**City of Valdosta**

**Business License Office**

**Alcohol Application**



Revised as of May 1, 2013

ORDINANCE NO 2011 – 41

Amended Code - Growlers

ORDINANCE NO 2015 - 4



ALCOHOL

APPLICATION

**MAILING ADDRESS:**

City of Valdosta Business License Office

P. O. Box 1125

Valdosta, GA. 31603-1125

**OFFICE ADDRESS:**

Business License Office – 229.259.3520

102 North Lee Street

Valdosta, GA. 31601

[citybusinesslicense@valdostacity.com](mailto:citybusinesslicense@valdostacity.com)

Police Department – 229.293.3099

500 Toombs Street

Valdosta, GA. 31601

[akirk@valdostacity.com](mailto:akirk@valdostacity.com)

Planning & Zoning Office – 229.259.3563

300 North Lee Street

Valdosta, GA. 31601

[ttolley@valdostacity.com](mailto:ttolley@valdostacity.com)

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| **Instructions and Conditions for Applying for a License to Sell Alcoholic Beverages**  **by the Container or by the Drink** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

* Every question must be fully and correctly answered, type written or legibly hand printed. Do not use initials. Spell out all names. Failure to do so may result in the denial or, if granted, the later revocation of a license. If the space provided is not sufficient, answer the question on a separate sheet and indicate in the space provided that a separate sheet is attached. Make sure any additional sheet attached includes the business name.
* The completed application form and the required nonrefundable application fees must be submitted at the same time the application is submitted to the business license department. Fees must be submitted in the form of cash, certified check or money order. All checks will be deposited daily as received by the City of Valdosta Customer Service Department.

**Ordinance No. 2011 – 41 Section 7-1044 Application Fee**

The application for a License shall be accompanied by a check payable to the City or cash in an amount as set forth in the schedule of fees and charges on file in the office of the Clerk of Council as an application fee to cover the cost of processing the application and conducting necessary investigations. Such fee shall be nonrefundable upon denial of the application and shall not apply toward any license fee or excise tax payable by the Licensee if the application is approved.

* Upon approval, all additional fees must be tendered prior to issuance of the alcohol certificate. Fees must be submitted in the form of certified check, cash or money order. All checks will be deposited daily as received by the City of Valdosta Customer Service Department.
* Any change in the ownership or any other status of the licensed operation which would change any answers on the original alcohol permit application must be reported in writing to the City of Valdosta Business License Office within thirty (30) calendar days from the time of such change. Failure to do so may result in the revocation of the license.

**Ordinance No. 2011 – 41 Section 7-1055 Transfer of Licenses**

1. All Licenses issued by the City shall be personal to the Person to who issued and are applicable only to the Premises for which application therefore is made and accordingly no License shall be transferable to any other Person or entity or to any other Premises.
2. Notwithstanding the provisions of subsection (a) of this section, in the event of the death of any Licensee, or any Person holding interest in a License, then upon application and approval by the City Manager subject to the terms of this section, a License may be utilized by the administrator, executor or personal representative of such deceased person, or by the heirs at law of the deceased person, in the event that such administrator, executor, personal representative or heirs meet all of the qualifications contained in this chapter for the issuance of such License, with the License of such deceased person to be so utilized by the administrator, executor, personal representative, or heirs of such deceased person only for the time necessary to complete the administration of the estate of such deceased person, but in no event longer than six (6) months from the date of the death of such deceased person, with such License to lapse upon the earlier of such six-month period, completion of such administration, or December 31 of the year in which death shall occur.
3. Notwithstanding the provisions of subsection (a) of this section, in the event that the Licensee certifies under oath in writing to the City Manager that the business served by such License is relocating to another physical location within the City, the City Manager may, upon payment to the City of an application amendment fee, provide for an amended License specific to the new location if such new location meets all of the requirements of this article. In no event shall any Licensee operate under a License at more than one location within the City at any time.
4. Notwithstanding any other provision of this article, any change in the ownership interests of a partnership or corporation which holds a License, as reflected in the initial application for such License, shall cause the immediate cessation of sales or disbursement of any alcoholic beverages. No sales or disbursement of alcoholic beverages shall be made until such change in the ownership interests is approved by the City Manager based upon the qualification of all persons then interested therein in accordance with the provisions hereof or until the issuance of another License to such corporation or partnership upon a new application therefore; provided, however, that this provision shall not apply in a situation in which one or more individuals who have existing interest in the entity which holds the License cease to have such interest and the remaining ownership interest in such entity remains unchanged except as to the division of the remaining interests therein.

* Background screening is required on all owners and/or partners as well as managers and/or anyone else listed on the alcohol permit application. The City of Valdosta Police Department will determine specific screening requirements upon review of application.
* The location must meet all health and sanitation requirements set for food service establishments by the City, State and Federal government as well as being located only in areas classified at the time of the issuance by the Valdosta Land Development Regulations, as amended, as C-C, C-D, and C-H. Following: school building, kindergarten, day care center, church building, municipal park, municipal recreation area, and private residence (street address, name required) as required by the ordinance. The main entrance of the building must meet the distance requirements of 50 feet from the premises listed above. Distance shall be measured in a straight line from the main entrance of the school or church building in question to the main entrance of the establishment for the sale of alcoholic beverages [Ord.2011-35§7-1041(b)] No license shall be issued except in the zones as defined by the applicable local zoning ordinances. Contact the City of Valdosta Zoning Department for zoning questions at 229.259.3563.

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| **Instructions and Conditions for Applying for a License to Sell Alcoholic Beverages**  **By the Container or by the Drink continued.** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

* The applicant shall be responsible for filing plans for review with Planning and Zoning Office for occupancy requirements.

