



Lamar County Alcohol License Checklist

This form shall be submitted with all necessary documentation. All applications shall contain a full and complete and sworn and notarized statement by each applicant of all material facts relevant to the requirements of Lamar County Alcohol License Ordinance Code Section 2-3.

- _____ Read and fully comprehend Alcohol License Ordinance

- _____ Consent Form - Background Check

- _____ *Fingerprinting Analysis and Background Check

- _____ Choose the applicable property ownership information provided:
 - _____ A copy of the deed to the premises, if owned by the licensee;

 - _____ A copy of the lease agreement covering the premises to be licensed, if leased by the licensee;

 - _____ In the case of a partnership, a copy of the partnership agreement;

 - _____ In the case of a corporation, a copy of the articles of incorporation

- _____ Application Fee – Original Application - \$100.00
Renewal Application - \$100.00

*Conducted at Lamar County Sheriff's Office, located at 101 Roberta Dr. Each applicant and any corporate officers or shareholders otherwise required to be fingerprinted shall submit themselves to the sheriff's office, where a complete set of fingerprints shall be taken. Each applicant authorizes the county and its agents to secure from any court, law enforcement agency, or other public agency his criminal and civil history and to use such information in determining whether the license applied for shall be issued. Each applicant further authorizes the county and its agents to use such information in any public hearing with respect to the license applied for, either before or after the issuance of the license. Each applicant waives any right, which he would otherwise have to preclude the county or its agents from obtaining and using such information; and each applicant further waives any liability of the county or its agents from obtaining and using such information.



LAMAR COUNTY ALCOHOL LICENSE APPLICATION

INSTRUCTIONS: Every question must be answered fully and correctly. If the space provided is not sufficient answer the question on a separate sheet and indicate in that space that a separate sheet is attached. When completed, it must be dated, signed and verified under oath by the applicant and filed in person by the applicant with the Office of the County Administrator, Lamar County Administration Building, 408 Thomaston St., Barnesville, GA 30204, together with all supporting documentation and a check for the required non-refundable application fee.

A license issued to an individual shall be issued in the name of the individual. A license issued to a partnership shall be issued in the name of the partnership and in the name of one of the partners who shall be the named licensee. A license issued to a corporation having as its principle business an activity other than the sale of alcoholic beverages shall be issued in the name of the corporation and in the name of the officer or employee of the corporation primarily responsible for the operation of the licensed premises; and such officer or employee shall be the named licensee.

NON-REFUNDABLE ANNUAL APPLICATION FEE:

Original Application - \$150.00

Renewal Application - \$150.00

TYPE OF LICENSE

There are 12 classifications of licenses available for the sale of wine and malt beverages:

Please CHECK all that apply

<input type="checkbox"/>	Malt Beverage Package	\$500.00
<input type="checkbox"/>	Malt Beverage Pouring	\$750.00
<input type="checkbox"/>	Wine Package	\$500.00
<input type="checkbox"/>	Wine Pouring	\$750.00
<input type="checkbox"/>	Farm Winery/Tasting Room	\$500.00
<input type="checkbox"/>	Brewpub	\$250.00
<input type="checkbox"/>	Brewery	\$500.00
<input type="checkbox"/>	Special Event (nonprofit)	\$0
<input type="checkbox"/>	Authorized Catered Function	\$50.00
<input type="checkbox"/>	Manufacturer	\$1000.00
<input type="checkbox"/>	Wholesale dealer/distributor	\$1000.00

List any other Alcohol License you currently hold:

Trade name of business for which application is made: _____

Phone Numbers: _____
Business Home/Cell

Mailing Address _____

If additional space is required please use the back of this sheet and label information appropriately.

PART II

If Statement or Question does not apply to your establishment please mark N/A.

1. Will the proposed outlet have live entertainment? Yes or No _____ If Yes, describe how often and what type in detail.

2. Have you received a copy of the Lamar County Alcoholic Beverage Ordinance? Initial Here: _____

No application will be processed until receipt of a copy of this Ordinance is acknowledged

3. Have you included with this application a check for the NON-Refundable application fee in the amount of \$150.00 as required by Section 2.3.25 of the Alcoholic Beverage Ordinance of Lamar County? Yes or No: _____

4. The following documents are required and to be submitted with this application:

a) A copy of the Deed to the premises to be licensed, if owned by Applicant – Initial here: _____

b) A copy of the lease agreement covering the premises to be licensed, if leased by the applicant. Initial here: _____

c) In the case of a partnership; a copy of the partnership agreement. Initial here: _____

