

**NORTH CAROLINA
ALCOHOLIC BEVERAGE CONTROL COMMISSION**

Location: **400 EAST TRYON ROAD
RALEIGH NC 27610
(919)779-0700
abc.nc.gov**

FEE PAID: _____
DATE: _____
RECEIVED BY: _____

APPROVED
REJECTED
BY: _____
DATE: _____

(Do Not Write Above This Line)

APPLICATION FOR ANTIQUE SPIRITUOUS LIQUOR PERMIT

Application Instructions:

- A. Complete this application in its entirety. (Please print.)
- B. Applicant's signature must be notarized.
- C. The fee (\$100.00) must be submitted by certified check, cashier's check, or money order, and made payable to the North Carolina Alcoholic Beverage Control Commission.

I hereby make application to the North Carolina Alcoholic Beverage Control Commission for an Antique Spirituous Liquor Permit pursuant to G.S. 18B-101(5a) to acquire and to sell antique spirituous liquor at retail for use in mixed beverages for consumption on premises.

G.S. 18B-101(5a) defines Antique Spirituous liquor as spirituous liquor that has not been in production or bottled in the last 20 years, is in the original manufacturer's unopened container, is not owned by a distillery, and is not otherwise available for purchase by an ABC Board except through the special order process.

Mixed Beverages Permit # _____ Trade Name of Business _____

Location Address of Business
Street Address _____ City _____ State _____ Zip Code _____

Mailing Address of Business
Street Address _____ City _____ State _____ Zip Code _____

Business Location Telephone # _____

Applicant's Full Name
First _____ Middle _____ Last _____

Date of Birth _____ Last 4 digits of Social Security # _____

It is a Crime to make a false statement to obtain an ABC Permit

I CERTIFY UNDER OATH OR AFFIRMATION THAT:

- I am not less than 21 years of age.
- I have not been convicted of a misdemeanor controlled substance offense or alcoholic beverage offence within the past two years.
- I have not been convicted of a felony within the past 3 yrs, and if convicted of a felony before then, I have had my citizenship restored.
- I have not had an alcoholic beverage permit revoked within the past three years.
- All of the information supplied by me in this application is complete and accurate.
- I, or my agent, will personally supervise the sale of alcoholic beverages and abide by all ABC laws.
- I understand that failure to abide by the ABC laws may result in the immediate revocation of my privilege to sell/serve alcohol.

Signature of Applicant

Sworn to and subscribed before me this the _____
Day Month Year

My commission expires: _____
Notary or other person qualified by law to administer oaths

MAIL THIS APPLICATION TO:

If sending by U.S. Postal Service (regular mail):

NC ABC Commission
ATTN: Permit & Product Compliance
4307 Mail Service Center
Raleigh, NC 27699-4307

If sending by U.S. Postal Service EXPRESS MAIL or by FEDEX/UPS:

NC ABC Commission
ATTN: Permit & Product Compliance
400 East Tryon Road
Raleigh, NC 27610