

CITY OF NEW MARTINSVILLE  
APPLICATION FOR LIQUOR LICENSE

191 MAIN STREET  
NEW MARTINSVILLE, WV 26155  
PHONE: (304) 455-9120

ATTACH COPY OF STATE LIQUOR LICENSE TO THIS APPLICATION. CITY LICENSE WILL NOT BE ISSUED UNTIL PROOF OF RECEIPT OF STATE LICENSE IS SHOWN.

IMPORTANT: PLEASE ARRANGE TO PICK UP YOUR CITY LIQUOR LICENSE BEFORE THE 1ST DAY OF JULY OF EACH YEAR SO LICENSE CAN BE POSTED FOR INSPECTION ON THAT DATE.

TO THE CITY OF NEW MARTINSVILLE:

The undersigned organization or corporation hereby applies for a City of New Martinsville Liquor License.

1. Name of Club \_\_\_\_\_
2. Street Address of Club Premises \_\_\_\_\_
3. Municipality \_\_\_\_\_
4. Post Office Address \_\_\_\_\_
5. Owner of Club Property \_\_\_\_\_
6. Address of Property Owner \_\_\_\_\_
7. Premises to be Licensed:

(a) List complete information for every room which is to be used in the operation of the licensed business, including a separate kitchen, if any, and area to be used for storage of alcoholic beverages.

ROOM		LOCATED ON WHAT FLOOR	SEATING CAPACITY	SERVING, KITCHEN OR STORAGE
WIDTH	LENGTH			

8. (a) No clause appears in the deed to the property prohibiting the sale of Liquor or Malt or Brewed Beverages, except as follows: \_\_\_\_\_  
\_\_\_\_\_
- (b) Deed is recorded in Volume \_\_\_\_\_ Page \_\_\_\_\_
9. The license applied for is not for any club located on any college campus, state university campus or branch thereof and the club has not been determined by law to be a public nuisance, except as follows: \_\_\_\_\_  
\_\_\_\_\_
10. The primary purpose or purposes of the club is \_\_\_\_\_
11. Date club organized \_\_\_\_\_ Dated Incorporated \_\_\_\_\_  
Place Incorporated \_\_\_\_\_
12. The following is a list of all Officers and Directors, Trustees or Governing Board:

NAME	TITLE	HOME ADDRESS	HOW LONG A RESIDENT OF WEST VIRGINIA

Name and Social Sec. No. of Owner or Chief Officer \_\_\_\_\_  
Soc. Sec. No. \_\_\_\_\_

13. The name of the Manager or Steward is \_\_\_\_\_  
 How long a resident of W. Va. \_\_\_\_\_ Home Address \_\_\_\_\_
14. Arrest Record - The following is a record of all arrests of the Officers, Directors, and Manager or Steward and Employees. (All applications will be checked through the Criminal Identification Bureau of the Department of Public Safety.)  
 (Attach rider if necessary.)  
 If there have been no arrests insert the word "NONE".

NAME	DATE OF ARREST	CHARGE	DISPOSITION OF ARREST	LOCATION OF COURT (COUNTY & STATE)

15. Has the club previously filed an application for license? \_\_\_\_\_ Has the license ever been revoked? \_\_\_\_\_ If so, when and where \_\_\_\_\_
16. Name and address of national organization with which affiliated, if any \_\_\_\_\_  
 Nature of Affiliation \_\_\_\_\_ Date of Affiliation \_\_\_\_\_
17. Number of Members of Applicant \_\_\_\_\_
18. W. Va. Consumer Sales Tax Account Identification Number \_\_\_\_\_
19. Store License No. - W. Va. \_\_\_\_\_ State Liquor License No. \_\_\_\_\_
20. W. Va. Health Department Permit Number \_\_\_\_\_
21. Number of Employees \_\_\_\_\_
22. Class of License (Check One):  
 Fraternal or Veteran's Organization  
 Non-Profit Social Club  
 Other organization with minimum of 100 dues paying members \_\_\_\_\_
23. Number of State Liquor License \_\_\_\_\_ Date of Issue \_\_\_\_\_  
 (ATTACH COPY TO THIS APPLICATION).
24. Is the State license valid and in effect on the date of this application? \_\_\_\_\_
25. Is the applicant the holder of a federal gambling stamp \_\_\_\_\_

