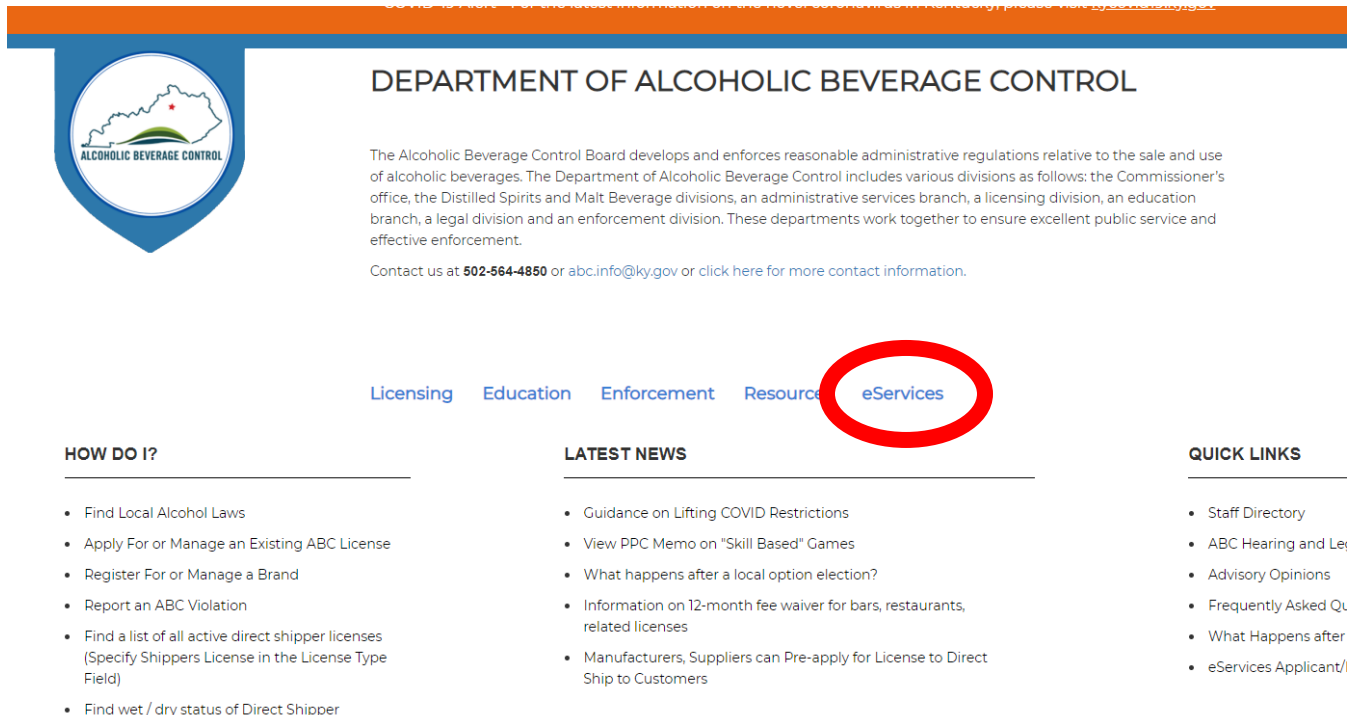


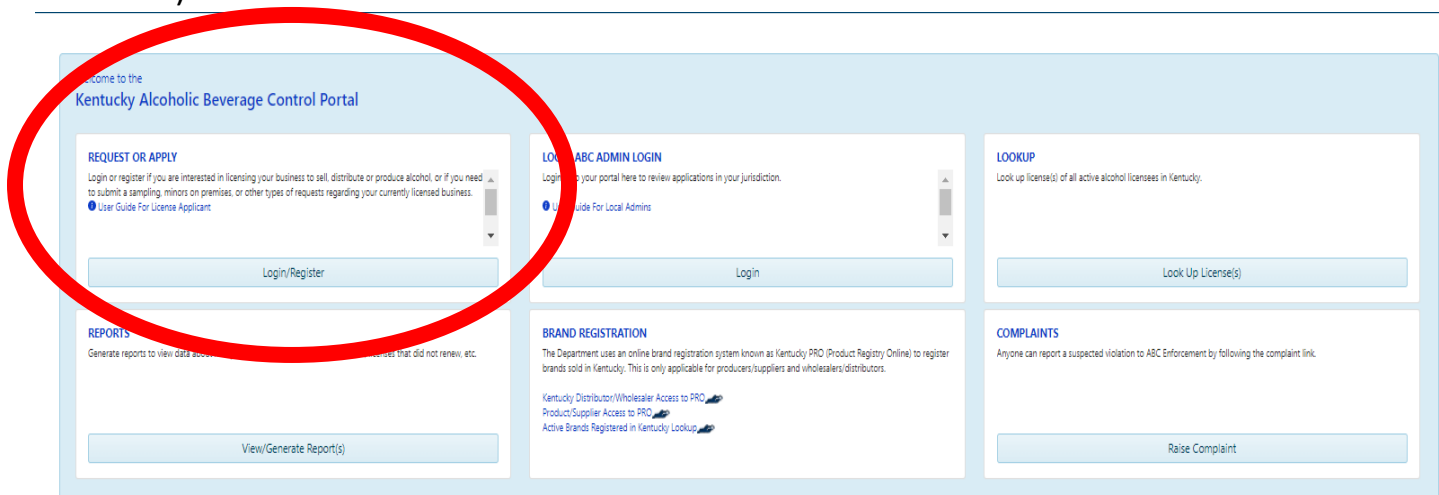
Agent Solicitor Application

*****All current holders of an Agent Solicitor license type with an issued date prior to July 1st 2021, must reapply as new.*****

1. Go to abc.ky.gov and click eServices



2. You will then click Login/Register (you will need to register for an account if you do not have one)



3. Complete the personal details page

PPC Alcoholic Beverage Control
Public Protection Cabinet

Home Profile New Applications/Requests My Applications My Licenses Bill Jackson

Personal Details Company Details All current holders of an Agent Solicitor license type must reapply as new beginning July 1, 2021

PERSONAL DETAILS

First Name* Bill Middle Name Enter Middle Name Last Name* Jackson
Suffix Select Suffix Phone* (502) 782-1010 Email* belle30test@icloud.com
Mailing Address
Country* United States Zip Code* 40601 Address* 500 Mero St
City* Frankfort State* KY

Save and Continue

4. You will then click profile, company details

Under the profile tab under COMPANY DETAILS, you will now need to add your parent company.

PPC Alcoholic Beverage Control
Public Protection Cabinet

Home Profile New Applications/Requests My Applications My Licenses Bill Jackson

Personal Details Company Details All current holders of an Agent Solicitor license type must reapply as new beginning July 1, 2021

PERSONAL DETAILS

First Name* Bill Middle Name Enter Middle Name Last Name* Jackson
Suffix Select Suffix Phone* (502) 782-1010 Email* belle30test@icloud.com
Mailing Address
Country* United States Zip Code* 40601 Address* 500 Mero St
City* Frankfort State* KY

Save and Continue

5. You will then need to answer the following questions

ADD COMPANY

Do you currently hold active license other than agent solicitor or In Review (pending) application with Kentucky Alcoholic Beverage Control?

Yes ☐ No ☒

Are you an agent solicitor wishing to be licensed?

Yes ☒ No ☐

