



## **ALCOHOL BEVERAGE LICENSE APPLICATION PROCESS OVERVIEW**

Application for a license to sell alcoholic beverages is somewhat different than the application for a general license for retail, wholesale, or service related business. Due to the regulatory nature of this type of business, there are additional requirements for the issuance of a license to sell alcoholic beverages. The following will hopefully serve as an overview of the application process currently in use by the City of Albertville.

The typical amount of time required for the application, approval and issuance process is 45 days. Primarily this is due to the fact that there is significant amount of documentation required in order to provide the City Council with an accurate insight into the financial, management and personal background of the applicant and those involved with the business. There are also several inspections that must be scheduled and approved as a part of the process.

Built into the process are opportunities, if needed, to meet with the City Clerk to review the application for completeness and/or to answer any questions you might have regarding the application. It is important to the process for the lines of communication to remain open so that there will be as little misunderstanding of expectations as possible. There are specific deadlines for several aspects of the application process and if these are not complied with, the result is delay in approval and more importantly to you, the opening of your business.

The following steps, along with a brief description, are listed in the order of completion for a typical application, approval, and issuance of an alcoholic beverage license. There are only two (2) methods for making application; as a new license, or as a transfer of an existing license. If you are going to transfer an existing license by change of ownership, **DO NOT PURCHASE, BEGIN OPERATING, OR MANAGING THE BUSINESS UNTIL AFTER THE CITY HAS BEEN CONTACTED!!!!**

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**Step 1. Verification of Zoning** – Form completed by applicant and approved by the Zoning Department confirming that current zoning ordinance supports the proposed use. A copy of the legal description and most recent survey or plot plan for the address of the proposed business is required for this step. Form is available in the City Clerk’s Office.

**Step 2. Application Release & Overview** – Upon the verification of zoning, an application package is released for completion. If you would prefer, a scheduled meeting can be arranged to go over the application and any specific requirements for your business.

**Step 3. Application Completion** – This is the gathering of necessary documentation and the actual answering of application questions by the applicant. All sections and

information on the application must be completed fully unless instructed otherwise on the application.

**Step 4. Application Submission & Review** – The completed application is returned and submitted for consideration. At this time, the applicant pays an application fee, and dependent on the type license desired, costs associated with the required public notice. Prior to submitting the application, it is preferred that an appointment be scheduled with the City Clerk in order to review the material for any incomplete or missing information and/or documentation. This will avoid needless delay in subsequent discovery of any omission and resubmission of that material.

**Step 5. Background Investigation** – All persons with any financial, operational, or management interest in the proposed business will be listed on the application. As part of the application review, a criminal background search is performed by the Alabama Bureau of Investigation with the history provided for review by City Police Department. This review by the Alabama Bureau of Investigation generally will require at least 14 days.

**Step 6. City Council Consideration** – Following the background investigation, the request of license is submitted to the Alcohol License Review Committee for their recommendation to the City Council. The City Council will then consider the application for their vote. Any approval given is contingent upon satisfactory departmental approvals by Building, Fire, Health and lastly Revenue. The Council meets on the first and third Monday of each month. All alcohol license requests will be presented at one of these meetings. There are several critical deadlines associated with this step and these will be discussed with you at the time of releasing the application.

**Step 7. Departmental Approvals** – As noted, all approvals by the Council are contingent upon satisfactory department approvals. It is the responsibility of the applicant to contact the Fire and Health departments to schedule the necessary inspection.

**Step 8. Release of Approval** – Upon receiving all approvals, the City Clerk will review the file and authorize the release of the City’s approval to the local representative of the State of Alabama Alcoholic Beverage Control Board.

**Step 9. Presentation of ABC License** – Upon releasing the City’s approval of your business for sales of alcoholic beverages, the State ABC Board will issue their license. (The ABC Board has an entirely separate application process that should be simultaneous with this application) The ABC License must be presented to the City Clerk’s Office and a City of Albertville Alcohol License is issued for your business. The City will also issue separate licenses for other business activities dependent upon the exact nature of your business (e.g., restaurant, grocery, etc.)

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COSTS ASSOCIATED WITH ALCOHOLIC BEVERAGE LICENSING APPLICATION:

APPLICATION FEE     \$300.00  
ADVERTISING FEE     \$ 35.00 (fee for advertising public hearing)

SHOULD YOU HAVE ANY QUESTIONS, PLEASE CALL 256-891-8200.

