BOARD OF COMMISSIONERS
LIBERTY COUNTY

JOHN D. McIVER
CHAIRMAN
MARION STEVENS, SR.
DISTRICT 1
DONALD L. LOVETTE
DISTRICT 2
CONNIE THRIFT
DISTRICT 3

P.O. BOX 829
HINESVILLE, GEORGIA 31310
(912) 876-2164

PAT BOWEN
DISTRICT 4
KENNY FUSSELL
DISTRICT 5
EDDIE J. WALDEN
DISTRICT 6
JOSEPH W. BROWN
COUNTY ADMINISTRATOR

APPLICATION FOR ALCOHOL BEVERAGE LICENSE

YEAR _____ **COUNTY LICENSE NO.:** _____

INSTRUCTIONS: This personal statement must be executed, under oath, by every person having ownership or profit sharing interest in, managing, or employed by, any place of business applying for a license from the State Revenue Commissioner to sell or deal in alcoholic beverages or liquors. Each question must be fully answered. If the space provided is not sufficient, answer the question on a separate sheet and indicate in the space provided that such separate sheet is attached. When returning this application to the Liberty County Building and Licensing Department please attach a money order, cashiers check, or cash for the cost of the alcohol license and application fee. If you have any questions about this application please feel free to call us at 912-876-8454.

1. Full name of applicant: _____

   Social Security No.: _____

   Home Phone #: _____ Work Phone # _____

2. Trade name & address of business of which this personal statement is a part:

   _____

3. Position of applicant in dealer's business: _____

4. Do you have financial interest in any bar, lounge, tavern, restaurant, or other place of business where alcoholic beverages are sold and consumed on the business premises? If so, give details.

   _____

   _____

   _____

5. Do you have any financial interest, or are you employed in any wholesale or retail alcoholic beverages business other that the business submitting license application of which this personal statement is part? _____
   If so, give names and locations, and amount of interest in each. _____

   _____

   _____

6. Do you presently have or had in the past, any financial or ownership interest and/ or presently employeed, or in the past, been employed, in any business engaged in distilling, bottling, rectifying, or selling (wholesale or retail) alcoholic beverages in this State or outside this State which has not otherwise been disclosed in this statement?

_____ If so, explain: _____

_____

_____

7. Other names used by applicant: Maiden name, names by former marriages, former name changed legally or otherwise: Aliases, nicknames, etc. Specify which, and show dates used: _____

_____

8. Home Address: _____

9. Business Address: _____

10. Place of birth: _____ Date of birth: _____

U.S. Citizen: _____ By birth: _____ Naturalized: _____

Date, Place, & Court: _____

Certification No.: _____ Petition No.: _____

Derived Parents Certification No.(s): _____

Alien Registration No.: _____ Native Country: _____

Date and Port of Entry: _____

11. How many consecutive years and months have you been a legal resident of Georgia and Liberty County?

Years? _____ Months? _____

12. Single ☐ Married ☐ Widowed ☐ Divorced ☐ Separated ☐

13. If married, divorced or widowed, complete the below requested information on spouse.

Full Name of Spouse: _____

Social Security Number: _____ Wife Maiden Name: _____

Place of Birth: _____ Date of Birth: _____

Place of Marriage: _____ Date of Marriage: _____

Name of Spouse Employer: _____

Employer's Address: _____

14. Race _____ Sex _____ Color of Eyes _____

15. Are you a registered voter in the State of Georgia?

How many years? _____ In what County? _____

16. For the last calendar year, did you file and pay any county property tax? _____

How Much? _____ Where? _____

17. Have you ever had any financial interest in a alcoholic beverages business which was denied a liquor license?

_____ If so, give full details: _____

_____

18. Has any alcoholic beverages business in which you hold, or have held, any financial interest, or are employed, or have been employed, ever been cited for any violation of the rules and regulation of the State Revenue Commissioner relation to sale and distribution of alcoholic beverages? _____ If so, give full details: _____

_____

_____

19. Do any of the following presently have, or had in the past, any license or financial or ownership interest whatsoever in any business dealing in alcoholic beverages: spouse, paernts, step-parents, parents-in-law, brothers, sisters, step-brothers, step-sisters, brother-in-law, sister-in-law, children, step-children, and children-in-law? _____ If so, give full details: _____

_____

20. Have you during the past ten years bought and/ or sold any local or state alcoholic beverage license in this State or outside this State? _____ If so, give details (date, license #, persons and considerations involved).

_____

_____

21. If during the past ten years you have bought, sold, or exchanged any real estate, automobiles or securities with any other person engaged in the alcohol beverages business, or with any regulatory official, give full details (date, property, persons, and considerations involved). _____

_____

_____

22. Have you ever visited or resided in any foreign country except while in the Armed Forces of the United States? _____ If so, give details. _____

_____

23. Have you ever been denied a bond by a commercial surety company: _____ If so, give details. _____

_____

24. List any close relatives (including in-laws) now residing outside the United States, except those actively serving in the Armed Forces of this Country. (Give name, relationship, age, place of residence, citizenship).

