

City of Elberton

203 Elbert Street, P. O. Box 70 Elberton, Georgia 30635 Phone: (706) 213-3100 Fax: 706-213-3125

www.cityofelberton.net

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE Temporary License for Special Events

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:

Classification	Fee Amount	Check all that apply
Temporary, Beer/Malt	\$100.00	
Temporary, Wine	\$100.00	
Temporary, Distilled Spirits	\$250.00	
TOTAL DUE:		

APPLICANT/ORGANIZATION'S INFORMATION:

Name of Applicant:	
Organization Name:	
Type of Organization (Non-profit, For-profit):	
Organization Address:	
DETAILS OF EVENT:	
Type of Event (concert, fundraiser, etc.):	
Location of Event:	Expected # of People:
Dates of Event:	Times of Event:
Name of Property Owner:	Attach permission letter from owner
Public Assembly Permit Required: No	Yes, attach copy
Waiver for Open Container Required:	No Yes, attach copy Subject to Elberton Code Section 4-225(b)
Applicants Signature:	Date:

SWORN OATH AND ACKNOWLEDGEMENT

*To be completed by Applicant.

I solemnly affirm, 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 the City of Elberton, 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. 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.

I further affirm that I am at least twenty-one (21) years of age and a legal resident of the United States. I have not been convicted of a felony or any violation of the law of this state or any other state, relating to the sale of alcoholic beverages, or possession, distribution, transportation, or manufacture, or sale of a controlled substance within the ten (10) year period immediately preceding the filing of this application. Furthermore, I will not employ anyone that has been convicted of a felony, or any violation of the law of this state or any other state, relating to the sale of alcoholic beverages, or possession, distribution, transportation, or manufacture, or sale of a controlled substance within the five (5) year period immediately preceding the filing of this application.

I acknowledge that I have read and reviewed Section 4-240, Section 225 and the Non-Criminal Justice Applicant's Privacy Rights and Privacy Act Statement as provided on page 5-7. I hereby certify under the pains and penalties of perjury that the above is true and accurate information, and that I will be responsible for the proper observance of the laws governing the dispensing of such alcoholic beverages.

I also acknowledge that I will be required to attend an informational presentation concerning the city, state and federal laws, rules and regulations within 90 days of license issuance.

Print Full Name as Signed Below	Date	
Signature of Applicant	Title	
(SEAL)	SWORN TO AND SUBSCRIBED BEFORE ME THIS DAY OF	
	NOTARY PUBLIC	
	My Commission Expires:	

E-VERIFY AFFIDAVIT Pursuant to O.C.G.A. 36-60-6(d)

*To be completed by all owners of business.

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for license, permit, or other document required to operate a business in O.C.G.A. 36-60-6(d):

Cneck	one	
	a.	On January 1, of previous year, the individual, firm, or corporation employed more than ten (10) employees
	b.	On January 1, of previous year, the individual, firm, or corporation employed ten (10) or fewer employees.
accorda undersi	nce gne	e employer has registered with and utilizes the federal work authorization program in e with the application provisions and deadlines established in O.C.G.A. 36-60-6. The ed private employer also attests that its federal work authorization user identification d date of authorization is as follows:
Name o	of P	rivate Employer
Federal	W	ork Authorization User Id No Date of Authorization
	I he	ereby declare under penalty of perjury that the foregoing is true and correct.
Signatu	ire (of Authorized Officer or Agent
Print N	amo	e of and Title of Authorized Officer, or Agent
(SEAL)		SWORN TO AND SUBSCRIBED BEFORE ME THIS,,
		NOTARY PUBLIC
		My Commission Expires:

To register for the E-Verify Program, go to the U.S. Citizenship and Immigration Services website (www.uscis.gov).

SAVE AFFIDAVIT Affidavit Verifying Status for Public Benefit Pursuant to O.C.G.A. 50-36-1(E)(2)

*To be completed by all owners of business.

By executing this affidavit under oath, as an applicant for a license, permit or other public benefit as referenced in O.C.G.A. 50-36-1, from the City of Elberton, Georgia, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

Select one:					
I am a United States citizen. Please http://law.ga.gov/immigration-repor	e see link for acceptable forms of identification: ts				
	I am a legal permanent resident of the United States. Please see link for acceptable forms of identification: http://law.ga.gov/immigration-reports				
with an alien number issued by th	igrant under the Federal Immigration and Nationality Act e Department of Homeland Security or other federal link for acceptable forms of identification: ts				
My alien number issued by the Department of Homeland Security or other federal immigration agency is:					
	tes that he or she is 18 years of age or older and has provided as required by O.C.G.A. 50-36-1(e)(1), with this affidavit.				
The secure and verifiable document provided	d with this affidavit can best be classified as:				
makes a false, fictitious, or fraudulent statem	ath, I understand that any person who knowingly and willfully nent or representation in an affidavit shall be guilty of a sminal penalties as allowed by such criminal statute.				
Signature of Applicant	Date				
Print Name of Applicant	Name of Business				
(SEAL)	SWORN TO AND SUBSCRIBED BEFORE ME THIS,				
	NOTARY PUBLIC				
	My Commission Expires:				

Section 4-240 Applications

- a) Individuals may be issued a temporary license for the sale of alcoholic beverages for onpremises consumption only by the council in accordance with the requirements of this article; *Ordinance* 2205, *June*, 2019.
- b) The applications for a temporary license for sale of alcoholic beverages for on-site consumption only shall be the same as that for a regular license.
- c) The application shall include a length of time request, or three days, whichever is shorter. After the expiration of such period, the temporary permit shall expire.
- d) The permit described hereunder may be applied for and granted no more than six times per 12-month period.
- e) The license fee for such permit shall be set from time to time by the Mayor and Council per classification requested. *Ordinance 2205, June, 2019*.
- f) The temporary permit granted under this article shall be deemed to be a privilege permit. The application shall be processed in accordance with his chapter and shall be presented to Council, which may take such action, as it deems appropriate. The council shall also set the days and hours of operation for this temporary permit.
- g) The applicant shall also comply with all applicable laws of the State of Georgia related to this application and shall obtain all necessary state permits.

Section 4-225 Open Container Prohibited

- a. It shall be unlawful for any person to have in his or her possession any alcoholic beverages in any open container while on the public streets, sidewalks, or rights-of-way, or in any public or semipublic parking facility within the city.
- b. This prohibition shall not apply to any exceptions or exemptions as may be granted by the Council for special events within the city.
- c. This prohibition shall not apply to patrons of a sidewalk café as defined in the applicable zoning code, if such establishment is otherwise licensed to sell alcoholic beverages under the applicable laws and ordinances in the city.

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 be provided 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 of 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-record-information).

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 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 the 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.