**Ordinance No. 2011 – 41 Section 7-1039 Additional Qualifications for Retail Malt Beverage Consumption License and Distilled Spirits Consumption License:**

* + In addition to the requirements of Section 7-1038, Retail Malt Beverage Consumption Licenses and Distilled Spirits Consumption shall only be issued for individual locations that comply with all of the following:

1. Meet all health and sanitation requirements set for food service establishments by the City, state and federal government.
2. Have installed an operative cooking facility and kitchen equipment on the premises for accommodating the demand for 30 food customers in C-C zoning, 60 customers in C‑H zoning and 30 customers in C-D zoning;
3. Have a complete place setting of utensils and durable and reusable serving containers in regular use for 30 food customers in C-C zoning, 60 customers in C-H zoning and 30 customers in C-D zoning;
4. Have seating facilities, at booths or tables designed for food service, sufficient for 30 food customers in C-C zoning, 60 customers in C-H zoning and 30 customers in C-D zoning, and such booths or tables shall each be large enough to accommodate at least two place settings of utensils and serving containers.
5. At all times during the hours of operation are prepared to serve full-course meals with a substantial variety of culinary choices, or substantial substitutes therefore, which must be prepared on site.
6. Shall print and maintain a complete menu and furnish such printed menu to each food customer, with prices which are competitive with other restaurants within the City, whether or not those restaurants engage in the business of serving alcoholic beverages.
7. Requirements (b), (c), (d) and (e) above shall all be provided within the same premises as the licensed establishment, and shall not be shared with any other business establishment unless such establishment is adjacent, under the same ownership, business license and internally connected to allow the free flow of patrons.
8. Alcoholic beverages shall be served only during the hours in which printed menu items, or substantial substitutes therefore, are available to the customers. The hours of service for food may be prolonged, but in no event shall alcoholic beverages be sold at any time contrary to the hours established for the sale of alcoholic beverages by other ordinances of the City of Valdosta.

* All corporate applicants, without regard to the number of stockholders, shall list the names and addresses of the officers of the corporation. In addition they shall name an agent whose name shall appear on the license issued to the corporation. The corporation shall provide the name and address of the agent, who shall be the individual who does in fact have regular, managerial, and supervisory authority over the business conducted on the licensed premises. In addition, the manager shall be an agent for service for the corporation in addition to all other methods allowed for serving a corporation by the laws of Georgia.
* Information requested concerning race and sex identification of applicants, corporations and stockholders are for investigative purposes only.
* Georgia Crime Information Center Council (GCIC) rules require that the consent form in the application packet be completed, signed and notarized prior to any information being accessed for release of criminal history investigations by the Police Department in reference to your application for license to sell alcoholic beverages.

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| **Instructions and Conditions for Applying for**  **a License to Sell Alcoholic Beverages**  **By the Container or by the Drink, continued.** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

* After the City issues the Alcohol Certificates it is necessary for the certificate holder to get in contact with the State of Georgia on how to obtain State Alcohol License. This is required before you can purchase and sell alcoholic beverages in the State of Georgia. Please contact the Georgia Department of Revenue at 404.651.8651 or P.O. Box 740001, Atlanta, GA 30374-0001
* A copy of the City of Valdosta Alcohol Ordinance is a part of this application package. Please read it carefully and retain it for your information.
* No manager and/or owner shall be employed to dispense, sell, serve, take orders, mix alcoholic beverages, or serve in any managerial position, until such person has been fingerprinted or cleared by the Chief of Police or his designee, indicating that the person is eligible for such employment.
* All bartenders and any person who pours alcohol shall be at least 21 years of age.

* When completed, the application must be dated, signed, and necessary documentation attached to assure that your license is processed timely. Allow approximately a thirty (30) day period for application processing.
* Improved Outdoor Location means a privately owned area attached or immediately adjacent to the premises of a Retail Consumption Dealer which meets all applicable building code requirements, including seating and tables in adequate and sufficient numbers to accommodate any customers allowed into the location and specifically designated for the consumption of food and alcoholic beverages. A varied and complete menu of food items must be available in the designated Improved Outdoor Location during all hours in which alcohol is consumed therein for any such specifically designated location to qualify for this exemption of this subsection. For similar areas on public rights-of-way, please see the definition of Outdoor Public Seating Area.
* Licensed alcoholic beverage caterer means any retail consumption dealer who has been licensed pursuant to this article.
* Outdoor Public Seating Area means the location and use of tables and chairs on the public sidewalk or public right-of-way and for which an Outdoor Public Seating Area Permit has been obtained in accordance with Section 4-1009.
* Special Event Privilege Permit may be issued by the City of Valdosta for special events that (1) are considered to be of a community nature; (2) that are advertised and open to the entire community; and (3) for which the City or Central Valdosta Development Authority is a sponsor or co-sponsor. Such events must be submitted to and approved by the office of the City Manager under the terms and conditions as determined by the City, which may be changed from time to time. Such conditions may include certain notification requirements, security, sanitation and clean-up, beginning and ending times, insurance, parking requirements, and more. At the City’s sole discretion, the special event privilege permit may be issued on a one time basis, or for ongoing events, on a weekly, monthly, or annual basis; provided that said ongoing event permits shall not exceed twelve (12) months. Any permit issued is subject to revocation for cause at any time. The City reserves the right to review the history of previous events to determine future decisions in regards to the special event privilege permit and to approve or deny any and all requests.

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| ***Instructions and Conditions for Applying for a License to Sell Alcoholic Beverages***  ***By the Container or by the Drink continued.*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

**Application for Alcohol Beverages License should be returned to:**

Location Address: City of Valdosta

Business License Office

102 North Lee Street

Valdosta, Georgia 31601

Mailing Address: City of Valdosta

Business License Office

P.O. Box 1125

Valdosta, Georgia 31603

Phone: 229.259.3520

E-mail: [citybusinesslicense@valdostacity.com](mailto:citybusinesslicense@valdostacity.com)

**\*\*Note: Faxed applications or photocopied applications will not be accepted. Only an original application filled out in black ink with all necessary documentation and notarized in the appropriate areas will be accepted.**

The Business License Office will not submit any application for approval before the City Manager unless the premise is in compliance with all City of Valdosta ordinances, including, without limitation, any ordinances dealing with building safety or zoning.

No license defined in the City of Valdosta Distilled Spirits Ordinance shall be issued to a person who is not a legal resident of the United States and at least 21 years of age. In the interest of public employees, the City Manager will not grant a license to any City of Valdosta employee whose duties include the regulation or policing of alcoholic beverages or licenses, or any tax-collecting activity.

The premises of the holder of a retail consumption dealer license for the sale of alcoholic beverages shall be open to inspection at any and all times by officers or officials authorized to conduct such inspections by the City, State or Federal authorities. Licenses under this Ordinance shall be displayed prominently at all times on the premises for which same was issued. Please note that if a business should have a new manager, the name, address and telephone numbers shall be filed with the Business License Office within (3) days of the date of such employment.