GENERAL INFORMATION

PRIOR TO MAKING APPLICATION WITH THE CITY OF ALBERTVILLE, YOU SHOULD CONTACT THE LOCAL OFFICE OF THE ALABAMA ALCOHOLIC BEVERAGE CONTROL BOARD AT EITHER OF THE FOLLOWING NUMBERS:

256-726-0401 – HUNTSVILLE ABC (AGENT WALLACE)  
256-582-2657- MARSHALL COUNTY ABC

THE ABC REPRESENTATIVE WILL PROVIDE THE INFORMATION NECESSARY TO COMPLETE AN APPLICATION WITH THE STATE OF ALABAMA.

IMPORTANT PHONE NUMBERS AND CONTACTS

CITY CLERK	256-891-8200	PHYLLIS WEBB
FIRE MARSHALL	256-891-8230	WESLEY BYNUM
BUILDING & ZONING DEPARTMENT	256-891-8208	PAUL GRAY
POLICE DEPARTMENT	256-891-8221	CHIEF DOUG POLLARD
HEALTH DEPARTMENT- ENVIRONMENTAL SERVICES	256-582-4926	ANN MARIE STEPHENS
RESPONSIBLE VENDOR PROGRAM COMPLIANCE	256-718-3538	JOEY W. MAY

IT IS THE APPLICANT'S RESPONSIBILITY TO CONTACT THE FIRE AND HEALTH DEPARTMENTS FOR THE NECESSARY INSPECTIONS REQUIRED FOR THE ALCOHOL LICENSE.

FOLLOWING A SATISFACTORY INSPECTION, THE DEPARTMENTAL REPRESENTATIVE WILL SIGN-OFF THE APPROVAL ON THE ORIGINAL APPLICATION, WHICH IS MAINTAINED IN THE CITY CLERK'S OFFICE. THE APPLICATION IS NOT GIVEN FINAL APPROVAL UNTIL ALL DEPARTMENTS HAVE SIGNED-OFF AND ALL REQUIRED DOCUMENTATION HAS BEEN PROVIDED TO THE CITY CLERK.

UPON RECEIPT OF THE STATE ABC LICENSE, YOU ARE REQUIRED TO BRING THAT LICENSE TO THE CITY CLERK'S OFFICE AND WE WILL ISSUE THE CITY LICENSE TO COMPLETE THE PROCESS. YOU ARE NOT ALLOWED TO SELL ALCOHOLIC BEVERAGES UNTIL YOU HAVE OBTAINED BOTH THE ABC LICENSE AND THE CITY LICENSE.



**ALCOHOLIC BEVERAGE LICENSE APPLICATION  
APPLICANT CHECKLIST**

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**ATTACHMENTS TO BE INCLUDED BY ALL APPLICANTS:**

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- (1) COPIES OF THE LEASE OR SUBLEASE FOR THE BUSINESS LOCATION.**  
This can be a proposed lease, with an executed lease to be submitted at a later date.
- (2) CRIMINAL BACKGROUND INVESTIGATION FORMS FOR ABI** (Must include separate cashier's check or money order made payable to ABI)
- (3) ARTICLES OF INCORPORATION/PARTNERSHIP AGREEMENT**
- (4) CERTIFICATION OF NOTICE TO SURROUNDING PROPERTY OWNERS**  
(Do not submit this signed form with the application)

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**Please read the following instructions related to the completion and submission of the Alabama Bureau of Investigation Criminal History Information Release Form.**

A separate form must be completed for each applicant, partner, officer, or landlord.

Print or type the information requested. If illegible, significant delay will result.

List the State and County of current residence in the upper left corner of the form.

If the form is not to be notarized, your signature must be witnessed by 2 people who must print their name, residence address, including City, State and Zip code.

You must include a cashier's check, bank or postal money order for \$25.00 (per applicant). This should be made payable to Alabama Bureau of Investigation.

The information will be returned to the City and become a part of your application.

If not completed and submitted as described, a delay will result in the processing and consideration of your alcohol license application.

You may make copies of the ABI form sufficient to meet your needs.



