

City of Elberton
2007 Application for Alcoholic Beverage License
For New or Changes to the Existing License

This license is a privilege conditional on the holder meeting all standards for such licenses and operating regulations applicable thereto set out in city ordinances and Georgia Law. Failure to meet such standards or to comply with such operating regulations shall subject the holder to the license being revoked following notice and hearing.

CALCULATION OF BASIC LICENSE FEE

Classification (check all that apply)	License Fee Jan 1 - June 30	License Fee July 1 - Dec 31
On-Premises Consumption:		
<input type="checkbox"/> Beer/malt beverages	\$ 500.00	\$ 250.00
<input type="checkbox"/> Wine	\$ 500.00	\$ 250.00
<input type="checkbox"/> Distilled spirits	\$ 1000.00	\$ 500.00
Retail:		
<input type="checkbox"/> Beer/malt beverage package	\$ 500.00	\$ 250.00
<input type="checkbox"/> Wine package	\$ 500.00	\$ 250.00
<input type="checkbox"/> Distilled spirits package*	\$ 5000.00	\$ 2500.00
*\$2,500 cash bond is required		
Bond (new business and/or addition classification)		
<input type="checkbox"/> \$250.00 per classification	\$ _____	\$ _____
<hr/>		
Total License Fee due	\$ _____	\$ _____

PURPOSE OF APPLICATION

New Business New Owner License Classification Change/Addition Other

BUSINESS INFORMATION

Business Name _____

Type of Business Individual Corporation Partnership

Business Location Address _____

Business Mailing Address _____

GA Sales Tax Number _____

F.E.I. Number _____

Contact Number: Day _____

Night _____

Fax Number _____

E-mail Address _____

OWNER/APPLICANT INFORMATION

Any person with more than a five percent (5%) interest in a business, either directly or indirectly shall provide the following information (this page may be duplicated, if needed):

Name _____

Date of Birth _____

Social Security Number _____

Motor Vehicle Operator's License No. _____

(Attach photocopy of license)

Address of Residence _____

Contact Number _____

Do you or any other owner, or immediate family have any interest in any other business licensed to sell alcoholic beverages () No () Yes, If so, provide business name and address:

OWNER/APPLICANT'S RECORD OF EMPLOYMENT FOR PAST FIVE YEARS

Employer _____ Position _____

Address _____

From _____ To _____

Employer _____ Position _____

Address _____

From _____ To _____

MANAGER INFORMATION

Name _____

Date of Birth _____

Social Security Number _____

Motor Vehicle Operator's License No. _____

(Attach photocopy of license)

Address of Residence _____

Contact Number _____

MANAGER'S RECORD OF EMPLOYMENT FOR PAST FIVE YEARS

Employer _____ Position _____

Address _____

From _____ To _____

Employer _____ Position _____

Address _____

From _____ To _____

GENERAL INFORMATION

Has the applicant/owner, manager or anyone connected therewith been cited, charged, or convicted at any time with any violation of City, County, State, or Federal ordinance, rule, regulation or Law? () No () Yes. If yes, provide details.

Has the applicant/owner provided a list of employees and understands that any change in employees will be reported to the office of the City Clerk immediately (See Employee Listing Form)? () Yes () No, why?

FOR WINE POURING AND DISTILLED SPIRITS LICENSE ONLY (Skip this section unless you are applying for wine pouring or distilled spirits license) **Every retail dealer in distilled spirits package shall post a cash bond in the sum of \$2500.00 at time of making application for license.** Bond Attached () Yes () No, why? _____

List the full name and address and other pertinent information of the owner(s) of the building and the land and the name and address of all lessors and sublessors. Attach one copy of each lease or deed concerning the building and land.

Owner, lessor, sublesser _____

Address _____

Payments and Interest _____

List all other businesses engaged in the sale of alcoholic beverages that any of the persons, firms, or corporations herein listed are interested in, by, or associated with in any way whatsoever.

Name _____

Business _____

Address _____

Interest _____

Attach a surveyor's statement or plat satisfactory to the City Manager describing the normal way of travel by street, road, or highway from the proposed premises to the nearest school and church buildings in order to determine whether or not there is compliance with the restrictions. Retail and distilled spirits package licenses shall also include in the certificate or plat the distance to the nearest wall of any private residence within 100 feet of the proposed premises.

List the names and addresses of all persons having any beneficial ownership interest in and to the land and building on and in which the business is located and the type and percentage of the interest.

Name _____

Address _____

Interest _____

How much of the capital of this business is borrowed and from whom? Attach the required financial statement of that person or entity if other than a bank. Also attach a copy of any note or other instrument evidencing a said loan.

