

ALCOHOLIC BEVERAGE CONTROL BASIC APPLICATION FORM

City of Corbin

805 S Main Street, P.O. Box 1343

Corbin, KY 40702

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**NOTICE OF SURRENDER OF RETAIL LIQUOR / WINE / BEER
LICENSE(S)**

I _____ am the owner or the officer of the company doing business as
_____ owning the retail liquor,
wine, or beer city license number(s) _____. I hereby wish to
surrender said license(s). I understand that by doing so I relinquish all rights and claims to this
license(s) privilege issued for the premises located at _____
in Corbin, Whitley / Knox County, Kentucky, 40701.

I further understand that if I wish to reopen this business or any other new alcoholic beverage
business I shall reapply for new licenses as a new applicant.

Signature _____

Print Your Name _____

Address of Premises _____

Current Mailing Address _____

City of _____ State _____ Zip Code _____

County _____

Current Phone Number(____) _____

***I HAVE ATTACHED MY LICENSE(S) TO THIS AFFIDAVIT AND SHALL RETURN IT ALONG WITH
THIS FORM TO THE CITY OF CORBIN ABC ADMINISTRATOR.***