APPLICATION FOR ALCOHOLIC BEVERAGE HANDLING PERMIT

QUICK GUIDE

It is imperative that you read and understand this checklist prior to submitting your Alcohol Permit Application to ensure that directions are followed completely

Please complete the application in full. Check all pertinent blocks for arrests. Failure to check blocks with either a "yes" or "no" will result in denial.

We must have the following documents in order to process your application:

1. Attach a copy of your driver's license or state issued identification card.

2. A letter from the business verifying that you work at their establishment.

3. If you are RENEWING a permit, you must attach a certificate or letter from your employer stating that you have completed an alcohol awareness course as provided by your employer.

4. You must be eligible to work in the United States. If you do not have a Social Security Number issued to you, you must show proof of a valid work visa.

5. If you have not lived in Georgia for 5 years or more, you must obtain a certified copy of a criminal history check and a certified copy of your drivers' history from the state you resided in prior to living in Georgia. We do not accept documents from "online" providers unless they are certified by the state that you are requesting the information from.

6. $25.00 (NON-REFUNDABLE} application fee. We do not accept credit cards or debit cards. We do not accept personal checks drawn on an out of state bank. Any other form of payment is acceptable. Checks should be made payable to City of Woodbury.

PLEASE NOTE THAT A DETERMINATION OF ELIGIBILITY FOR A PERMIT WILL NOT BE MADE UNTIL THE APPLICATION HAS BEEN PROCESSED.

Applications are accepted at the Police Department
Monday-Friday, 8:00 a.m.-4:00 p.m.

You will be provided with a date and time that you may return to have your permit issued.

Thank you for your cooperation.

REQUEST FOR CRIMINAL HISTORY/DRIVER HISTORY CHECK

PERMIT NUMBER: _____

DATE: _____

I hereby authorize the City of Woodbury, Georgia to receive any criminal history information pertinent to me that may be in the files of any state or local criminal justice agency.

Have you ever been:

Arrested	☐ Yes	☐ No
Convicted of a crime (or crimes)	☐ Yes	☐ No
Entered a Plea of Nolo Contendere	☐ Yes	☐ No
Entered a Plea of First Offender	☐ Yes	☐ No
Entered a Plea of Guilty	☐ Yes	☐ No

_____ _____
Print Full Name Current Employer

_____ _____ - _____ - _____ _____
Street Address Social Security# Cell/Home Phone #

_____ _____ _____
City State Zip Code

_____ _____ _____ _____ _____
Sex Race Date of Birth Age Place of Birth (City, State)

_____ _____ _____ _____
Height (Ft/In) Weight (Pounds) Eye Color Hair Color

If this request is for an Alcohol Work Permit Check Box and sign below after reading. ☐

I swear and/or affirm that the information provided in this application is true and accurate. Furthermore, I understand that misrepresentation of any or all information will result in non-issuance or revocation of the Alcohol Work Permit. By signing this document, I attest that I have received, read, and understand the City of Fayetteville Ordinances and Georgia State laws that pertain to the sale of alcohol. Furthermore, I understand that if I violate these ordinances o laws that I may be subject to criminal prosecution and that my alcohol permit may be revoked.

_____ _____
Signature Witness

If this request is for a Criminal Background Check box and Sign below. ☐

_____ _____
Signature Witness

U.S. CITIZEN / QUALIFIED ALIEN AFFIDAVIT

By executing this affidavit under oath, as an applicant for a City of Woodbury, Georgia Business License, Occupational Tax Certificate, Alcohol License, or other public benefit as referenced in O.C.G.A. § 50-36-1, the undersigned applicant verifies one of the following with respect to the application for a public benefit:

1) I am a United States Citizen.

2) I am a legal permanent resident of the United States.

3) I am a qualified Alien of Non-Immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other Federal Immigration Agency.

My Alien number issued by the Department of Homeland Security or other Federal Immigration Agency is: _____.

The applicant also hereby verifies that he / she is 18 years of age or older and lawfully present in the United States.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement of representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statue.

_____ _____

Signature of Applicant Date

_____

Printed Name of Applicant

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE

_____ DAY OF _____,20___.

_____

NOTARY PUBLIC
MY Commission Expires _____

Name-Based Criminal History Record Information (CHRI) Consent/Inquiry Form

I hereby authorize _____ to conduct an inquiry for
Agency/Company

the purpose below and receive any Georgia and/or national CHRI as authorized by state and federal law.

Full Name (print)			
Address			
Sex	Race	Date of Birth	Social Security Number

☐ This authorization is valid for _____ days from date of signature.

☐ I, _____, give consent to the above-named entity to perform periodic criminal history background checks for the duration of my employment.

_____ _____
Signature Date

_____ _____ _____
Attorney for Individual (Purpose Code E and U Only) Bar Number Date

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

Purpose Code Used (check one): Note: *Only one inquiry may be performed per consent form.*

NON-CRIMINAL JUSTICE PURPOSES		
	E	Employment
	M	Employment direct care with Mentally Ill/Developmentally Disabled
	N	Employment direct care with Elderly
	W	Employment direct care with Children
	P	Public Record (no consent required)
	F	Probate Court/Weapons Carry License
PERSONAL REQUEST (INDIVIDUAL OR THEIR ATTORNEY)		
	U	Personal Copy (stamp return "personal copy")
CRIMINAL JUSTICE EMPLOYMENT		
	J	Civilian Criminal Justice Employment (state and III data received)
	Z	Sworn Criminal Justice Employment (state and III data received)

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

	No criminal history available
	Criminal history available (attached/released)
	No NCIC/GCIC Warrant
	Possible NCIC/GCIC Warrant (list Wanting agency below)
	Wanting Agency Name:
	Wanting Agency Telephone:

Agency Designee Signature and Title

Georgia Driver's History Consent Form

O.C.G.A. § 40-5-2(f)(4) authorizes local fire departments and law enforcement agencies access to Georgia driver's history records as part of an application for employment or any current employee for use relative to the performance of official duties with the local fire or law enforcement agency.

I hereby authorize the

_____

List Name of Law Enforcement Agency/Fire Department

To receive a copy of my Georgia Driver's History record as part of my application for employment, or for use relative to the performance of my official duties with the agency.

Full Name (print)	
Address	
Sex	
Race	
Date of Birth	
Social Security Number	
Driver's License Number	

This authorization is valid for 90 days from the date of signature.

_____

Signature Date

To be completed by CJIS network operator:

Date of Inquiry	
Time of Inquiry	
Operator's Initials	

Date Results Provided	
Person Results Provided to	

List of sites where the Alcohol Server Course can be found. This is just some of the popular sites, you are not required to use them. If the website you are using meets the state of Georgia's requirements the certificate will be accepted.

- Servingalcohol.com
- 360training.com
- Hospitalityexam.com