



Ben Hill County Georgia

Beer & Wine License Application

www.benhillcounty.com

Name of Business _____

Business Location Address _____

City, State, and Zip Code _____

Business Mailing Address _____

City, State, and Zip Code _____

Bus Location Map & Parcel _____ Zoning Classification _____

Business Phone Number _____ Business Email Address _____

Location Manager(s) _____

Type of Business

Corporation Partnership Individual

If this is a Corporation please provide the following information

Corporation Name _____ Date Chartered _____

Applicant/Owner's Information

Applicant's Name _____

Home Address _____

City, State, and Zip Code _____

Social Security Number _____ Date of Birth _____

Home Phone Number _____ Email Address _____

Is the Applicant an American Citizen or Alien lawfully admitted for permanent residency? Yes No

Please list the name(s) and other required information for each person having an interest in this business .

Name _____ Position _____ SSN # _____

Interest _____ Full Address _____

Name _____ Position _____ SSN # _____

Interest _____ Full Address _____

If more space is needed please use the back of this form.

What type of business will you operate at this location? Restaurant Lounge Convenience Store
Other (Describe) _____

License Information: Retail Package Dealer Beer Wine
Consumption on Premises Beer Wine

Have you ever applied for an alcohol beverage license before? If so please give us the year of the application and its disposition:

If Yes give details _____

Are you familiar with Georgia and Ben Hill County Laws regarding the sale of alcoholic beverages? Yes Please Initial _____

Has any liquor 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 regulations of Ben Hill County or the State Revenue Commission relating to the sale and distribution of distilled spirits?

Yes No If Yes please give full details

Have you 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 Ordinance? (Do not include traffic violations with the exception of any traffic offenses pertaining to alcohol or drugs). All other charges must be included even if they are dismissed. Give reason charged or held, date, & place where charged and its disposition

Yes No If Yes please give full details

List the Owner(s) of the building and property:

State the distance of the location of your business in miles to the City Limits of Fitzgerald: _____

If this is a new application, state the straight line distance for the property line of the nearest School, Church, Library, or Public Recreation Area to the wall of the building where alcoholic beverages are sold.

Church _____ School _____ Library _____ Public Recreation _____

State of Georgia, Ben Hill County, I _____

Do solemnly swear, subject to the penalties of false swearing, that the statements and answers made by me as the Applicant, I the forgoing alcoholic beverage application are true.

Applicants Signature _____

I hereby certify that _____

is personally known to be, that he/she signed his/her name to the foregoing application stating to me that he/she knew and understood all statements and answers made herein, and, under oath actually administered by me, has sworn that said statements and answers are true.

This _____ Day of _____ 20 _____

Notary Public _____

This application has been reviewed and approved by the undersigned or their designee.

County Manager _____

Sheriff _____