

BEN HILL COUNTY GEORGIA
BEER, WINE, & LIQUOR APPLICATION

1. NAME OF BUSINESS. The Dog House
2. BUSINESS ADDRESS. 162 Bowens Mill Hwy
3. CITY Fitzgerald STATE GA ZIP 31750
4. BUSINESS PHONE 2294249052 HOME PHONE [REDACTED]
5. APPLICANT NAME AND ADDRESS: Candice Daine Britt
[REDACTED]
Fitzgerald GA 31750
6. APPLICANT SOCIAL SECURITY NUMBER [REDACTED]
- APPLICANT DATE OF BIRTH [REDACTED]
7. BUSINESS LOCATION: A. MAP/PARCEL: 13-3-8 B.) ZONING GB
8. LOCATION MANAGER(S) Candice Britt

9. IS APPLICANT AN AMERICAN CITIZEN OR ALIEN LAWFULLY ADMITTED FOR PERMANENT RESIDENCY? (X) YES () NO

OWNERSHIP INFORMATION

10. CORPORATION (IF APPLICABLE): DATE CHARTERED: / /
11. MAILING ADDRESS: _____
- NAME OF BUSINESS: The Dog House
- ATTENTION: Candice Britt or Bryan Britt
- ADDRESS _____
12. OWNERSHIP TYPE:
- CORPORATION: _____ PARTNERSHIP: _____ INDIVIDUAL
13. CORPORATE NAME: _____

LIST NAME AND OTHER REQUIRED INFORMATION FOR EACH PERSON HAVING INTEREST IN THIS BUSINESS.

NAME POSITION SOCIAL SECURITY NUMBER ADDRESS INTEREST

14. WHAT TYPE OF BUSINESS WILL YOU OPERATE IN THIS LOCATION?

RESTAURANT _____ LOUNGE CONVENIENCE STORE _____

MANUFACTURER _____ DISTRIBUTOR _____

OTHER: (DESCRIBE) _____

15. LICENSE INFORMATION BEER WINE LIQUOR

RETAIL PACKAGE DEALER () () ()

CONSUMPTION ON PREMISES () () ()

WHOLESALE () () ()

16. HAVE YOU EVER APPLIED FOR AN ALCOHOL BEVERAGE LICENSE BEFORE? yes
IF SO, GIVE YEAR OF APPLICATION AND ITS DISPOSITION.

2020 still current in the city of Fitzgerald, moving to new location that is in the county

17. ARE YOU FAMILIAR WITH GEORGIA AND BEN HILL COUNTY LAWS REGARDING THE SALE OF ALCOHOLIC BEVERAGES? yes IF YES, PLEASE INITIAL. (JB)

18. 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? IF SO, GIVE FULL DETAILS.

No

19. 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.

No

20. LIST OWNER OR OWNERS OF BUILDING AND PROPERTY.

Lewis Browning + Bryan Britt

21. STATE DISTANCE OF LOCATION IN MILES TO CITY LIMITS OF FITZGERALD.

Maybe 1/2 mile

22. IF 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 ALCOHOL BEVERAGES ARE SOLD.


A.) CHURCH. 1 mile

B.) SCHOOL 2 mile

C.) LIBRARY 2 mile

D.) PUBLIC RECREATION 1 mile

23. 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 ON THE FORGOING ALCOHOLIC BEVERAGE APPLICATION ARE TRUE.



(APPLICANT SIGNATURE)

24. I HEREBY CERTIFY THAT Candice Britt 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 1st DAY OF September, 2021.

Donna Renea Prather
NOTARY PUBLIC



THIS APPLICATION HAS BEEN REVIEWED AND APPROVAL IS RECOMMENDED BY THE UNDERSIGNED OR THEIR DESIGNEE.

Michael [Signature]
COUNTY MANAGER

[Signature]
SHERIFF

**Ben Hill County
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 are 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.

I, Candice Briff, received a copy of the Ben Hill County Privacy Rights and Privacy Act Statement.

C. Briff
Applicant Signature

8.27.21
Date

Donna R. Prather
County Clerk

8.27.21
Date

Affidavit for Ben Hill County Alcohol Ordinance

I, Candice Bitt, have received a copy of the Ben Hill County Alcohol Ordinance. I understand it is my responsibility to familiarize myself with the law in regards to the manufacture, distribution, and/or sale of alcoholic beverages and my alcohol licenses.

