

THE COMMISSION OF GEORGETOWN-QUITMAN COUNTY

P.O. BOX 114/25 OLD SCHOOL ROAD

GEORGETOWN, GA 39854

Phone(229) 334-0903-Fax(229)334-2151

Received by _____

Date _____

2018 APPLICATION FOR LICENSE FOR THE SALE OF ALCOHOLIC BEVERAGES

1. Type of license-Please check one:

_____ New _____ Renewal (complete pages 1,2,3,4,5,6,7 &8)

2. Type of Business:

_____ Restaurant _____ Wine Tasting on Premises
_____ Manufacturer/Wholesale _____ Convenience/Supermarket Store

**A club or bar must meet the definition of a restaurant under the ordinance to be eligible for a license*

Will live entertainment be offered? _____ Yes _____ No

If yes, please explain _____

3. Administrative Fee:

New application \$255.00 _____ Renewal Application \$100.00 _____

4. License Classification & Fees-Please check all that apply:

Retail Consumption off Premises:

___ Beer and Wine \$1000.00 (class II license) _____ Distilled Spirits \$5000.00 (Class III license)

Retail Consumption on Premises:

___ Beer & Wine \$2000 (Class IV license) _____ Distilled Spirits \$3500 (Class V license)

Wholesale:

___ Beer, Wine & Distilled Spirits \$3500 (Class I license)

5. Business Information:

Business Name _____

Business Advertising Name _____

Location Address _____ Phone _____

City _____ State _____ Zip Code _____

Mailing Address _____ Phone _____

City _____ State _____ Zip Code _____

5. Type of Ownership (Please mark appropriate box and fill out section a, b, c, or d as indicated):

___ Individual(a) ___ Partnership(b) ___ Limited Liability Co(c) ___ Corporation(d)

6. Individual:

Full Legal Name _____

Mailing Address _____ Physical Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Alternate Phone _____

Race _____ Sex _____ DOB _____ SSN _____

7. Partnership/LLC:

All applicants who are non-individual persons shall list the names, addresses and ownership interest of each owner of a 5% or greater interest.

Partnership or LLC Name _____

Mailing Address _____ Physical Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Alternate Phone _____

Partners:

1. Full Legal Name _____ % Interest _____

Mailing Address _____ Physical Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Alternate phone _____

Race _____ Sex _____ DOB _____ SSN _____

2. Full Legal Name _____ % Interest _____

Mailing Address _____ Physical Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Alternate Phone _____

Race _____ Sex _____ DOB _____ SSN _____

(Attach additional pages if necessary)

8. Corporation:

All applicants who are non-individual persons shall list the names, addresses and ownership interest of each owner of a 5% or greater interest.

Name of Corporation _____
(Name should be shown exactly as in Articles of Incorporation or Charter)

Date of Incorporation _____ Place of Incorporation _____

Mailing address. _____ Physical Address _____

City _____ State _____ Zip Code _____

Home Phone. _____ Alternate Phone. _____

9. Property:

Owner of the property (Land & building) where the business will be located

Full Legal Name _____

Mailing Address. _____ Physical Address _____

City _____ State _____ Zip Code _____

Home Phone. _____ Alternate Phone _____

Is the commercial space where the business is to be located rented or leased?

___ Yes ___ No If yes, please state name of the lessee.

Full Legal Name. _____

Mailing Address. _____ Physical Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Alternate Phone _____

10. Residency/Age requirement:

Is there any party identified in Question 7 or Question 9 that is not a legal resident of the United States and at least twenty-five (25) years of age?

___ Yes ___ No If yes, please give full details on separate sheet.

If not a U.S. Citizen, can they legally be employed in the United States?

___ Yes ___ No If yes, please explain:

11. Disclosure of previous denials:

Is there anyone connected with this business that has applied for a beer, wine and/or liquor license from Georgetown-Quitman County or other City or County in the State of Georgia or other state or political subdivision and been denied such?
___ Yes ___ No If yes, please explain:

12. Disclosure of licenses held:

Is there anyone connected with this business who holds another alcohol license in any retail category or any license under any wholesale category?
___ Yes ___ No If yes, please explain:

13. Disclosure of felony/other convictions or offenses: FAILURE TO MAKE FULL DISCLOSURE IN RESPONSES TO THESE QUESTIONS MAY RESULT IN DENIAL OR SUBSEQUENT REVOCATION OF THE LICENSE.

a. Have you ever been arrested, indicted, convicted or entered a plea of nolo contendere for any offense by any State, County, City, Federal or Foreign Governmental Authority? (Do not include minor traffic violations.)

___ Yes ___ No If yes, please explain in detail and include dates, place, charges and disposition.

b. Is there anyone connected with this business that has entered a plea of nolo contendere or been convicted of a felony or a crime involving moral turpitude?

___ Yes ___ No If yes, please explain in detail and include dates, place, charges and disposition.

c. Is there anyone connected with business that has entered a plea of nolo contendere or been convicted of any State, Federal or Local ordinance pertaining to the manufacture, possession, use, transportation or sale of malt beverages, wine, or intoxicating liquors, or the taxability thereof within the last ten years immediately prior to the filing of this application?

___ Yes ___ No If yes, please explain in detail and include dates, place, charges and disposition.

d. Is there anyone connected with this business that has been found in violation of the ordinances of Georgetown-Quitman County, or any other county or municipality, governing alcoholic beverages licenses with the last five years immediately prior to the filing of this application?

___ Yes ___ No If yes, please explain in detail and include dates, place, charges and disposition.

e. Is there anyone connected with this business that has been convicted under any Federal, State or County law for a criminal offense involving alcoholic beverages, gambling or tax law violations?

