

ANNUAL ALCOHOLIC BEVERAGE APPLICATION



ATLCORE
BUSINESS LICENSING & PERMITTING PORTAL

USER GUIDE








SUBMISSION INSTRUCTIONS





Submission Instructions

These instructions will guide you through submitting an online application through the portal. See the Alcoholic Beverage Application for full instructions online at (<https://www.atlantapd.org/i-want-to/forms/-folder-53>).

-  **APPLICATION COMPLETENESS** -Answer **ALL** questions on the application. Be sure to submit a notarized Certification Form.
-  **PERSONAL HISTORY FORM** -A personal history form is required for the agent. If applicant is a corporation, the agent and first (5) corporate officers or major stockholders must complete a personal history card and be fingerprinted.
-  **FINGERPRINTS** -Fingerprints will not be accepted through the online portal and are required for the agent and the ownership. The Agent will be fingerprinted in the License and Permits Office by appointment only. If applicant is a corporation, the first 5 owners will need to provide fingerprints.
-  **NOTARIZED DOCUMENTS** – Ensure that are documents that require notarization are Notarized.
-  **APPLICATION FILING FEE** - \$300.00 per application. This fee must be submitted through the online portal upon submission of the application. Without payment of the application filing/processing fee, your application will not be processed.
-  **ANNUAL LICENSE FEES** – The Annual Alcohol License Fees will be submitted to the License and Permits Unit when the assigned investigator schedules your appointment. Only certified funds (money order or cashier’s check) will be accepted for the license fee.
-  **After submitting, you will receive a confirmation message and an assigned License Record Number. An Investigator or Inspector will contact you for further processing of your application.**

REQUIRED FORMS CHECKLIST

New Application

- Government Issued ID (Non-Expired)
- Consent Form
- Personal History Form (Needed for Agent & First Five Owners of the Corporation)
- Corporate Papers
- NPU Form
- Certified Statement for Parking Verification (10-57(3)) (*Only if Nightclub*)
- Save Affidavit
- E-Verify
- Federal Clearance (Applicant/Agent and/or Spouse)
- Certificate of Residence (Applicant/Agent)
- Proof of Citizenship (Applicant/Agent)
- Three Letters of Reference
- Upload color photo
- Alcohol Certified Survey (*Only if applicant will have live entertainment*)
- Lease or Valid Document
- Financial Investments/6 months bank statements
- Menu
- Floor Plan
- Property Owner's Notification

If Private Club:

- Private Club (also include) Salaries and Other Benefits received by each officer, trustee and employee
Copy of 501c (Internal Revenue Code Tax Exempt Documentation)
Membership Application

Change of Agent

- Consent Form
- Personal History Form
- Save Affidavit
- E-Verify
- Federal Clearance (Applicant/Agent and/or Spouse)
- Certificate of Residence (Applicant/Agent)
- Proof of Citizenship (Applicant/Agent)
- Three Letters of Reference
- Upload Color Photo

Smoking Exemption On-Premise Consumption

Will you be applying for a Certificate of Exemption from the City of Atlanta's Prohibition of Smoking? (See *City of Atlanta Code of Ordinances Sec. 86-32 – Prohibition of smoking, and Sec. 10-76. – Indoor Air Certificate of Exemption*)

If yes, please provide a statement from a certified public accountant demonstrating you are eligible for the exemption per *City of Atlanta Code Sec. 86-33(2) – Areas exempt from smoking prohibitions.*

Additional Items For: Retail Package / Package Store

- Less than 5% of Beer/Wine Sales Form (*Package Store Only*)

Transfer of Location

- Certified Statement for Parking Verification (10-57(3)) (*Only if Nightclub*)
- Alcohol Certified Survey (*Only if applicant will have live entertainment*)
- Lease or Valid Document
- Floor Plan
- Property Owner's Notification

Adding Additional Facility / Adding Patio

- Government Issued ID (Non-Expired)
- NPU Form
- Floor Plan
- Upload Photo

Adding Live Entertainment

- Government Issued ID (Non-Expired)
- NPU Form
- Floor Plan
- Upload Photo

REQUIRED FORMS



CERTIFICATION

ARE YOU FAMILIAR WITH THE CITY OF ATLANTA ORDINANCES, STATE LAWS AND REGULATIONS GOVERNING THE OPERATION OF ESTABLISHMENTS THAT SERVE AND/OR SELL ALCOHOLIC BEVERAGES? () YES () NO

DO YOU AGREE TO ABIDE BY SUCH ORDINANCES, LAWS AND REGULATIONS? () YES () NO

IT IS THE RESPONSIBILITY OF THE AGENT TO ENSURE THAT ALL LICENSES TO SELL ALCOHOLIC BEVERAGES ARE RENEWED NO LATER THAN JANUARY 1ST OF EACH YEAR.

I, _____, BEING DULY SWORN ACCORDING TO LAW, DO SWEAR THAT THE FACTS AND DETAILS STATED BY ME IN THE FOREGOING ANSWERS TO QUESTIONS ARE TRUE AND COMPLETE, AND NO FALSE OR FRAUDULENT STATEMENT IS MADE HEREIN — THAT SUCH ANSWERS WERE MADE IN ORDER TO PROCURE THE GRANTING OF SUCH LICENSE.