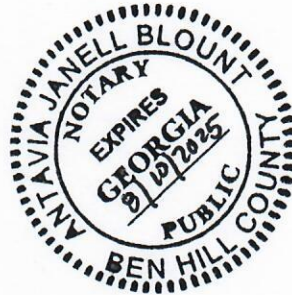
C. Bitt
Applicant's Signature

Candice Bitt
Applicant's Signature

Danna R. Prother
County Clerk

This 27th day of August, 20 21.

Antavia Janell Blount (SEAL)
Notary Public



LSTCN:6431001120 GBITCN:12430429089993 DATE/TIME:2021-08-31 08:26:56 NAME:BRITT,
CANDICE DAINE



Georgia Bureau of Investigation
3121 Panthersville Road
Decatur, Georgia 30034
404-244-2639

LSTCN:6431001120
GBITCN:12430429089993
DATE/TIME:2021-08-31 08:26:56
NAME:BRITT, CANDICE DAINE
PHOTO:PHOTO NOT AVAILABLE

NO GEORGIA OR FBI NATIONAL CRIMINAL HISTORY RECORD FOUND

APPLICANT

LEAVE BLANK

TYPE OR PRINT ALL INFORMATION IN BLACK

LAST NAME NAM FIRST NAME MIDDLE NAME

FBI

LEAVE BLANK

britt candice daine

ALIASES AKA

O
R
I

GA0090000
SO
FITZGERALD, GA

DATE OF BIRTH DOB
Month Day Year

SIGNATURE OF PERSON FINGERPRINTED
Britt
RESIDENCE OF PERSON FINGERPRINTED
105 hayes In fitzgerald ga 31750-6110

CITIZENSHIP CTZ

SEX F RACE W HGT 505 WGT 180 EYES BLU HAIR BRO

PLACE OF BIRTH POB
GA

DATE 08/31/2021 SIGNATURE OF OFFICIAL TAKING FINGERPRINTS
Shatter Dewkey

YOUR NO. OCA

LEAVE BLANK

EMPLOYER AND ADDRESS

FBI NO. FBI

CLASS _____

REASON FINGERPRINTED
3-3-2 Alcohol/Liquor Licensee

SOCIAL SECURITY NO. SOC

REF _____

MISCELLANEOUS NO. MNU



APPLICANT

LEAVE BLANK

TYPE OR PRINT ALL INFORMATION IN BLACK

FBI

LEAVE BLANK

LAST NAME NAM FIRST NAME MIDDLE NAME

britt candice daine

SIGNATURE OF PERSON FINGERPRINTED

[Handwritten Signature]

ALIASES AKA

OR I

GA0090000
SO
FITZGERALD, GA

DATE OF BIRTH DOB
Month Day Year
08/07/90

RESIDENCE OF PERSON FINGERPRINTED
105 hayes in fitzgerald ga 31750-6110

CITIZENSHIP CTZ

SEX F RACE W HGT 505 WGT 180 EYES BLU HAIR BRO

PLACE OF BIRTH POB
GA

DATE 08/31/2021 SIGNATURE OF OFFICIAL TAKING FINGERPRINTS

[Handwritten Signature]

YOUR NO. OCA

LEAVE BLANK

EMPLOYER AND ADDRESS

FBI NO. FBI

CLASS _____

REASON FINGERPRINTED
3-3-2 Alcohol/Liquor Licensee

SOCIAL SECURITY NO. SOC
[REDACTED]

REF. _____

MISCELLANEOUS NO. MNU



1. R. THUMB



2. R. INDEX



3. R. MIDDLE



4. R. RING



5. R. LITTLE



6. L. THUMB



7. L. INDEX



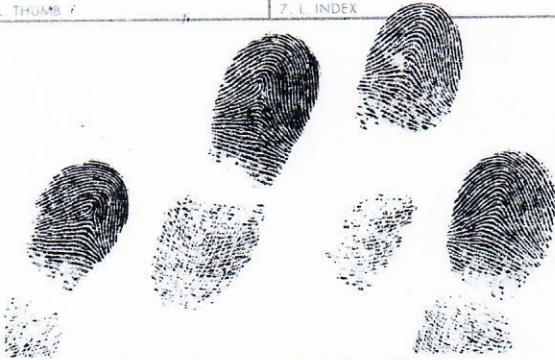
8. L. MIDDLE



9. L. RING



10. L. LITTLE



LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY



L. THUMB



R. THUMB



RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY