

EFFINGHAM COUNTY, GEORGIA

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

BEFORE THE UNDERSIGNED ATTESTING OFFICER DULY AUTHORIZED BY LAW TO ADMINISTER OATHS, PERSONALLY COMES THE PETITIONER FOR A LICENSE TO CONDUCT THE BUSINESS DESCRIBED BELOW AND, BEING FIRST DULY SWORN, ON OATH, SAYS THAT THE INFORMATION GIVEN AND THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE, CORRECT, AND COMPLETE.

Application is hereby made for a business license for the calendar year 20__ to do business within Effingham County as a dealer in alcoholic beverages as indicated below:

1.

<u>Type of business to be operated</u>	<u>License Fee</u>
_____ Retail beer & wine sale by the drink	\$ <u>1250.00</u>
_____ Retail Liquor sale by the drink	\$ <u>2500.00</u>
_____ Retail Beer, Wine and Liquor sale by the drink	\$ <u>3750.00</u>
_____ Wholesale License	\$ <u>1000.00</u>
_____ Retail Beer & Wine sale by package	\$ <u>1250.00</u>
_____ Farm Winery, sale by package and drink	\$ <u>1250.00</u>

2.

<u>Initial Application Fee</u> Beer, Wine, Liquor	\$ <u>250.00</u>
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3.

Renewal Application Fee	\$ <u>50.00</u>
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Exterior Sign Fee	\$ <u>25.00</u>
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Advertising Fee	\$ <u>30.00</u>
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6. Name of Business _____ Date _____

7. Is name of business registered with the Clerk of Superior Court, Effingham County, GA? _____

8. Location of Business: _____

9. Name of applicant _____ Age _____ Date of Birth _____
Social Security Number _____

10. Name of owner of Business _____ Home Phone _____
Home Address _____

11. Is the business incorporated? _____ If so, where and what date? _____

12. Name of manager or operator? _____
Home Address _____ Home Phone _____

13. Name and addresses of all persons having an interest in said business, including the names and addresses of all stockholders, if a corporation. (attach additional sheet if necessary) _____

14. What interest do such persons have? _____

15. Name of landlord of the business location _____
Landlord's address _____ Home Phone _____

16. Name of owner of said location _____
Owner's Address _____ Phone Number _____

17. In whose name will the income taxes be due on profits arising from the operation of said business?

18. In what manner will the manager or operator of said business be compensated? _____

19. By whom will such compensation be paid? _____

20. What other kinds of businesses will be conducted at said location? _____

21. What are the names and addresses of the persons who will conduct such other kinds of businesses?

22. Has application been made for the required State licenses? _____

23. Is this business location within 200 yards of any church, school building or school grounds, alcohol treatment centers, child daycare facility or housing authority property? _____

24. Has the applicant or any person connected with or having an interest in said business:

a. Ever been convicted of any violation of law; other than traffic violations, in any locality? _____

b. Ever served time in prison, or other correctional institution? _____

c. Ever had any alcoholic beverage license suspended or revoked at any time in any locality? _____

25. If the answer to any part of the above question is "yes" for the applicant or any person connected with or having an interest in said business, describe circumstances in detail for each person (Attach sheet if necessary) _____

26. Give the names and addresses of three citizens of Effingham County as references:

27. If a renewal, the information herein is different from the information given in the original license application in the following particulars:

ALL OF THE FOREGOING INFORMATION IS HEREBY GIVEN AND ALL OF THE FOREGOING STATEMENTS ARE HEREBY MADE AN OATH, WILLFULLY, KNOWINGLY AND ABSOLUTELY, AND THE SAME IS AND ARE HEREBY SWORN TO BE TRUE UNDER PENALTY FOR FALSE SWEARING AS PROVIDED BY LAW.

Sworn to and subscribed before me this _____ day of _____, 20 ____.

Applicant Signature

Notary Public

My commission expires

NOTICE: The applicant for retail license shall be a citizen of the United States, a resident of Effingham County, Georgia, and the owner of the business or if a corporation, partnership or other legal entity is the owner, a substantial and major stockholder or the applicant may be the manager of the business charged with the regular operation of said business on the premises for which the license is issued.

IMPORTANT: The applicant for an alcoholic beverage license must attach hereto a valid check or money order payable to Board of Commissioners of Effingham County in the amount of the license fee to be due if said license is granted together with other applicable charges as shown below.

(FOR OFFICE USE ONLY)

Date application received _____ Amount Paid: License Fee \$ _____
Exterior Sign \$ _____
Advertising \$ _____
Total Fees \$ _____

INSPECTIONS DEPARTMENT: _____ Approved _____ Disapproved By: _____

SHERIFF: _____ Approved _____ Disapproved By: _____

COMMENTS: (Attach separate page if necessary) _____

This application is _____ Approved _____ Disapproved. If approved, authorization is hereby given to issue license. (Date) _____

ADMINISTRATOR DATE