

**APPLICATION TO SELL ALCOHOLIC BEVERAGES IN MARION COUNTY**

Type of application:

Restaurant \_\_\_\_\_ Bar \_\_\_\_\_ Night Club \_\_\_\_\_  
Convenience Store \_\_\_\_\_ Grocery Store \_\_\_\_\_

Beer \_\_\_\_\_ Off Premise \_\_\_\_\_ On Premise \_\_\_\_\_  
Wine \_\_\_\_\_ Off Premise \_\_\_\_\_ On Premise \_\_\_\_\_

1. Business Title:

- a. Legal name of business \_\_\_\_\_
- b. Business location \_\_\_\_\_
- c. Business telephone number \_\_\_\_\_

2. Applicant:

- a. Name \_\_\_\_\_
- b. Street address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_
- c. Date of Birth \_\_\_\_\_
- d. U.S. citizen YES \_\_\_\_\_ How Long \_\_\_\_\_ NO \_\_\_\_\_
- e. Home telephone number \_\_\_\_\_
- f. What is the applicant's relationship to the business?  
\_\_\_\_\_

g. Is this business operated as a partnership or corporation? Yes \_\_\_ NO \_\_\_  
If yes, please provide a list of all partners or board of directors and their addresses.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

h. Has the applicant, or any individual listed as having an interest in this business, ever been convicted, pleaded nolo contendere or forfeited bond for any of the disqualifying conditions listed in Marion County's Alcohol Beverage Ordinance? YES \_\_\_\_\_ NO \_\_\_\_\_. If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

i. Has the applicant applied for a GA sales tax number? YES \_\_\_\_\_ NO \_\_\_\_\_

I, \_\_\_\_\_ (Applicant), being duly sworn according to the law, do swear that the facts stated in the above application are true and correct. I have read and understand, and also agree to abide by the Marion County Alcoholic Beverage Ordinance, and any State or Federal laws or regulations governing the sale of alcoholic beverages.

\_\_\_\_\_  
Signature of Applicant

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

My commission expires \_\_\_\_\_.

Notary Public