**THE UNDERSIGNED AGREE, IF A LICENSE IS ISSUED AS HEREIN APPLIED FOR, TO COMPLY AT ALL TIMES WITH AND OBSERVE ALL THE PROVISIONS OF CHAPTER 60, ARTICLE 7 OF THE CODE OF WEST VIRGINIA 1931, AS AMENDED AND ALL OTHER LAWS OF THIS STATE AND THE RULES AND REGULATIONS PROMULGATED BY THE ALCOHOL BEVERAGE CONTROL COMMISSIONER. THE UNDERSIGNED FURTHER CERTIFY THAT IF A LICENSE IS ISSUED THE GENERAL PUBLIC WILL NOT BE ADMITTED ON THE PREMISES SET FORTH IN THIS APPLICATION AND ONLY DULY ELECTED OR APPROVED MEMBERS, IN GOOD STANDING, AND THEIR GUESTS, WHILE IN THE COMPANY OF A MEMBER, WILL BE PERMITTED TO ENTER SAID PREMISES.**

**NOTE: If an association, use the following acknowledgement:**

STATE OF WEST VIRGINIA, \_\_\_\_\_ COUNTY, TO-WIT:  
 \_\_\_\_\_, being first duly sworn, according to law, deposes and says that he is the duly elected and qualified \_\_\_\_\_ (President, Vice-President, or Recording Officer) of the \_\_\_\_\_ an association duly organized for the purpose and purposes herein stated, and that the statements and answers made in the foregoing application are true and acknowledged the said writing to be the actual deed of said association.

Signed \_\_\_\_\_

Association - Acknowledgement (Continued):

Attested:

\_\_\_\_\_  
(Secretary)

RESIDENCE ADDRESS \_\_\_\_\_

Sworn to before me and subscribed in my presence this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

My commission expires: \_\_\_\_\_ (Notary Public)

Verified by all the Trustees or Governing Board:  
\_\_\_\_\_  
\_\_\_\_\_

Note: If a corporation, use the following acknowledgement:

State of West Virginia, \_\_\_\_\_ County, To-Wit:

\_\_\_\_\_, being first duly sworn, according to law, deposes and says that he is \_\_\_\_\_

(President, Vice-President, Secretary)  
of the \_\_\_\_\_, a corporation duly organized and authorized by law to do business in the State of West Virginia, and that the statements and answers made in the foregoing application are true and acknowledged the said writing to be the act and deed of said corporation.

Signed \_\_\_\_\_

Attested: \_\_\_\_\_ (Add corporate seal)

RESIDENCE ADDRESS \_\_\_\_\_

Sworn to before me and subscribed in my presence this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

My commission expires: \_\_\_\_\_ (Notary Public)

Verified by all the Officers and Directors:  
\_\_\_\_\_  
\_\_\_\_\_

INSTRUCTIONS:

1. All questions must be answered or the application will be returned. All attached riders must be identified with the name and address of the applicant.
2. All associations shall have attached thereto a copy of the corporate charter and if an association the agreement of the association.
3. Original application must be returned to the LICENSE DEPARTMENT, CITY OF NEW MARTINSVILLE, RECORDER'S OFFICE, 203 MAIN STREET, NEW MARTINSVILLE, WEST VIRGINIA.
4. Each member of the governing board of the applicant must verify the application for an association and each officer and all members of the board of directors must verify the application for a corporation.

DO NOT WRITE BELOW THIS LINE

CITY CLUB LICENSE \_\_\_\_\_ ISSUED \_\_\_\_\_

STATE CLUB LICENSE \_\_\_\_\_ ISSUED \_\_\_\_\_