

**SPECIAL EVENT  
ALCOHOLIC BEVERAGE  
INSTRUCTION SHEET**

**SATISFACTORY COMPLETION OF THE FOLLOWING REQUIREMENTS ARE NECESSARY TO FILE APPLICATIONS. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**

- ❑ **1. TWO ORIGINAL SPECIAL EVENT/OUTDOOR FESTIVAL APPLICATIONS** – Answer all questions on both applications legibly appropriately in black ink or typed. Be sure applications are notarized.
- ❑ **2. PERSONAL HISTORY FORM/FINGERPRINT CARDS** – All applicant/licensee/agent and spouse (if applicable) must be fingerprinted. One (1) Personal History Card and spouse (if applicable) must be completed and signed. Fingerprints are \$20.00 per card (payment must be in the form of a money order/cashier's check ). If applicant has a corporation, the agent and first (5) corporate officers or major stockholders must complete a personal history card and be fingerprinted. (Fingerprints can be obtained from another Law Enforcement Agency).
- ❑ **3. CORPORATE PAPERS** – Submit a Certificate of Incorporation and a copy of the Corporate Charter and/ Bylaws that have been properly signed by the Secretary of State and the registered agents(s) for the corporation. List all percentages held and title of each officer on the application.
- ❑ **4. LETTER OF CLEARANCE** – APPLIES TO LICENSEE-AGENT ONLY.
  - ❑ **A. Federal Clearance** – verifying that neither the applicant/licensee/agent nor spouse has been convicted of a crime within the past (10) years. Federal Clearance may be obtained from the Federal District Court (See the Clerk of Court) Richard B. Russell Building, 75 Spring Street, Atlanta, Ga. 30303.
  - ❑ **B. Certificate of Residence** – Applicant/Licensee/Agent must reside in one of the thirteen Metro-Atlanta counties (Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding and Rockdale). The Probate Court of the county in which you may reside may sign the certificate verifying residency. (See the Clerk of Superior Court).
  - ❑ **C. Proof of Citizenship** – Applicant/Licensee/Agent must be a citizen of the United States or an alien lawfully admitted for permanent residence. A copy of the citizenship naturalization certificate or resident alien status is required. A United States Passport or Birth Certificate may also be utilized to prove citizenship.
  - ❑ **D. Three Letters of Reference** – May be furnished by any three (3) person who have known the applicant(s) for at least three (3) years. Letter must include name, address and telephone number.
  - ❑ **E. Two (2) small photos** – Size 2 x 2 (passport size).

- ❑ 5. **LEASE OR VALID DOCUMENT** – Shows applicant has legal access to the proposed premises (deed, lease, sublease, rental agreement, etc.).
- ❑ 6. **FINANCIAL INVESTMENTS** – Current Licensed alcohol holders with the City of Atlanta are not required to provide financial information. Non-profit organizations must provide a copy of the Internal Revenue Service form 501C-3.
- ❑ 7. **APPLICATION FEES/LICENSE FEES- MONEY ORDERS OR CASHIERS CHECKS ONLY.**  
(All Fees Are Non-refundable)
 

A. Profit Application Fee:	<b>\$100.00</b>
B. Profit License Fee:	<b>\$500.00 per day</b>
C. Non-profit Application Fee:	<b>\$25.00</b>
- ❑ 8. **APPROVAL OF FIRE, HEALTH AND BUILDING DEPARTMENTS-** Fire, Health and Building inspection forms will be issued to the applicant/licensee/agent at the time the application is accepted by an investigator. These documents must be taken to the appropriate departments within 24 hours. An inspection of the premises will be conducted and sent back to the License and Permits Office. It is the applicant/licensee agent's responsibility to ensure that the inspection forms are sent back to the License and Permits Office. These inspections should be received no later than 7 days prior to the License and Review Board Hearing.
- ❑ 9. **LICENSE REVIEW BOARD HEARING-** All applicants/licensee/agent must appear before the City of Atlanta License and Review Board (No substitute individuals will be permitted). Once an application has been accepted by an investigator, a tentative License and Review Board hearing date will be assigned.
- ❑ 10. **MAYOR'S APPROVAL-** The City of Atlanta Mayor is the approving authority for all Special Event Applications. After the License and Review Board hearing date the special event application will be forwarded to the Mayor for final review and signature.
- ❑ 11. **BUSINESS LICENSE OFFICE-** After the Mayor has approved and signed the Special Event Application, a copy of the application will be forwarded to the Business License Office. Contact the Business License Office at (404) 330-6000 to obtain the Special Event Alcohol License.

