



Virginia Alcoholic Beverage Control Authority
Bureau of Law Enforcement



www.abc.virginia.gov • 2901 Hermitage Road • Richmond, VA 23220 • (800) 552-3200

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): _____ (print): _____

- 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.	

Comments/Suggestions: _____

Applicant (signature): _____ (print): _____

Agent (signature): _____ (print): _____