

Town of Tyrone 950 Senoia Road Suite A Tyrone, GA 30290 Phone: (770)487-4038 www.tyrone.org

Alcoholic Beverage License Cover Letter

Dear Applicant:

Thank you for being part of the Town of Tyrone business community. We welcome the opportunity to assist you in obtaining an Alcoholic Beverage License. The following are some important reminders to help you efficiently apply for your license:

Applicant:

- Must be at least 21 years of age
- Must be a citizen of the United States or a permanent resident alien
- Must be a resident of the State of Georgia as the License Representative

Application Process: Once the application is complete and all administrative, investigative and permit fees are paid, the application for Alcoholic Beverage License will be advertised in the legal organ once a week for two weeks prior to the week when the application shall be heard by the Town Council. Town Council Alcohol Public Hearings are held on the first Thursday of each month. The applicant shall place signs upon the location of the proposed business two (2) weeks prior to the week of the hearing. Each sign shall be obtained from the Town and the fee is \$25.00 per sign. In conjunction with the Town application process, you must also apply with the Georgia Department of Revenue at https://dor.georgia.gov/centralized-alcohol-licensing.

Annual License Fee is as follows:

Retail Consumption Dealer (distilled spirits, malt beverages & wine)	\$5,000
Retail Consumption Dealer – Private Club (malt beverages & wine)	\$2,300
Retail Consumption Dealer (malt beverages & wine)	\$1,800
Commercial Manufacture (distilled spirits)	\$1,200
Retail Package Dealer – s.f. greater than 4,000 (malt beverages & wine)	\$1,000
Commercial Manufacture (malt beverage & wine)	\$ 500
Retail Package Dealer – s.f. less than 4,000 (malt beverages & wine)	\$ 400
Wholesale Dealer (malt beverages & wine)	\$ 200
Transfer Fee	\$ 100

Tax Reporting: Taxes are due on or before the 10^{th} of each month. You are responsible for the timely submittal of your excise taxes. Taxes are due from both wholesalers and retailers. Failure to timely submit excise taxes will result in late fees being assessed against remitter. Penalties for noncompliance include fines and possible revocation of license. Reporting must be sent in for all alcoholic beverages purchased from wholesalers.

Renewal of License: All licenses shall expire on December 31st of the year of issue. The Town Clerk or his/her representative will notify license holder on or before November 1st.



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Alcoholic Beverage License Checklist

A Complete Application will have the following Forms and Supporting Documentations:

In conjunction with the Town's application process you must apply to the Georgia Department of Revenue <u>https://dor.georgia.gov/centeralized-alcohol-licensing</u>

<u>1</u>. Application Form and Fee - \$350 non-refundable processing and investigation fee. Such fee shall cover costs of investigating the license applicant and shall be credited against the first annual license fee upon grant of a license.

2. Survey – A certificate from a Georgia registered land surveyor showing a scale drawing of the location shall be measured from the closest point of the licensed premises to the nearest property line. It cannot be within 300 feet of a branch of a public library; 300 feet of any alcoholic treatment center owned and operated by the state, the county, or the town; 300 feet of any church or residence in any residential district other than the AR zoning district; except that for a consumption on premises only pouring license, the distance requirement shall be 250 feet of any residence in any residential district; 600 feet of any school building, school grounds or college campus; 600 feet of any structure used as a residence on property that is zoned AR. Refer to Article III, Chapter 4, Alcoholic Beverages, Licensing, section 4-80 for <u>all</u> distance requirements. (A survey is not required for transfer of existing license for an existing location)

<u>3</u>. Deed or Lease – A copy of a deed; showing the applicant to be the owner of the premises for which the license is sought or a copy of a lease showing any interest the owner of the premises has in the business for which the license is sought.

<u>4</u>. Notarized Affidavit and Criminal History Investigation Form - Applicants can not, within five (5) years prior to the date of the application, been convicted of or entered a plea of guilty or nolo contendre to any felony, misdemeanor, or other charge relating to the sale, manufacture, distribution, taxability, possession or use of alcoholic beverages or illegal drugs including the offense of driving a motor vehicle under the influence of alcohol or drugs; and has not entered a plea or been convicted of a felony or a misdemeanor of a crime opposed to decency and morality.