_____

_____

25. Education: (all schools avove elementary-give name of school, address, dates attended, and degrees or certificates received.) _____

_____

_____

26. Employment Record: (Give most recent experience first, if self-employed, give details.

From Month/Year	To Month/Year	Occupation and description of duties performed	Salaries Recieved	Employers	State	Reason for Leaving

27. List in reverse chronological order all your residents for the past ten years.

Dates: From	To	Street Address:	City:	State:
	Present			

28. References: Give three personal references, not relatives, former employers, fellow employees, or school teachers, who are responsible, reputable, adults, business or professional men or women, who have known you well during the past five years. (Name, residence, business address, and number of years known).

_____

_____

_____

29. Military service: (Serial number, branch of service, period of service, type of discharge). _____

_____

_____

30. Have you ever been arrested, or held by Federal, State, or other law-enforcement authorities, for any violation of any federal law, state law, county, or municipal law, regulation or ordinances? (do not include traffic violations. All other charges must be included even if they were dismissed. Give reason charged or held, date, place where charged and disposition). _____

_____

_____

_____

ALCOHOLIC BEVERAGE CODE OF ORDINANCE CERTIFICATION

I, _____ , certify that I have read and understand provisions of Liberty County Code Chapter 4 dealing with Alcoholic Beverages. I certify that I have received a copy of said chapter for display on premises.

Signature: _____

Date: _____

NOTE: Before signing this statement, check all answers and explanations to see that you have answered all questions fully and correctly. This statement is to be executed under oath and subject to the penalties of false swearing, and it includes all attached sheets submitted herewith.

VERIFICATION

State of Georgia, _____ County

I, _____ , do solemnly swear, subject to the penalties of false swearing, that the statement and answers made by me as the applicant in the foregoing personnel statement are true.

_____

Applicant's Signature
(Full name and in ink)

I hereby certify that _____ is personally known to
(the above named person)
me, that he/she signed their name to the foregoing application stating to me that he knew and understood all statements and answers made therein, and, under oath actually administered by me, has sworn that said statement and answers are true.

This _____ day of _____ 20_____ .

_____

Notary Public

(Affix Seal)

BOARD OF COMMISSIONERS
LIBERTY COUNTY

JOHN D. McIVER
CHAIRMAN
MARION STEVENS, SR.
DISTRICT 1
DONALD L. LOVETTE
DISTRICT 2
CONNIE THRIFT
DISTRICT 3

P.O. BOX 829
HINESVILLE, GEORGIA 31310
(912) 876-2164

PAT BOWEN
DISTRICT 4
KENNY FUSSELL
DISTRICT 5
EDDIE J. WALDEN
DISTRICT 6
JOSEPH W. BROWN
COUNTY ADMINISTRATOR

TO: Liberty Consolidated Planning Commission

FROM: County Adminstrator

SUBJECT: Alcohol Beverage License Application

1. Consider the location for which the enclosed license is sought and determine possible traffic congestion; no original license shall be issued hereunder, where the business building in which the license is located is within one hundred and fifty (150) feet of any area zoned residential, or unless the business building of the proposed location is situated more than six hundred (600) feet from any property line of any library, church, shrine, chapel or a mortuary, or other place used exclusively for religious services, and more than six hundred (600) feet from any property line of any school or college campus. The distance set out shall be measured in a straight line and shall be computed from property line of the aforesaid library, church, school, or area zoned residential to the building in which is located the business for which the license is being sought.

2. Following an on-sight inspection of the proposed location, I recommend that this license (circle one).

BE ISSUED BE DENIED

If you do not reccommend approval, indicate your reasons below:

_____

_____

_____

_____ _____

Date Rep. , LCPC

ALCOHOL BEVERAGE LICENSE APPLICATION
CRIMINAL HISTORY CHECK
LIBERTY COUNTY SHERIFF'S DEPARTMENT

_____ Clerk of Courts / State and Superior Court

_____ Detectives Office / Warrants

_____ City Detectives Office

_____ District Attorney's Office

_____ C.I.D. / Fort Stewart

_____ G.C.I.C. - Criminal History & Drivers History

_____ Photo of Building: Is it in a Business or Residential area or near a School Zone?

Detective: _____

Date: _____

CONFIDENTIAL REPORT OF BEVERAGE LICENSE INVESTIGATION

Trade Name: _____

Name of Applicant: _____

Address of Business: _____

City: _____ County: _____

Assigned To: _____ Date: _____

Due Date: _____

Agents Signature: _____

Date Investigation Completed: _____

Meets all requirements: Yes: _____ No: _____

TO: Sheriff of Liberty County, Georgia

FROM: _____

I have completed this investigation report and recommend the license applied for be

APPROVED _____ DISAPPROVED _____

Comments: _____

_____

_____

_____

_____

License Fees:

_____ Liquor - Consumption on premises

_____ Liquor - Consumption off premises (package)

_____ Beer - Consumption on premises

_____ Beer - Consumption off premises (package)

_____ Wine - Consumption on premises

_____ Wine - Consumption off premises (package)

_____ **Total Amount of License or Licenses**

_____ **Approved by Governing Authority**

_____ **Disappoved by Governing Authority**

Date: _____

New License No.: _____

_____

Joseph Brown, County Administrator
Liberty County Board of Commissioners

Further comments concerning application or restrictions applicable to this business: _____

_____

_____

_____