

APPLICATION FOR LICENSE TO SELL
ALCOHOLIC BEVERAGES
CITY OF LOOKOUT MOUNTAIN, GEORGIA

A. TYPE OF LICENSE: (Indicate by "X" Type and Category of License Desired)

LIQUOR

Wholesaler _____

Retail Package _____

Consumed on
Premises _____

(a) Restaurant _____

(b) Private Club _____

(c) OTHER: _____

WINE

Wholesaler _____

Retail Package _____

Consumed on
Premises _____

(a) Restaurant _____

(b) Private Club _____

(c) OTHER: _____

BEER

Wholesaler _____

Retail Package _____

Consumed on
Premises _____

(a) Restaurant _____

(b) Private Club _____

(c) OTHER: _____

If additional space is needed to fully complete answers in this application, please attach supplemental sheets.

B. BUSINESS TITLE:

1. (a) Legal Name of Business: _____
(b) Trade Name: _____
2. (a) Location Address: _____
(b) Phone: _____

C. SITING REQUIRMENTS

Distance shall be measured in all directions from the nearest wall enclosing the proposed premises to the nearest property line of any school or church, measured by way of the nearest traveled road, street, or highway.

1. How is the proposed location zoned? _____
2. Is the business within 1,000 yards of college or school campus? _____
3. Is the business within 1,000 yards of a church _____
4. If this is an original application, attach proof of adequate parking facilities of one off-street parking space at least 10 feet wide and 22 feet long for each 200 square feet of customer service area available to applicant's patrons.
5. If the business is to be operated from a building yet to be constructed or from a remodeled building, submit detailed plans and specifications for the new or remodeled building and a building permit.

D. OWNERSHIP OF BUSINESS PROPERTY

Submit copy of deed

1. Owner of property: _____
Date of purchase: _____
2. Is the property rented: _____
If yes, please submit copy of lease agreement or another supporting document
Manner which rent is determined: _____
Amount paid per month: _____
Semiannually: _____ Annually: _____

E. MANNER OF OPERATION

Submit copy of corporate charter, if applicable

1. If operating as a corporation, list all officers and directors

<u>NAME AND OFFICE</u>	<u>ADDRESS</u>	<u>D.O.B</u>	<u>S.S. No.</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. If operating as a corporation, list the stockholders and the amount of interest of each stockholder.

<u>NAME</u>	<u>ADDRESS</u>	<u>D.O.B.</u>	<u>AMOUNT OF INTEREST</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Submit copy of partnership agreement, if applicable

3. If operating as a partnership, list the partners:

<u>NAME</u>	<u>ADDRESS</u>	<u>S.S. No</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

When and where was the partnership organized?

4. List any other individuals or firms owning any interest in or receiving any funds from the operation of this business

<u>NAME</u>	<u>ADDRESS</u>	<u>S.S. No</u>
_____	_____	_____

F. ADDITIONAL INFORMATION

- 1. Has any partner, corporation, officer, stockholder, or spouse any financial interest in any manufacturer or wholesaler of alcoholic beverages?**
- 2. Has any partner, corporation, officer, stockholder, or spouse received any financial aid or assistance (to include land, fixtures, or equipment) from any manufacturer or wholesaler of alcoholic beverages?**

NAME

AMOUNT

DATE

- 3. List any persons, corporations, partnerships, or associations who presently receive or will receive financial gain from the operation of this business (Financial gain or payment shall include payment of gain from any interest in the land, fixtures, building, stock, or any other asset of the proposed operation under the license).**

- 4. In the event any corporation is listed as receiving an interest or income from this operation show the names of the officers and directors of said corporation together with the names of the principal stockholders.**

- 5. State whether applicant, partner, corporation officer, or stockholder holds any alcoholic beverage license in any other jurisdiction. If answer is YES, give name and address of business.**

3. Citizenship: _____

4. Home Address: _____

Phone: _____

5. Resident of Georgia: _____ Years: _____

County of Residence: _____ Years: _____

Resident of Lookout: _____ Years: _____

6. Give names and addresses of ALL children and stepchildren who are now 17 years of age or older:

_____	S.S. No: _____ - _____ - _____
_____	S.S. No: _____ - _____ - _____
_____	S.S. No: _____ - _____ - _____
_____	S.S. No: _____ - _____ - _____
_____	S.S. No: _____ - _____ - _____

7. Occupation for the past seven years in chronological order. State name of company and immediate supervisor and dates of employment.

<u>COMPANY</u>	<u>SUPERVISOR</u>	<u>DATES</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

8. Have you even been convicted or entered a plea of nolo contendere within five years immediately prior to the filing of this application for any felony or misdemeanor? _____ If answered YES, please continue below. Otherwise, skip to number 9.

<u>DATE</u>	<u>PERSON CHARGED</u>	<u>OFFENSE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

<u>LOCATION (CITY & STATE)</u>	<u>DISPOSITION</u>
_____	_____
_____	_____
_____	_____

9. Do you or your spouse have an interest in other liquor stores? If so, state in how many stores each is interested, and where the same are located. Explain fully.

