



The City of Garden City, Georgia
100 Central Avenue, Garden City, Georgia 31405
Phone: 912.966.7777 Fax: 912.966.2735

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

Date Filed _____

For the Year _____

Expires on December 31 of the above year

Check type of License	License Fee
<input type="checkbox"/> Spirituous Liquors (Package)	\$2,722.00
<input type="checkbox"/> Spirituous Liquors (by the drink)	\$2,722.00
<input type="checkbox"/> Beer and/or malt beverages	\$682.00
<input type="checkbox"/> Wines	\$236.00
<input type="checkbox"/> Advertising Cost	\$75.00

Total: \$

- 1) Name of (proposed) business: _____
- 2) Location of business _____
- 3) Mailing address _____
- 4) Zoning District _____
- 5) Business phone _____
- 6) Emergency phone _____
- 7) Applicant Name _____ Age _____
- 8) Applicant's Home Address _____
- 9) Home phone _____
- 10) Ever held similar license? _____ Year _____
- 11) Date of Birth _____
- 12) SSN _____



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13) Brief Personal history of applicant (include education, previous jobs, businesses owned, and any place of residence during last five years)

14) List all persons with a financial interest in the proposed business. For corporations, this shall include all stockholders who own more than ten percent of the outstanding stock of the corporation. Use additional paper if needed.

% Ownership	Name	Address
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15) Criminal History of Applicant (if any)

16) Describe the interest owned or held by the applicant in the premises:



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17) Five characters references that will vouch for the applicant:

Name

Address

18) Will the applicant operate the business in person? Yes No

If no, list the name of the manager below. The manager must also complete a *Manager's Application*.

Manager's name _____

19) What other kinds of business will be conducted at this location?

20) Fingerprints of applicant shall be required with the initial application.

21) In whose name will the income taxes be due on profits arising from the operation of said business?

22) Has the applicant or any person connected with or having an interest in said business been convicted of any violation of law other than a traffic violation?

Served time in prison, or other correctional institution?

23) If the answer to part of question 22 is "yes" for the applicant or any person connected with or having an interest in said business, describe circumstances in detail for each person. (Attach additional sheet if necessary).



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*ALL OF THE FOREGOING INFORMATION IS HEREBY GIVEN AND ALL OF THE FOREGOING STATEMENTS ARE HEREBY MADE ON OATH, WILLFULLY, KNOWINGLY AND ABSOLUTELY. THE SAME IS AND ARE HEREBY SWORN TO BE TRUE UNDER PENALTY FOR FALSE SWEARING AS PROVIDED BY LAW.

Applicant's Signature

License Applicant Signature

Sworn to and subscribed before me

This _____ day of _____, 20____.

Notary Public



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THIS PAGE FOR OFFICE USE ONLY

Application received by _____ Date _____

POLICE DEPARTMENT REVIEW

Fingerprinted by _____ Date _____

Separate report submitted to the City Administrator:

_____ Date _____

Police Chief

Public Hearing held on _____

Date advertised in Savannah Morning News _____

Action of Council Approval Denial

License(s) Issued + _____ Date _____