***IF THERE ARE ANY QUESTIONS CONCERNING THE COMPLETION OF THE APPLICATIONS, PLEASE FEEL FREE TO CALL THE LICENSE AND PERMITS OFFICE FOR ASSISTANCE AT (404) 546-4470.***

***PLEASE CALL FOR AN APPOINTMENT TO FILE AN APPLICATION. APPOINTMENTS ARE SCHEDULED MONDAY, TUESDAY AND WEDNESDAY FROM 9:00 AM TO 2:00PM.***

***NOTE: ALL APPLICATIONS MUST BE RECEIVED BY THE POLICE DEPARTMENT 30 DAYS PRIOR TO THE DATE OF THE SPECIAL EVENT.***

**LICENSE AND PERMITS UNIT  
3493 DONALD LEE HOLLOWELL PARKWAY  
ATLANTA, GEORGIA 30331**



# CITY OF ATLANTA

## Certificate of Residence For Retail Package Liquor Applicants Only

State of Georgia, \_\_\_\_\_ County  
I, \_\_\_\_\_ Judge of the probate Court,  
for \_\_\_\_\_ County, Georgia, Hereby certify that  
\_\_\_\_\_ is now, and has been a Bona Fide Resident of the state of  
Georgia for one year in the county of \_\_\_\_\_ for one year immediately  
preceding the date of this affidavit, based upon the affidavit of applicant, and the  
evidence submitted therewith. In Witness Whereof, I have hereunto set my hand  
and affixed the seal of said Probate Court this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Judge of the Probate court

\_\_\_\_\_  
County, Georgia

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## Certificate of Residence For All Other Alcoholic Beverage License Applicants

State of Georgia, \_\_\_\_\_ County  
I, \_\_\_\_\_, Judge of the  
Probate Court For \_\_\_\_\_ County, Georgia, Hereby  
Certify that \_\_\_\_\_ is now a Bona Fide  
resident of the state of Georgia and county of \_\_\_\_\_ based upon the  
affidavit of applicant, and the evidence submitted therewith. In Witness Whereof, I  
have hereunto set my hand affixed the seal of said Probate Court this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Judge of the Probate Court

\_\_\_\_\_  
County, Georgia



**ATLANTA POLICE DEPARTMENT  
PERSONAL HISTORY RECORD**

PERMIT TYPE: \_\_\_\_\_ DATE: \_\_\_\_\_

Name in FULL (Please Print) \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Place of Birth \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
(City, State) (Day, Month, Year)

Race: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License # \_\_\_\_\_

Have you been convicted of any law? Federal: \_\_\_\_\_ Foreign Country: \_\_\_\_\_ State Law: \_\_\_\_\_

City Ordinance: \_\_\_\_\_ if so, explain: \_\_\_\_\_

List names and addresses of employers for the past three (3) years: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Finger printed by: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**CRIMINAL HISTORY CONSENT**

I hereby authorize the Atlanta Police Department/License and Permits Unit to receive any criminal history record information pertaining to me which may be in the files of any state local criminal justice agency in Georgia. I also acknowledge that any information I provide on this application can be made publicly available under the Georgia Open Records Act O. C. G. A. 50-18-70.

Have you ever been charged or convicted of any violation of the law? ( ) Yes ( ) No

Date of Occurrence: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Disposition: \_\_\_\_\_ Explain: \_\_\_\_\_

I DO HEREBY SWEAR OF AFFIRM THAT THE FOLLOWING IS TRUE AND CORRECT UNDER PENALTY OF

CITY ORDINANCE 106-90. (SIGNATURE) \_\_\_\_\_

SAVE Affidavit



CITY OF ATLANTA AFFIDAVIT  
VERIFYING STATUS FOR RECEIPT OF PUBLIC BENEFIT  
SUBMITTED TO DEPARTMENT OF POLICE/LICENSE AND PERMITS

By executing this affidavit under oath, as an applicant for a City of Atlanta Contract, Business License or Georgia Occupation Tax Certificate, Alcohol License, Taxi Permit, Insurance Company License or other public benefit as referenced in O.C.G.A. Section 50-36-1, I am stating the following with respect to my application for a City of Atlanta public benefit:

For: \_\_\_\_\_

[Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity]

1) \_\_\_\_\_ I am a United States Citizen

OR

2) \_\_\_\_\_ I am a legal permanent resident 18 years of age or older or I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.\* **All non-citizens must provide their Alien Registration Number below.**

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of Code Section 16-10-20 of the Official Code of Georgia.

