From: Helen Gordon < helen.gordon@virginiaabc.com >

Date: Thu, Mar 20, 2025 at 4:14 PM Subject: RE: FOLLOW-UP Confirmation Request for VaABC Forms and Documents received To: Maura Walsh-Copeland <Maura@walsh-copelandconsulting.com>

Good afternoon Ms. Walsh-Copeland,

Assistant Special Agent in Charge John O'Connell has confirmed that the forms you have are the most current forms.

Helen H. Gordon | Senior Paralegal | Office of Legal Counsel Office: (804) 213-4688 | Fax: (804) 494-8022 | <u>helen.gordon@virginiaabc.com</u> Virginia ABC | 7450 Freight Way, Mechanicsville, Virginia 23116 www.abc.virginia.gov

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From: Maura Walsh-Copeland <<u>Maura@walsh-copelandconsulting.com</u>>
Sent: Thursday, March 20, 2025 2:28 PM
To: MeaghanOBrien@virginiaabc.com
Subject: FOLLOW-UP Confirmation Request for VaABC Forms and Documents received

Meaghan,

I was <u>very</u> thankful for the quick and complete response to questions originally presented to Marc Haalman and responded to by your office in September 2023. The information was extremely helpful.

As a follow-up,

- I would appreciate confirmation that the attached inspection forms and GO procedure documents received are still **THE MOST CURRENT VERSIONS.**
- If any have been updated since receipt in September, 2023 I would appreciate receiving the <u>revised versions</u>.

Thank you, again, for all your help!

Maura

Maura Walsh-Copeland







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COMPLIANCE INSPECTION REPORT

LICENSEE INFORMATION

License Number:	Region:
T/A:	Agent:
	Inspection Date: <i>From:</i> // <i>70:///</i>
Phone Number:	Inspection Time: <i>From: To:</i>

By signing this statement, I am acknowledging my express consent to Special Agent(s) of the Virginia Alcoholic Beverage Control Authority to conduct a complete inspection of the licensed premises to include examining and inspecting such place and all records, invoices, and accounts therein in accordance with the provisions of §4.1-204 and 3VAC5-70-90 of the Code of Virginia.

Licensee (signature): ___

□ NO VIOLATIONS NOTED □ VIOLATIONS NOTED

_____ (print): ______

INSPECTION INFORMATION		
	YES	NO
ABC License Posted		
Designated Manager Posted		
Other Local/State/Federal Licenses/Permits Verified		
Ownership Correct		
Physical Address Correct		
Business Entity Address Correct		
Trade Name Correct		
If any answer is NO, explain		

Comments/Suggestions:	Compliance/Issues:
Licensee (signature):	(print):
Agent (signature):	(print):

COMPLIANCE INSPECTION REPORT: WINERY

LICENSE NUMBER:

TRADE NAME:

Property & equipment owner

Property size

Adequate equipment for fermenting, bottling & storage a maximum capacity of approx. gallons of wine annually. Y/N

Bonded area locations

Sales records for onsite sales for which month?

Total Distilled Spirits production for the years in gallons (or liters)

Agricultural Product used for the fermentation of wine- Grapes owned by Licensee

Agricultural Product used for the fermentation of wine- Grapes grown in VA under lease

Agricultural Product used for the fermentation of wine- Grapes purchased in VA- Not under lease

Agricultural Product used for the fermentation of wine- Grapes purchased out of state

Invoices to retail space reviewed? Y/N

ABC Excise Tax Reports reviewed? Y/N

TTB Production Reports reviewed? Y/N

Delivery/Shipper Reports reviewed? Y/N

Areas of consumption on property

Is there a tasting room at location? Y/N

Is there a restaurant at location? Y/N

Is food available? Y/N

ABC Designated Managers List posted? Y/N

ABC License(s) posted? Y/N

Other wine available other than that produced by that farm winery? Y/N

Keg Books reviewed Y/N

Authorized Distributors?

Wholesale invoices reviewed? Y/N

Does the Farm Winery engage in Contract Wine making for other Wineries? Y/N/N/A

Does the Farm Winery engage in contract Wine making with another Farm Winery to produce wine? Y/N/N/A

Agreements reviewed Y/N

Does the licensee have entertainment expenses to retailers? Y/N

Records reviewed? Y/N

Samplings Conducted at retail establishments? Y/N

Expense reports for sales/marketing reviewed? Y/N

POS Materials? Y/N





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SITE VISIT FORM

APPLICANT INFORMATION

Application #:	License Type:	
T/A:	Agent:	Region:
Address:	Site Visit Date:///	_
Phone Number:	Site Visit Time: From: To:	

By signing this statement, I am acknowledging my express consent to Special Agent(s) of the Virginia Alcoholic Beverage Control Authority to conduct, as a pre-requisite to licensure, a complete site visit of the above-listed premises to include examining and evaluating such place, inventory, records, and all applicable qualifying items.

Applicant (signature): ______ (prin

	print):
-	pinny.

REVIEWED REQUIREMENTS, LAWS, AND REGULATIONS ASSOCIATED WITH THE LICENSE

- □ INCOMPLETE/UNDER CONSTRUCTION □ FOLLOW-UP VISIT SCHEDULED
- APPLICANT HAS MET ALL REQUIREMENTS TO SUPPORT ISSUANCE OF THE LICENSE
- DEFICIENCIES NOTED

DEFICIENCIES/REMARKS/CORRECTIONS	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Agent (signature):______ (print): ______

Comments/Suggestions: _____

Applicant (signature): _____

(print):______

805-31 Rev. 6/2018.





