

BEN HILL COUNTY GEORGIA
BEER, WINE, & LIQUOR APPLICATION

1. NAME OF BUSINESS. DHYAN LIQUORS LLC
2. BUSINESS ADDRESS. 182- Jacksonville hwy
3. CITY Fitzgerald STATE G.A ZIP 31750
4. BUSINESS PHONE _____ HOME PHONE 732-789-7335
5. APPLICANT NAME AND ADDRESS: PATEL URVASHI BEN. R
41, Dodd trail
Greenville. S.C 29605
6. APPLICANT SOCIAL SECURITY NUMBER [REDACTED]
APPLICANT DATE OF BIRTH [REDACTED]
7. BUSINESS LOCATION: A. MAP/PARCEL: 14426 B.) ZONING C3 commercial
8. LOCATION MANAGER(S) None
9. IS APPLICANT AN AMERICAN CITIZEN OR ALIEN LAWFULLY ADMITTED FOR PERMANENT RESIDENCY? YES () NO

OWNERSHIP INFORMATION

10. CORPORATION (IF APPLICABLE): DATE CHARTERED: / /
11. MAILING ADDRESS: 41, Dodd trail S.C 29605
NAME OF BUSINESS: DHYAN LIQUORS LLC
ATTENTION: _____
ADDRESS _____
12. OWNERSHIP TYPE:
CORPORATION: _____ PARTNERSHIP: _____ INDIVIDUAL
13. CORPORATE NAME: _____

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

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? NO
IF SO, GIVE YEAR OF APPLICATION AND ITS DISPOSITION.

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

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~~ NONE

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.

Pramukh Realty LLC

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

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. 0.4

B.) SCHOOL _____

C.) LIBRARY _____

D.) PUBLIC RECREATION _____

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.



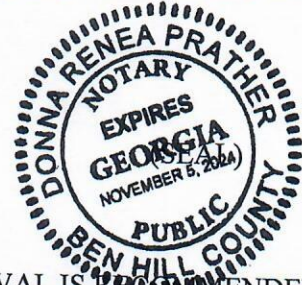
APPLICANT SIGNATURE

3/19/2024

Date

24. I HEREBY CERTIFY THAT PATEL URVASH BEN-R 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 20th DAY OF March, 20 24.
Donna Renea Prather
NOTARY PUBLIC



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

[Signature]
COUNTY MANAGER

[Signature]
SHERIFF

Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is 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, Patel Urvashiben-R, received a copy of the FBI/GBI Privacy Rights and Privacy Act Statement.

Patel

Applicant Signature

3/19/2024

Date

Donna B. Pralthen

County Clerk

3/19/24

Date

Affidavit for Ben Hill County Alcohol Ordinance

I, Peter Urvashi ben R., 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.

Peter Urvashi ben R.
Applicant's Signature

Dorinda B. Preaker
County Clerk

Applicant's Signature

This 19th day of March, 20 24.

Antavia Blount
Notary Public

(SEAL)

