



6505 Rico Road Chattahoochee Hills Georgia 30268

**ALCOHOL BEVERAGE LICENSE
New License Application**

MAYOR

Tom Reed

CITY COUNCIL

James Stephens

Richard Schmidt

Claire Williams

Alan Merrill

Don Hayes

CITY MANAGER

Robert T. Rokovitz

www.chatthillsga.us

(770) 463-8881

Fax (770) 463-8550

Attached is the application and supplemental documents needed to apply for a new Alcohol Beverage License. Please complete forms and instructions as indicated. For details on Chattahoochee Hills regulations on alcohol licenses, please refer to the Code of Ordinances, Chapter 4: Alcohol Beverages available on the City website at <http://www.chatthillsga.us/government/city-code/>

Date: _____

Contact Name: _____

Contact Phone: _____

Business Name: _____

DBA (If applicable): _____

Before submitting your application, please make sure all check-list items have been completed.

_____ 1. Application sworn by applicant before notary public or other officer authorized to administer oaths.

_____ 2. MasterCard, Visa, check or money order for advertising, background check and license fees.

_____ 2. Completed GCIC (Georgia Crime Information Center) consent form. Each manager and all persons owning twenty percent or more of the business must complete this form.

_____ 3. Completed Land Survey form and site map of the business location.

_____ 4. Signed affidavit (for restaurants only).

ALCOHOL BEVERAGE LICENSE
Fee Schedule

Administrative Fees:

Application Fee		\$100	___
Advertising Fee		\$200	___
GCIC Background Check per person	_____ x	\$ 20	___
	(Number)		

Consumption on Premises:

Limited Pouring - Wine and Malt Beverages	\$1,300	___
Limited Pouring - Distilled Spirits Only	\$3,200	___
Full Pouring - Wine, Malt Beverages and Distilled Spirits	\$4,500	___
Additional Bar (each)	\$1,000	___

Package:

Wine	\$ 400	___
Malt Beverages	\$ 400	___
Distilled Spirits	\$3,000	___

Other:

Ancillary Wine/Beer Tasting	\$100	___
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Wholesale:

	Outside City Limits	Inside City Limits
Wine	\$100 ___	\$ 500 ___
Malt Beverage	\$100 ___	\$ 500 ___
Wine & Malt Beverage	\$100 ___	\$1,000 ___
Distilled Spirits	\$100 ___	\$3,500 ___
Wine, Malt Beverage and Distilled Spirits	\$100 ___	\$4,500 ___

Distiller/Manufacturer:

Distilled Spirits	\$100 ___	\$4,500 ___
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Total Fees Due:

Administrative Fees (see above): \$ _____

License Fees: \$ _____

Total Amount Due: \$ _____

**SPECIAL EVENT ALCOHOL BEVERAGE LICENSE
Fee Schedule**

	<u>Large*</u> <u>Event</u>	<u>Small**</u> <u>Event</u>
<u>Administrative Fees:</u>		
Application Fee	\$ 100	\$ 50
Advertising Fee	\$ 200	\$200
GCIC Background Check per person	_____ x \$ 20	\$ 20
	(number)	
<u>Special Event Pouring:</u>		
Limited Pouring – Wine and Malt Beverages	\$ 450	\$225
Limited Pouring – Distilled Spirits only	\$1,050	\$525
Full Pouring – Wine Malt Beverages and Distilled Spirits	\$1,500	\$750
<u>Special Event Package:</u>		
Wine	\$ 125	N/A
Malt Beverages	\$ 125	N/A
Distilled Spirits	\$1,000	N/A
<u>Fees per Sales Station/Server:</u>		
Per Sales Station	_____ x \$ 50	\$ 15
	(number)	
Per Server	_____ x \$ 10	\$ 10
	(number)	

Total Fees Due:

Administrative Fees (see above): \$ _____

License Fees: \$ _____

Total Amount Due: \$ _____

*Large event is 500 or more attendees.

**Small event is less than 500 attendees.

**INSTRUCTIONS: PLEASE PRINT OR TYPE APPLICATION
& ANSWER ALL QUESTIONS**

Please fill out entire application leaving no sections blank; please mark sections that do not apply N/A.

