealer in alcoholic beverages?

Yes \_\_\_ No \_\_\_ If yes, explain \_\_\_\_\_

2. Do you, individually, or the legal entity to be licensed, have any right, title, lien, claim, or other interest, financial or otherwise, in, upon or to the premises, equipment, business, or merchandise of any manufacturer of or wholesale dealer in alcoholic beverages?

Yes \_\_\_ No \_\_\_ If yes, explain \_\_\_\_\_

3. Does your interest result in exercise of control over, or participation in the management of the manufacturer's or wholesaler's business or business decisions?

Yes \_\_\_ No \_\_\_ If yes, explain \_\_\_\_\_

I will immediately notify the Oklahoma Alcoholic Beverage Laws Enforcement Commission if a LICENSEE-WHOLESALER connection as described above exists or is contemplated in my business. (This notification extends to corporate officers, directors, and substantial stockholders.)

Signature of Applicant for Retail, Mixed Beverage, Bottle Club, or Caterer Certification Date

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B. TO BE ANSWERED IF APPLICATION IS FOR A MANUFACTURER OR WHOLESALER LICENSE.

1. Do you, individually, or the legal entity to be licensed, have the right, title, lien, claim or any other interest, financial or otherwise, in, upon or to the premises, equipment, business, or merchandise of any retailer, mixed beverage, bottle club or caterer of alcoholic beverages?

Yes \_\_\_ No \_\_\_ If yes, explain \_\_\_\_\_

I will immediately notify the Oklahoma Alcoholic Beverage Laws Enforcement Commission if a WHOLESALER-LICENSEE connection as described above exists or is contemplated in my business. (This notification extends to corporate officers, directors, and substantial stockholders.)

Signature of Applicant for Wholesale or Manufacturer Certification Date

**OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION  
CORPORATE QUESTIONNAIRE**

Licensee \_\_\_\_\_ Type of License \_\_\_\_\_

Trade Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

**Corporate Officers:**

| Title | Name  | SSN   | Address |
|-------|-------|-------|---------|
| _____ | _____ | _____ | _____   |
| _____ | _____ | _____ | _____   |
| _____ | _____ | _____ | _____   |
| _____ | _____ | _____ | _____   |

**Board of Directors/Trustees/Executive Committee:**

| Name  | SSN   | Address |
|-------|-------|---------|
| _____ | _____ | _____   |
| _____ | _____ | _____   |
| _____ | _____ | _____   |
| _____ | _____ | _____   |

**Stockholders:**

| Name  | SSN   | Address | No. of Shares Held |
|-------|-------|---------|--------------------|
| _____ | _____ | _____   | _____              |
| _____ | _____ | _____   | _____              |
| _____ | _____ | _____   | _____              |
| _____ | _____ | _____   | _____              |

Total shares authorized to issue \_\_\_\_\_ No. of shares issued \_\_\_\_\_ No. of shares unissued \_\_\_\_\_

Service Agent (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of Corporate Officer

**OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION  
LIMITED LIABILITY COMPANY QUESTIONNAIRE**

Licensee \_\_\_\_\_ Type of License \_\_\_\_\_

Trade Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Limited Liability Company Managers:

| Title | Name  | SSN   | Address |
|-------|-------|-------|---------|
| _____ | _____ | _____ | _____   |
| _____ | _____ | _____ | _____   |
| _____ | _____ | _____ | _____   |
| _____ | _____ | _____ | _____   |

Limited Liability Company Members:

| Name  | SSN   | Address |
|-------|-------|---------|
| _____ | _____ | _____   |
| _____ | _____ | _____   |
| _____ | _____ | _____   |
| _____ | _____ | _____   |
| _____ | _____ | _____   |
| _____ | _____ | _____   |
| _____ | _____ | _____   |
| _____ | _____ | _____   |
| _____ | _____ | _____   |
| _____ | _____ | _____   |

Resident Agent Name \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

Signature of Manager \_\_\_\_\_

OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

Draw a diagram of the licensed premises. The diagram should include the following: outside dimensions, rooms, doorways, bars, and liquor storage areas.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant/Licensee

