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CITY OF PERRY, GEORGIA

APPLICATION FOR ALCOHOL BEVERAGE LICENSE

Post Office Box 2030 - 1211 Washington Street – Perry, Georgia 31069

Office 478-988-2740 Fax 478-988-2748

liz.nelson@perry-ga.gov

1. Full legal name of applicant _____

2. Applicant's date of birth _____ Social Security Number _____

3. Applicant Contact Information:

Residence Address _____

Cell Phone Number _____ Home Phone Number _____

Work Phone Number _____ Email _____

*** Must provide copy of current valid driver's license (Must be within 30 miles of Perry City limits)**

4. Business location _____

5. Type of Business _____ NAICS _____

6. a. Full legal name of entity operating business _____

How will business be listed on State application: _____

b. Full legal name of persons/entities having 20% or more interest in above entity.

c. Name and address of Corporate Officers if applicable _____

d. Name, address, and phone number of registered agent _____

6. License applied for (**INITIAL ALL THAT APPLY**)

- | | |
|---|---|
| (a) Malt Beverage (Beer) Retail | (b) Wine – Retail |
| (1) Packaged to go _____ | (1) Packaged to go _____ |
| (2) To be consumed on the premises _____ | (2) To be consumed on the premises _____ |
| (c) Distilled Spirits (Packaged Liquor) _____ | (d) Distilled Spirits/Liquor (By The Drink) _____ |
| (e) Alcohol Catering _____ | |

7. I am a legal resident of _____ County, Georgia and have been since _____

8. If my application is approved, I certify: (**PLEASE INITIAL EACH ONE**)

- (a) That I will abide by all the requirements of the Perry code including installation of continuous video recording system and laws of the State of Georgia, and regulations of the State Department of Revenue. _____
- (b) That I will abide by the opening and closing hours and the days on which sales are prohibited as set forth in the Perry Code. _____
- (c) That I have never been convicted of any felony involving moral turpitude, any felony not involving moral turpitude (within the last ten years next preceding the filing of this application for such license) or the violation of any law involving alcoholic beverages, gambling, or tax law violations. _____
- (d) That I will not attempt to transfer any license granted except under the terms and conditions as is set forth in the Perry Code. _____
- (e) That the business in which I propose to sell alcoholic beverages to be consumed on the premises is not within 100 yards of a church, school ground, or college campus (unless applicant previously held the type alcoholic beverage license applied for prior to July 23, 1974 or business is in the restaurant district). _____
- (f) That if a license as applied for is granted, I will allow my business premises to be open to inspection at any time by City officials authorized to conduct inspection of business premises. _____
- (g) That should I fail to comply with the City Code, laws of the State of Georgia, or regulations of the Department of Revenue, I understand that my license can be suspended and that no license fees paid shall be refundable. _____
- (h) That if a license is granted to me, I will sell in the original unbroken package only and will not allow alcoholic beverages to be consumed on the premises (complete this on all applicants except liquor by the drink application and malt beverage and wine to be consumed on the premises applications). _____
- (i) That the building in which alcoholic beverages are to be sold has been completed according to the Southern Standard Building Code and **evidence of ownership of said building or a copy of the lease to said premises is attached hereto.** _____
- (j) That I am the holder of the following alcoholic beverage licenses in the State of Georgia (list the type license and the governmental identity issuing such license and if none, so state): _____

9. List last three places employed:

Company _____	Address (include zip code) _____
Business _____	Employed from _____ to _____
Position _____	Monthly Earnings _____
Supervisor _____	Reason for leaving _____
Telephone (____) _____	
Company _____	Address (include zip code) _____
Business _____	Employed from _____ to _____
Position _____	Monthly Earnings _____
Supervisor _____	Reason for leaving _____
Telephone (____) _____	

Company _____ Address (include zip code) _____
Business _____ Employed from _____ to _____
Position _____ Monthly Earnings _____
Supervisor _____ Reason for leaving _____
Telephone (____) _____

11. List last three residential addresses:

- (1) _____
- (2) _____
- (3) _____

12. Do you have any kind of record other than traffic violation? _____ If so, state _____

13. The required application fee or fees is attached hereto in the amount of \$ _____

I, the applicant hereinabove set forth, after being duly sworn, under oath states the foregoing information is true and correct to my best knowledge and belief. So help me God.

This _____ day of _____, 20_____.

APPLICANT (Signature **Must** be notarized)

Sworn to and subscribed before me the day and year first above written.