TYPE OF BUSINESS: (Check all appropriate spaces)

- Restaurant Bar or Lounge Liquor Store
 Private Food Store Service Station
 Hotel/Motel Sunday Sales Other, specify: _____

TYPE OF LICENSE: (Check all appropriate spaces)

- Retail/Package Malt Beverage Wine Distilled Spirits
 Consumption On The Premises Ancillary Wine/Beer Tasting
 Manufacturer Wholesaler Brew Pub (subject so wholesale excise)
 Special Event Retail/Package Malt Beverage Wine Distilled Spirits
 Ancillary Wine/Beer Tasting
 Change Of Ownership

1. Full Name of Business _____
2. Under what name is the Business to be operated _____
3. Is the business a proprietorship, partnership or corporation? _____
4. New business Existing business purchase
5. If change of ownership, effective date of this change _____
(If change of ownership, enclose a copy of the sales contract and closing statement)
6. Domestic or foreign? _____
7. Address: Physical: _____
 Mailing: _____
8. Phone _____ Beginning Date of Business in Chattahoochee Hills _____
9. Federal Tax ID Number _____ Georgia Sales Tax Number _____
10. Is business within the designated distance of any of the following as specifically defined in the City Code of Ordinances, Chapter 7:

		<u>YES</u>	<u>NO</u>
Package Malt Beverage or Package Wine:	100 Yards from School	()	()
Package Distilled Spirits:	100 Yards from Church	()	()
	200 Yards from School	()	()
	500 Yards from another package establishment	()	()
All Package Licenses: 200 Feet from single-family or two-family residences as defined in Chapter 7 of Code of Ordinances		()	()
Consumption on the Premises: 100 Yards from School		()	()

11. Full name of Applicant _____
12. Full name of Spouse, if Married _____
13. Are you a U.S. Citizen or Alien Lawfully Admitted for Permanent Resident? [] Yes or [] No
14. Current Address _____
15. Home Telephone _____
16. Number of years at present address _____
17. Do you reside in Fulton County? [] Yes or [] No If yes, how long? _____
18. What is the name of the person who, if the license is granted, will be the active manager of the business and on the job at the business? List name and phone number:

19. Has the applicant, spouse or any individual having an interest either as owner, partner or stockholder, been arrested, convicted or entered a plea of nolo contendere within ten (10) years immediately prior to the filing of this application for any felony or misdemeanor of any state or of the United States or of any municipal ordinance except traffic violations? If yes, describe in detail and give dates: _____

20. Do you own the land and building on which this business is to be operated? [] Yes or [] No
 Date purchased _____ Amount _____
- If not, provide the name of the owner and agent, if any. (Attach a copy of the lease and any other pertinent documents)

21. How is the proposed location zoned? _____
- Does this establishment have a patio/open area intended to be used for consumption of alcohol beverages? [] Yes or [] No
- If yes, provide a site plan indicating the location of the patio in relation to the building, the height of the fence and any entrances or exits.
22. 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, social security numbers and the office held by each: _____

23. If operating as a corporation, list the stockholders (20% or more) complete addresses, area code and telephone numbers, residential and business and the amount of interest of each stockholder in the corporation:_____

24. If operating as a partnership, list the partners with complete addresses, area code and telephone numbers, residential and business and the amount of interest or percent of ownership of each partner:_____

25. If partnership or individual, state names of any other persons or firms owning any interest or receiving any funds from the corporation:_____

26. Does applicant or spouse received any financial aid or assistance from any manufacturer or wholesaler of alcohol beverages? () Yes () No If yes, please explain.

27. Does applicant or spouse any financial interest in any manufacturer or wholesaler of alcohol beverages? () Yes () No If yes, please explain._____

28. State whether or not applicant, partner, corporation officer, or stockholder holds any alcohol beverage license in other jurisdiction or has ever applied for a license and been denied. (Submit full details):_____

29. Do you or your spouse or any of the other owners, partners, or stockholders have an interest in other liquor stores? If so, state in how many stores each is interested and where stores are located. Explain fully:_____

30. Do you, your spouse, any partner or any stockholder have any financial interest in any wholesale liquor business? () Yes () No If so give details:_____

31. All beer, wine and liquor retailers shall only purchase alcohol beverages from a State of Georgia Licensed Wholesaler as per Georgia Alcohol Beverage Laws and Regulations, 1996 Edition, as now or hereafter amended, Chapter 560-2-2.04. **Initial here** _____

32. Do you have any questions or comments regarding the ordinances, laws, regulations or application?
() Yes () No

33. Are you familiar with the City of Chattahoochee Hills ordinances, state laws and, regulations, federal laws and regulations governing the operation of this type of business? () Yes () No

34. Have you made application for a State license? () Yes () No

35. Have you answered all questions? () Yes () No

FOOD SALES AND ALCOHOL BEVERAGE SALES AFFIDAVIT

NAME OF ESTABLISHMENT: _____

ADDRESS OF ESTABLISHMENT: _____

LICENSEE'S NAME: _____ BUSINESS LICENSE #: _____

I. FOOD SALES AND ALCOHOL BEVERAGE SALES. Final reports must be attached to support the reported sales totals or CPA certification must be completed attesting to the reported sales totals. This information must be provided from the financial records of the above establishment on a calendar-year basis or such period during which the establishment has been open.

