



COMMONWEALTH OF KENTUCKY  
DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL  
1003 Twilight Trail  
Frankfort, Kentucky 40601-8400  
502-564-4850 phone  
502-564-1442 fax  
http://abc.ky.gov

**SPECIAL TEMPORARY LICENSE APPLICATION**

Val. \_\_\_\_\_

**Applications will be returned if all questions are not answered completely.**

Val. \_\_\_\_\_

**LEAVE BLANK - FOR ABC USE ONLY**

License # \_\_\_\_\_ \$ \_\_\_\_\_ License # \_\_\_\_\_ \$ \_\_\_\_\_ License # \_\_\_\_\_ \$ \_\_\_\_\_  
License # \_\_\_\_\_ \$ \_\_\_\_\_ License # \_\_\_\_\_ \$ \_\_\_\_\_ License # \_\_\_\_\_ \$ \_\_\_\_\_

Reviewing Licensing Administrative Specialist: \_\_\_\_\_ Input Date: \_\_\_\_\_ Review Date: \_\_\_\_\_  
Malt Beverage Administrator's Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
Distilled Spirits Administrator's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION A**

Name of person(s) or company to be licensed: ESTEEM LLC dba: LIQRBX  
Name of the special event: Rockin The Ridge  
Address of premises to be licensed: S. Main St. (Piddle Park)  
City: Dry Ridge County: Grant State: KY Zip Code: 41035  
Mailing address (if different from above): 3567 Heckin-Lawrenceville rd. Williamstown, KY 41097  
Contact person: Courtney Wilson E-mail address: courtney.wilson2011@yahoo.com  
Contact phone: (513)-967-3756 Fax: N/A

Check the type of temporary license(s) for which the applicant is applying:

☒ Special Temporary license

☐ Special Temporary Alcoholic Beverage Auction license

**SECTION B**

- Amount of fee enclosed (make certified check, cashier's check, or money order payable to Kentucky State Treasurer): \_\_\_\_\_
- Period to be covered by license beginning (month) June (day) 24<sup>th</sup> (year) 2017 through (month) June (day) 24<sup>th</sup> (year) 2017  
(Each qualifying event requires a separate application, fee, and license.)
- What are the date(s) and time(s) of the qualifying event? Saturday, June 24<sup>th</sup> 2017 8:00AM - 11:55PM
- Kentucky law limits temporary licenses to public events. Therefore, do you agree to not exclude the public from this special event? ☒ YES ☐ NO
- Does the applicant own the premises where the qualifying event is to take place?  
If yes, **attach** a copy of the deed. ☐ YES ☒ NO  
If no, **attach** a copy of the lease, permit, or letter of permission to use this property, signed by the applicant and the owner of the premises. List the premises owner's name and contact information: \_\_\_\_\_

### SECTION C

Complete the following for the business proprietor, partner(s), and all persons interested in the business to be licensed. List all owners, officers, directors, partners, managing members, members, and shareholders. If privately-held, show 100% of the ownership. If this is a publicly-traded company or a non-profit company, list the top three officers and any natural person who owns ten percent (10%) or more interest. Make an attachment if additional space is needed.

NAME AND HOME ADDRESS	ALL PHONE NUMBERS H= HOME W= WORK F= FAX C= CELL	SOCIAL SECURITY NUMBER	TITLE	USA CITIZENSHIP	DATE OF BIRTH	STATE(S) WHERE PERSON RESIDED IN PAST 5 YRS	% OF OWNERSHIP
Courtney Wilson 3567 Heekin-Lawrenceville rd. Williamstown, KY 41097	H _____ W <u>859-903-2118</u> F _____ C <u>513-967-3756</u>	272-96- 5414	Owner	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	12/01/92	Kentucky	50 %
Thomas McDaniel II 3567 Heekin-Lawrenceville rd. Williamstown, KY 41097	H _____ W <u>859-903-2118</u> F _____ C <u>239-357-0828</u>	402-45- 3004	Owner	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	11/11/92	Kentucky Florida	50 %
	H _____ W _____ F _____ C _____			<input type="checkbox"/> YES <input type="checkbox"/> NO			%
	H _____ W _____ F _____ C _____			<input type="checkbox"/> YES <input type="checkbox"/> NO			%

### SECTION D

**A temporary license may be obtained only if the event is located in a wet territory where retail alcoholic beverage sales are permitted. This license cannot be issued in moist or dry territories.**

6. Are the premises to be licensed located within an incorporated city or town?  
If yes, give the name of the city or town: Dry Ridge ☒ YES ☐ NO

7. Is the entire license fee paid by the applicant and by no other person? ☒ YES ☐ NO

8. Is the applicant a corporation, limited partnership, or limited liability company in good standing with the Kentucky Secretary of State? ☒ YES ☐ NO

9. Is the applicant a non-profit organization? ☐ YES ☒ NO

NOTE: For-profit individuals, promoters, or corporations may receive special temporary licenses in conjunction with civic events. (804 KAR 4:250) Applications by for-profit individuals, promoters, corporations, or organizations for a special temporary license in conjunction with an organized civic or community sponsored event, must **attach** written or documentary evidence of the civic nature of the event, including but not limited to any promotional materials or news articles evidencing the local government's knowledge of and support for the event for which the applicant is applying.