6. After answering the questions, you will be directed to the New Special Agent/Solicitor screen (complete all required fields)

NEW SPECIAL AGENT/SOLICITOR

First Name*
Enter First Name

Middle Name
Enter Middle Name

Last Name*
Enter Last Name

Suffix
Select Suffix

Phone*
Enter Phone

Email*
Enter Email

SSN/FEIN*
Enter SSN/FEIN

Mailing Address

Country*
United States

Postal Code*
Enter Postal Code

Address*
Enter Street Address

City*
Enter City

State*
Enter State

Cancel Add

7. Once you click save you will directed to the Company Details page, you will need to click owners/officers (you will add yourself as the 100% owner) Complete all required fields

COMPANY DETAILS Add Company

Kellsey Burns
500 Mero St., Frankfort, KY 40601

Owners/Officers

Owner Name	Ownership %	Title	Phone Number	ADDRESS	Email
No records to display					

Add Owners/Officers

ADD AN OWNER/OFFICER FOR

Ownership Type*
Private

● Complete the following for the company proprietor, partner(s) and all the persons having interest in the company to be licensed. List all the owners, officers, directors, partners, managing members, members and shareholders. If privately held, show 100% of ownership. If publicly traded, list the three highest ranking officers. If non-profit, list the highest ranking director or officer.

Is this a direct owner or part of another company with ownership stake? *

Individual ☒ Company ☐

First Name*
Enter First Name

Suffix
Select Suffix

Title*
Enter Title

Percentage of ownership*
Enter Percentage

Middle Name
Enter Middle Name

Phone*
Enter Phone Number

Date of Birth*
Enter DOB

Last Name*
Enter Last Name

Email*
Enter Email Address

SSN*
Enter SSN

US Citizen ☐

Mailing Address

Country*
United States

City*
Enter City

Postal Code*
Enter Postal Code

State*
Enter State

Address* ●
Enter Street Address

List State(s) or Provinces person resided in past 5 yrs*
Select State(s) or Provinces

The following questions are regarding the person above.