**OFFICE USE ONLY**

Date Submitted \_\_\_\_\_  
ARC Release \_\_\_\_\_  
ABI Mailed \_\_\_\_\_  
Application Fee Pd \_\_\_\_\_  
Council Approval \_\_\_\_\_  
RV Certification \_\_\_\_\_

Applic. Release \_\_\_\_\_  
License # \_\_\_\_\_  
ABC Letter \_\_\_\_\_  
City License Issued \_\_\_\_\_  
City License # \_\_\_\_\_

**CONFIDENTIAL**

Please Type or Print Legibly

**ALCOHOL BEVERAGE LICENSE APPLICATION**

New \_\_\_\_\_ Transfer \_\_\_\_\_

LICENSE TYPE: \_\_\_\_\_

**1. APPLICANT INFORMATION**

Name of Applicant(s) \_\_\_\_\_ D.O.B. \_\_\_\_\_

Mailing Address \_\_\_\_\_ Phone \_\_\_\_\_

Social Security No. \_\_\_\_\_ Drivers License No. \_\_\_\_\_

**2. Legal Name \_\_\_\_\_ D.B.A. \_\_\_\_\_**

Exact Location \_\_\_\_\_

**3. NAME AND ADDRESS OF INDIVIDUAL APPLICANT; OR IF A PARTNERSHIP, ASSOCIATION, INCORPORATED ENTERPRISE, OR CORPORATION, THE NAMES AND RESIDENCE OF THE PARTNERS, MEMBERS, OFFICERS, AND DIRECTORS. (ATTACH SEPARATE SHEET IF NECESSARY).**

NAME	TITLE	BIRTHPLACE	DOB	PRESENT ADD & LENGTH OF RESIDENCE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Note: If a corporation, give place and date of incorporation or issuance of certificate of authority to do business in Alabama.

Book \_\_\_\_\_ Page \_\_\_\_\_ Date \_\_\_\_\_ County \_\_\_\_\_

LENGTH OF TIME IN BUSINESS AT THIS LOCATION \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

4. OWNER OF REAL ESTATE FOR WHICH LICENSE IS DESIRED \_\_\_\_\_

ADDRESS \_\_\_\_\_

NAMES AND ADDRESSES OF ALL LESSEES OR SUB-LESSEES

NAME ADDRESS

NAME ADDRESS

ATTACH COPY OF ANY LEASE AGREEMENT UNDER WHICH THE APPLICANT HAS THE RIGHT OF POSSESSION IF THE APPLICANT IS NOT THE OWNER OF THE PROPERTY. (THE AMOUNT OF MONTHLY RENTAL OR OTHER COMPENSATION TO BE PAID BY THE LESSEE UNDER SAID LEASE MAY BE STRUCK OUT ON SAID ATTACHED COPY.)

5. GIVE DESCRIPTION OF THE PREMISES FOR WHICH LICENSE IS DESIRED, AND A DESCRIPTION OR PLAN OF THAT PART OF THE HOTEL, RESTAURANT, CIVIC CENTER OR DINNER THEATER WHERE IT IS PROPOSED TO KEEP AND SELL LIQUOR.

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

6. WILL ANY BUILDING RENOVATIONS, REMODELING, OR REPAIRS BE COMPLETED PRIOR TO OPENING YOUR BUSINESS AT THIS ADDRESS? IF SO, PLEASE DESCRIBE THE NATURE AND EXTENT OF THIS WORK.

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

7. HAS THE MANAGER EVER HAD AN ABC LICENSE SUSPENDED, REVOKED, OR DELCINED? IF SO, PLEASE EXPLAIN:

\_\_\_\_\_

8. IS ANY ONE OF THE APPLICANTS, WHETHER INDIVIDUAL, MEMBER OR PARTNERSHIP OR ASSOCIATION, OR OFFICERS AN DIRECTORS OF CORPORATION OR THE CORPORATION ITSELF, IN ANY MANNER PECUNIARILY INTERESTED DIRECTED OR INDIRECTLY IN THE PROFITS OF ANY OTHER CLASS OF BUSINESS REGULATED UNDER THIS ORDINANCE AND/OR THE ALCOHOLIC BEVERAGE LICENSING CODE OF THE STATE OF ALABAMA?

IF SO, STATE THE EXTENT OF SAID INTEREST, INCLUDING NAME OF SUCH BUSINESS:

\_\_\_\_\_

9. ARE THE APPLICANTS NAMED ABOVE THE ONLY PERSONS IN ANY MANNER PECUNIARILY INTERESTED IN THE BUSINESS SOUGHT TO BE LICENSED? \_\_\_\_\_, IF NOT EXPLAIN:

\_\_\_\_\_

10. HAS THE APPLICANT MADE APPLICATION BEFORE FOR A SIMILAR OR OTHER ALCOHOLIC BEVERAGE LICENSE?\_\_\_\_\_. IF SO STATE DISPOSITION OF SUCH APPLICATION: \_\_\_\_\_

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**Note\*\***

This form is to be signed by the owner, or in the case of a partnership, association, or unincorporated enterprise, by a partner or member thereof, or in case of a corporation by an executive officer.