10. Has the applicant or any person named in Section C been convicted of any felony, been released from felony custody or felony incarceration, been on felony parole, or had a termination of felony probation within the past five (5) years? (KRS 243.100(1)(a)) ☐ YES ☒ NO  
If yes, **attach** a statement identifying the person(s) convicted and date(s) and type(s) of conviction(s).

11. Has the applicant or any person named in Section C been convicted of a misdemeanor directly or indirectly related to alcohol or a controlled substance in the past two (2) years? (KRS 243.100(1)(b) and (c)) ☐ YES ☒ NO  
If yes, **attach** a statement identifying the person(s) convicted and date(s) and type(s) of conviction(s).

12. Has there ever been a suspension, denial, or revocation of any alcoholic beverage license held by the applicant or by any person named in Section C of this application? ☐ YES ☒ NO  
If yes, **attach** a statement giving a full explanation, including dates of suspension, revocation or denial.

13. **Attach** a description of the event. Attach copies of any advertising, mailers, invitations or handbills for this event, if applicable. Include any other information the applicant wishes the state administrators to consider.

Note: An ABC licensed caterer may not cater alcoholic beverages at an event covered by a special temporary license.  
No free samples of alcoholic beverages may be provided at the event.  
All alcoholic beverages for the event must be purchased through a licensed distributor or wholesaler.

14. Name of the responsible party/individual who shall be present at the time of the event: Courtney Wilson and Thomas McDaniel II



## SECTION E

Check the type(s) of license(s) for which the applicant is applying. For each license type selected, the applicant affirms that the requirements for that license type are met.

License Types	Licensing Fee
<input checked="" type="checkbox"/> Special Temporary License (KRS 243.260 and 804 KAR 4:250). Check the type of alcoholic beverage sales the applicant desires. Some territories do not permit distilled spirit sales. <div style="margin-left: 20px;"> <input checked="" type="checkbox"/> Malt Beverage/Beer  <input type="checkbox"/> Distilled Spirits  <input type="checkbox"/> Wine  <input type="checkbox"/> All                             </div>	\$90
<input type="checkbox"/> Special Temporary Alcoholic Beverage Auction License (KRS 243.036)	\$110

## LOCAL ABC ADMINISTRATOR APPROVAL

Pursuant to KRS 243.370, if a city or county alcohol license is required, then the local ABC Administrator must approve this application before it can be submitted to the state ABC. Take or mail this application and all attachments to the local ABC Administrator. Obtain the local ABC Administrator's signature and approval before filing this application with the state ABC office.

### LOCAL ABC ADMINISTRATOR'S SIGNATURE OF APPROVAL

I certify that the applicant(s) has been approved for the equivalent local license type(s) applied herein for the identified premises, and that the applicant satisfies all local ordinances.

The premises to be licensed is located in the following wet or moist PRECINCT: Grant

APPLICANT'S NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

Administrator: Please identify whether a special temporary license authorizes distilled spirits drink sales in your locality:

- ☐ Yes. Quota Retail Drink (LD) Licenses are available in this locality.  
☐ Yes. An economic hardship ordinance authorizes distilled spirits drink sales in this locality.  
☐ No. Special Temporary licenses do not authorize distilled spirits drink sales in this locality.

SIGNATURE OF APPROVAL OF LOCAL ABC ADMINISTRATOR: 

PRINTED NAME OF LOCAL ABC ADMINISTRATOR: JAMES WELLS

City of Dry Ridge Administrator OR County of \_\_\_\_\_ Administrator

## APPLICATION AFFIDAVIT

### AFFIDAVIT OF APPLICANT APPLYING FOR THE ABC LICENSE (S)

I, (print your name here) Courtney Wilson do hereby swear and affirm under penalty of perjury that all statements contained in this application and any attachments are true and correct to the best of my knowledge, information, and belief. I hereby swear and affirm that I shall not engage in any activity involving alcoholic beverages at the premises described herein until I have been issued the appropriate license(s) by the Kentucky Department of Alcoholic Beverage Control. I hereby swear and affirm that if the license(s) is issued, I shall abide by all state and local statutes, regulations, and ordinances relating to the manufacture, sale, use, and trafficking in alcoholic beverages. I hereby swear and affirm that no persons listed in Section (C) of this application are in default of a repayment obligation under any financial program administered by Kentucky Higher Education Assistance Authority (KHEAA) such as a student loan repayment.

Signature of Applicant: Courtney Wilson Title: Owner Date: 06/01/17

# CITY OF **DRY RIDGE**

P.O. Box 145, 31 Broadway  
Dry Ridge, Kentucky 41035-0145

Phone: 859-824-3335  
Fax: 859-824-3598  
[www.cdrky.org](http://www.cdrky.org)

Esteem LLC, dba: LIQRBX  
Warsaw Ave  
Dry Ridge, Ky 41035

June 2, 2017

Re: Land Use for Civic Event

This letter authorizes Esteem LLC, dba: LIQRBX to use the property known as Piddle Park located behind 24 South Main Street for the sale of alcoholic beverages for the Rockin' the Ridge Summer Music Festival on June 24th, 2017.



James Wells, Mayor  
City of Dry Ridge

James Wells, Mayor  
[jim.wells@cdrky.org](mailto:jim.wells@cdrky.org)

Amy Kenner,  
City Clerk/ Treasurer  
[amy.kenner@cdrky.org](mailto:amy.kenner@cdrky.org)

