



City of Elberton

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

Alcoholic Beverage License New Application

Enclosed are the forms needed to apply for a City of Elberton Alcoholic Beverage License. In order to begin engaging in the sale of alcoholic beverages certain requirements must be met.

1. Applicant must submit an application for a City of Elberton Alcoholic Beverage License to the City Clerk (address above). The application must include the following:
 - a. Application must include fees applicable for issuance of alcohol license. Make sure to include bond of \$250 per classification selected. See table on page 2 of application.
 - b. **For Wine Pouring and Distilled Spirits License.** Complete page 5 of the application.
 - c. Applicants must submit a signed copy of the **Sworn Statement and Acknowledgement Form** on page 6 and **Release of Criminal History Consent Form** on page 7 of the application for each person with 5% or more interest in the business.
 - d. Applicant must print in the local newspaper an advertisement statement two consecutive weeks as stated on page 8 of the application.
 - e. **Cash or Check** in the amount of **\$20.00** made payable to the Elberton Police Department to cover the cost of fingerprint processing.
 - f. **Money Order** in the amount of **\$40.00** made payable to the GBI to cover the cost of fingerprinting.

If you need assistance completing the forms or have questions regarding the licensing process, you may contact the City Clerk at 706-213-3100 or cchurney@cityofelberton.net.

Rev. 2011

**CITY OF ELBERTON
RENEWAL APPLICATION FOR ALCOHOLIC BEVERAGE 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):*

On-Premises Consumption	Fee Amount	Check all that apply
Beer/malt Beverages	\$500	
Wine	\$500	
Distilled Spirits	\$1,000	
Retail		
Beer/malt Beverages	\$500	
Wine	\$500	
Distilled Spirits	\$5,000	
Bond (carried over each year)	\$250 per classification	
TOTAL LICENSE FEE DUE		

PURPOSE OF APPLICATION

- Renewal (no change)
 Classification Change/Addition (bond may be required)
 New Owner (fingerprinting required)
 Other Change (specify)

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 _____

Length of Time Business Has Been In Operation: _____

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:

Name _____

Date of Birth _____ Social Security Number _____

Motor Vehicle Operator's License No. _____
(Attach photocopy of license)

Address of Residence _____

Contact Number _____ Length of Residence at address _____

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:

MANAGER (MANAGES DAY-TO-DAY OPERATIONS) INFORMATION

Name _____

Birth Date _____ Social Security Number _____

Motor Vehicle Operator's License Number _____
(Attach a photocopy of license)

Address of Residence _____

Telephone Number _____ Length of Residence at Address _____

(THIS PAGE MAY BE DUPLICATED IN ORDER TO PROVIDE REQUIRED INFORMATION ON ALL PERSONS WITH A FIVE- PERCENT (5%) OR MORE INTEREST IN THE BUSINESS)

SWORN OATH AND ACKNOWLEDGEMENT

I do solemnly swear, subject to criminal penalties for false swearing, the statements and answers made to the foregoing questions in this application for an 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 renewal license. I understand that loss of qualifications during the term of a license shall be grounds for revocation or for denial or renewal.

I have received a copy of Chapter 4, Alcoholic Beverages, of the Code of Ordinances and Resolution of administrative penalties. I understand that I am required to provide a list of employees and understand that any change in employees will be reported in writing to the city clerk immediately. I also understand that I am required to complete/submit the monthly alcoholic beverage report form by the 10th of each month.

Signature _____

Sworn to and subscribed before me this _____ day _____ of 20 _____

Notary Public _____ Notary Expiration Date: _____

(THIS PAGE MAY BE DUPLICATED IN ORDER TO PROVIDE REQUIRED INFORMATION ON ALL PERSONS WITH A FIVE- PERCENT (5%) OR MORE INTEREST IN THE BUSINESS)

CITY OF ELBERTON
ALCOHOLIC BEVERAGE LICENSE
Affidavit Verifying Status for Public Benefit Application

By executing this affidavit under oath, as an applicant for a City of Elberton, Georgia, **Alcoholic Beverage License**, I am stating the following with respect to my application

Name

Name of business

Check one:

1. I am a United States citizen **OR**
2. I am a legal permanent resident 18 years of age or older I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.*

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of Code Section 16-10-20 of the Official Code of Georgia.

Signature of Applicant: _____

Date: _____

Print Name: _____

*Alien Registration number for non-citizens: _____

Sworn and subscribed before me this _____ day _____ of 20 _____

Notary Public _____

Notary Expiration Date: _____

*Note: O.C.G.A. Section 50-36-1(e)(2) requires that aliens under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien", legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below:

Monthly Alcoholic Beverage License Report Due by the 10th of each month.

Business Name: _____ **Month of:** _____

Business Location: _____

CONTAINERS DETERMINED BY THE CASE:

Distributors	7	8	10	12	14	16	20	22	24	26	32	38	40	45	1- 1/8	2- 1/4	1/8	1/4	1/2
GA Crown Dist.																			
Classic City Beverages																			
Leon Farmer																			
National Dist./Atlanta Wholesale																			
Northeast Sales Dist.																			
General Wholesalers																			
United Distributing																			
Savannah Distributing																			
List Other:																			

I certify, under penalty of perjury, that this is a true and correct report of malt beverage transactions during the month shown above and that at the time of each delivery, the purchaser was furnished a true and correct invoice describing each transaction within the taxing jurisdiction.

SIGNED _____ **TITLE** _____

INSTRUCTIONS:

1. Enter the number of containers purchased for each purchase next to the distributor's name.
2. Attach copies of the invoices provided by the distributors.
3. Sign and forward all information to ATTN: City Clerk, City Hall, 203 Elbert Street, PO Box 70, Elberton, GA 30635.