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| ***Alcohol Taxes Section*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

Ordinance No. 2011-41 - Section 7-1032:

The manufacture, distribution, sale and possession of alcoholic beverages within the City are declared to be privileges and not rights. Such privileges shall not be exercised except in accordance with the Article.

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| **BUSINESS INFORMATION** |

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| Business Name: |  | | |  | |
| Business Address: |  | | |  | |
| Federal Employment ID Number (FEI): | |  | Georgia Sales Tax ID Number (STI): | |  |
| Georgia Department of Revenue Alcohol License Number :  NOTE: If your application has not been approved yet then please submit a copy of the state application | | | | | |
| City: Valdosta | State: Georgia | | | Zip Code: | |
| **MAILING ADDRESS IF DIFFERENT FROM BUSINESS ADDRESS:** | | | | | |
| Mailing Address: |  | | |  | |
| City: | State: | | | Zip Code: | |

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| **MAJOR BUSINESS CATEGORY – ONLY CHECK ONE BOX** |

**RETAIL CONSUMPTION DEALER:** means any person who sells alcoholic beverages for consumption on the premises at retail only to consumers and not for resale.

**□ RESTAURANT**: means a business kept, used, maintained, advertised and held out to the public as a place where meals are actually and regularly prepared and served for a period of at least five (5) hours per day on at least five (5) days per week with the exception of (i) holidays, (ii) vacations not exceeding two (2) weeks duration, and (iii) periods of redecorating not exceeding 30 calendar days duration except to the extent extended by the City Manager in its discretion upon request therefore; and which meets all of the following requirements:

(1) Meets all health and sanitation requirements for food service establishments required under applicable federal, state and local laws, codes, ordinances, rules and regulations;

(2) Maintains upon the premises thereof, in operative condition, cooking and kitchen facilities and equipment appropriate to accommodate the preparation of meals for at least 30 food service customers at one time;

(3) Maintains upon the premises thereof seating facilities, at booths or tables designed for food service, sufficient for at least 30 food service customers at one time, not including seating provided by counters and stools, with booths and tables for purposes hereof being large enough to adequately accommodate at least two place settings of cutlery and dishes;

(4) Maintains at all times such additional facilities, equipment and items as well as employees as shall be necessary for the cooking, preparation and service of meals for consumption at tables or booths located upon the premises for at least 30 food service customers at one time;

(5) Is at all times during the hours of operation thereof prepared to serve full course meals with substantial entrees from a substantial variety of culinary choices, or substantial substitutes thereof, chosen by food service customers from a printed menu available to all food service customers at prices which are competitive with other restaurants in the community whether or not such other restaurants engage in the sale of alcoholic beverages.

**□ HOTEL RESTAURANT:** means a restaurant that is not independent from the hotel.

**□ LOUNGE**: means a separate room connected or adjacent to the premises of a restaurant or its adjacent lobby or reception area, with a seating capacity of at least 20 persons, and with all access and all exits to and from the lounge opening into such restaurant or the lobby or reception area adjoining such restaurant except for emergency exits or exits used solely as service doors.

**RETAIL BY BOTTLE:** means the sale or offer of sale of any alcoholic beverage in its original package meaning a bottle, can keg, barrel or other original consumer container.

**□ GROCERY STORE**: Industries in the Food and Beverage Stores subsector usually retail food and beverages merchandise from fixed point -of-sale locations. Establishments in this subsector have special equipment (e.g., freezers, refrigerated display cases, refrigerators) for displaying food and beverages goods. They have staff trained in the processing of food products to guarantee the proper storage and sanitary conditions required by regulatory authority.

**□ GASOLINE STATION WITH CONVENIENCE STORE**: This industry comprises establishments engaged in retailing automotive fuels (e.g., gasoline, diesel fuel, and gasohol) in combination with convenience store or food mart items.

**□ CONVENIENCE STORE:** This industry comprises establishments known as convenience stores or food marts (except those with fuel pumps) primary engaged in retailing a limited line of goods that generally includes milk, bread, soda, and snacks.

**□ PHARMACIES AND DRUG STORES:** This industry comprises establishments know as pharmacies and drug stores engaged in retailing prescription or nonprescription drugs and medicines. Also in the retailing of food, beverages, and personal care products...

**□ PACKAGE STORE**: This industry comprises establishments primarily engaged in retailing packaged alcoholic beverages, such as ale, beer, wine and liquor.

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| **MAJOR BUSINESS CATEGORY – ONLY CHECK ONE BOX** |

**RETAIL BY GROWLER:** means the sale or offer of sale of any tapped keg of a malt beverage dispensed into a professionally, sanitized, and sealed growler not to exceed 68 ounces and is filled by a licensee or employee of a licensed establishment.

**□ GROWLER STORE**: The filling of growlers by means of a tapped keg shall not constitute the breaking of the package as contemplated by O.C.G.A. § 3-3-26 or other provisions of this chapter. Growlers may only be filled from kegs procured by the licensee from a duly licensed wholesaler. Only professionally and sanitized and sealed growlers may be filled and made available for retail sale. Each growler must be securely sealed and removed from the premises in the original sealed condition. Consumption on the premises is strictly prohibited, however, samples may be available but shall not exceed 3 ounces in volume nor shall any one individual be offered more than 4 samples within a 24 hour period. Growlers may not be sold at any establishment engaged in the sale of distilled spirits.

**MANUFACTURERS ONLY:**

**□ BREWERY**: This industry comprises establishments primarily engaged in brewing beer, ale, malt liquors, and nonalcoholic beer. (Manufacturers)

**□ WINERY**: This industry comprises establishments primarily engaged in one or more of the following: (growing grapes and manufacturing wine and brandies; (2) manufacturing wine and brandies from grapes and other fruits grown elsewhere; and (3) blending wines and brandies. (Manufacturers)

**□ DISTILLERIES**: This industry comprises establishments primarily engaged in one or more of the following: (1) distilling potable liquors (except brandies); (2) distilling and blending liquors; and (3) blending and mixing liquors and other ingredients. (Manufacturers)

**WHOLESALERS ONLY:**

**□ BREWERY**: This industry comprises establishments primarily engaged in brewing beer, ale, malt liquors, and nonalcoholic beer. (Wholesalers)

**□ WINERY**: This industry comprises establishments primarily engaged in one or more of the following: (growing grapes and manufacturing wine and brandies; (2) manufacturing wine and brandies from grapes and other fruits grown elsewhere; and (3) blending wines and brandies. (Wholesalers)

**□ DISTILLERIES**: This industry comprises establishments primarily engaged in one or more of the following: (1) distilling potable liquors (except brandies); (2) distilling and blending liquors; and (3) blending and mixing liquors and other ingredients. (Wholesalers)

**□ DISTILLED SPIRITS STORE**: This industry comprises establishments primarily engaged in retailing packaged alcoholic beverages, such as ale, beer, wine, and liquor.

