License Renewal Application
Revised May 2026

Applicants must complete all sections of this renewal form.

Commonwealth of Kentucky
Department of Alcoholic Beverage Control
500 Mero St. 2NW WK#21
Frankfort, KY 40601
ABC.ky.gov

LICENSE RENEWAL APPLICATION

Mailing Address:

Licensee Name:

Premises Address & Site ID #:

If the licensee has no holds or modifications, you can renew online through the Kentucky Belle External Portal system at https://abcportal.ky.gov/BELLEExternal. Detailed instructions for associating your account with your ABC license can be found at abc.ky.gov under "Licensing." You will need the Site ID and license number.

Section 1. Renewal Fees

Title of License	License Number	Current License Expires	Site ID	Annual Renewal Fee (1 Year)
Tobacco, Nicotine or Vapor Product License				$500
Total Amount Enclosed				$ _____

Note: A 2.75% convenience fee added to the total for credit card payments or a $0.35 convenience fee added to the total for EFT/ACH payments.

Section 2: Holds – Delays

- No Holds

Continue to next page.

Section 3. Requirements

Does the applicant still have a valid deed, lease, permit, management agreement or land contract for the licensed premises?

☐ Yes ☐ No

Has there been any changes which would require a new application, or has anyone who has interest in the license(s) been convicted of a Misdemeanor directly or indirectly related to alcohol beverages or controlled substances, or any Felony since this license was obtained?

☐ Yes ☐ No

Has there been any change in the ownership structure of the business?

☐ Yes ☐ No

Has there been any change in the business premises address?

☐ Yes ☐ No

Please Note: If, after a license has been issued, and there is a change in any of the facts required to be set forth in the application, a verified supplemental statement in writing giving notice of the change shall be filed with the department within ten (10) days after the change.

Section 4. Instructions

TO AVOID LOSING YOUR RIGHT TO SELL TOBACCO, NICOTINE OR VAPOR PRODUCTS, PLEASE RETURN YOUR RENEWAL WITH PAYMENT BY DECEMBER 15TH FOR PROCESSING.

- Complete the entire form, sign and date on Section 5.
- Return renewal form, all documents and payment immediately.
- **DO NOT SEND CASH!** Payment Authorization Form, Check or Money Order to be made payable to: **Kentucky State Treasurer.**

Section 5. Signature and Contact Information

Please Print Name of Licensee:_____

Day Phone: _____ Email Address: _____

Signature of Licensee: _____ Date Signed: _____