## APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE FULTON COUNTY, GEORGIA

1. TYI	PE OF LICENSE -	[ ] Wine and Malt Be [ ] Malt Beverage [ ] Wine [ ] Distilled Spirits [ ] Brew Pub	everage	[]Co []Ma	etail holesale onsumption on the Premises anufacturer I anufacturer II
2 Bus	siness or Trade Name				
3 Cor	porate Name				
	dress			Suite	or Unit Number
5.					
City	/		State		Zip Code
6 Ma	ailing Address Suite or Unit Number		or Unit Number		
7 City	,		State		Zip Code
8 Squ	uare Footage	Parking Spaces	Location		District
	wned as a corporation,	where and when charte	Where	nt	When
	Secretary		Treasurer		
Princ	ipal Stockholders (20%	or more of the stock of	the corporation,	if none so	o state)
	Name	%	Name		%
	Name	%	Name		%
10. Th	ne following information (Attach additional sh	must be furnished for e eets if necessary)	ach owner, partr	ner or prin	ciple stockholder:
	Full Name of Owner				
	Residence Address o	f Owner			
	Phone Residence	Busi	ness	Fax	
	Date of Birth	Soci	al Security Num	oer	
	Place of Birth	Leng	oth of Residence	(Fulton C	County/ Georgia)
	Is owner an Americar	Citizen? []YES	[] NO		

	Is owner an Alien lawfully admitted for the permanent resident status? []YES []NO						
Is owner, spouse or minor child employed by Fulton County? []YES []NO							
	Is owner related to a Fulton County employee? [] YES [] NO If yes, give name and relationship:						
	Name Relationship						
	Present occupation of owner	ſ					
	Prior business(es) of owner for preceding 10 years						
Name and address of 5 persons who have known owner for 10 years:							
Name		Address					
Name		Address					
Name		Address					
Name		Address					
Name		Address					
11. lf j	person other than the owner w	ill be the license hold	er, the following information must be submitted:				
	Full Name of proposed licens	se holder					
	Residence Address of propo	sed license holder					
	Phone						
	Residence	Business	Fax				
	Date of Birth	Social Se	ecurity Number				
	Place of Birth	Length of	f Residence (Fulton County/ Georgia)				
	Is proposed license holder an American Citizen?[]YES []NO						
	Is proposed license holder an Alien lawfully admitted for the permanent resident status?[] YES [] NO						
	Is proposed license holder, s	proposed license holder, spouse or minor child employed by Fulton County? []YES []NO					
	Is proposed license holder related to a Fulton County employee? []YES []NO If yes, give name and relationship:						
	Name	F	Relationship				
	Present occupation of propos	sed license holder					

Name and address of 5 persons who have known proposed license holder for 10 years:

Name	Address		
Name	Address		
	sed license holder, or relative thereof by or manufacturer of alcoholic beverages		
If yes, give particulars:			
If yes, give particulars: 14. Has owner or prop	rage license suspended or revoked? [ ]	, charged, convicted, pled	
Municipal, County, Sta	ate or Federal Court? []YES []NO		
15. Bank to be used b	by business, include branch address:		
	s of any person, firm, or corporation, oth s license is requested. Give the nature a		any interest in the
Name	Address	Nature	Amount
Name	Address	Nature	Amount

17. Is there an existing agreement for the sale or transfer of this license, if granted, to another person, firm or corporation? []YES []NO

lf	yes,	give	particulars:	

18. Are finances for the proposed business owned or borrowed?\_\_\_\_\_

If borrowed, give the name of the lender:\_\_\_\_\_

## CERTIFICATION

The undersigned hereby certifies that he/she is the \_\_\_\_\_\_ of

Title

\_\_\_\_\_and is authorized to sign this application on behalf of the applicant.

Business Name

The undersigned further certifies that:

I have read the Fulton County Alcohol Beverages Code and a copy will be maintained on the premises, and each and every employee will be required to be familiar with said regulation;

I will comply with all laws, rules and regulations of the United States, the State of Georgia, and Fulton County, now in force or which may hereafter be promulgated or enacted, regulating and governing the sale of distilled spirits, wine and malt beverages.

I understand that any license issued shall cover the period of one year commencing the 1<sup>st</sup> day of January and expiring December 31, and that no license shall be assignable or transferable, nor am I entitled to a rebate of the license fee or any portion thereof by reason of the revocation of said license, or for any other reason.

I further understand that making false or fraudulent statements and/or representations may subject me to criminal and/or civil penalties including a fine and/or imprisonment.

Submitted here with is the sum of \$ \_\_\_\_\_\_ to cover the **ESTIMATED** cost of the newspaper advertising on behalf of this application. Any remainder will be paid prior to the issuance of the license. Any overage in excess of \$1.00 will be refunded.

Submitted herewith in either check or money order payable to Fulton County, Georgia is the sum of \$\_\_\_\_\_\_ as payment in full for the license fee and to include the amount of \$816.00 to cover investigation costs and \$30.00 for a fire inspection.

I understand that if for any reason a license should not be granted, the sum of \$\_\_\_\_\_\_ (license fee) tendered hereunder shall be refunded, but that advertising costs which have been expended and the sum of \$846.00 will be retained by Fulton County to defray investigation expenses and fire inspection expenses.

I solemnly swear that the facts stated in the above and foregoing application for a license in unincorporated Fulton County, Georgia, are true and correct.

Signature of Applicant

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

Notary Public

My commission expired: \_\_\_\_\_