CITY OF CORNELIA ALCOHOLIC BEVERAGE LICENSE RENEWAL APPLICATION FOR THE YEAR 2022 Due by November 30, 2021

(Please Check the License(s) Renewing)

FEES IN THE CENTRAL BUSINESS DISTRICT ARE REDUCED BY 50%

<u>PACKAGE SALES</u> <u>CONS</u>	SUMPTION ON PREMISES	<u>MISCELLANEOUS</u>
BEER \$750	BEER \$750	BREW PUB \$5,000
WINE \$750	BEER \$750 WINE \$750	MICRO BREWERY \$750
DISTILLED SPIRITS \$5,000		
		GROWLER \$750
		TRANSFER FEE \$200
TOTAL DUE \$		CATERER \$50
·		
DATE:		
LEGAL NAME OF BUSINESS:		
APPLICANT:		
TYPE OF LICENSE RENEWING:		
TYPE OF OWNERSHIP:IN		
FEDERAL EMPLOYER IDENTI	FICATION NUMBER:	
GA SALES TAX NUMBER:		
LOCATION OF BUSINESS:		
MAILING ADDRESS:		
BUSINESS PHONE NUMBER:	FA	X#:
OWNER OF PROPERTY:		
MANAGING AGENT:		
(Employee-On Site Responsible Par ADDRESS/PHONE#:	ty)	
REGISTERED AGENT:		
(Resident of Habersham County)		
ADDRESS/PHONE #:		

Have you, the individual applicant, or any member of the partnership, or any officer or agent of the corporation applying for such license made application at any previous time for a license to operate a business selling malt beverages and wine in the City of Cornelia?_____No If yes give full details:

Have you, the individual applicant, or any member of the partnership, any officer or agent of the corporation applying for such license, had a previous license revoked or suspended by any State or subdivision thereof, or by the Federal Government? Yes No If so, enumerate each license which has been revoked or suspended and state for each the name of the political subdivision or other authority which issued said license, the year license was issued, and the reasons for revocation or suspension of license.

Have you, the individual applicant, or any member of the partnership, any officer or agent of the corporation been charged with a violation of any and all laws and ordinances, Municipal, State or Federal?____Yes____No If yes list each charge, the name and location of the court in which each such charge was made, the final disposition and dates of each case:

Is there any other person, firm or corporation to be interested directly or indirectly in the profits or losses, or both, of the applicant?____Yes___No

The gross receipts of said business where derived from the sale of merchandise other than malt beverages and wine and exceeded seventy-five(75) percent for Class A Yes No; fifty(50) percent for Class B & C Yes No, for the six (6) successive calendar months immediately preceding the filing of this application.

NOTE: Before signing this application, check all answers and explanations to see that all are answered fully and correctly. This application is to be executed under oath and subject to the penalties of false swearing and it includes all attached sheets submitted herewith. It shall be the duty of the applicant to report to the City Commission, within five (5) days, any change in any interest in such licensee's business, but not limited to: (1) Any division of profits; (2) Any division of net or gross sales for any purpose whatsoever; (3) Any change in the payment of rents or leases; (4) Any change in the ownership of any lease or building or land used in such business; (5) Any change in the ownership of any corporation that has any interest in such business or the change of management of such corporation. According to Code Section 24-11, the applicant understands that the City Commission shall have complete authority to revoke, suspend or deny the transfer of any retail dealer license issued under the provision of the law and the making of any untrue or misleading statement in the application is grounds for suspension or revocation.

STATE OF GEORGIA, COUNTY OF

I, ______, do solemnly swear subject to criminal penalties for false swearing, that the statements and answers made by me to the foregoing questions in this application, are true, and no false or fraudulent statement or answer is made herein to procure the granting of this license.

Signature:_____

I hereby certify that ______, personally appeared before me, is personally known to me, and that the applicant, who being sworn by me, says that the statements and answers set forth in the foregoing application are true and correct.

This ______ Day of ______, 20____.

Notary Public:______ My Commission Expires:_____