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| **MAJOR BUSINESS CATEGORY – ONLY CHECK ONE BOX** |

**NON-RETAIL/MEMBERS ONLY:**

**□ HOTEL (LOBBY):** means a hotel business that provides alcoholic beverages to its guests at no charge in their lobby or by room service only.

**□ VETERANS ORGANIZATION:** to be classed as a veteran’s organization the owner must qualify by submitting all necessary documentation including an approved veteran certificate of license tax exception application.

**□ PRIVATE CLUB**: means a non-profit organization which is organized under state law which meets each of the following requirements:

(1) Has either a tax exempt status under Section 501 of the United States Internal Revenue Code or operates pursuant to a charter from a state or national parent organization which has such tax exempt status;

(2) Has been in existence at least one year prior to the filing of its application for a License to be issued pursuant to this chapter;

(3) Has at least 50 members paying dues on a regular periodic basis;

(4) Is organized and operated exclusively for the pleasure and recreation of its members and their guests or for other nonprofit purposes;

(5) Has facilities which are available for use only by the membership thereof and their guests and not by the general public;

(6) Owns, rents or leases a building or space within a building for facilities for the use of its members and their guests;

(7) Maintains kitchen and dining room space, equipment and items necessary to appropriately provide food service of full course meals for its members and their guests;

(8) Is staffed with a sufficient number of employees for the preparation and service of meals for its members and their guests;

(9) Has no member, officer, agent or employee directly or indirectly receiving, in the form of salary or other compensation, any profits, beyond a fixed salary, from the sale of alcoholic beverages to the club or to its members or their guests; and

(10) Has such licenses as are required for the operation thereof.

**□** OTHER (Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| ***Alcohol Taxes Section-***  ***Please Check the Appropriate Box… (continued)*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

**Ordinance No. 2011-41 - Section 7-1073. Distilled Spirits**

There is imposed and levied upon each retail distilled spirits dealer a privilege tax for and with respect to each license year, graduating in amount and measured and computed in accordance with the following:

**Ordinance No. 2011-41 - Section 7-1074. Wines**

There is imposed and levied upon each retail wine dealer who is a retailer of wines a privilege tax for and with respect to each license year, graduating in amount and measured and computed in accordance with the following:

**Ordinance No. 2011-41 - Section 7-1075. Malt Beverages**

There is hereby levied and imposed upon each retail beer dealer a privilege tax in an amount equaling the total of the following:

**Ordinance No. 2015-4 – Section 6 – 35(b). Growler**

The sale of growlers shall require the payment of an annual license feeof $250.00 from the local license holder and the payment of all excise tax.

**Retail Distilled Spirit (Liquor), Wine, and/or Malt Beverage (Beer) Dealer:**

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| **Retail of Closed Container Option(Required for Consumption(Pouring)Sales)** | | **Amount** |
|  | Distilled Spirit (Liquor) - $1,075.00 |  |
|  | Clubs or Organizations making sales to members only and having a charitable purpose - $750.00 |  |
|  | Veterans Organization making sales to members only and having a charitable purpose - $500.00 |  |
|  | Wine - $500.00 |  |
|  | Malt Beverage (Beer) - $500.00 |  |
|  | Growler (Beer) - $250.00 (also requires a retail Malt Beverage (Beer) privilege tax) |  |
|  | **TOTAL(1)** |  |

**Ordinance No. 2011-41 - Section 7-1076. Consumption License Fees**

In addition to the initial taxes provided for in Sections 7-1073, 7-1074, and 7-1075, Retail Dealers desiring to obtain a consumption license, shall pay an additional privilege tax in the following amounts:

**Consumption License Fee – Distilled Spirit (Liquor), Wine, and/or Malt Beverage (Beer):**

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|  | **Consumption (Pouring) Option** | **Amount** |
|  | Distilled Spirit (Liquor), Wine, and Malt Beverage (Beer) Consumption License - $2,475.00 |  |
|  | Wine Consumption License - $165.00 |  |
|  | Malt Beverage (Beer) Consumption License - $165.00 |  |
|  | **TOTAL(2)** |  |

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| ***Alcohol Taxes Section-***  ***Please Check the Appropriate Box… (continued)*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

**O.C.G.A § 3-3-3**. **Licenses required to distribute, sell, or otherwise deal in alcoholic beverages; display of licenses**

No person shall manufacture, distribute, sell, handle, or possess for sale, or otherwise deal in, alcoholic beverages without first obtaining all applicable licenses required by this title.

**Manufacturing License Fee – Breweries, Wineries, or Distilleries:**

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|  | **Manufacturing Option** | **Amount** |
|  | Brewery, Winery, or Distillery –(Manufacturing License) - $1,500.00 |  |
|  | **TOTAL(3)** |  |

**Ordinance No. 2011-41 - Section 7-1060. Sunday Sales License**

A Retail Consumption Dealer may obtain a Sunday Sales Consumption License which allows the selling and dispensing of alcoholic beverages on Sunday from 12:30 p.m. to 12:00 midnight provided the Retail Consumption Dealer (1) pays Sunday Sales License fee; and (2) demonstrates to the satisfaction of the City Manager, or his designee, that he derives at least 50 percent (50%) of the total annual gross sales from the sale of prepared meals, or food is served or in any licensed establishment which derives as least 50 percent (50%) of its total annual gross income from the rental of rooms for overnight lodging.

A Retail Package Dealer may obtain a Sunday Package Sales License which allows the selling of packaged sale of alcoholic beverages between the hours of 12:30 p.m. and 11:30 p.m. upon paying the applicable Sunday Package Sales License Fee.