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COMPLIANCE INSPECTION REPORT

LICENSEE INFORMATION

License Number:	Region:
T/A:	Agent:
	Inspection Date: <i>From:</i> // <i> To:</i> ///
Phone Number:	Inspection Time: <i>From: To:</i>

By signing this statement, I am acknowledging my express consent to Special Agent(s) of the Virginia Alcoholic Beverage Control Authority to conduct a complete inspection of the licensed premises to include examining and inspecting such place and all records, invoices, and accounts therein in accordance with the provisions of §4.1-204 and 3VAC5-70-90 of the Code of Virginia.

Licensee (signature): ___

□ NO VIOLATIONS NOTED □ VIOLATIONS NOTED

_____ (print): ______

INSPECTION INFORMATION		
	YES	NO
ABC License Posted		
Designated Manager Posted		
Other Local/State/Federal Licenses/Permits Verified		
Ownership Correct		
Physical Address Correct		
Business Entity Address Correct		
Trade Name Correct		
If any answer is NO, explain		

Comments/Suggestions:	Compliance/Issues:
Licensee (signature):	(print):
Agent (signature):	(print):

COMPLIANCE INSPECTIO	ON REPORT: DISTILLERY

LICENSE NUMBER:

TRADE NAME:

Property & equipment owner

Property size

Adequate equipment for distilling a maximum capacity of approx. gallons of distilled spirits annually Y/N

Bonded area locations

ABC License(s) posted? Y/N

Cash register Y/N

Computer/Internet Connection Y/N

Valid Business email address and telephone Y/N

Any changes to the approved distillery store layout? Y/N

"Do Not Sell" Stickers affixed to counter at the point of sale? Y/N

Hours of Operation

Store tastings conducted Y/N

Fee charged for participating Y/N

Amount charged?

Sampling area location

Sales records for onsite sales for which month

Total Distilled Spirits production for the year in gallons (or liters)

TTB Production Reports reviewed? Y/N

Bonded Transfers from other Distilleries Y/N

Licensee engaged in distilling for Wineries Y/N

Records Reviewed? Y/N

Licensee engaged in selling to Mixed Beverage Licensees? Y/N

Licensee Order Forms Reviewed Y/N

Does the licensee have entertainment expenses for retailers? Y/N

Samplings Conducted at retail establishments? Y/N

POS Materials? Y/N

Expense reports for sales/marketing reviewed? Y/N

Solicitors Salesman Permits reviewed? Y/N





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COMPLIANCE INSPECTION REPORT

LICENSEE INFORMATION

License Number:	Region:
T/A:	Agent:
	Inspection Date: <i>From:</i> // <i> To:</i> ///
Phone Number:	Inspection Time: <i>From: To:</i>

By signing this statement, I am acknowledging my express consent to Special Agent(s) of the Virginia Alcoholic Beverage Control Authority to conduct a complete inspection of the licensed premises to include examining and inspecting such place and all records, invoices, and accounts therein in accordance with the provisions of §4.1-204 and 3VAC5-70-90 of the Code of Virginia.

Licensee (signature): ___

□ NO VIOLATIONS NOTED □ VIOLATIONS NOTED

_____ (print): ______

INSPECTION INFORMATION		
	YES	NO
ABC License Posted		
Designated Manager Posted		
Other Local/State/Federal Licenses/Permits Verified		
Ownership Correct		
Physical Address Correct		
Business Entity Address Correct		
Trade Name Correct		
If any answer is NO, explain		

Comments/Suggestions:	Compliance/Issues:
Licensee (signature):	(print):
Agent (signature):	(print):

COMPLIANCE INSPEC	CTION REPORT: BREWERY
LICENSE NUMBER:	
Property & equipment owner	
Property size	
Adequate equipment for fermenting, bottling beer annually Y/N	and storing a maximum capacity of approx. gallons of
Bonded area locations	
Areas of consumption on property	
Is there a tasting/tap room? Y/N	
Is there a restaurant at location? Y/N	
Is food available? Y/N	
ABC Designated Managers List posted? Y/N	
ABC License(s) posted? Y/N	
Other beer available other than that produced by that brewery? Y/N	
Keg Books reviewed Y/N	
Sales records for on site sales for which month?	
Total beer production for the year in gallons (or liters)	
Invoices to retail space reviewed? Y/N	
ABC Excise Tax Reports reviewed? Y/N	
TTB Production Reports reviewed? Y/N	
Delivery/Shipper Reports reviewed? (If applicable) Y/N	
Bonded Transfers from other Breweries Y/N	
Authorized Distributors? Y/N	
Wholesale invoices reviewed? Y/N	
Product Approvals reviewed? Y/N	
Random Sample Product	
Product Approval Obtained? Y/N	
Certificate of Label Approval? Y/N	
Does the licensee have entertainment expenses to retailers? Y/N	
Records reviewed? Y/N	
Samplings Conducted at retail establishments? Y/N	
Expense reports for sales/marketing reviewed? Y/N	
POS Materials? Y/N	
Does the Brewery engage in Contract Brewing for other Breweries? Y/N	
Agreements reviewed Y/N	