CHARITABLE COLLABORATION BREWER LICENSE APPLICATION CHECKLIST

Before completing the application packet read the information below:

• The application will be reviewed and under investigation upon filing of application.
• The license fee is due upon filing the application. We accept cash, credit card, business check, money order, or cashier’s check for walk-in customers. Mail-in customers can submit the license fee by money order, cashier’s check, or business check only.
• File the completed application in person or by mail at the ABLE Commission, 3812 N. Santa Fe Avenue, Suite 200, Oklahoma City, OK 73118, Monday thru Friday 7:30 am to 4:30 pm.
• Contact the ABLE Commission office at (405) 521-3484 or visit our website at www.able.ok.gov for questions or general information.

*A charitable collaboration brewer license shall authorize the collaborating licensed brewers and holders thereof:

To formulate, manufacture, bottle, package and store the charitable collaboration beer, or any part thereof, on the licensed premises.
To sell the charitable collaboration beer in this state to holders of beer distributor licenses.
To sell the charitable collaboration beer out of this state to qualified persons for the sole purpose of fundraising for the stated charitable purposes.
To sell the charitable collaboration beer in this state to holders of retail licenses.
To serve free samples of the charitable collaboration beer produced by the collaborating licensed brewers to visitors twenty-one (21) years of age or older on the collaborating brewery licensed premises.
To sell the charitable collaboration beer produced by the collaborating licensee brewers for either on-premises or off-premises consumption to consumers on the brewery premises, or on premises located contiguous thereto.
To sell the charitable collaboration beer produced by the collaborating licensed brewers at public events such as trade shows or festivals.
To purchase the charitable collaboration beer produced by the collaborating licensed brewers in retail containers from the holder of a beer distributor license to sell or serve in accordance with this section. Nothing in this section shall prohibit the holder of a charitable collaboration brewer license from also holding or owning an interest in the holder of a brewpub license.
No visitor may sample more than a total of twelve (12) fluid ounces of the charitable collaboration beer per day. The brewer must restrict the distribution and consumption of charitable collaboration beer samples to an area within the licensed premises designated by the brewer. A current floor plan that includes the designated sampling area must be on file with the ABLE Commission. No visitor under twenty-one (21) years of age shall be permitted to enter this designated sampling area when samples are being distributed or consumed. Sales and sampling may only occur between the hours of 10:00 a.m. and 2:00 a.m.
CHARITABLE COLLABORATION BREWER LICENSE APPLICATION

Please complete the entire form. No licenses will be issued unless the ABLE Commission is able to verify the information provided. The ABLE Commission may request additional information not requested on this application. Additional information may be required prior to the issuance of any license.

CHARITABLE COLLABORATION BREWER LICENSE AND FEE

<table>
<thead>
<tr>
<th>Charitable Collaboration Brewer License</th>
<th>$0.00</th>
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Primary Brewer License Number

Secondary Brewer License Number

2. DBA Name of Location

3. Location Address

City

County

State

Zip

4. Mailing Address

City

County

State

Zip

5. Business Phone Number

6. Alternate Phone Number

7. E-mail Address

8. Type of Owner

- Individual
- Partnership
- Limited Partnership
- General Partnership
- Corporation
- Limited Liability Company
- Tribe
- Tribal Corporation/Entity
- Other

9a. Name of Individual/Sole Proprietor (If owned by an Individual)

9b. Social Security Number

10a. Name of Business Entity (If Partnership, Corp., LLC or Tribe)

10b. Federal Employer Identification #
**ADDITIONAL INFORMATION**

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<thead>
<tr>
<th>11a. Application Contact Person</th>
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<td>11b. Application Contact Address</td>
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<td>12a. Name of the Charitable Organization:</td>
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<td>12b. Donation Proceeds will be given to:</td>
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<td>12c. Timeframe for Charity Event:</td>
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<td>13a. Where is the product going to be manufactured?</td>
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<td>13b. How many gallons will be produced?</td>
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**OWNER ACKNOWLEDGEMENT**

I, ____________________________, being duly sworn upon oath deposes and says: That he/she is the applicant who makes the above and foregoing application, that he/she has read and signed the same; knows the contents thereof and that all statements therein contained are true. Applicant(s) certifies that the statements and representations made herein are true and correct and consents that if any statements and representations herein are found to be false or omitted, that the Director may refuse to issue said license or may cause such license to be revoked forthwith at any time.

______________________________________________

Signature of Applicant & Date
LOCATION DIAGRAM

Draw a diagram of the licensed premises on this page. The diagram should include the following: outside dimensions, rooms, doorways, bars and liquor storage areas. **DO NOT SUBMIT.** Keep the drawn diagram and have it ready to present to the Agent who contacts you regarding your inspection.