City of Ellijay
On-Premise Consumption License Application

Date:_____

Name of Business:_____

Business Physical Address:_____

Business Mailing Address:_____

Business Telephone:_____ Email:_____

Owner:_____

Address:_____

Telephone:_____ Email:_____

Drivers License:_____ Social Security:_____

Check All That Apply:

- ☐ Distilled Spirits Consumption $750.00
  Administrative Fee $100.00 Renewals $50.00

- ☐ Wine/Beer Consumption$1000.00
  Administrative Fee $100.00 Renewals $50.00

ALL LICENSES EXPIRE DECEMBER 31 AT 12:00 MIDNIGHT

RENEWAL APPLICATIONS MUST BE COMPLETED BY NOVEMBER 15 OF EACH YEAR.

This application plus your annual report of sales for the month of August, September and October of the current calendar year, showing gross sale of food products excluding the sale of distilled spirits, malt beverage and wine, the gross sale of malt beverages and wines, and the gross sale of other merchandise, must be filed by November 15th each year along with your renewal application.

Note to Distilled Spirits Licensees: You are required to submit State Form ST3 to the City Clerk on or before the 20th day of each month with your payment for the preceding month's excise tax collected. A copy is included for your use.

On-Premise Consumption License Application

Name of Business_____Date of Application_____

Name of Business Owner(s)(printed)_____

Name of Applicant_____

Address:_____

Birthdate:_____Social Security:_____Drivers License:_____

1) Has the person to whom license is to be issued ever been convicted of a crime other than a traffic violation? ☐ Yes ☐No

2) Is the person to whom the license is to be issued, a U.S. citizen? ☐ Yes ☐No

3) Has the person to whom the license is to be issued a Gilmer County resident? ☐ Yes ☐No

4) Has the applicant or any person with any interest in the application made application at any previous time for any malt beverage or wine license or a distilled spirits license? ☐ Yes ☐No
If yes, what is the disposition of that license?_____

5) Has a previous license issued to the applicant or any person with any interest in the application been revoked by any state or subdivision or by the federal government?
☐ Yes ☐No If yes explain: _____
_____

6) Is any other person interested directly or indirectly in the profits or losses or both of the proposed business? ☐ Yes ☐No (Names and addresses of owners, partners and shareholders should be provided with this application)

7) Location of proposed business:_____
(If this is a new application, you must attach a drawing to scale indicating that the location complies with the distance requirements as set forth in the ordinance to which your application applies.)

I hereby swear that I am a person of good moral conduct and do qualify for this license in accordance with the contents and terms of the ordinance to which my application applies. I also swear that the facts contained in this application are true and correct to the best of my knowledge. I also understand that any false swearing concerning this information contained herein shall be punishable as provided by law.

_____ _____
Signature of Business Owner Signature of licensee

City of Ellijay regulations require that where the owner of the business for which a license is sought is a resident individual of Gilmer county, Georgia, the application for said license shall be in said owner's name. Where the owner is a corporation, partnership, association or non-resident, the application shall be made in the name of a resident managing officer or managing agent and the application shall show that the license is for the use of the owner, and the owner shall be named. The written application for the license shall be a permanent record which the licensee must maintain current. Failure to maintain a current license application as required shall be grounds for revocation of license. I further understand that the sale of alcohol in the City of Ellijay is a privilege and not a right and the issue of a license does not create any property rights in the license holder.

City of Ellijay

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

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for a business license, occupational tax certificate, or other document required to operate a business as referenced in O.C.G.A. § 36-60-6(d):

Section 1. Please check only one:

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

*** If you select Section 1 (A), please fill out Section 2 and then execute below.

(B)_____ On January 1st of the below-signed year, the individual, firm, or corporation employed ten (10) or fewer employees.

*** If you select Section 1(B), please skip Section 2 and execute below.

Section 2.

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. The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as follows:

_____

Name of Private Employer

_____

Federal Work Authorization User Identification Number

_____

Date of Authorization

I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on_____, _____, 201___ in Ellijay, Georgia.

_____

Signature of Authorized Officer or Agent

_____

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____DAY OF_____, 201___.