11. HAS APPLICANT, OR IN THE CASE OF A PARTNERSHIP, ASSOCIATION, OR UNINCORPORATED ENTERPRISE, ANY PARTNER OR MEMBER THEREOF, OR IN A CASE OF CORPORATION, ANY OFFICER, DIRECTOR OR STOCKHOLDER THEREOF, HAD DURING THE THREE YEARS IMMEDIATE PRECEDING THE DATE OF THIS APPLICATION, A LICENSE FOR THE SALE OF SPIRITOUS OR VINOUS LIQUORS, FORTIFIED WINE OR TABLE WINE, OR MALT OR BREWED BEVERAGES REVOKED OR SUSPENDED BY ANY GOVERNMENTAL AUTHORITY? \_\_\_\_\_

12. LIST BELOW, THE COURT RECORDS FOR VIOLATIONS, IF ANY, OF EACH APPLICANT, PARTNER, OR MEMBER OFFICER, MEMBER OF THE BOARD OF DIRECTORS, LANDLORD AND MANAGER. (Do not include traffic violations except D.W.I. and reckless driving) IF NO RECORD EXISTS, STATE NONE.

NAME	VIOLATION CHARGED	COURT	DATE	DISP. OF CASE
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(Attach a separate sheet if necessary)

I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN THIS APPLICATION IS GROUNDS FOR DENIAL.

SIGNED \_\_\_\_\_  
TITLE \_\_\_\_\_

NOTE\*\* If corporation, the undersigned certifies that all officers and directors of the corporation are reputable individuals and citizens of the United States.

SIGNED \_\_\_\_\_  
TITLE \_\_\_\_\_

THE UNDERSIGNED AGREES, IF ISSUED A LICENSE AS HEREINBEFORE REQUESTED, (1) TO COMPLY WITH ALL THE PROVISIONS OF THE LAWS OF ALABAMA AND PARTICULARLY TITLE 28, CODE OF ALABAMA, AS NOW AND HEREAFTER AMENDED, (2) AND TO OBEY ALL RULES AND REGULATIONS PROMULGATED BY THE ALABAMA ALCOHOLIC BEVERAGE CONTROL BOARD (THE "BOARD"), RELATIVE TO THE HANDLING OF THE ALCOHOLIC BEVERAGES, AND PARTICULARLY ORDINANCE NO. 635-04, AS NOW AND HEREAFTER AMENDED, AND (3) TO ALLOW ANY DULY AUTHORIZED AGENT OF THE BOARD AND ANY DULY COMMISSIONED LAW ENFORCEMENT OFFICER OF THE STATE OF ALABAMA, MARSHALL COUNTY, OR THE CITY OF ALBERTVILLE TO ENTER AND SEARCH WITHOUT A WARRANT THE LICENSED PREMISES OR ANY OTHER BUILDING OWNED OR OCCUPIED BY THE LICENSEE IN CONNECTION WITH, ADJOINING OR ADJACENT THERETO, WHETHER CONNECTED OR NOT, AND WHETHER USED BY THE LICENSEE AS HIS PRIVATE DWELLING OR NOT, AT ANY TIME. THE UNDERSIGNED UNDERSTANDS THAT A VIOLATION OF THE STATE OR CITY LAWS OR RULES AND REGULATIONS OF THE BOARD MAY RESULT IN A SUSPENSION OR REVOCATION OF HIS LICENSE.

STATE OF \_\_\_\_\_ SIGNED \_\_\_\_\_  
NAME OF APPLICANT

COUNTY OF \_\_\_\_\_ TITLE \_\_\_\_\_

THE UNDERSIGNED \_\_\_\_\_

\_\_\_\_\_  
OR NAME AND TITLE OF OFFICER IF A CORPORATION

APPLICANT FOR THE ALCOHOLIC BEVERAGE LICENSE, REQUESTED BY THE FOREGOING APPLICANT HEREBY SWEARS OR AFFIRMS THAT HE OR SHE HAS READ SAID APPLICATION AND ALL THE STATEMENTS THEREIN AND THAT THE FACTS SET FORTH THEREIN ARE TRUE AND CORRECT, AND THAT THE APPLICANT IS THE ONLY PERSON INTERESTED IN THE BUSINESS FOR WHICH LICENSE IS REQUESTED.

