Wake County Revenue Department
421 Fayetteville Street, Suite 200
P.O. Box 2719 Raleigh NC 27602-2719
(919) 856-5999

BEVERAGE LICENSE APPLICATION

FOR OFFICE USE ONLY

Acct #: *Lic #:* *Date:*

Application is hereby submitted for licenses in accordance with and in conformity to all the provisions of the Beverage Control Act of 1937. If applicant possesses a State Permit, although he does not sell alcoholic beverages, he must purchase a County License. Complete and return this application along with your check or money order made payable to the Wake County Revenue Department.

Trade Name: _____ Business Telephone: _____

Location of Business: _____
Street City State Zip

Mailing Address: _____
Street City State Zip

Owner/Corp. Name: _____ Owner's Telephone: _____

Owner's Address: _____
Street City State Zip

Indiv/Corp. Officer Name: _____ Home Telephone: _____

Individual's Address: _____
Street City State Zip

Federal ID/Social Security #: _____ Opening Date: _____

PLEASE FILL IN YOUR STATE ABC COMMISSION PERMIT NUMBERS WHERE APPLICABLE:

On Premises: Malt _____ Unfortified Wine _____ Fortified Wine _____

Off Premises: Malt _____ Unfortified Wine _____ Fortified Wine _____

COUNTY FEE SCHEDULE:

On/Off Premises Beer	$25.00	Off Premises Beer	$ 5.00	On Premises Beer **Only**	**$25.00**
Wine	$25.00	Wine	$25.00	Off Premises Beer **Only**	**$ 5.00**
Total	**$50.00**	Total	**$30.00**	Wine **Only**	**$25.00**

NOTE: State law provides that any person who shall knowingly make any false statement in an application for this license shall be guilty of a misdemeanor, and upon conviction shall be fined and/or imprisoned as provided by law.

NOTARIZED SIGNATURE CERTIFIES THAT THE FOLLOWING ARE TRUE:

1. The Applicant is a resident of North Carolina and is not less than 21 years of age except if a corporation holds the State ABC Permit then the manager/applicant is not less than 19 years of age.
2. The Applicant has not had an unsatisfied outstanding final judgment entered against him/her in an action under Article 1A of Chapter 18B of the Alcoholic Beverage Control Laws.
3. The Applicant within two (2) years has not had any alcoholic beverage offenses or any misdemeanor controlled substance offense.
4. The Applicant has not within three years been convicted of a felony or had an alcoholic beverage permit revoked; or during the preceding license year, committed any act or permitted any condition for which his/her license has been revoked or suspended.

_____ _____
PRINTED NAME OF APPLICANT NOTARIZED SIGNATURE OF APPLICANT

On this _____ day of _____ , _____ , personally appeared before me _____ who acknowledged execution of the above application and being duly sworn according to the law, deposes and says the statements made by him/her and contained therein are true and accurate.

_____ _____
My Commission Expires Notary Public

PLEASE RETURN APPLICATION WITH PAYMENT