PERIOD FOR WHICH INFORMATION IS PROVIDED: _____

(If existing business, must be 12-month period. If new business, must be 12-month estimate)

Gross Receipts from Food Sales this period: \$ _____ %

Gross Receipts from Alcohol Beverage Sales this period: \$ _____ %

Total Food Sales and Alcohol Beverage Sales this period: \$ _____ %

Briefly describe the method by which receipts are segregated daily into food sales & alcohol beverage sales:

I certify that I have a working knowledge of the books and records of the establishment whose name appears above, and that to the best of my knowledge the figures presented above represent accurate sales totals for the period specified.

CPA Name (Printed)

CPA Signature

Name of CPA Firm

Business Address

Sworn under oath this _____ day of _____, 20_____

Notary Public Signature

My commission expires; _____

II. I hereby affirm that I understand that the privilege of selling alcohol beverages on Sundays from 12:30 p.m. until 12:00 a.m. (Midnight) requires a valid alcohol beverage pouring license, valid Sunday Sales pouring license, and that at least 50% of the license establishment's annual gross food and alcohol beverage sales must be derived from the sale of prepared meals and food.

I hereby affirm that I understand that records of food sales and alcohol beverage sales must be prepared and maintained. Failure to prepare and maintain records of food sales and alcohol beverage sales is cause for denial or revocation of an alcohol beverage pouring license, including a Sunday Sales pouring license. I further affirm that I understand that the City of Chattahoochee Hills division may audit our records to verify the same at its discretion.

Signature, Licensee/Owner

Sworn under oath this _____ day of _____, 20_____

Notary Public Signature

My commission expires; _____

ALCOHOL BEVERAGE LICENSE

Report of Land Survey

This form must be signed by Georgia Registered Land Surveyor and returned with a boundary line survey clearly indicating that the proposed retail establishment meets Chattahoochee Hills's City Code of Ordinances regarding distance requirements.

The attached boundary line survey should be prepared by a Georgia Registered Land Surveyor and include the following information.

- Building location within boundaries of property.
- Indicate location of main/front entrance of building to determine appropriate distance requirements.
- Name, address, and telephone number of applicant.
- Date of survey, graphic scale, and north arrow.
- Location of attract (land district and land lot) and acreage.
- Signature and certification statements as listed below on survey for related alcohol beverage use.
- Include one (1) of the certification statements as listed below on survey for related alcohol beverage use.

1. Certified that RETAIL SALES (Distilled Spirits) is not located within 100 yards of a church building or within 200 yards of any school building, educational building, school grounds, or college campus.
2. Certified that RETAIL SALES (Wine or Malt Beverage) is not located within 100 yards of any school building, school grounds, or college campus.

Business Name (Business applying for license)

Location Address

Surveyor Name (printed)

Company

Signature

Date

ALCOHOL BEVERAGE LICENSE

Contact Information

Wholesalers

Name	Business Address	Business Phone
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(If more, please indicate on the back of this form)

Solid Waste Haulers (for restaurants only)

Name	Business Address	Business Phone
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_____	_____	_____
_____	_____	_____

(If more, please indicate on the back of this form)

Consent Form for GCIC Records Check
Please make copies as necessary

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

Full Name Date

Maiden Name/ Previous Name/Other Names Used

_____/_____/_____
Date of Birth Social Security Number Driver's Licenses State and Number

Race Gender

Present Street Address

City State Zip

Former Street Address, if less than five years

City State Zip

Business Name

I authorize Chattahoochee Hills's Public Safety Department or their designee to make independent investigation and receive any criminal history record information pertaining to me, which may be in the files of any federal, state, and/or city criminal justice agency in Georgia.

I release the City of Chattahoochee Hills and any person or entity that provides information pursuant to this authorization, from any and all liabilities, claims or lawsuits in regard to the information obtained from any and all of the above referenced sources used.

Signature Date

ALCOHOL BEVERAGE LICENSE

Application Affidavit

TO BE SIGNED BY BUSINESS OWNER AND A NOTARY OF THE PUBLIC

Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate their business according to the law and that the rights and responsibilities conferred by the license(s), if granted will not be assigned to another. The applicant agrees to notify Chattahoochee Hills of any change as it applies to this application within thirty (30) days of change. Failure to make such amendments shall be cause for the revocation of any license issued pursuant to this application. Further, the applicant agrees to abide by all laws, rules, and regulations of the United States, the State of Georgia, and of the City of Chattahoochee Hills, now in force or which may hereafter be enacted, which regulate and govern the sale of alcohol beverages and liquors. The applicant understands that issuance of license hereby applied for be granted, shall be constituted only as a privilege and not a right and that said license may be revoked or suspended by the City Manager of Chattahoochee Hills. The applicant also fully understands that any license issued shall cover the period of one (1) year commencing the 1st day of January and expiring December 31st. All license fees are nonrefundable.