Name _____

Address _____

Amount & Terms _____

SWORN OATH

I do solemnly swear, subject to criminal penalties for false swearing, the statements and answers made to the foregoing questions in this application for a Alcoholic Beverage License(s) are true and complete and no false or fraudulent statement or answer is made herein to procure granting of a license, that any license issued pursuant to this application is conditioned upon the truth of the answers and statements made herein and that any false answers and statements herein shall constitute cause for suspension or revocation of any license issued pursuant to this application. Should any changes occur during the year for which a license is issued pursuant to this application, which require a different answer to any question contained in this application, such change will be reported as a written amendment to this application within five (5) days of the change. The failure to make such amendment shall be a cause for the revocation of any license issued, and I so understand.

I do further swear that I am at least twenty-one (21) years of age, of good moral character and a citizen of the United States. **I have not been convicted** of a felony, a lesser crime involving moral turpitude, or any violation of the law of this state or any other state, relating to the sale of alcoholic beverages, or the possession, distribution, transportation, or manufacture, or sale of a controlled or dangerous substance **within the ten (10) year period** immediately preceding the filing of an application for licenses. Furthermore, **I have not employed anyone that has been convicted** of a felony, a lesser crime involving moral turpitude, or any violation of the law of this state or any other state, relating to the sale of alcoholic beverages, or the possession, distribution, transportation, or manufacture, or sale of a controlled or dangerous substance **within the five (5) year period** immediately preceding the filing of an application for licenses. A plea of nolo contendere or the forfeiture of a bond shall be considered a conviction for the purposes of this license. I shall be active in, and solely responsible for the management and operation of the business for which the licenses is granted. I understand that I must meet all qualifications when renewing license. I understand that loss of qualifications during the term of a license shall be grounds for revocation or for denial or renewal.

I understand that I am responsible for obtaining all state permits (if required) and shall attach proof of its exemption status as granted by the Internal Revenue Service. I may also be required to provide additional information to verify proof of non-profit status.

Signature_____

Sworn to and subscribed before me this_____day _____2006.

Notary Public_____ Expire Date_____

A separate form must be completed for whomever the license is issued to and the agent or designated manager for individual business or partnerships. Corporations should complete forms for officers and agent or the designated manager. In addition any employee of the business may be required to comply with this requirement as determined by the City Manager. Any owner with a five- percent (5%) or more interest in the business will complete form. **THIS FORM MAY BE DUPLICATED, IF NEEDED.**

**REQUIRED FOR ANY BUSINESS MAKING CHANGES TO EXISTING
ALCOHOLIC BEVERAGE LICENSE**

(Applies to change in owner, manager, store name, classification)

If the applicant is requesting an alcoholic beverage license of any classification for the first time, the applicant must print in the legal organ of the county the following advertisement once (1) a week for two (2) consecutive weeks.

Sample Ad:

Notice of Application

I (name/names), the owner/operator of (business name/address) do hereby state that I have made application for a (type of classification) license with the City of Elberton.

(Signature/date of owner)

**FOR INFORMATIONAL PURPOSES ONLY
(OFFICE USE ONLY)**

CITY CLERK:

- Application complete with all required attachments
- Fee(s) Paid
- Bond(s) Paid, if applicable
- Copy of Ordinance 2104 and Resolution of Fines supplied to applicant.
- Copy of monthly report form and employee listing form provided to applicant.

PLANNING/ZONING:

- In B1 or B2 Zone
- Distance requirements met
- Certified Letter sent to applicant in regard to polling place distance requirements (if applicable)

BUILDING INSPECTION/FIRE:

- Meets all building and life safety codes
- Has valid food service permit from the Elbert County Board of Health (if required)
- Meets interior lighting requirements, initially
- Meets interior visibility requirements, initially
- Has a public toilet with posted signs advertising use by public
- Posted signs for prohibiting on all underage sales (on site consumption), minors, and manager (retail distilled spirits), as applicable.
- No exterior signs, initially

CITY MARSHAL:

- Fingerprinting completed on license holder/applicant, as required
- All amusement machines licenses posted
- Notified license holder/applicant of Occupational tax license posting requirements

POLICE:

- Background check completed on license holder/applicant
- Certified Letter sent to applicant

CITY MANAGER

- Recommend approval of application to license holder
- Do not recommend approval of application to license holder (why?) _____

MAYOR AND COUNCIL:

- Approved, date _____
- Disapproved (why?) _____

**FOR INFORMATIONAL PURPOSES ONLY
(OFFICE USE ONLY)
CITY MARSHAL - PERIODIC INSPECTION**

At least quarterly the city will verify the following and provide original checklist to the City Clerk.

- Alcoholic beverage licenses posted
- Licenses for amusement machines posted/match
- Occupational tax license posted
- Required postings of prohibition of underage sales (all), minors (on site consumption) and manage (retail distilled spirits)
- Meets interior lighting requirements
- Meets visibility requirements
- No exterior signs or advertising brand, price, etc. of alcoholic beverages
- Public restroom available
- No broken packages for sale in retail distilled spirits package establishment
- Retail distilled spirits package requirements on product sales
- No minors in businesses with on site consumption licenses without parent or guardian
- Meets retail distilled spirits package requirements prohibiting certain activities

Name of Business

Street Address

Inspection Conducted by

Date of Inspection