\_\_\_\_\_  
Signature of Applicant/Licensee

OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION  
FINANCIAL STATEMENT

NAME \_\_\_\_\_ DOING BUSINESS NAME \_\_\_\_\_  
(Individual, Partner, Limited Partnership, Corporation, Limited Liability Company)

| ASSETS                 | AMOUNT | LIABILITIES       | AMOUNT |
|------------------------|--------|-------------------|--------|
| CHECKING AT            |        | TAXES DUE         |        |
| Financial Institution  |        | SCHEDULE D        |        |
| Name                   |        | OTHER             |        |
| Address                |        |                   |        |
| Account Signer(s) Name |        |                   |        |
|                        |        |                   |        |
| Account #              |        |                   |        |
| Financial Institution  |        |                   |        |
| Name                   |        |                   |        |
| Address                |        |                   |        |
| Account Signer(s) Name |        |                   |        |
|                        |        |                   |        |
| Account #              |        |                   |        |
| Financial Institution  |        |                   |        |
| Name                   |        |                   |        |
| Address                |        |                   |        |
| Account Signer(s) Name |        |                   |        |
|                        |        |                   |        |
| Account #              |        |                   |        |
| SAVINGS AT             |        |                   |        |
| Financial Institution  |        |                   |        |
| Name                   |        |                   |        |
| Address                |        |                   |        |
| Account #              |        |                   |        |
| Financial Institution  |        |                   |        |
| Name                   |        |                   |        |
| Address                |        |                   |        |
| Account #              |        |                   |        |
| EARNEST MONEY          |        |                   |        |
| LEASE DEPOSIT          |        |                   |        |
| OTHER                  |        |                   |        |
| CASH VALUE OF:         |        |                   |        |
| Schedule A             |        |                   |        |
| Schedule B             |        |                   |        |
| Inventory              |        |                   |        |
| Fixtures/Equipment     |        |                   |        |
| Vehicles               |        |                   |        |
| Schedule C             |        |                   |        |
| Life Insurance         |        |                   |        |
| Other                  |        |                   |        |
| TOTAL ASSETS           |        | TOTAL LIABILITIES |        |
|                        |        | NET WORTH         |        |
|                        |        | TOTAL LIABILITIES |        |
|                        |        | & NET WORTH       |        |

- Last year's total income: \$ \_\_\_\_\_ Source: \_\_\_\_\_
- Have you any assets or liabilities not listed on this financial statement?  
Yes \_\_\_ No \_\_\_ If yes, explain why not included \_\_\_\_\_
- Are you a co-signer of any notes or contracts? Yes \_\_\_ No \_\_\_ If yes, explain \_\_\_\_\_
- Have you any judgments, suits, liens, or tax warrants filed against you?  
Yes \_\_\_ No \_\_\_ If yes, explain \_\_\_\_\_
- Have you ever filed a petition of bankruptcy or been adjudged bankrupt? Yes \_\_\_ No \_\_\_ If yes, explain \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_



OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

NOTICE OF INTENTION TO APPLY FOR AN ALCOHOLIC BEVERAGE LICENSE

In accordance with Title 37, Section 522 \_\_\_\_\_

(name & address of individual, partners, limited partnership, corporation, or limited liability company)

an/a \_\_\_\_\_ (individual, partnership, limited partnership, corporation, limited liability company)

hereby publishes notice of \_\_\_\_\_ intention to apply within (his, her, its, their)

sixty days from this date to the Oklahoma Alcoholic Beverage Laws Enforcement Commission for a \_\_\_\_\_

(Beer & Wine, Brewer, Distiller, Rectifier, Winemaker, Wholesaler, Class B, Retail Store, Mixed Beverage, Bottle Club, Caterer, or Caterer/Mixed Beverage Combination)

License under authority of and in compliance with the said Act: That \_\_\_\_\_ intend(s), if granted such license to operate as a (he, she, it, or they)

\_\_\_\_\_ establishment with business premises located at (Beer & Wine, Brewer, Distiller, Rectifier, Winemaker, Wholesaler, Class B, Retail Store, Mixed Beverage, Bottle Club, Caterer, or Caterer/Mixed Beverage Combination)

(full street address or legal description)

in \_\_\_\_\_, \_\_\_\_\_, Oklahoma, under the business (City) (County)

name of \_\_\_\_\_ (doing business name)

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

Signature of applicant(s): If partnership, all partners must sign. If corporation an officer of the corporation must sign. If limited liability company a manager must sign.

\_\_\_\_\_  
\_\_\_\_\_

County of \_\_\_\_\_, State of Oklahoma.

Before me, the undersigned notary public, personally appeared;

\_\_\_\_\_ to me known to be the person(s) described in and who executed the foregoing application and acknowledged that \_\_\_\_\_ executed the same (he/she/they) as \_\_\_\_\_ free act and deed. (his/her/their)

(Notary Public)

(My commission expires)

Instructions:

- 1. Complete in detail.
2. Copy to Newspaper for publication.
3. Said notice shall be published in not less than two column inches in a legal newspaper of general circulation in the county in which licensed premises are to be located.
4. The notice will be twice published, once every eight (8) days for (2) successive weeks.
5. Submit original with application.