**Ordinance No. 2011-41 - Section 7-1060. Sunday Sales License Fee**

**Sunday Sales License Fees – Retail Consumption or Retail Package:**

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|  | **Sunday Sales License Fees** | **Amount** |
|  | Retail Consumption (Pouring) Dealer - $450.00 |  |
|  | Retail Package Dealer - $1,000.00 |  |
|  | **TOTAL(4)** |  |

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|  | **TOTAL AMOUNT DUE** | **Amount** |
|  | Retail of Closed Container Option(Required for Consumption(Pouring)Sales) (1) |  |
|  | Consumption (Pouring) Option (2) |  |
|  | Manufacturing Option (3) |  |
|  | Sunday Sales License Fees(4) |  |
|  | **TOTAL** |  |

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| **Business Status Section** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

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| **Choice one from the list** |
| SOLE PROPRIETORSHIP – Individual Applicant  PARTNERSHIP  CORPORATION – Designated Agent |

**Ordinance No. 2011-41- Section 7 – 1042 Applications (a), (b), (c), (d),**

Prior to the issuance of any License, the applicant shall file a written application with the City, in such form and substance as shall from time to time be determined by the City Manager, together with a check payable to the City of Valdosta or cash for the application fee provided for in this article. Applications for Licenses shall be presented to the City Manager or his appointed designee shall be signed by the applicant if an individual, or by all partners if a partnership, or by a duly authorized agent, if a corporation shall be verified by oath or affidavit, shall contain the following statements and information, and shall otherwise meet the following requirements:

**Sole Proprietorship:**

* In the case of an individual applicant who will actually and actively be in charge and manage the day to day operation of the business in which the License applied for will be utilized, then the name, age, sex, height, weight, date of birth, social security number, current residence address, business addresses, and all previous such addresses of the applicant within the last (10) years:
* In the case of an individual applicant who will not actually and actively be in charge and manage the day to day operation of the business in which the License applied for will be utilized, then the name, age, sex, height, weight, date of birth, social security number, current residence address, business addresses, and all previous such addresses within the last ten (10) years of both the applicant and the person who will actively manage such business.

**Partnership:**

* In the case of a partnership or multi member limited liability company, then the name, date and location of formation, federal tax identification number, current principal business address, and all prior business addresses within the past ten (10) years of such partnership as well as the name, age, sex, height, weight, date of birth, social security number, current business address, current residence address, and all prior such addresses within the past ten (10) years of all partners, members and managers of such partnership or company and the manager or managers of the business in which the License applied for will be utilized;

**Corporation:**

* In the case of a corporation, then the name, date and location of incorporation, federal tax identification number, current principal business address, name and address of registered agent for service of process, and all prior business addresses within the last ten (10) years of such corporation as well as the name, age, sex, height, weight, social security number, current business address, current residence address, and all prior such addresses within the last ten (10) years of all officers thereof, all directors thereof, and all shareholders thereof who own either directly or beneficially, as such word is defined and utilized in the Internal Revenue Code of the United States and regulations issued pursuant thereto, more than 20 percent (20%) of the outstanding shares of stock thereof, and of the manager or managers of the business, in which the License applied for will be utilized;

**Back Ground Check Information**

**For**

**Valdosta Police Department**

**Must be completed by each necessary applicant and include all additional attachments**

|  |  |
| --- | --- |
| **Applicant Information - To be completed by each individual applicant regardless that the application is filed by a Sole Proprietorship, Partnership, or Corporation** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

* This page needs to be duplicated for each individual applying
* Remember to include the name of the business on any additional documents

Have you been convicted of a felony within the past five (5) years? □ Yes □ No

|  |  |  |  |
| --- | --- | --- | --- |
| Name:(List all previous last names and aliases): | | | |
| Title: | | | |
| Date of Birth: (MM/DD/YYYY) | Race: | Social Security Number: | Driver’s License Number: |
| Height: | Weight: | Primary Phone Number: |  |
| Age: | Sex: | Secondary Phone/Cell: |  |
| Current Residence Address: (If less than (10) years then include that information below)  Street Number:  City: State: Zip Code: | | | |
| Previous Residence Address : From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Street Number:  City: State: Zip Code: | | | |
| Previous Residence Address: From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Street Number:  City: State: Zip Code: | | | |
|  | | | |

Required Attachment:

* A head and shoulder photograph, such as is contained on a state driver’s license, taken within the past three (3) years

|  |  |
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| ***Managers’ Personal Information***  ***Section*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

**Ordinance No. 2011 – 41 – Section 7-1031 Definitions:**

*Manager* means the individual who supervises the regular operations of a business licensed under this Chapter and who is physically present on site at such business: (a) at least 35 hours per week, or (b) at least 90 percent (90%) of the hours such business is open to the public, whichever is less.

* Provide the names of all the managers of the business location
* **NOTE:** Change in management must be filed with the City of Valdosta Business License Department within three (3) business days of the new managements hire date. An additional application fee will be required prior to the background check on the new manager.
* All individuals in this section must submit a separate form for criminal history and background check and a picture ID. This section can be duplicated for each manager or as needed.

|  |
| --- |
| ***CERTIFICATE OF APPOINTMENT*** |

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby appoint \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as my

(Business Owners’ Name) (Manager’s Name)

Lawful and true Manager, who is in charge of my business, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(Business Name)

In Valdosta, Lowndes County, Georgia located at, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(Business Street Location)

This certificate becomes part of the application filed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(Business Owner’s Name)

on this day, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(Date Month, Day, Year) (Business Street Location)

Owners Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Date Month, Day, Year)

Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Print Witness Name) (Witness Signature) (Date Month, Day, Year) (Business Street Location)

Required Attachment:

* A head and shoulder photograph, such as is contained on a state driver’s license, taken within the past three (3) years

|  |  |
| --- | --- |
| ***Managers’ Personal Information*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name:(List all previous last names and aliases) | | | | |
| Date of Birth: (MM/DD/YYYY) | Race: | Social Security Number: | | Primary Phone Number: |
| Age: | Sex: | Driver’s License Number: | | Secondary Phone/Cell: |
| Height: | Weight: |  | |  |
| Home Address: (If less than (5) years then include that information below)  Street Number:  City: State: Zip Code: | | | | |
| Previous Address: From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Street Number:  City: State: Zip Code: | | | | |
| Previous Address: From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Street Number:  City: State: Zip Code: | | | | |
| **PREVIOUS PLACE OF EMPLOYMENT: List the last three (3) full time or part time jobs** | | | | |
| Previous Place of Employment: From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Employer: | | | Business Location/Phone Number: | |
| Supervisor’s Name: | | | Reason For Leaving: | |
| Previous Place of Employment: From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Employer: | | | Business Location/Phone Number: | |
| Supervisor’s Name: | | | Reason For Leaving: | |
| Previous Place of Employment: From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Employer: | | | Business Location/ Phone Number: | |
| Supervisor’s Name: | | | Reason For Leaving: | |

|  |  |
| --- | --- |
| ***Managers’ Personal References –***  ***References cannot be related to you*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |
| Name: | |
| Occupation: | How long have they known you? |
| Mailing Address: | Phone Number (S): |
| Name: | |
| Occupation: | How long have they known you? |
| Mailing Address: | Phone Number (S): |
| Name: | |
| Occupation: | How long have they known you? |
| Mailing Address: | Phone Number (S): |
| **ADDITIONAL INFORMATION** | |
| Have you ever been denied an Alcohol Beverage License? □ NO □YES  If “Yes”, please explain: | |
| Have you ever received medical assistance for the treatment of alcohol or drug abuse? □ NO □YES  If “Yes”, please provide dates and explanation: | |

