

**Alcoholic Beverage Control  
Special Temporary License Application**

City of Flemingsburg, Kentucky  
Fleming County, Kentucky

140 W. Electric Avenue  
Flemingsburg, Kentucky 4104

Phone: 606-209-3024  
Email: abc@flemingsburgky.org

A special temporary ABC license may be issued for any regularly organized fair, exposition, racing association or other party. The applicant must be a non-profit organization, racing association or political campaign function. If the applicant is a for-profit individual or organization, the event must be part of a bona fide civic event or community-sponsored event. A special temporary ABC license will only be issued after it has been reviewed and approved by the Local ABC Administrator and the State ABC Board.

The online State Application found at [abc.ky.gov](http://abc.ky.gov), along with this form, must be completed at least 30 days prior to the event.

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

Special Temporary License (KRS 243.260)       Special Temporary Alcoholic Beverage Auction License (KRS 243.036)

**APPLICANT INFORMATION**

**Business/company name:** \_\_\_\_\_

**DBA (Doing Business As):** \_\_\_\_\_

**Address of premises to be licensed:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Premises phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Mailing address** \_\_\_\_\_

(if different from above): \_\_\_\_\_

**Contact person:** \_\_\_\_\_ **Contact phone:** \_\_\_\_\_

Has the applicant or any member of the organization 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?       YES    NO

Has the applicant or any member of the organization been convicted of a misdemeanor directly or indirectly related to alcohol or a controlled substance within the past two (2) years?       YES    NO

If yes to any of the above, please explain: \_\_\_\_\_

**EVENT INFORMATION**

**Name of special event:** \_\_\_\_\_

**Period to be covered by license beginning** (month) \_\_\_\_\_ (day) \_\_\_\_\_ (year) \_\_\_\_\_ through  
(month) \_\_\_\_\_ (day) \_\_\_\_\_ (year) \_\_\_\_\_

*\*Cannot exceed 30 days      \*\* Not more than 1 auction may be held*

**Date(s) and time(s) of special event:** \_\_\_\_\_

Does the applicant own the premises where the event will take place?    YES    NO

If **yes**, attach proof of ownership. 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. The letter should also include the owner's name and contact information.

If this event is held on city property, attach a signed copy of the Special Event Permit. If this event is held on county owned property, attach a signed letter of permission to use the property from the County Judge Executive.

**FEES (PER EVENT)**

- Special Temporary License \$166.66
- Special Temporary Alcoholic Beverage Auction License \$100.00

Payment must be submitted with the application. Make checks payable to the City of Flemingsburg.

**NOTE: All persons working this event must receive training in the sales and service of alcoholic beverages. This training will be conducted free of charge by the Local ABC Administrator, prior to the event. All attendees will be required to sign in and only those who attend the training will be permitted to serve alcohol at the event.**

**AFFIDAVIT**

I, \_\_\_\_\_ do hereby solemnly swear or affirm that I am aware that my State application is incorporated, made a part of this application, and that the answers contained are true and correct to the best of my knowledge, information and belief. I confirm that I have received a copy of the current Alcoholic Beverage Control Ordinance of the City of Flemingsburg, Kentucky, and/or Fleming County and I hereby consent to the authority of the Alcoholic Beverage Control Administrator and his/hers investigators for: (a) inspections and searches of the licensed premises listed above; (b) confiscation of articles found on said licensed premises in violation of any Ordinance or Statute; and (c) emergency temporary closure of the licensed premises if the public health, safety, morals and welfare is threatened by multiple violations of any Ordinance or Statute involving disturbance of the peace or public disorder during the course of one day's operation of the licensed premises.

Date of Application: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Title: \_\_\_\_\_

**COMMONWEALTH OF KENTUCKY**  
**STATE AT LARGE**  
**COUNTY OF \_\_\_\_\_**

This is to certify that the foregoing document was subscribed and sworn to before me this \_\_\_\_\_ day \_\_\_\_\_ of , 20\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

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

- Approved
- Denied

\_\_\_\_\_  
Local ABC Administrator

\_\_\_\_\_  
Date