_____

NOTARY PUBLIC

My Commission Expires:_____

City of Ellijay

O.C.G.A § 50-36-1(e)(2) Affidavit

By executing this affidavit under oath pursuant to O.C.G.A. § 50-36-1, as an applicant for a City of Ellijay public benefit, I swear or affirm under oath the following with respect to my application for a City of Ellijay Occupation Tax Certificate for: _____

Select one of the following:

☐ I am a United States citizen 18 years of age or older. Attach a front and back copy of your driver's license or United State Passport or other secure and verifiable document approved by the Georgia Attorney General's Office. You can find a list of approved documents at www.law.ga.gov under the *Key Issues* tab.

☐ I am a legal permanent resident 18 years of age or older. Attach a front and back copy of your Permanent Resident Card.

☐ I am a qualified alien or non-immigrant under the *Federal Immigration and Nationality Act* and 18 years of age or older and lawfully present in the United States.

Alien Registration number for non-citizens: _____

(Required) A front and back copy of one of the following documents must be attached:

a. Valid Foreign Passport with I-94
b. Temporary Resident Alien Card (I-688)
c. Employment Authorization Card (I-766 or I-688B)
d. Employment Authorization Document (I-688B)
e. Refugee Travel Document (I-571)

Any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of Official Code or Georgia O.C.G.A. § 16-10-20.

Sworn to and subscribed

_____ _____

Signature of applicant *Printed name of applicant*

For notary use only

Subscribed and sworn before me on

this the _____ day of _____ 20 _____

_____ _____

Notary Public *Date my commission expires*

SEAL

Distilled Spirits
Alcohol Sales Tax Return
City of Ellijay

Gross sales for month of _____ as reported on State Form ST3

IMPORTANT: This return must be filed and paid by the 20th of the month following the period for which the tax is due to avoid loss of licensee's compensation and payment of penalty and interest. Dealer must file timely return even though no tax is due. Do not send cash by mail.

Date of Tax Return _____

Name of Licensee _____

Trade Name _____

Address _____

1. Gross Sales _____ $_____
2. Gross Excise Tax Due _____ $_____
3. Licensee's Compensation(3% of gross tax due)____ $_____
   (Deduct on timely returns only)
4. Net Excise Tax Due _____ $_____
5. Specific Penalty _____ 25%___ $_____
6. Interest _____ $_____
7. Other _____
8. Pay This Amount _____

Make Checks Payable To The City Of Ellijay

**Please submit this form with payment on or before the 20th of the month for prior month sales along with a copy of State Form ST3 (Georgia Sales and Use Tax), as required in Section 6-125 of the City of Ellijay Distilled Spirits Ordinance.

I certify that this return, including accompanying schedules or statements, has been examined by me and is to the best of my knowledge and belief a true and complete return, made in good faith, for the period stated.

This _____ day of _____, 20____

Return Prepared By _____

Licensee's Signature _____

SUBMIT THE FOLLOWING WITH YOUR APPLICATION:

1. Copy of Lease or proof of ownership.

2. **New applicants including owners, partners, and shareholders for Off-Premise Consumption Licenses are required to be fingerprinted.** These may be obtained at The UPS Store, #4805, 96 Craig Street, Suite 112, East Ellijay, GA 30540. Telephone (706) 698-4877, or the Ellijay Police Department. Telephone (706) 635-7430. The ORI number for the City of Ellijay **GA923184Z**. Please provide this number when making application. You must first register on-line at www.cogentid.com. Click on Georgia GAPS, Applicant Registration, City/County Government and Law Enforcement Agencies, Alcohol and Liquor License.

3. Pictures of ALL sides of building.

4. A drawing to scale, showing the nearest church, school or college, or an affidavit of a registered surveyor that the proposed location of the premises complies with the distance requirements of the ordinance, or by a statement from the City of Ellijay Code Enforcement Officer that the proposed location of the premises complies with the distance requirements as set forth in the applicable ordinance(s).

5. An affidavit of the publisher of the Times Courier certifying notice of application for a beer, wine, and/or distilled spirits license has been published at least one time per week for the three weeks preceding the regular city council meeting.

   Notice in newspaper must contain:
   1) name of person applying
   2) name of owner if different than applicant
   3) location of proposed premises
   4) type of license(s) applied for