Applicants must read and understand the Town of Tyrone's Ordinance, regarding the rules and regulations of the sale of alcoholic beverages. The Chief of Police's signature of approval required.

5. Licensee and License Representative – If the Licensee is not a resident of the State of Georgia, the Licensee must designate a License Representative who shall be a resident of the State and a manager of the business who is on the premises on a regular basis. Must be 21 years of age or older.

_____6. Out-of-State Background Investigation - If the Licensee or the License Representative has not been a resident of the State of Georgia for at least 5 years, then they must provide a certified copy of a driver history and criminal background investigation conducted by a law enforcement agency in their pervious state or states of residence. The background report must include all arrests and convictions for misdemeanors, felonies and local ordinances. This report must be sent directly from the investigating agency to: Town of Tyrone, Police Chief, Tyrone Police Department, 945 Senoia Road, Tyrone, GA 30290



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Alcoholic Beverage License Affidavit & Consent Form

AFFIDAVIT AND CRIMINAL HISTORY CONSENT FORM FOR TOWN OF TYRONE ALCOHOLIC **BEVERAGE LICENSE APPLICATION**

(PRINT FULL NAME), swear that I am at least 21 years of age I, _ and I am competent to provide this affidavit. years and _____ months.

My address is: _____

My previous addresses for the last 10 years are as follows: (Attach separate sheet if necessary)

Social Security #_____ Date of Birth:

Driver's License#/State_____ Race: ______ Sex: _____

I have/have not within 5 years prior to this application, been convicted of, (or entered a plea of nolo contendere to) any felony or misdemeanor relating to the sale/use of alcoholic beverages or illegal drugs.

I have/have not ever been arrested for a crime. If so, details below and the disposition of the arrest are listed below. I understand that failure to disclose any arrest (including DUI's) may result in the denial of the application.

I have/have not ever had beneficial interest in any other alcoholic beverage business in this or any other alcoholic beverage business in this or any other state in which the alcohol license was denied, revoked or other disciplinary action taken. (Beneficial interest here means when a person holds the license in hi own name or when he has legal, equitable or other ownership interest in, or has any legally enforceable interest or financial interest, or derives any economic benefit from, or has control over a business.) If so, please describe in detail. Attach a separate sheet if necessary:

I am/am not the applicant for License Representative. If so, I swear that I am a manager of the business who is on the premises on a regular basis and that I am a resident of the State of Georgia.

I have read the Town of Tyrone's Ordinance regarding the sale of alcoholic beverages and I understand and will comply with rules and regulations. I hereby authorize the Town of Tyrone to request and receive any criminal history information pertaining to me, including driving records, which may be in the files of any state or local criminal justice agency. I solemnly swear, subject to criminal penalties for false swearing that the statements and answers made by me to the foregoing questions in this application for Town license for the sale of alcoholic beverages are true, and no false or fraudulent statement or answer is made herein to procure the granting of such license.

Signature

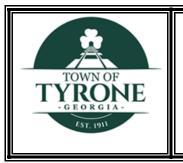
Date

I do hereby certify that the foregoing applicant is personally known to me, that he/she 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 has sworn that said statements and answers are true.

[SEAL]

NOTARY PUBLIC: ______ this _____ day of _____, 20____.

Police Chief: Approval______date_____



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Alcoholic Beverage License Application

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

Business Name:		Business Loc	ati	ion:						
Nature of Business:		Mailing Add	Mailing Address:			Business Phone Number:				
Name of Licensee:		Home Address:			Home Phone Number:					
Name of Licensee Representative:		Home Address:			Home Phone Number:					
Please indicate type of licenses applying for:										
			tail Package Dealer			Wholesale Dealer				
Malt Beverage		Malt Beverage				Malt Beverage				
Wine		Wine				Wine	•			
Distilled Spirits		Distilled Spirits		6	Distilled Spirits					
Please Indicate type of business:										
List owner I information below b		ormationList informor all generalbelow for directors,		Close Corp List inform below for a directors, a stockholder	nation all officers, and		Li	orporation st registered agent for rvice of process below		
NAME		ADDRESS			PHONE NUMBER (Home and Business)					