OKLAHOMA ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

PROOF OF PUBLICATION

I do hereby declare, under penalty of perjury, that \_\_\_\_\_  
(name of legal newspaper)

did cause to be published in a legal newspaper of general circulation in the county of \_\_\_\_\_ located in the City of \_\_\_\_\_, Oklahoma, by causing the same to be published on the \_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, and on the \_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, a Notice of Intention to apply for an Alcoholic Beverage License, and that a true copy of said notice is attached and made a part hereof.

Dated this \_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

\_\_\_\_\_  
(legal representative of the newspaper)

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

\_\_\_\_\_  
My Commission Expires

\_\_\_\_\_  
Notary Public

Instructions:

1. Attach a true copy of each run of the publication.
2. Submit original completed Proof of Publication with application.
3. You may submit the publisher's affidavit form in place of the above affidavit.

OKLAHOMA WHOLESALERS  
(Spirits & Wines)

**ACTION WHOLESALE LIQUOR**

Tad Shadid & Jeffrey Shadid  
4200 Southeast 59<sup>th</sup>  
Oklahoma City, OK 73135-2511  
(405) 682-8527  
fax (405) 682-8559  
[jrod@actionliquor.com](mailto:jrod@actionliquor.com)  
[mikespoon@actionliquor.com](mailto:mikespoon@actionliquor.com)

**K O BEVERAGE**

Larry Barnes  
4157 S 72<sup>nd</sup> East Avenue  
Tulsa, OK 74145  
(918) 728-7401  
fax (918) 728-7402  
[kobeverage@tulsacoxmail.com](mailto:kobeverage@tulsacoxmail.com)

**CENTRAL LIQUOR COMPANY**

Franklin K. & Robert Z. Naifeh  
605 North Tulsa  
P.O. Box 75447  
Oklahoma City, OK 73147  
(405) 947-8050  
fax (405) 949-1416  
[Juanita@centralliquor.com](mailto:Juanita@centralliquor.com)

**SOUTHERN OKLAHOMA  
SPIRITS**

Tim J. McCullers  
309 Mill Street  
Ardmore, OK 73401  
(580) 223-0148  
fax (580) 226-7180

**DIXIE LIQUOR COMPANY**

Al J. Horton & Stacey Horton  
300 North Jupiter Road  
Hartshorne, OK 74547  
(918) 297-0133  
fax (918) 297-0293  
[staceyk@dixieliquor.com](mailto:staceyk@dixieliquor.com)

**FIREWATER SUPPLY CO**

Greg George, Owner  
7220 E. 151<sup>st</sup> Street South  
PO Box 66  
Bixby, OK 74008  
[firewater@olp.net](mailto:firewater@olp.net)  
(918)396-5600  
fax (918)369-5604

**JARBOE SALES COMPANY**

John B. Jarboe & John B. Jarboe II  
6833 East Reading Place  
P.O. Box 580130  
Tulsa, OK 74158  
(918) 836-2511  
(800) 669-2850  
fax (918) 836-6688  
[mvaught@jarboesales.com](mailto:mvaught@jarboesales.com)

**LDF Wine & Spirits**

Theodore Solie  
10718 East Marshall Street  
Tulsa, OK 74116  
(918)437-7722  
fax (918) 437-3502

**STERLING WINES & SPIRITS CO**

Paul W. Dudman  
2226 North Broadway  
Oklahoma City, OK 73103-4312  
(405) 557-1818  
fax (405) 557-1857



STATE OF OKLAHOMA  
ALCOHOLIC BEVERAGE LAWS ENFORCEMENT COMMISSION

SHORT FORM PRICE REGISTRATION  
BY NON-RESIDENT SELLER & OKLAHOMA WINERIES

Spirits & Wine

License No. \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

In compliance with 45:30-3-3(b)(2) of the Oklahoma Administrative Code (OAC) the above named Non-resident Seller/Oklahoma Winery adopts by reference its most recent detailed price registration filed with the ABLE Commission \_\_\_\_\_, 20\_\_\_\_, for the month of \_\_\_\_\_, 20\_\_\_\_, and affirms that said registration, without exception, will remain unchanged and in effect during the month of \_\_\_\_\_, 20\_\_\_\_\_.

It is hereby certified, under penalty of suspension or revocation of license that the above named licensee has on this date sent a true copy hereof to each Oklahoma licensed wholesaler.

Non-resident Seller/Oklahoma Winery: \_\_\_\_\_

By: \_\_\_\_\_