**Zoning Information for the Business location**

**Make sure all additional attachments are included**

|  |  |
| --- | --- |
| ***Business Location Information*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

**Section 7-1041: Location of Alcoholic Beverage Businesses**:

1. **Retail Malt Beverage, Distilled Spirits and Wine Package Licenses.**
2. The provisions of any other ordinance of the City notwithstand­ing, Retail Malt Beverage, Distilled Spirits or Wine Package Licenses shall be issued only for locations in areas classified at the time of the issuance by the Valdosta Land Development Regulations (LDR), as amended, as zoned C-D, C‑H, C-C, M-1 or M-2.
3. No Retail Package Licenses, whether it be for Distilled Spirits, Malt Beverages or Wine, shall be issued for a Premises unless it is in accordance with the provisions contained in O.C.G.A §3-3-21.
4. **Retail Malt Beverage, Distilled Spirits and Wine Consumption Licenses.**
5. The provisions of any other ordinance of the City notwithstand­ing, Retail Malt Beverage, Distilled Spirits and Wine Package Licenses shall be issued only for locations in areas classified at the time of issuance by the LDR, as amended, as zoned C-D, C-H, or C-C.
6. In all areas classified by the Valdosta Land Development Regulations, as amended, as C-D, a Retail Malt Beverage, Distilled Spirits and Wine Consumption License shall only be issued if the building from which the business will operate is more than 50 feet from any church sanctuary, school building or education building. In all areas classified by the LDR, as amended, as zoned C-C or C-H, the Retail Malt Beverage, Distilled Spirits and Wine Consumption License shall only be issued if the premises from which the business will operate are more than 50 feet from any private residence, church building, school building or educational building. The terms “school building” and “educational building” shall apply only to state, county, City, or church school buildings and to such buildings at such other schools in which are taught subjects commonly taught in the common schools and colleges of this State and which are public schools or private schools as defined in O.C.G.A §20-2-690(b). The terms “church sanctuary” and “church building” shall mean a stand-alone building owned in fee simple by the religious organization where regular worship services are performed and shall not mean a commonly platted area which has common or shared parking such as shopping centers, strip malls, etc.
7. **Measurement of Distances.**
8. Unless otherwise provided by law, all measurements to determine distances required by this Chapter shall be measured by the most direct route of travel on the ground in the following manner: (1) from the front door of the structure from which Alcoholic Beverages are sold or offered for sale; (2) to the front door of the building of a church, government-owned treatment center or other retail package store; or (3) the nearest property line of the real property being used for school or educational purposes.

|  |
| --- |
| Legal Business Name: |
| LDR-Zoned Approved Areas  C-H  C-D  C-C  Business Type: Retail Malt Beverage, Distilled Spirits and Wine Package License  C-H  C-D  C-C  Consumption License |
| Business Address:  Valdosta, Georgia Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Owner of the property: (Name and Mailing Address) |

|  |  |
| --- | --- |
| ***Business Location Information***  ***Continued…..*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

Section 7-1041. Location of Alcoholic Beverage Businesses (a) (b) and (c)

Address of the Front Door (main entrance) of the Structures from which Alcoholic Beverages are sold or offered for sale:

Less than 50 Feet

List address (front door) of the private residence within the set limit of the front door:

List address (front door) of any school building or educational building (State, County, City or Church) within the set limit of the front door:

List address (front door) of any church or sanctuary within the set limit of the front door:

|  |  |
| --- | --- |
| ***Business Information for***  ***Consumption License per Zoning District*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

**Section 7-1039: Additional Qualifications for Retail Malt Beverage Consumption License and Distilled Spirits Consumption License:**

In addition to the requirements of Section 7-1038, Retail Malt Beverage Consumption Licenses and Distilled Spirits Consumption shall only be issued for individual locations that comply with all of the following:

1. Meet all health and sanitation requirements set for food service establishments by the City, state and federal government.
2. Have installed an operative cooking facility and kitchen equipment on the premises for accommodating the demand for 30 food customers in C-C zoning, 60 customers in C‑H zoning and 30 customers in C-D zoning;
3. Have a complete place setting of utensils and durable and reusable serving containers in regular use for 30 food customers in C-C zoning, 60 customers in C-H zoning and 30 customers in C-D zoning;
4. Have seating facilities, at booths or tables designed for food service, sufficient for 30 food customers in C-C zoning, 60 customers in C-H zoning and 30 customers in C-D zoning, and such booths or tables shall each be large enough to accommodate at least two place settings of utensils and serving containers;
5. At all times during the hours of operation are prepared to serve full-course meals with a substantial variety of culinary choices, or substantial substitutes therefore, which must be prepared on site;
6. Shall print and maintain a complete menu and furnish such printed menu to each food customer, with prices which are competitive with other restaurants within the City, whether or not those restaurants engage in the business of serving alcoholic beverages;
7. Requirements (b), (c), (d) and (e) above shall all be provided within the same premises as the licensed establishment, and shall not be shared with any other business establishment unless such establishment is adjacent, under the same ownership, business license and internally connected to allow the free flow of patrons;
8. Alcoholic beverages shall be served only during the hours in which printed menu items, or substantial substitutes therefore, are available to the customers. The hours of service for food may be prolonged, but in no event shall alcoholic beverages be sold at any time contrary to the hours established for the sale of alcoholic beverages by other ordinances of the City of Valdosta.

**NOTE: The following requirements must be available for inspection at time of site visit.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Requirements for a Consumption license** | **LDR-Zoned Approved Areas** | | |
| **Check List** |  | **C –C**  **30 Customers** | **C – D**  **30 Customers** | **C – H**  **60 Customers** |
|  | Cooking facility and kitchen equipment to cook for: | **#** | **#** | **#** |
|  | Complete place setting of utensils and durable and reusable serving containers for: | **#** | **#** | **#** |
|  | Seating facilities, at booth or tables designed for food service sufficient for: | **#** | **#** | **#** |
|  | At all times during the hours of operation business is prepared to serve full-course meals on site for: | No  Yes | Yes  No | No  Yes |
|  | Business shall print and maintain a complete menu and furnish such printed menu to each customer with pricing for: | **Attach--Finished Printed Copy of Menu** | | |

|  |  |
| --- | --- |
| ***OATH*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

I (we) do solemnly swear, subject to criminal penalties for false swearing, that the statements and answers made to the forgoing questions in this application for a City License as a dealer in alcoholic beverages and distilled spirits are true and complete and no false or fraudulent statement or answer is made herein to procure granting of license, that any license issued pursuant to this application is conditioned upon the truth of the answerer and statements made herein and that any false answer and statements herein shall constitute cause for the suspension or revocation of any license issued pursuant to this application, which would require a different answer to any question contained in this application. Such change must be reported as an amendment to this application within two (2) days. The failure to make such amendment shall be cause for the revocation of any license issued.

I (we) solemnly swear that the foregoing information meets those standards necessary for the issuance by the State of Georgia of a Retail License to sell Alcoholic Beverages. I further swear that this business will be conducted according to the Laws of the State of Georgia for a Retail License to Sell ( ) Malt beverages, ( ) Distilled spirits and/or ( ) Wine. I (we) further swear that this business will be conducted according to the Laws of the State of Georgia and the Ordinances of the City of Valdosta.

Sworn to and signed before me this \_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signed by the License Holder)

Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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| ***VALDOSTA POLICE DEPATMENT***  ***AUTHORITY FOR RELEASE OF INFORMATION***  ***TO BE COMPLETED BY EACH APPLICANT*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

**TO WHOM IT MAY CONCERN:**

I hereby authorize any investigation or duly accredited representative of the Valdosta Police Department bearing this release or a copy thereof, within one year of its date, to obtain any information from schools, residential, hospitals doctors, Veterans Administration, Credit Bureau employers, criminal justice agencies, or individuals relating to my activities. This information may include, but is not limited to academic, residential, health records, credit rating achievement, performance, attendance, personal history, disciplinary, arrest and conviction records. I hereby direct you to release such information upon request of the bearer. I understand that the information released is for official use by the Valdosta Police Department and may be disclosed to such third parties as necessary in the fulfillment of official responsibilities.

I hereby release any individual, including records custodians, from any and all liability for damages of whatever kind of nature, which may at any time result to me as a result of compliance, or any attempts to comply, with this authorization. Should there be any question as to the validity of this release, you may contact me as directed below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature (Full Name) : | | | | |
| Printed (Full Name) : | | | | |
| Other Names Used: | | | | |
| Date of Birth: (MM/DD/YYYY) | Race: | Social Security Number: | | Primary Phone Number: |
| Weight: | Sex: | Driver’s License Number: | | Secondary/Cell Phone |
| Age: | Height: |  | |  |
| Current Residence Address:  Street Address:  City: State: Zip Code: | | | | |
| Business Name: | | | Business Address: | |

|  |  |
| --- | --- |
| ***CRIMINAL HISTORY WAIVER***  ***PURPOSE CODE E***  ***AWARENESS STATEMENT*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

I (print your name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, authorize the Valdosta Police Department to release any Criminal History record the State of Georgia or the Valdosta Police Department might have to the Valdosta Police Department Chief of Police and/or its duly authorized agent.

I hereby agree that the Valdosta Police Department, the Georgia Crime Information Center, the employees of either agency, or the employees of any other agency of the state shall not be responsible for the accuracy of the information given or have any liability for defamation, invasion of privacy, negligence or any other claim in connection with any dissemination of information pursuant to this records check.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Employers Business Name: | | | Business Location: | | | | | |
| Printed (Full Name) : | | | | | | | | |
| Other Names Used: | | | | | | | | |
| Date of Birth: (MM/DD/YYYY) | | Place of Birth: | | | Sex: | Height: | Weight: | Age: |
| Eye Color: | Hair Color: | Social Security Number: | | | Primary Phone Number: | | | |
| Race: |  | Driver’s License Number & State: | | | Secondary/Cell Phone: | | | |
| Current Residence Address:  Street Address:  City: State: Zip Code: | | | | | | | | |
| Signature of Prospective Employee: | | | | Date: | | | | |

The prospective employee must be made aware of any adverse employment decisions made as a result of the   
Criminal History and that the individual may contact the Valdosta Police Department should they wish to contest any part of the criminal history. ***NOTE:* All information must be legible for the operator to process this form. If illegible the form will not be processed.**

**NOTE – Each person listed in this application must complete this form.**

|  |  |
| --- | --- |
| ***Criminal History & Background Check***  ***Consent Form per Applicant*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Employer’s Business Name: | | | | | | Business Location: | |
| Printed (Full Name) : | | | | | | | |
| Other Names Used: | | | | | | | |
| Date of Birth: (MM/DD/YYYY) | | | | | Place of Birth: | | U.S. Citizen |
| Race: | | | | | Resident Alien  List your INS Number: |
| Eyes Color: | | Hair Color: | | | Social Security Number: | | Primary Phone Number: |
| Sex: | Height: | Weight: | | Age: | Driver’s License Number: | | Secondary/Cell Phone: |
| Marital Status: | | | | | Spouse’s Name if applicable: | |  |
| Single | Married | Divorced | Widowed | |  | | |
| Current Residence Address:  Street Address:  City: State: Zip Code: | | | | | | | |

* If you have ever been arrested then please list all arrests below (must include all charges even if they were dismissed or expunged) List any additional arrests on a separate sheet of paper and attach to this application.

|  |  |
| --- | --- |
| Date Arrested: | Charges: |
| Arresting Agency: | Court Dispositions: |
| Date Arrested: | Charges: |
| Arresting Agency: | Court Dispositions: |

|  |  |
| --- | --- |
| ***Criminal History & Background Check***  ***Consent Form*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

