



City of Riverdale
Police Department

Riverdale, Georgia 30274
A City that Cares

**Alcohol & Liquor
Permit Application**

City of Riverdale Police Department
Riverdale, Georgia 30274

Alcohol or Liquor Permit Application

FOR OFFICIAL USE ONLY

City License/Permit Number: _____

Calendar Year: _____

PERSONAL STATEMENT

INSTRUCTIONS: This personal statement must be executed, under oath, by every person having any ownership or profit sharing interest in managing, or is employed by, any place of business applying for a license from the City of Riverdale to sell or deal in alcoholic beverage or liquors. Each question must be fully answered. If the space provided is not sufficient, answer the question on a separate sheet of paper and indicate such in the space provided and attach the separate sheet to this application. A personal statement, including a passport size photograph and a fingerprint card (provided by the City of Riverdale Police Department), for the below person, must be submitted with each license/permit application.

PERSONAL INFORMATION SECTION

Please print clearly:

- 1) Full name of applicant: _____
- 2) Complete home address: _____

Street address & Apt. #

City

State

Zip
- 3) Race: _____ Sex: _____ Height: _____ Age: _____ Weight: _____ Hair Color: _____ Eye Color: _____
- 4) Date of Birth: _____ Place of Birth (City & State): _____
- 5) U.S. Citizen? _____ By Birth? _____ Naturalized? _____
 - ◆ Date, Place and Court: _____
 - ◆ Certificate #: _____ Petition #: _____
 - ◆ Derived Parent Certificate #'s: _____ Alien Registration #: _____
 - ◆ Native Country: _____ Date & Port of Entry: _____
- 6) How many consecutive years and months have you been a legal resident of the State of Georgia?

Years: _____

Months: _____
- 7) Single: _____ Married: _____ Widowed: _____ Divorced: _____ Separated: _____
- 8) If married, give spouse's full name (including wife's maiden name), date and place of birth, date and place of marriage (County & State), and name of spouse's employer. If widowed or divorced, provide same information on former spouse: _____

- 9) Other names used by applicant: Maiden name, names by former marriages, former names changed legally or otherwise; aliases, nicknames, etc... Specify which and show dates used: _____

- 10) Employment Record for past 10-years: (Give most recent experience first. If self-employed, give details)

FROM MO/YR	TO MO/YR	OCCUPATION & DESCRIPTION OF DUTIES PERFORMED	EMPLOYERS	REASON FOR LEAVING

- 11) List in reverse chronological order all of your residences for the past 10-years:

DATES		STREET ADDRESS	CITY	STATE	ZIP
FROM	TO				

- 12) References: Give three personal references (not relatives, former employers, fellow employees, or school teachers) who are responsible, reputable adults, business or professional men or women, who have known you well during the past 5-years. (Name, residence address, business address and number of years known)

1. _____
2. _____
3. _____

13) Military Service: (Branch of service, serial numbers, period of service, type of discharge): _____

14) Have you ever been arrested, or held by Federal, State, or any other Law Enforcement authorities for any violation of any federal, state county or municipal law, regulation or ordinances? (do not include traffic violations, except for driving under the influence. All other charges must be included even if they were dismissed. Give reasons charged or held, date, place where charged and disposition.) _____

ALCOHOL/LIQUOR INFORMATION SECTION

15) Full name of the business, dealer and/or trade name, if any, submitting application for which this personal statement is a part: _____

16) Position in which the applicant will be working in the dealer's business: _____

17) State ownership or profit sharing interest, if any, in this business: _____ If any, provide the amount of compensation and method by which determined. _____
Annual profit or compensation derived from this business: _____

18) Do you have any financial interest in any bar, lounge, tavern, restaurant, or other place of business where alcoholic beverages or liquors are sold and/or consumed on the business premises? If so, give details: _____

19) Do you have any financial interest and/or are you employed, in any wholesale or retail liquor business other than the business submitting the license application for which the personal statement is a part? _____ If so, give the names and locations and the amount of interest in each: _____

20) Do you have any financial interest, and/or are you employed, in any business engaged in distilling, bottling, rectifying, or selling (wholesale or retail) any alcoholic beverage in the State of Georgia or outside of the State of Georgia which has not otherwise been disclosed in the personal statement? _____ If so, explain: _____

Criminal & Driver's History Release Consent Form

I, the under signed, hereby authorize the City of Riverdale Police Department to receive any criminal and driver's history record information pertaining to me, which maybe in the files of any Federal, State, County or local criminal justice agency.

Please print clearly:

Full Name: _____
LAST FIRST MIDDLE

Complete Street Address: _____

City: _____ State: _____ Zip: _____

Sex: _____ Race: _____ Date of Birth: _____

Social Security Number: _____ Driver's License #: _____ State: _____

Note: Before signing this Consent Form, check all answers to see that you have answered all questions fully and correctly. This Consent Form is to be executed under oath and is subject to the penalties of false swearing.

Verification

STATE OF GEORGIA, CLAYTON COUNTY
CITY OF RIVERDALE

I, _____ do solemnly swear or affirm, subject to the penalties of false swearing, that the above information in the foregoing Consent Form is true and correct and that I do willingly give my consent.

Signature (Full name)

I hereby certify that _____ (the above name individual) signed his or her name to the foregoing Consent Form stated to me that he or she knew and understood the reason for this Consent Form and willingly signed said Consent Form, and under oath actually administered by me, has sworn or affirmed, that said information is true and correct.

This _____ day of _____, 19 _____.

Notary Public

(Place Notary Seal Above)

City of Riverdale Police Department

6690 Church Street
Riverdale, Georgia 30274

Liquor/Pawnshop Permit Verification

The attached application for _____, for a Liquor or Pawnshop Permit or Business license has been reviewed by the undersigned, with all the required investigations having been made, and I so hereby certify that all provisions of the code of ordinances, of the City of Riverdale, for which I am responsible, have been complied with.

Date

Chief of Police



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