VABC INSPECTION FORM VERIFICATION

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 | helen.gordon@virginiaabc.com

Virginia ABC | 7450 Freight Way, Mechanicsville, Virginia 23116

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From: Maura Walsh-Copeland < Maura@walsh-copelandconsulting.com >

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.

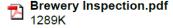
As a follow-up,

- 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 revised versions.

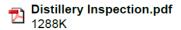
Thank you, again, for all your help!

Maura Walsh-Copeland











G.O. 101 - Organizational Structure, Duties and Responsibilities 06.19.15.pdf

G.O. 500 - Underage Buyer Operations 06.19.15.pdf 357K

G.O. 501 - Licensee Inspections 06.19.15.pdf 336K

G.O. 502 - Alcoholic Beverage License Applications 06.19.15.pdf

G.O. 503 - Banquet.Special Event Application Investigations 06.19.15.pdf

G.O. 100 - Organizational Philosophy 06.19.15.pdf 270K





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COMPLIANCE INSPECTION REPORT

LICENSEE II	NFORMATION			
License Number:	Region:			
Т/А:				
Address:		om:/		
Phone Number:	Inspection Time: Fro	om: To:		
By signing this statement, I am acknowledging my express concontrol Authority to conduct a complete inspection of the licerand all records, invoices, and accounts therein in accordance Virginia. Licensee (signature): NO VIOLATIONS NOTED UVIOLATIONS NOTED	nsed premises to include	examining and ins .1-204 and 3VAC5-	specting su 70-90 of th	uch place
INSPECTION INFORM	ATION			
	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				
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 :	tion #: License Type:			
	Agent:			
	Site Visit Date:			
Phone Numb	Site Visit Time: <i>From</i> :	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 (s	nt (signature): (print):			
□ REVIE	VIEWED REQUIREMENTS, LAWS, AND REGULATIONS ASSOCIATED WITH THE	LICENSE		
□ INCOM	COMPLETE/UNDER CONSTRUCTION FOLLOW-UP VISIT SCHEDULED			
	PLICANT HAS MET ALL REQUIREMENTS TO SUPPORT ISSUANCE OF THE LICE	NSE		
□ DEFICI	FICIENCIES NOTED			
	DEFICIENCIES/REMARKS/CORRECTIONS			
1.				
2.				
3.				
4.	, ·			
5.	,	,		
6.				
7.				
8.				
9.				
10.				
Comments/Suggestions:				
Applicant (s	nt (signature):(print):			





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COMPLIANCE INSPECTION REPORT

LICENSEE II	NFORMATION			
License Number:	Region:			
Т/А:				
Address:		om:/		
Phone Number:	Inspection Time: Fro	om: To:		
By signing this statement, I am acknowledging my express concontrol Authority to conduct a complete inspection of the licerand all records, invoices, and accounts therein in accordance Virginia. Licensee (signature): NO VIOLATIONS NOTED UVIOLATIONS NOTED	nsed premises to include	examining and ins .1-204 and 3VAC5-	specting su 70-90 of th	uch place
INSPECTION INFORM	ATION			
	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				
Comments/Suggestions:	Compliance/Issues	:		
Licensee (signature):	(print):			
Agent (signature):	(print):			

COMPLIANCE INSPECTION REPORT: BREWERY		
LICENSE NUMBER: TRADE NAME:		
Property & equipment owner		
Property size		
Adequate equipment for fermenting, bottling and storing a maximum capacity of approx. gallons of beer annually Y/N		
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		





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COMPLIANCE INSPECTION REPORT

LICENSEE II	NFORMATION			
License Number:	Region:			
Т/А:				
Address:		om:/		
Phone Number:	Inspection Time: Fro	om: To:		
By signing this statement, I am acknowledging my express concontrol Authority to conduct a complete inspection of the licerand all records, invoices, and accounts therein in accordance Virginia. Licensee (signature): NO VIOLATIONS NOTED UVIOLATIONS NOTED	nsed premises to include	examining and ins .1-204 and 3VAC5-	specting su 70-90 of th	uch place
INSPECTION INFORM	ATION			
	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				
Comments/Suggestions:	Compliance/Issues	:		
Licensee (signature):	(print):			
Agent (signature):	(print):			

COMPLIANCE INSPECTION 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 poin	nt 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 i	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 Lice	nsees? 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			