- d) In the case of a corporation, a copy of the articles of Incorporation.
Initial here: _____
- e) A current stamped certificate from a registered surveyor which shows a scale drawing the premises and the location at which the applicant desires to operate an alcoholic beverage outlet and which shows, with linear foot measurements where appropriate, such location's compliance or non-compliance with the provisions of Section 2.3.35 of the Alcoholic Beverage Ordinance of Lamar County.
Initial here: _____
5. Have you confirmed with the *Lamar County Planning & Zoning Administrator* that the location of the proposed outlet is in the Zoning District approved for the sale of Alcoholic Beverages subject to the specific limitations of the respective district as provided for in Section 2.3.33 of the Alcoholic Beverage Ordinance of Lamar County.
Initial here: _____
6. If applicable, have you received approval from the Lamar County Building Official for any new construction, renovations, remodeling, etc. at the premises to be licensed. Yes or No: _____
7. If applicable, have you received an approved site plan from Lamar County for the Location of the premises to be licensed? Yes or No: _____
8. If applicable, have you received a Lamar County Health Department Food Service Permit and any other applicable local, state, or Federal permits, etc. required for a Food Service Establishment? Yes or No: _____
9. Has the applicant(s) paid all Property Taxes and Personal Property Taxes due the County of Lamar and is applicant current with all fees required to conduct business in Lamar County? Yes or No: _____
No application will receive final approval until necessary permits are secured
10. Has the named licensees and all other persons otherwise required, submitted themselves to the Lamar County Sheriff's Office for fingerprinting (initial application only) and background check(s) (if applicable this year) as provided for in Section 2.3.22 of the Alcoholic Beverage Ordinance of Lamar County? Yes or No: _____
11. Has the named Licensee, any partner(s), the corporation, or any corporate officer been:
- Convicted within the last **ten (10)** years of any felony or any misdemeanor involving moral turpitude? Yes or No: _____
 - Any other misdemeanor within the past **five (5)** years? Yes or No: _____
 - Denied or had revoked, within the past **five (5)** years any license to sell alcoholic beverages issued by any government entity? Yes or No: _____
 - Been convicted of selling alcohol to a minor within the past **three (3)** years? Yes or No: _____

If the answer to any portion of question 11 is Yes, describe in detail and give dates of occurrences:

12. Has any alcoholic beverage business in which the named licensee, partner(s), the corporation, or corporate officers holds or has held any financial interest in, or are employed by, or have been employed by, ever been cited for any violation of the rules and regulations of the State Revenue Commissioner or any local ordinance/legislation relating to the sale or distribution or alcoholic beverage? Yes or No: _____

If the answer to question 11 is Yes, describe in detail and give dates:

13. On behalf of the name of licensee, provide three (3) personal references (No Relatives, Former employers, Fellow Employees or School Teachers) who are responsible, reputable adults, business or professional men or women, who have known the named licensee during the past five (5) years.

Include Name, residence, business address, and number of years known.

14. Is the Named Licensee a citizen of the United States? Yes or No: _____

Place of Birth; City & State

Date of Birth

PART III
VERIFICATION

State of Georgia, _____ County

I, _____, Licensee, 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 such license.

Applicants Signature (FULL NAME IN INK)

I hereby certify that _____ signed his/her name to the foregoing application after stating to me that he/she knew and understood all statements and answers made

therein, and, under oath actually administered by me, has sworn that said statements and answers are true.

This _____ day of _____ 20 ____.

Notary Public My Commission Expires: _____

(Seal)



Board of Commissioners

Lamar County

408 Thomaston Street
Barnesville, Georgia 30204

Charles Glass, Chairman
Nancy Thrash, Vice Chair
Bennie Horton, 1st District
Robert Heiney, 2nd District
Ryan Traylor, 3rd District

Sean Townsend
County Administrator
Office: (770) 358-5146
Fax: (770) 358-5149

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.

Applicant Privacy Rights Notification Signature Form

Applicant Notification and Record Challenge:

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction or updating an FBI identification record is set forth in Title 28 Code of Federal Regulations 16.34.

Procedures for obtaining a copy of the FBI criminal history record are set forth in 28 CFR 16.30 – 16.33 or go to the FBI website at <http://fbi.gov/about-us/cjis/background-checks>.

Signature: _____

Print Name: _____ Date: _____

I have been given a copy of the Privacy Rights Statement documents – Applicant's Initials: _____