\*\*\*\*\*\* Rules of Georgia Crime Information Center Council Chapter (GCIC) 140-02 Section 140-02 04 Criminal Justice Information Exchange and Discrimination. Amended \*\*\*\*\*\*

Criminal justice agencies may disseminate criminal history records to private persons, businesses, public agencies, political subdivisions, authorities and instrumentalities, including state or federal licensing and regulatory agencies, or to their designated representatives. For dissemination purposes, criminal history records include all available criminal history information; except information relating to any arrest or charges disposed of under the provisions of the Georgia First Offender Act shall not be provided after the person has been discharged from First Offender status and exonerated of the charges. At the time of each request requestors shall provide the fingerprints or the signed and notarized consent of the person whose record is requested. The signed and notarized consent must be in a form approved by GCIC and must include the person’s full name, address, social security number, race, sex and date of birth. Criminal justice agencies which disseminate criminal history records to private individuals and to public and private agencies shall advise all requestors that if an employment or licensing decision adverse to the record subject is made, the record subject must be informed by the individual or agency making the adverse decision of all information pertinent to that decision. This disclosure must include information that a criminal history check was made, the specific contents of the record, and the effect the record had upon the decision.

The City of Valdosta requires an annual investigation of all licensees. A new Consent will be required with each renewal. The criminal investigation is done by the City of Valdosta Police Department through the State of Georgia and GCIC does the background investigation.

By signing this form I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the applicant, understand the reason for this inquiry. I also authorize the City of Valdosta and its designees to receive my criminal history from the Valdosta Police Department. I further authorize the City of Valdosta and its designees to receive my background history form the Georgia Crime Information Center. I understand that I will receive a pourer’s permit upon completion of this form and the criminal history and background check consent form. I further understand that if there is any negative information returned from GCIC or the Valdosta Police Department or if I falsely entered any information then my permit will be revoked.

|  |  |
| --- | --- |
| Applicant Signature: | Date: |
| Notary Signature: | |
| Sworn and subscribed before me this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_ in the year of \_\_\_\_\_\_\_\_\_\_\_\_. | |
|  | Seal: |

|  |  |
| --- | --- |
| ***Office Use Only Planning and Zoning Office*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **LDR-Zoned Approved Areas**  **Retail and/or Consumption License:** | **C - C** | **C - D** | **C - H** |
| Initials |
|  | Does the proposed location comply with Zoning Ordinance for business type: |  |  |  |
|  | Front Door Entrance Address: |  | | |
|  | Distance to the nearest Church: |  |  |  | |
|  | Distance to the nearest school or education building |  |  |  | |
|  | Distance from the nearest residence: |  |  |  | |
| NOTES: | |  | | |
| Signature of reviewer: | | Date: | | |
| Initials | **LDR-Zoned Approved Areas**  **Consumption License:** |  | | |
| **C - C** | **C - D** | **C - H** |
| **30 Customers** | **30 Customers** | **60 Customers** |
|  | Cooking facility and kitchen equipment to cook for: |  |  |  |
|  | Complete place setting of utensils and durable and reusable serving containers for: |  |  |  |
|  | Seating facilities, at booth or tables designed for food service sufficient for: |  |  |  |
|  | At all times during the hours of operation business is prepared to serve full-course meals on site for: |  |  |  |
|  | Business shall print and maintain a complete menu and furnish such printed menu to each customer with pricing for: |  |  |  |
| NOTES: | | | | |
| Signature of reviewer: | | Date: | | |

|  |  |
| --- | --- |
| **Business Name:** | **Business Locations:** |

**Review this check list before turning this application in for review:**

|  |  |
| --- | --- |
| **Alcohol Permit Application Checklist** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

**Yes No**

□ □ Copy of completed business license for the primary business is attached.

□ □ City of Valdosta Alcohol Application fully completed, signed, dated and notarized

□ □ Copy of all applicant(s) state driver’s license

□ □ Copy of Menu

|  |  |
| --- | --- |
| ***BUSINESS LICENSE QUESTIONAIRE*** | City of Valdosta  P O Box 1125  Valdosta, Ga. 31603 |

|  |  |  |
| --- | --- | --- |
| Yes | No |  |
| **□** | **□** | Is there anyone connected with this business that is not a legal resident of the United States and at least twenty one (21) years of age? (If yes, provide full details on separate sheet) |
|  |  |  |
| **□** | **□** | Is there anyone connected with this business that has applied for a malt beverages, wine and/or distilled spirits License from any City or County in the State of Georgia and been denied? (If yes, provide full details on separate sheet) |
| **□** | **□** | Have you had an Alcoholic Beverage License revoked for cause, within two (2) years preceding this application? (If yes, provide full details on separate sheet) |
| **□** | **□** | Is there anyone connected with this business that holds another alcohol license? (If yes, please provide full details on separate sheet) |
| **□** | **□** | Is there anyone connected with this business that has been convicted of a felony or crime involving moral turpitude, or convicted of violations of the ordinances of the City or County governing alcoholic beverages licensed within a ten (10) year period, or the violation of any State or Federal laws pertaining to the manufacture, possession, transportation or sale of malt beverages, wine, or distilled spirits or the taxability, within the last five (5) years immediately prior to the filing of said application? (If yes, provide full details on separate sheet) |
| **□** | **□** | Is there anyone connected with this business that has been convicted for selling alcohol to an under-age person within the last three (3) years? (If yes, provide full details on separate sheet) |
| **□** | **□** | Is there anyone connected with this business that is an official or public employee whose duties include the regulation or policing of alcoholic beverages or licenses, or any tax collecting activity? (If yes, provide full details on separate sheet) |
| **□** | **□** | Will adult entertainment be a part of the business operations? (If yes, provide full details on separate sheet) |

|  |  |
| --- | --- |
| **Alcohol Application Checklist**  (continued) | City of Valdosta  P O Box 1125  Valdosta, GA 31603 |

**DEPARTMENT USE ONLY:**

Police Chief: □ Denied □ Approved Initial: Date: \_\_\_\_\_\_\_\_\_\_\_\_

Planning/Zoning: □ Denied □ Approved Initial: Date: \_\_\_\_\_\_\_\_\_\_\_\_

City Manager: □ Denied □ Approved Initial: Date: \_\_\_\_\_\_\_\_\_\_\_\_

□ Check this box if written notice has been sent to the applicant giving reasons for denial and advising of rights to appeal. Attach the notice of denial to the application paperwork.