

Board of Commissioners Wilkinson County

MEMBERS OF BOARD:
Flint Shepherd
James Hagins
Robert Dame
Anderson Ford

PO BOX 161
IRWINTON GA 31042
(478) 946-4300
FAX 946-3767

Tracy Strange, County Manager
Benjamin Vaughn, Attorney
e-mail: bdofcomm@wilkinsoncounty.net
website:
www.wilkinsoncounty.net

LICENSE APPLICATION

ID REQUIRED* FEE: \$ _____

PLEASE CHECK WHICH TYPE OF LICENSE YOU ARE APPLYING FOR:

CONSUMPTION ON PREMISES _____
RETAIL PACKAGE _____
WHOLESALE _____
MANUFACTURING _____
SPECIAL EVENT _____
FESTIVAL _____
BREW PUB _____

PLEASE CHECK WHICH PACKAGE YOU ARE APPLYING FOR:

MALT BEVERAGE: _____ DISTILLED SPIRITS: _____
WINE: _____ MALT/WINE/DISTILLED SPIRITS COMBO _____
MALT/WINE COMBO: _____ FARM WINERY TASTING ROOM _____

ADDITIONAL APPLICATION INFORMATION:

1: NAME: _____

2: ADDRESS: _____

3: TELEPHONE NUMBER: _____
CELL NUMBER: _____

4: IS APPLICANT A RESIDENT OF WILKINSON COUNTY? _____ IF THE ANSWER IS NO, THEN PROVIDE THE FOLLOWING INFORMATION OF WILKINSON COUNTY RESIDENT WHO WILL BE HELD RESPONSIBLE FOR COMPLIANCE WITH THE BEER AND WINE ORDINANCE:

NAME: _____

ADDRESS: _____

TELEPHONE / CELL NUMBER: _____

5: DATE OF BIRTH OF APPLICANT: _____

6: SOCIAL SECURITY NUMBER OF APPLICANT: _____

7: APPLICANT'S FIRST TIME FILLING OUT APPLICATION: _____

8: NAME OF PERSON OR AGENT IN CHARGE OF BUSINESS: _____

9: NAME AND ADDRESS OF TRUE OWNER OR OWNERS OF BUSINESS:

10: IF APPLICANT IS RENTING OR LEASING SUCH ESTABLISHMENT, STATE TRUE OWNER OF THE PROPERTY UPON WHICH SAID ESTABLISHMENT IS LOCATED:

11: PROPOSED LOCATION OF BUSINESS: _____

12: IS THE PROPOSED LOCATION WITHIN:

- 300 FEET OF CHURCH, SCHOOL GROUND OR COLLEGE CAMPUS, PUBLIC LIBRARY OR BRANCH, TOURIST OR MOBILE HOME COURT OR MOTEL? _____ YES _____ NO
 - 1,000 FEET OF PRIVATE RESIDENCE? _____ YES _____ NO
 - 1,000 FEET OF AN EXISTING ESTABLISHMENT LICENSED UNDER THIS ORDINANCE? _____ YES _____ NO
 - 1,000 FEET OF AN EXISTING ESTABLISHMENT LICENSED UNDER THE ADULT ENTERTAINMENT ORDINANCE? _____ YES _____ NO
- ALL DISTANCES ARE MEASURED IN A STRAIGHT LINE FROM THE NEAREST PROPERTY LINES OF THE PARCELS.

13: HAS THE PROPOSED LOCATION BEEN:

1. INSPECTED BY THE WILKINSON COUNTY HEALTH DEPARTMENT
_____ YES _____ NO
2. INSPECTED AND APPROVED BY THE WILKINSON COUNTY FIRE MARSHALL _____ YES _____ NO

13: WITHIN THE PAST TEN (10) YEARS, HAVE YOU ENTERED A PLEA OF GUILTY, NOLO CONTENDERE, OR HAVE YOU BEEN CONVICTED OF A FELONY OR OTHER CRIME INVOLVING MORAL TURPITUDE?
_____ YES _____ NO

IF YES, STATE THE CRIME, THE DATE, THE PLEA ENTERED, THE COURT, AND THE SENTENCE:

14: HAVE YOU ENTERED A PLEA OF GULTY, NOLO CONTENDERE, OR HAVE YOU BEEN CONVICTED OF ANY CRIME INVOLVING A VIOLATION OF ANY ALCOHOL CONTROL LAW OF THE UNITED STATES OR THE STATE OF GEORGIA?
_____ YES _____ NO

15. DO YOU CONSENT TO A BACK-GROUND CHECK?
(PLEASE FILL OUT ADDITIONAL BACKGROUND CONSENT ATTACHED)

16. IF THIS IS AN ANNUAL RENEWAL APPLICATION, HAVE YOU BEEN CHARGED WITH ANY OF THE ABOVE CRIMES, OR ENTERED A PLEA OF GUILTY,

NOLO CONTENDRE OR BEEN CONVICTED OF A FELONY OR OTHER CRIME INVOLVING MORAL TURPITUDE SINCE FIRST APPLYING FOR THIS LICENSE?
_____ YES. _____ NO

17: DO YOU INTEND TO SERVE BEER AND WINE FOR CONSUMPTION ON OR OFF THE PREMISES?
ON THE PREMISES _____ OFF THE PREMISES _____

18: HAVE ALL COUNTY AD VALOREM TAXES (REAL AND PERSONAL PROPERTY) FOR WHICH APPLICANT IS LIABLE BEEN PAID? _____

19: IF RENTING, HAS THE RESPONSIBLE PARTY PAID ALL COUNTY ADVALOREM TAXES (REAL AND PERSONAL) FOR THE PROPERTY? _____

20. HAVE YOU REVIEWED A COPY OF THE WILKINSON COUNTY BEER AND WINE ORDINANCE WHICH BECAME EFFECTIVE **SEPTEMBER 3, 1974** AND THE FOLLOWING AMENDMENTS TO SAID ORDINANCE

DECEMBER 3, 1974	Sections 1, 14 and 21
DECEMBER 2, 1975	Section 19
SEPTEMBER 6, 1977	Section 16
JANUARY 2, 1979	Section 16
JANUARY 8, 1985	Section 38
JUNE 4, 1985	Section 21 and 22
DECEMBER 17, 1985	Section 15 and 21
DECEMBER 20, 1988	Section 21
DECEMBER 19, 1989	Section 21
AUGUST 17, 2004	Section A4, B1, B5, C1, C2, C3, D2(c)

AND ARE YOU, TO THE BEST OF YOUR KNOWLEDGE AND BELIEF, IN COMPLAINE WITH SAID ORDINANCE? YES _____ NO _____

BY MAKING THIS APPLICATION, THE UNDERSIGNED APPLIED HEREBY AUTHORIZES WILKINSON COUNTY AND ITS AGENTS TO COMPLETE A THOROUGH CRIMINAL BACKGROUND IVESTIGATION AND AGREE TO COOPERATE IN ANY WAY NECESSARY TO COMPLETE THE INVISTIGATION.

THE UNDERSIGNED APPOCIANT HEREBY CERTIFIES, UMDER OATH, THAT THEY HAVE READ AND UNDERSTAND THE BEER AND WINE ORDNINANCE OF WILKINSON COUNTY AND ALL AMENDMENTS THERE OF:

THE UNDERSIGNED APPLICANT FURTHER CERTIFIES, UNDER OATH, THAT THE FOREGOING STATEMENTS ARE TRUE, THAT HE AGREES TO ABIDE BY THE TERMS OF SAID BEER AND WINE ORDINANCE, SHOULD A LICENSE BE ISSUED, AND THAT

THE MAKING OF ANY FALSE STATEMENT IN CONNECTION WITH SAID LICENSE APPLICATION SHALL CONSTITUTE GROUNDS FOR DENIAL OF SAID LICENSE.

THIS _____ DAY OF _____, 20_____

APPLICANT'S SIGNATURE

SWORN TO AND SUBSCRIBED BEFORE ME,

THIS _____ DAY OF _____, 20_____

NOTARY PUBLIC