Do you have an interest in any alcoholic beverage business or the premises of any alcoholic beverage business other than that for which you are herein applying? *

Yes ☐ No ☐

Have you been convicted of any felony in the past five (5) years or been convicted of misdemeanor directly or indirectly related to alcohol or a controlled substance within the past two (2) years? *

Yes ☐ No ☐

Are there pending proceedings against the licensee for a violation of any statute or regulation which may result in the suspension or revocation of this license(s)? *

Yes ☐ No ☐

Is the licensee in debt on the inventory to Kentucky Wholesaler responsible for the collection and payment of the tax imposed under KRS 243.884? *

Yes ☐ No ☐

Does the above individual have a 10% interest or more in any alcohol license type? (804 KAR 4:015) *

8. You will need to click submit

ADD AN OWNER/OFFICER FOR

Ownership Type*
Private

● Complete the following for the company proprietor, partner(s) and all the persons having interest in the company to be licensed. List all the owners, officers, directors, partners, managing members, members and shareholders. If privately held, show 100% of ownership. If publicly traded, list the three highest ranking officers. If non-profit, list the highest ranking director or officer.

Owner Name	Title	ADDRESS	Ownership %	Email	Phone		
Kelley Burns	Owner	500 Mero St, Frankfort, KY 40601	100	abccexternal31@gmail.com			

Cancel **Submit** ● verify information and click submit

9. The company details page will look like this, you will then click New Applications/Request

KYC Beverage Control

Home Profile **New Applications/Requests** Applications My Licenses

Kelley Burns

500 Mero St, Frankfort, KY 40601

COMPANY DETAILS

Owners/Officers

Owner Name	Ownership %	Title	Phone Number	ADDRESS	Email	
Kelley Burns	100	Owner	5027821028	500 Mero St, Frankfort, KY 40601	abccexternal31@gmail.com	

10. Click Apply

The screenshot shows the 'New Application/Request' page. A red circle highlights the 'NEW LICENSE APPLICATION' button. The page includes a navigation bar with 'Home', 'New Applications/Requests', 'My Applications', and 'Licenses'. The user is logged in as 'Kelsey Burns'. The main content area has four sections: 'NEW LICENSE APPLICATION', 'TEMPORARY LICENSE APPLICATION', 'TRANSFER OF ALCOHOL REQUEST', and 'VINTAGE SPIRITS SALE NOTICE'. Each section has an 'Apply' button.

11. You will select your name from the drop-down menu then enter your employer and click next

The screenshot shows the 'Please Select Your Company' form. It has a 'Select Company' dropdown menu with 'Kelsey Burns' selected. To the right is a 'DON'T SEE YOUR COMPANY?' link and an 'Add Company' button. Below is a 'Choose Your Employer' text input field with 'KENTUCKY EAGLE, INC.' entered.

12. You will answer the questions below and click next

The screenshot shows the 'Company Details' form. It has tabs for 'Company Details', 'Licenses', 'Affidavit', and 'Submission & Status'. The 'Company Details' tab is active. It includes fields for 'Company Name' (Kelsey Burns) and 'Employer Name' (KENTUCKY EAGLE, INC.). Below is the 'COMPANY INFORMATION' section with fields for 'Company Name', 'Street Address', 'City', 'State', 'Country', and 'Zip'. The 'Owners/Officers' section has a table with one row for 'Kelsey Burns'. The form ends with a series of yes/no questions and a 'Next' button.

Owner Name	Ownership %	Title	Phone Number	ADDRESS	Email	
Kelsey Burns	100	Owner	5027821028	500 Mero St, Frankfort, KY 40601	abcexternal31@gmail.com	Edit

13. Click the box by Special Agent or Solicitor's License and click next

Company Details Licenses Affidavit Submission & Status

Refresh

Product Type	Product Details	Half Year Fee	One Year Fee	Two Year Fee	Transitional Fee
<input checked="" type="checkbox"/> Special Agent's or Solicitor's License	This license allows an individual to sell alcohol on behalf of the distiller, rectifier, winery, or wholesaler employing them.	15.00	30.00	N/A	

Back Next

14. Complete the affidavit and click next

Company Details Licenses Affidavit Submission & Status

AFFIDAVIT
All terms and conditions text regarding the payment.

I do hereby swear or affirm, under penalty of perjury, that I am authorized to submit this application on behalf of the named applicant and that all information and statements contained therein and any attachments are true and correct to the best of my knowledge, information, and belief. I hereby swear or affirm that if the license(s) is issued, the applicant shall abide by all state and local statutes, regulations, and ordinances relating to the manufacture, sale, use, and trafficking in alcoholic beverages.

I agree to sign and file this application by electronic means with the Department in compliance with the Kentucky Uniform Electronic Transactions Act contained in KRS 369.101 to 369.120. I further understand that the Department is accepting a typed version of my name as my original signature and that I have typed my name below with intent to sign this application.

Name *

Kelsey

Back Next

15. Click Submit

Company Details Licenses Affidavit Submission & Status

Do you want to Submit Your License Application?

Back Submit

***** Once the application is approved you will receive an email. You will login to the portal to pay the fee and print the license*****