SIGNATURE OF AGENT/LICENSEE

DATE

SWORN TO AND SUBSCRIBED

BEFORE ME THIS _____

DAY OF _____, 20 _____

NOTARY PUBLIC

SIGNATURE AND TITLE OF PERSON OTHER THAN AGENT FILLING OUT THIS APPLICATION

TELEPHONE NUMBER



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

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 and has been a Bona Fide Resident of the state of Georgia in the county of _____ 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

CITY OF ATLANTA POLICE DEPARTMENT APPLICATION FOR LICENSE TO SELL ALCOHOLIC BEVERAGE



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 License Number: _____

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)

O.C.G.A. § 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a(n) _____ [type of public benefit], as referenced in O.C.G.A. § 50-36-1, from _____ [name of government entity], the undersigned applicant verifies one of the following with respect to my application for a public benefit:

- 1) _____ I am a United States citizen.
- 2) _____ I am a legal permanent resident of the United States.
- 3) _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

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 O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in _____ (city), _____ (state)

Signature of Applicant

Printed Name of Applicant

SUBSCRIBED AND SWORN
BEFORE ME ON THE
____ DAY OF _____, 20____

NOTARY PUBLIC
My Commission Expires:

Private Employer Affidavit Pursuant To O.C.G.A. § 36-60-6(d)

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for a business license, occupational tax certificate, or other document required to operate a business as referenced in O.C.G.A. § 36-60-6(d):

Section 1.

Please check only one:

- (A) _____ On January 1st of the below signed year, the individual, firm, or corporation employed more than ten (10) employees.
- (A) _____ On January 1st of the below signed year, the individual, firm, or corporation employed ten (10) or fewer employees.

*** If the employer selected Section 1(A), please fill out Section 2 below.

Section 2.

The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. §36-60-6. The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as follows:

Name of Private Employer

Federal Work Authorization User Identification Number

Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, _____, 201__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires: _____

CONSENT FORM

I hereby authorize the Atlanta Police Department's License and Permits Unit to receive any criminal history record information pertaining to me, which may be in the files of any state or local criminal justice agency in Georgia or in the files of the Federal Bureau of Investigation.

Full Name (Please Print)

Address

City

State

Zip Code

Race

Sex

DOB

Social Security Number

Signature

SWORN TO AND SUBSCRIBED
BEFORE ME THIS _____
DAY OF _____, 20 _____

NOTARY PUBLIC

PROPERTY OWNER'S NOTIFICATION

Pursuant to City of Atlanta Code of Ordinances Section 10-109 (h):

"Property owners of licensed premises will be responsible to a reasonable extent for unlawful activity which occurs on their premises on a regular basis such that the property owner knows or should have known that such unlawful activity was taking place on the licensed premises. If it appears that such activity was encouraged or if it appears that the property owner could have prevented such activity, in addition to being authorized to deny, revoke and refuse to renew the license, the Mayor shall be authorized to deny the issuance of any license under this division at that location for a period up to two years from the occurrence of such unlawful activity, and such property shall also lose its permitted and nonconforming uses for the same period."

I, _____, owner of the property located at _____, have read and am familiar with the above cited code section.

Signature of Property Owner

Date

CITY OF ATLANTA POLICE DEPARTMENT APPLICATION FOR LICENSE TO SELL ALCOHOLIC BEVERAGE

NEIGHBORHOOD PLANNING UNIT (NPU) _____ REPORT
TO LICENSE REVIEW BOARD

It is the responsibility of the applicant to present Section 1 of his/her application for a license to sell alcoholic beverages before the appropriate NPU. The applicant must first come to the Bureau of Planning, 55 Trinity Ave., Suite 3350 to file a copy of Section 1 of the application and obtain a "Notice to Appear" including a date for the Application's appearance at the NPU. Failure by the applicant to attend the NPU meeting will result in the non-acceptance of the application by the License & Permits Unit.

Application Date: _____

_____	Proposes to operate a (n)	<u>Circle:</u>
Name of Applicant		New Business
_____		Change of Ownership
Type of Business		Change of Agent
_____		Change of Licensee
Name of Business		Other

Address of Business	City, State, Zip	

_____	_____	_____
Applicant Telephone Number (Business/Office)	Applicant Telephone Number (Other)	NPU Date
TO: Chief of Police		
Attention - License & Permits Unit		

This is to advise that Agent/Licensee _____ appeared before our NPU meeting on the above meeting date to obtain a license at the above listed location.

Applicant Did Not Appear

NPU Recommendation: Approved Denied Recommendation

Comments:

_____ Date _____ NPU Chairperson or Designated Representative

_____ Date _____ Commissioner, DPCD or Designee

FOR LICENSE & PERMITS USE ONLY

License Review Board Hearing _____ DPCD notified: Yes No

Notice by: _____ Date: _____

**PACKAGE STORES
LESS THAN 5% OF BEER/WINE SALES**

Date of Initial Alcohol License: _____

I, _____, have read the Atlanta City Ordinance, Section 10-88.1(B) on beer and/or wine package sales by a convenience store. I understand that less than 5% of my gross receipts from my business will be derived from the sale of alcoholic beverages. Beer and wine package sales of 5% or more may possibly result in the loss of my license to sell alcohol.

Signature of Agent

SWORN TO AND SUBSCRIBED
BEFORE ME THIS _____
DAY OF _____, 20_____

NOTARY PUBLIC



**CITY OF ATLANTA
ATLANTA POLICE DEPARTMENT
LICENSE & PERMITS UNIT**

License Review Board Agenda Notification

Name of Business: _____

Address: _____

Licensee/Agent: _____

I, _____, licensee/agent for the above referenced location, understand that it is my sole responsibility to ensure that all documents/inspections (Building, Health, Fire, Advertisements) are completed and submitted to the License & Permits Unit one week prior to my scheduled License Review Board date.

I further understand that if these documents are not received by the License & Permits Unit by the due date, my application will not be placed on the next scheduled License Review Board agenda.

Signature

Date

Investigator

Date

REFERENCE: Atlanta City Code Chapter 10, Article II, Division 2, Section 10-66(b) or www.municode.com.