___ Yes ___ No If yes, please explain in detail and include dates, place, charges and disposition.

f. Has any place of business engaged in the sale of distilled spirits, wine or malt beverages with which you have been associated ever been cited or charged at any time with any violation of Georgia law or Federal law or municipal law or any rule or regulation or ordinance concerning the sale of such products?

___ Yes ___ No If yes, please explain in detail and include dates, place, charges and disposition.

14. Attached a certified scale drawing of the proposed premises by a registered land surveyor or professional engineer, showing the distance requirement from church and school.

15. Attach evidence of ownership of the building or proposed building or a copy of the lease if the applicant is leasing the building.

16. If the applicant is a franchise, attach a copy of the franchise agreement or contract.

17. If establishment is a restaurant, attach a copy of the menu(s).

18. For Building:

a) If the building is complete, attach copies of detailed site plans of said building including outside premises and floor plan.

b) If the building is proposed, attach copies of proposed site plan and specification and building permit of the proposed building.

c) Show all areas where alcoholic beverages may be sold, served or consumed.

APPLICANT'S/AGENT OATH:

I, _____, solemnly swear, subject to the penalties for false swearing as provided under Georgia Law, all information required in this application and supporting documents for a license to sell alcoholic beverage in Georgetown-Quitman County, Georgia is true and correct to the best of my knowledge and I fully understand that any false information may cause the denial or revocation of said license.

Print applicant's full name as signed below

Signature of Applicant

Title

Date

Sworn to and subscribed before me

this ____ day of _____, 20____.

Notary Public (SEAL)

Expire

ACKNOWLEDGEMENT

I authorize the Unified Government of Georgetown-Quitman County and/or the Sheriff Department of Quitman County to conduct a fingerprint based criminal history record check of me. I understand that the Unified Government of Georgetown-Quitman County and/or the Sheriff Department of Quitman County will send my fingerprints to the Georgia Crime Information Center for a search of criminal history information in its files and to the Federal Bureau of Investigation for a search of its files when a federal record check is so authorized.

I understand and authorize that the electronic results of this fingerprint check will be received by Unified Government of Georgetown-Quitman County and/or the Sheriff Department of Quitman County for determining my suitability for the an alcohol license.

I further understand that Unified Government of Georgetown-Quitman County and/or the Sheriff Department of Quitman County will maintain a copy of my record and that my records is subject public disclosure under an open records request.

By: _____ Date: _____

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2

- A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at:
<http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- A driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document for proof of or documentation of identity, that document will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]

NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant that is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history record check for a non-criminal justice purpose (such as an application for a job or license, immigration or naturalization, security clearance, or adoption), you have certain rights which are discussed below.

- You must provide written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- If your fingerprints/biometrics are used to conduct a FBI national criminal history check, you are provided a copy of the Privacy Act Statement that would normally appear on the FBI fingerprint card.
- If you have a criminal history record, the agency making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy if the information in the record.
- The agency must advise you of the procedures for changing, correcting, or updating your criminal history record as set forth in Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a Georgia or FBI criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the agency denies you the job, license or other benefit based on information in the criminal history record.
- In the event an adverse employment or licensing decision is made, you must be informed of all information pertinent to that decision to include the contents of the record and the effect the record had upon the decision. Failure to provide all such information to the person subject to the adverse decision shall be a misdemeanor [O.C.G.A 35-3-34(b) and 35-3-35(b)].

You have the right to expect the agency receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of state and/or federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

If the employment/licensing agency policy permits, the agency may provide you with a copy of your Georgia or FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, information regarding how to obtain a copy of your Georgia, FBI, or other state criminal history may be obtained at the GBI website (<http://gbi.georgia.gov/obtaining-criminal-history-record-information>).

If you decide to challenge the accuracy or completeness of your Georgia or FBI criminal history record, you should send your challenge to the agency that contributed the questioned information. Alternatively, you may send your challenge directly to GCIC provided the disputed arrest occurred in Georgia. Instructions to dispute the accuracy of your criminal history can be obtained at the GBI website (<http://gbi.georgia.gov/obtaining-criminal-history-redcord-information>).

I HAVE READ & RECEIVED A COPY OF NON-CRIMINAL JUSTICE PRIVACY RIGHTS

SIGNATURE

DATE

PRIVACY ACT STATEMENT

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

I HAVE READ & RECEIVED A COPY OF THE PRIVACY ACT STATEMENT

SIGNATURE

DATE

CODE ENFORCEMENT OFFICER PREMISE & STRUCTURE

INSTRUCTIONS: Under oath, each question must be fully answered. If space provided is not sufficient, answer on a separate sheet and indicate in the space provided that a separate sheet is attached.

1. Type of Business:

Restaurant Club Wine Tasting on Premises

Manufacturer/Wholesale Convenience Store Supermarket Other *

*Please explain _____

2. Full Legal Trade Name of Business _____

Mailing Address _____ Physical Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Alternate Phone _____

3. Is this location within a commercial zoning district?

Yes No

Please indicate zoning classification: _____

4. Does the completed building or the proposed building comply with the ordinances of Georgetown-Quitman County, regulations of the State Revenue Commissioner and Laws of the State of Georgia?

Yes No

If no, please explain reason for non-compliance and proposed methods to rectify the same:

6. (a) Does the building in which business is to be located contain sufficient lighting so that the building itself and

the premises on all sides of the building are readily visible at all times from the front of the street on which the building is located as to reveal all of the outside premises of such building?

Yes No

(b) Is the building illuminated so that the interior of the business is visible day and night?

Yes No

If the answer is no to either (a) or (b) or both above, please explain proposed methods to rectify the insufficient lighting no, please explain reason for non-compliance and proposed methods to rectify the same: _____
