leesburg
We've got a good thing growing
107 Walnut Ave N. ~ Leesburg, GA 31763
229-759-6465 ~ Fax 229-759-6249

ALCOHOL LICENSE APPLICATION

I. Purpose

The purpose of this packet is to assist the applicant in complying with the requirements for issuance of alcoholic beverage licenses. Please review the alcoholic beverage ordinance in its entirety to familiarize yourself with all the qualifications and requirements contained therein.

A copy of the City of Leesburg ordinance is attached

1. A fully completed application includes the application form and the following attachments
2. Consent agreement for criminal history record of each person named in the application
3. Valid ID of each person named in the application

License fees shall be payable in advance for an entire year beginning January 1 and ending December 31 of the same year. If an initial license fee is paid after January 1, the license fees shall be prorated on a monthly basis for each month or portion of a month left between the date of payment and December 31. The suspension or revocation of any license granted pursuant to this article shall not entitle the licensee to a return of any portion of the license fee.

II. Application Process

1. Applicant receives and completes the application form and obtains all required attachments.
2. Applicant submits the application form, attachments, and payment to:

Leesburg City Hall
107 N. Walnut Avenue
Leesburg, GA 31763
T: (229) 759-6465 F: (229)759-6249
Monday - Friday, 8:00 a.m. - 5:00 p.m.

3. The City of Leesburg publishes a notice of application in the county legal organ, The Lee County Ledger.
4. The City Council conducts a public hearing regarding the application.
5. The City Council either grants or denies the application.

CITY OF LEESBURG, GEORGIA ALCOHOL LICENSE APPLICATION

Instructions: Please answer all the questions completely. Return the signed and dated form, all attachments and payment for license fees to:

Leesburg City Hall ~ 107 N. Walnut Ave.
Leesburg, GA 31763 ~ T: (229) 759-6465 F: (229)759-6249
Monday - Friday, 8:00 a.m. - 5:00 p.m.

1) Type of Application (Sec. 6-30 - 6-33) (check one):

❑ New

❑ Annual Renewal

2) Name of Business Making the Application _____

3) Street Address of Sales Location _____ _____

4) City _____ 5) State _____ 6) Zip Code _____

7) Telephone Number _____ 7a) Email Address _____

8) Name of Person Making the Application _____

9) Social Security Number _____ 10) Date of Birth _____

11) Street Address of Sales Location _____

12) City _____ 13) State _____ 14) Zip Code _____

15) Telephone Number _____16) How Long at this Address _____

17) The Entity Making this Application is a(n):

Individual

Name of Individual _____

Partnership

Name of Partnership/Company _____Name of Partner _____

Name of Partner Making Application _____Name of Partner _____

(Same as SB)

Name of Partner _____ Name of Partner _____

18) The licensee must be at least 21 years of age and a citizen of the United States?

Yes, _____ No _____

TOTAL DUE: $_____

All application fees shall be paid at the time the application is filed and shall not be refunded. All license fees shall be paid upon approval of the license application, and no license shall be issued until the payment of all applicable license fees

17) The Entity Making this Application is a(n):

Individual

Name of Individual _____

Partnership

Name of Partnership/Company _____Name of Partner _____

Name of Partner Making Application _____Name of Partner _____

Name of Partner _____ Name of Partner _____

19) The Entity making this application is a(n):

_____**Individual** Name: _____

_____ **Partnership** Name of Partnership/Company _____

Name of Partner (s)_____

Name of Partner Making Application _____

ALCOHOL BEVERAGE LICENSE

LEGAL NOTICE AND CITY COUNCIL MEETING DATES

FOR OFFICE USE ONLY

Dates for Advertisement in the Lee County Ledger:

Date: _____

The Applicant Shall be Present at the Following Leesburg City Council Meetings:

Date: _____

APPLICANT'S COPY

Dates for Advertisement in the Lee County Ledger:

Date: _____

The Applicant Shall be Present at the Following Leesburg City Council Meetings:

Date: _____

City of Leesburg/City Hall
107 Walnut Ave N
Leesburg GA 31763
Phone: 229-759-6464
Fax: 229-759-6249

Alcohol/LiquorLicense Fingerprint Authorization

Fingerprint Instructions

1 Receive a copy OF THE Applicant Privacy Rights / Privacy Act Statement from The City of Leesburg and sign the acknowledgement form.

2 Pay the Fingerprint fee ($42.00) to the City of Leesburg (Cashier's Check / Money Order)

3 Contact The Lee County Sheriff's Office at 229-759-3064 to schedule an appointment for fingerprinting.

4 Bring a valid government issued photo ID and this authorization to your fingerprint appointment.

_____

Please fingerprint the following individual with The City of Leesburg **ORI GA 923484Z** for the following _____ Alcohol/Liquor License 3-3-2

Applicant's Name _____

City of Leesburg/City Hall
107 Walnut Ave N
Leesburg GA 31763
Phone: 229-759-6464
Fax: 229-759-6249

ALCOHOL BEVERAGE LICENSE

CONSENT AGREEMENT FOR CRIMINAL HISTORY RECORD

(TAKE THIS FORM TO LEE COUNTY SHERIFF'S OFFICE TO HAVE THE CRIMINAL HISTORY RUN)

Name of Person Making the Application_____ _____

Social Security Number _____Date of Birth_____ _____

State of Birth _____ Street Address_____ _____

City _____ State_____ Zip Code _____

Telephone Number _____Driver's License Number _____State _____

I, _____, hereby request to review or challenge my criminal history records. I fully understand that the signing of this authorization form shall relieve the Lee County Sheriff's Office and its employees any liability or responsibility related to the Georgia Crime Information Center Council Rules, and/or Federal or State laws related to the dissemination of criminal history date,

Signature_____ Date _____

Sworn and Subscribed Before Me

THIS____ DAY OF _____ , 20 _____

Notary Public's Name _____

Signature: _____

Note: The individual acknowledges that he may be required to be fingerprinted and that verification be made before any release of information will be given. Also, the individual acknowledges that he may be required to produce other acceptable forms of identification, as a birth certificate, in lieu of fingerprints, if deemed necessary by the records section.

Please fingerprint the following individual with The City of Leesburg ORI GA 923484Z

for the following _____ Alcohol/Liquor License 3-3-2

CONTACT LEESBURG CITY HALL WHEN THE RESULTS ARE READY FOR PICKUP