Signature of Applicant:

Date:

\_\_\_\_\_

\_\_\_\_\_

Printed Name:

\_\_\_\_\_

SUBSCRIBED AND SWORN  
BEFORE ME ON THIS THE

\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

\*

\_\_\_\_\_  
Alien Registration number for non-citizens

\*Note: O.C.G.A. § 50-36-1(e)(2) requires that aliens under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien," legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below:

\_\_\_\_\_



**CITY OF ATLANTA**

**APPLICATION FOR PERMIT TO OPERATE A:**     **Special Event**  
 **Outdoor Festival**

All applications must be typed or legibly printed in black ink. Each question must be answered completely and correctly. If the space provided herein is not sufficient, attach additional information. Applications must be signed, dated notarized and filed in the License and Permits Office, thirty (30) days prior to the date of the event. Permits issued are only valid for the dates, times and location specified in this application. Proof of non-profit status must be submitted with this application. The License and Permits Unit is located at 3493 Donald Lee Hollowell Parkway Atl., Ga.

- 1. Is applicant: ( ) Sole Proprietorship    ( ) Partnership    ( ) Corporation
- 2. (A) Legal name of business: \_\_\_\_\_  
(B) Operating / Trade name of business: \_\_\_\_\_
- 3. Type of Business: \_\_\_\_\_ ( ) Profit    ( ) Non-Profit
- 4. Location of Business: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_
- 5. Full name of Applicant: \_\_\_\_\_
- 6. Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home: \_\_\_\_\_ Work: \_\_\_\_\_
- 7. Agent's occupation, business interest(s) and/or employer(s) for the past ten (10) years:

Company	Address	Position	Dates

7. If a corporation or partnership, indicate the following for all officers, members of board of directors, trustees and/or principal stockholders. If a partnership, include all partnership.

Name	Address	DOB	SSN	Position	% Int.

8. State the amount and source of money that has or will be invested by each individual who and interest in the event. If a corporation or partnership, list each individual separately:

Name	Amount	Source of Funds

9. List any other individual(s) or firm(s) owning any interest in or receiving any funds from the operation of the event:

Name	Amount	Source of Funds

10. Location where event is to be held. (If park, name and address of park)

\_\_\_\_\_

11. Name and address of property owner where event will be held.

\_\_\_\_\_

12. If property rented, amount and manner in which rent is determined.

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13. Describe nature and character of business. Be specific.

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14. Day(s), date(s) and time of event:

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15. Indicate the type of alcoholic beverage which will be sold:

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16. Do you currently hold a license to sell/serve alcohol in the City of Atlanta?  Yes  No

17. Does agent, any partner(s) or corporation officer, board member, principle shareholder or trustee Have, within five (5) years, any conviction(s) or pending charge(s) for the violation of any federal, state or local laws(s), ordinance or regulation?

*(For the purpose of this question, the term "conviction" shall include an adjudication of guilty, a plea of nolo contendere or the forfeiture of a bond.)*

Person Charged	Date	Offense	Location (city& state)	Disposition



I, \_\_\_\_\_, being duly sworn accordingly to law, do swear that the facts and things stated by me in the foregoing answers to questions are true, and no false or fraudulent statement has been made (herein that such answers were made in order to procure the granting of such license).

\_\_\_\_\_  
Signature of Licensee/Agent

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Signature and Title of person other than  
Licensee/Agent filling out this application

(\_\_\_\_\_) \_\_\_\_\_  
Telephone Number

Receiving Investigator: \_\_\_\_\_

Date Received: \_\_\_\_\_

Tentative License Review Board Date: \_\_\_\_\_