10. Are you or any member of your family the owner, lessor, or sublessor of any real estate which is occupied by a retail liquor store? If so, give the location, information as to any lease or rental agreement, amounts of rents received, to whom rented or leased.

11. Are you or any member of your family the executor or administrator or beneficiary or heir of any estate having any interest in retail liquor store? If so, give the location, and the amount of your interest in the estate?

12. Are you or any member of your family the beneficiary or trustee of any trust fund having any interest in a retail whiskey store? If so, give your position, the name of the trust and the amount of income you receive.

13. Have you or your spouse financial interest in any wholesale liquor business? If so, give details.

H. INVESTED CAPITAL

To be filled out by all individuals, partners, corporation officers and principal stockholders

1. State the amount of money to be invested by each individual who has an interest in the business. If a corporation or partnership, list each individual separately.

2. Has your interest or the interest of a partner, corporation member, or stockholder in this establishment been assigned, or pledged or hypothecated to any person, form, or corporation, or has any agreement been entered into whereby your interest or the interest of a partner, corporation member, or stockholder is to be assigned, pledged, or sold in part or in whole to any person, firm, or corporation? _____ If YES, explain in detail.

3. Have you or a partner, or a corporation officer, or a stockholder ever filed bankruptcy? _____ If YES, furnish details on a separate sheet.

4. List below the names and addresses of any persons, firms, or corporations which either have or will advance monies to you or to any partner, corporation officer, or stockholder to assist in financing your investment in this enterprise.

<u>NAME & ADDRESS</u>	<u>RELATIONSHIP TO APPLICANT</u>	<u>AMOUNT OF LOAN</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

5. Assets of applicant:

<u>TYPE OF ASSET</u>	<u>LOCATION</u>	<u>AMOUNT</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

ACCOUNTS AND NOTES RECEIVABLE

<u>TYPE & DUE DATE</u>	<u>AMOUNT</u>
----------------------------	---------------

	\$
	\$
	\$
	\$
	\$

OTHER CURRENT ASSETS OR INVESTMENTS INCLUDING STOCKS, BONDS, ETC., REAL ESTATE, AND OTHER PERSONAL PROPERTY:

	<u>AMOUNT</u>
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL ASSETS	\$

6. STATEMENT OF LIABILITIES – DESCRIBE FULLY.

Indicate secured liabilities. (if additional space is required, attach supporting schedules)

CURRENT LIABILITIES

<u>NOTES PAYABLE</u> <i>(Name, Bank, Branch)</i>	<u>DUE DATE</u>	<u>HOW SECURED</u>	<u>AMOUNT</u>
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

ACCOUNTS PAYABLE:

Provision for current Year’s Federal Income Tax:

	\$
--	----

Liability for Federal Income Tax (Delinquent):

	\$
--	----

Provisions for Other Current Taxes:

	\$
--	----

Liability for Other Delinquent Taxes:

\$ _____

MORTGAGES PAYABLE:

HOW SECURED

PAYMENTS

TOTAL

<u>HOW SECURED</u>	<u>PAYMENTS</u>	<u>TOTAL</u>

OTHER LIABILITIES:

\$ _____

\$ _____

\$ _____

Total Liabilities:

\$ _____

Contingent Liabilities:

\$ _____

7. Are you familiar with the City of Lookout Mountain Ordinances, State Laws and Regulations, Federal Laws and Regulations governing the operation of this type of business? _____
Do agree to abide by such ordinances, laws, and regulations? _____

I. ADDITIONAL ATTACHMENTS:

1. Personal performance bond payable to the City of Lookout Mountain, Georgia
2. Annual License Fee payable to the City of Lookout Mountain, Georgia
3. Completed application form with all attachments and requirements for a state license.

This license is required to be posted in a conspicuous place on the business premises at the address specified below. This license may not be transferred.

CITY OF LOOKOUT MOUNTAIN, GEORGIA
LICENSE NO. _____

Issued Pursuant to Application and Under the Terms and Conditions of Ordinance No. 69 of the City

Name: _____

Address: _____

Is licensed: to sell Controlled Beverages (Liquor, Malt Beverages, and Wine) for consumption on the premises described above.

This license is valid for: _____

“Any license issued hereunder shall be valid only for the calendar year indicated thereon and no such License may be renewed. A licensee who desires to continue in business during the next or subsequent calendar year must make a new application for such year on or before November 1 of the preceding year....”

Ordinance No. 69

Receipt of TWO HUNDRED FIFTY AND 00/100 Dollars (\$250.00)
is hereby acknowledged by the Treasurer of the City of Lookout Mountain, Georgia.

THIS LICENSE IS A MERE PRIVILEGE SUBJECT TO BEING REVOKED AND ANULLED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF LOOKOUT MOUNTAIN, GEORGIA UPON NOTICE AND OPPORTUNITY TO BE HEARD.

CITY OF LOOKOUT MOUNTAIN, GEORGIA
By _____

Clerk, City of Lookout Mountain, Georgia

