



APPLICATION FOR ALCOHOL/DISTILLED LICENSE

Date:

Name of Business:

Mailing Address:

City:

State:

Zip:

Location Of Business:

Date Established:

Describe Principal Type or Business Conducted:

■ BEER & WINE PACKAGE SALES:	\$500.00
■ DISTILLED SPIRITS:	\$2,500.00
■ ADMINISTRATIVE FEE: (MUST BE ADDED)	\$10.00
TOTAL AMOUNT DUE:	

I hereby certify that the information reported herein is true and correct. Please attach a copy with your application of the authorized person driver's license.

Signature of Authorized Person Reporting

Printed Name of Authorized Person

Title of Authorized Person Reporting:

Georgia Bureau of Investigation

Georgia Crime Information Center

Consent Form

City of Irwinton

ORI#

I hereby authorize the City of Irwinton to use my fingerprints to receive any Georgia Criminal history record information pertaining to me which may be in files of any state or local criminal justice agency in Georgia.

First Name:

Middle:

Last Name:

Adress:

City:

State:

Zip:

Sex:

Race:

Date of Birth:

Social Security #:

Signature:_____

Date:

Clerk

NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulation (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared or retained.
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a 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 officials deny you the employment, license, or other benefit based on the information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you with a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks> and <https://www.edo.cjis.gov>. You may find information regarding how to obtain a copy of your Georgia criminal history record on the GBI website: <https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) If the disputed arrest occurred in the State of Georgia, you may send your challenge directly to the GCIC. Contact information for the GCIC can be found at <https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-askedquestions>.
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for the authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

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.

Applicant Privacy Rights Notification Signature Form

Applicant Notification and Record Challenge:

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure of obtaining a change, correction or updating an FBI identification record is set forth in Title 28, Code Federal Regulations (CFR), 16.34.

Procedures for obtaining a copy of the FBI criminal history record are set forth in 28 CFR 16.30 through 16.33 or review the [FBI website](#).

Signature

Print Name

Date



Application for Occupational License

Section I

For the Year:

Name of Business:

Contact Person:

Telephone No.

Physical Address:

City:

State:

Zip:

Billing Address:

City:

State:

Zip:

Type of Business:

Section II

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

By executing this affidavit under oath, as an applicant for a(n) Business, Beer & Wine, or Pour by the Drink License as referenced in O.C.G.A. / 36-60-6(d) from the City of Irwinton, the undersigned applicant representing the private employer, verifies one of the following with respect to my application for the above mentioned document.

On January 1st of the signed below year the individual, firm, or corporation employed more than ten (10) employees, if so, proceed to complete section 3 below.

On January 1st of the signed below year the individual, firm, or corporation employed less than ten (10) employees.

Section III

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(a). The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are listed below.

Federal Work Authorization User Identification Number

Date of Authorization

4. You must obtain a certified copy of a criminal background history from the Wilkinson County Sherriff's Office located in Irwinton.

Once we have received your application along with all supporting documentation, your application will be presented to Major and Council for review.

If your application is approved, you will be notified by the clerk's office.

Please note that if you purchase a Pour by the Drink license you must also obtain the beer and Wine License, Cost is as follows:

Occupational License: \$50.00

Beer and Wine License: \$400.00

Fees are due before any license will be issued, and renewable every January 1st.

Section IV

SIGNATURE PAGE

Please Check One:

I am applying for an Occupational License Only

I am applying for an Occupational License and Beer and Wine License Only

In applying for a Beer and Wine License you must affirm that you have read the copy of the Ordinance pertaining to the sale of Beer and Wine Ordinance included in this packet.