NOTARY PUBLIC

Total License Fee Due Prior to Issuance \$ _____

(To be completed by City Manager)

- 1. Date of first reading by Council _____
- 2. National background check and Finger printing performed _____
- 3. Background check approved _____
- 4. Code compliance video equipment Reviewed and approved. _____
- 5. Action required by Council prior to approval _____
- 6. Date of second reading by Council _____
- 7. Date approved by Council _____
- 8. Date disapproved by Council _____

CITY MANAGER, City of Perry



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Fingerprint Criminal History Record Consent and Request

City of Perry, City Hall NCJ ORI (On File)
for Alcohol License

I hereby authorize the City of Perry to conduct an inquiry for the purpose of obtaining an alcohol license. This inquiry will include fingerprinting for obtaining national and the State of Georgia criminal history record information as authorized by state and federal law.

Full Name Printed			
Address where you reside			
Sex	Race	Date of Birth	Social Security Number

This authorization is valid for 30 days from date of signature

Signature Date

Date of Inquiry: _____ Time of Inquiry: _____ Operator's Initials: _____

Purpose Code: ALCOHOL LICENSE APPLICATION

The inquiry resulted in the following: (check all that apply)

<input type="checkbox"/>	No Criminal Record Available
<input type="checkbox"/>	Criminal Record (Attached/Released)
<input type="checkbox"/>	No NCIC/GCIC Warrant
<input type="checkbox"/>	Possible NCIC/GCIC Warrant (List Wanting Agency Below)

Wanting Agency Name: _____

Wanting Agency Telephone: _____

Agency Designee Signature and Title



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Applicant Privacy Notification Policy

Notification

The City of Perry issues alcohol licenses and as a part of the process conducts fingerprint based background checks through the Georgia Crime Information Center. Prior to fingerprinting each individual must complete an application and receive a copy of both the Applicant Privacy Rights and the Privacy Act Statement. The City of Perry provides the applicant with the privacy rights. A copy is provided as part of the application packet

Once the applicant had read and understands the Applicant Privacy Rights and the Privacy Act Statement, they will sign a form stating the notification was received and maintain such document for no less than 3 years.

Record Challenge/Correction

If an applicant chooses to challenge the accuracy of the criminal history record or needs to correct or update a record they will be given 30 days to do so. The applicant is notified that the procedures for challenging an FBI record are set forth in 28 CFR 16.30 through 16.34 and the procedures for challenging a Georgia record can be found on the GBI website. The applicants will be given a copy of the criminal history record.

Appeal Process

The applicant is provided an opportunity to appeal an adverse decision based on the criminal history record information provided from the fingerprint based background check. The procedures for the appeal process are as follows:

- 📍 Perry City Police will review the CHRI and render their opinion in a closed door session with the Mayor, Council and City Manager
- 📍 The applicant is aware prior to the hearing that CHRI may be disclosed;
- 📍 The applicant is not prohibited from being present at the hearing
- 📍 CHRI is not disclosed during the hearing if the applicant withdraws from the application process.



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NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant that is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, immigration or naturalization, security clearance, or adoption), you have certain rights which are discussed below:

- 📍 You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- 📍 If your fingerprints/biometrics are used to conduct a FBI national criminal history check, you are provided a copy of the Privacy Act Statement that would normally appear on the FBI fingerprint card.
- 📍 If you have a criminal history record, the agency making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- 📍 The agency must advise you of the procedures for changing, correcting, or updating your criminal history record as set forth in Title 28, Code of Federal Regulations (CFR), Section 16.34.
- 📍 If you have a Georgia or FBI criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the agency denies you the job, license or other benefit based on information in the criminal history record.
- 📍 In the event an adverse employment or licensing decision is made, you must be informed of all information pertinent to that decision to include the contents of the record and the effect the record had upon the decision. Failure to provide all such information to the person subject to the adverse decision shall be a misdemeanor [O.C.G.A. § 35-3-34(b) and §35-3-35(b)].

You have the right to expect the agency receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of state and/or federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council. If the employment/licensing agency policy permits, the agency may provide you with a copy of your Georgia or FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, information regarding how to obtain a copy of your Georgia, FBI or other state criminal history may be obtained at the GBI website (<http://gbi.georgia.gov/obtaining-criminal-history-record-information>). GCIC Mission: To protect the citizens of Georgia by providing accurate and timely criminal justice information and related services. GCIC does this through employee, customer and stakeholder involvement, teamwork, planning and technology.

If you decide to challenge the accuracy or completeness of your Georgia or FBI criminal history record, you should send your challenge to the agency that contributed the questioned information. Alternatively, you may send your challenge directly to GCIC provided the disputed arrest occurred in Georgia. Instructions to dispute the accuracy of your criminal history can be obtained at the GBI website (<http://gbi.georgia.gov/obtaining-criminal-history-record-information>)

Signature

Date



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PRIVACY ACT STATEMENT

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable

Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Signature

Date