**LEASE/PROPERTY OWNERSHIP**

THIS IS TO CERTIFY THAT I AM THE PROPERTY OWNER OR HAVE LEGAL CONTROL OF THE PROPERTY DESCRIBED HEREIN LOCATED IN THE CITY OF ALBERTVILLE AND MARSHALL COUNTY, STATE OF ALABAMA.

DESCRIPTION OF PROPERTY:

\_\_\_\_\_, \_\_\_\_\_  
OWNER DATE

THE ABOVE PROPERTY HAS BEEN RENTED, LEASED, SUBLEASED OR OTHERWISE SURRENDERED TO \_\_\_\_\_

WHO HAS APPLIED FOR AN ALCOHOL BEVERAGE LICENSE FOR THIS LOCATION.

THIS PROPERTY IS:

LEASED( ), RENTED ( ), AT A MONTHLY RATE OF \_\_\_\_\_.

WITNESS:

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

\_\_\_\_\_  
OWNER/LESSOR

\_\_\_\_\_  
LICENSEE



**AUTHORITY TO RELEASE INFORMATION**

I, \_\_\_\_\_, hereby authorize any representative of the City of Albertville to collect information in reference to, but not limited to, my personal background, driving record and arrest record.

I further authorize the release of any and all information pertaining to me by any person to whom this authorization may be presented, in consideration of the fact that all such obtained information shall be pertinent information which would assist the City of Albertville, Alabama, in evaluating my character and qualifications.

I hereby release from any liability anyone who collects such information or anyone that furnishes such information on my behalf. I further agree that a photo static copy of this authorization shall have the same effect as the original.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
DATE

DRIVERS LICENSE NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

SEX: \_\_\_\_\_ RACE: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_



**CRIMINAL HISTORY  
RELEASE FORM  
ABI-46 (1/93)**

State of \_\_\_\_\_  
Information  
County of \_\_\_\_\_

My full name is \_\_\_\_\_, I reside at \_\_\_\_\_  
\_\_\_\_\_, City of \_\_\_\_\_, State of \_\_\_\_\_.

I am possessed of sound mind and legally competent to execute this release. I hereby authorize the Alabama Department of Public Safety to release any and all criminal history information they have on me to the City of Albertville: Attention: Phyllis Webb, P.O. Box 1248, Albertville, Al 35950.

I do hereby for myself, my heirs, executors, and administrators release and forever discharge the Alabama Department of Public Safety and its officers and agents from any and all claims, action, or causes of action, which may arise as a consequence of the release of the criminal history information.

I certify that I have read this release and that I understand the significance of the same and in witness thereof I have voluntarily signed my name on this the \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_.

Signature \_\_\_\_\_  
SSN \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_

\_\_\_\_\_  
Witness Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City                    St.                    zip

Sworn to and subscribed before me on this the \_\_\_\_\_,  
day of \_\_\_\_\_, 2\_\_\_\_.

Notary Public \_\_\_\_\_  
My Commission Expires \_\_\_\_\_

\_\_\_\_\_  
Witness Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City                    St.                    zip

\_\_\_\_\_  
Signature & SSN of person receiving record

Please note:  
This document must be witnessed by two (2) witnesses or, notarized by a Notary Public, and must be accompanied by a cashier's check, bank, or postal money order in the amount of \$25.00 made payable to ALABAMA BUREAU OF INVESTIGATION.

Mail To: Identification Unit  
Alabama Bureau of Investigation  
P.O. Box 1511  
Montgomery, Al 36102-1511



**ACKNOWLEDGEMENT**

I CERTIFY THAT I HAVE HAD THE REQUIREMENTS OF ORDINANCE NO. 635-04 EXPLAINED TO ME WITH REFERENCE TO THE \$300.00 FILING FEE.

IF MY APPLICATION IS DENIED, I WILL NOT RECEIVE A REFUND OF THE SAID \$300.00 FILING FEE.

\_\_\_\_\_  
PROPOSED LICENSEE

\_\_\_\_\_  
CITY CLERK

\_\_\_\_\_  
DATE

\_\_\_\_\_  
TRADE NAME

\_\_\_\_\_  
CITY

***PLEASE DO NOT SIGN THIS DOCUMENT UNTIL YOU HAVE MET WITH THE CITY CLERK AND REVIEWED THE ORDINANCE REFERRED TO ABOVE.***