As an applicant for an Alcohol Beverage License, I understand that my license application will be publicly advertise and presented to the City Council for approval at one public hearing.

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each questions, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to state laws and city ordinances of Chattahoochee Hills, Georgia shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statement and affidavits in connection with this application.

Subscribed and sworn to before me this _____ day of _____, 20_____.

Clerk/ Notary Public My commission expires; _____

Signature of applicant

Printed

ALCOHOL BEVERAGE LICENSE
Additional Information

Advertisement

The City of Chattahoochee Hills assesses an advertising fee for the publication of the required public hearing date in the City's legal organ. After the application has been processed, the applicant is required to post a sign in front of their business advertising the date of the approval hearing. The applicant is responsible for purchasing and posting the on-premises sign.

The public hearing sign requirements are as follows:

- Posted not less than fifteen days before the hearing's date, and
- The notice shall be on a sign having a surface of not less than twelve (12) square feet, and
- The notice shall be painted or printed in black letters at least three inches in height against a white background, and
- The notice shall state all of the following information:
 - That an application for a license to sell alcoholic beverages on the premises has been filed with the City of Chattahoochee Hills
 - The type of license applied for
 - The time and place of the public hearing to be held on such license application
 - The name(s) in which the license is to be issued, and
- The advertisement shall be placed with the base of the sign not more than three (3) feet from the ground on the most conspicuous part of the premises, facing the most frequently traveled road, street or highway abutting same, and not more than ten (10) feet there from.

Hours of Sale

Package Retail - Beer, Wine and Liquor

Chapter 7, Article 5, Section 5(b)

Sunday	12:30 p.m. – 11:30 p.m.
Monday - Saturday	7:00 a.m. - 12:00 (Midnight)

Consumption on Premises - Beer, Wine and Liquor

Chapter 7, Article 5, Section 6 (b)

Eating Establishments ONLY - establishment which is licensed to sell alcohol beverages and which derives at least fifty percent (50%) of its total annual gross food and beverages sales from the sale of prepared meals of food:

Sunday	12:30 p.m. - 12:00 (Midnight)
Monday- Saturday	9:00 a.m. – 12:00 (Midnight)

No sales permitted on Christmas Day

No sales allowed within 250 feet of polling places on Election Days (city, county, state, federal) during polling hours

ALCOHOL BEVERAGE LICENSE

Pouring Permit Information
(For applicant's records)

According to the City of Chattahoochee Hills Code of Ordinances, anyone who serves alcohol in retail establishment or private club must have a pouring permit. As described in Chapter Seven of the code, this is "anyone who dispenses, sells, serves, takes orders or mixes alcohol beverages in establishments licensed as a retail consumption dealer." No licensee shall employ any person required to have a pouring permit until such person has procured such permit.

Applications for City of Chattahoochee Hills pouring permits are available at City Hall, 6505 Rico Road. Below is a list of requirements to obtain a pouring permit. Pouring permits must be renewed on an annual basis.

- Complete GCIC Background Check Consent Form.
- Must apply in person at City Hall, 6505 Rico Road.
- Annual fee is \$30, payable by MasterCard, Visa check or money order.

For any questions regarding Alcohol Pouring Permits, please call 770-463-8881.

**Application for Pouring Permit
(distribute to all servers as defined above)**

CALENDAR YEAR _____

Applicant Name _____

Are you a Citizen of the United States _____

Current Address _____

Home Telephone _____ Email Address _____

Number of years at present address _____

Do you reside in Fulton County? _____ If yes, how long _____

Establishment Name: _____

Establishment Address: _____

**Consent Form for GCIC Records Check
Required for Pouring Permit**

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

Full Name _____
Date

Maiden Name/ Previous Name/Other Names Used

_____/_____/_____
Date of Birth _____-_____-_____ _____
Social Security Number Driver's Licenses State and Number

Race _____
Gender

Present Street Address

City _____ _____
State Zip

Former Street Address, if less than five years

City _____ _____
State Zip

Business Name

I authorize Chattahoochee Hills's Public Safety Department or their designee to make independent investigation and receive any criminal history record information pertaining to me, which may be in the files of any federal, state, and/or city criminal justice agency in Georgia.

I release the City of Chattahoochee Hills and any person or entity that provides information pursuant to this authorization, from any and all liabilities, claims or lawsuits in regard to the information obtained from any and all of the above referenced sources used.

Signature _____
Date