

**APPLICATION FOR LICENSE TO SELL
RETAIL ALCOHOLIC BEVERAGES AND LIQUOR
IN COFFEE COUNTY**

1. Full name of applicant (Individual, Partnership, Corporation)

2. Where is the place of business to be located? _____

3. Under what name is the business to be operated? _____
_____ Phone No.? _____
4. Is it within 50 yards of library Branch on the same side of the street? _____
Is it within 200 yards of a college or school campus? _____
Is it within 100 yards of a church or public park? _____ Is it within 100
yards of any public housing or public hospital owned or operated by any
government agency or authority _____ Is it within the business zones
provided by the Ordinance? _____ How far is it from the nearest retail
whiskey store? _____
5. Have you attached hereto, if this is an original application, a certificate from a
registered surveyor showing the scale drawing of the location of the proposed
premises and the straight line distance to the property of the nearest private
residence, church and school (measured by a straight line distance from property
line of nearest church or school to nearest enclosing the proposed premises.)
6. Are you applying for this license on behalf of yourself, or firm, or corporation?
_____. What is the name of the person who, if the
license is granted will be the active manager of the store and on the job in the
store? _____
7. Are you a citizen of the United States? _____ Where were you
born? _____
8. Home address _____
Home phone no. _____
9. How long have you resided in Coffee County? _____
10. What has been your occupation for the past 5 years?

11. If operating as a partnership, state names and addresses of each Partner and the
amount of interest of each partner in the partnership and when and where the
partnership was organized?

12. If operating as a corporation, state name and address of corporation when and
where incorporated, and the names and addresses of the officers and directors
thereof and the office held by each.

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13. If operating as a corporation, list the stockholders with addresses and the amount of interest of each stockholder in the corporation.
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14. Do you or any of the other owners or stockholders have an interest in any other liquor stores in Coffee County? _____
15. If so, state in how many stores each is interested, and where stores are located
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16. How much of the capital is borrowed? _____
17. From whom? _____
18. Has the applicant or individual having an interest either as owner, partner or stockholder has been convicted or entered a plea of nolo contendere within 10 years immediately prior to the filing this application for any felony or misdemeanor of any State for any municipal ordinance except traffic violations? If the answer is yes describe in detail and give dates.
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19. Have you within the last ten years been convicted or entered a plea of nolo contendere on any charge of tax evasion? _____ If the answer is yes, state the offense and the disposition of the case.
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20. Has the spouse of the applicant or the spouse of any individual have an interest either as owner, partner or stockholder been convicted or entered a plea of nolo contendere within 10 years immediately prior to the filing of this application for any felony or misdemeanor of any state of the United States or for any municipal ordinance except traffic violations? If yes, describe
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21. A. Do you propose to operate the store solely as a package store?
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- B. If the store is to operate as a department in premises where another business is carried on, if so, what is the type of business carried on?
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- C. What distance from the public sidewalk is the front entrance to your premises?
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- D. Have you advertised for two weeks, or are you now advertising notice for two weeks, of this application in the legal organ newspaper in Coffee County? _____
- E. Do you understand that this license is not transferable?
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- F. Do you agree to keep the premises in which retail sales are made lighted day and night so that such premises may be viewed through street windows at any time? _____

22. Do you agree to abide by the ordinances of Coffee County respecting your business? _____
23. Do you or does your spouse or any member of your family own any interest in any retail store selling spirituous liquors? _____. If so, designate your relationship and list information. _____

Attach a list of all your brothers, sisters, grandchildren, father-in-law, mother-in-law, etc.

24. Are you or any member of your family the owner, leaser or sub-leaser of any real estate which occupied by a retail whiskey store? _____. If so, give location, information on rental or lease agreement, amounts of rents received, to whom rented or leased. _____
25. Are you or any member of your family the executor or administrator of any estate having any interest in a retail whiskey store? _____. If so, describe fully _____
26. Are you or any member of your family the beneficiary or trustee of any trust fund having any interest in a retail whiskey store _____. If yes, describe fully, _____
27. Do you own the land and building on which this retail business is to be operated? _____. When did you buy it? _____. What did you pay for it? _____. If not, give the amount of rental paid for such land and building. _____. Give the name of the owner and agent, if any _____.
28. If the land and building are owned by a corporation, list the officers and their titles and the directors _____
29. Have you attached hereto an affidavit from the owner, leaser or sub-leaser of such land and buildings? _____. Give the names and addresses of all persons having any whole, partial beneficial or other interest in and to the land and building on and in which said retail packaged store is located _____
30. Attached hereto: Proof of adequate parking facilities of one parking space off the street for each 50 square feet of customer service area within premises of applicant.
31. Has the applicant or any individual having an interest either as owner, partner, or stockholder, or spouse of such individual, been found guilty of violating the regulations of any County State or Regulatory Agency? _____. If yes, give details _____
32. Have you or your spouse any financial interest in any wholesale liquor business? _____. If yes, give details _____

33. ATTACH HERETO: (From applicant and spouse)

- Have fingerprints taken electronically at UPS Store in Douglas, GA after completing Fieldprint application online at : Fieldprintgeorgia.com
- Criminal Record Information from Coffee County E-911
- Sign Privacy Rights for COGENT
- Sign Privacy Act Statement for COGENT Fingerprints
- Cash or Personal check in the amount of the charge for fingerprint application from COGENT made payable to Coffee County Commissioners for processing of Fingerprints application.
- Affidavit of Citizenship
- Plat of Property
- Proof that property taxes are current.
- Proof that Solid Waste account is current.
- Apply online for State of Georgia Alcohol license.
- Three letters of reference from reputable citizens

Applicants signature below acknowledges his/her fingerprints will be used to check their criminal history records maintained by the Georgia Crime Information Center and the FBI.

Applicants Signature

Signature – Spouse of Applicant

Sworn to and subscribed

Before me this ____ day of _____, 20 ____.

Notary

Commission Expires

GEORGIA, COFFEE

I, _____, being duly sworn according to law, do swear that the facts and things stated by me in the above and foregoing answers to questions are true, and no false, or fraudulent statements is made herein and such answers to questions are true, and no false, or fraudulent statement is made herein and such answers were made in order to procure the granting of this license.

Signature of Applicant

Signature – Spouse of Applicant

Sworn to and subscribed before me

this ____ day of _____, 20 ____.

Notary Public / Commission Expires

Fingerprinted on: _____