



Clayton County Community Development Department
Alcohol License Renewal Application –2014
 121 S. McDonough Street Jonesboro, GA 30236 **Remit By November 15, 2013**

DO NOT COMPLETE THIS RENEWAL APPLICATION IF THERE HAS BEEN A CHANGE OF LICENSEE OR OWNERSHIP. PLEASE CONTACT THE PERMITS & LICENSE OFFICE.

BUSINESS:

Business Name: _____ Alcohol License #: _____
 Business Address: _____
 City, State, Zip: _____

LICENSEE:

Licensee Full Name: _____
 Licensee Home Address: _____
 City, State, Zip: _____
 Licensee Home Phone: _____ Licensee Cell Phone: _____ Licensee Email: _____

LICENSE FEE: (A nonrefundable \$250.00 investigation fee per application.)

<input type="checkbox"/>	Hotel / Motel - Restaurant/Lounge (Beer/Wine/Distilled)	\$ 8,000.00
<input type="checkbox"/>	Restaurant - Retail Consumption (Beer/Wine/Distilled)	\$ 5,000.00
<input type="checkbox"/>	Restaurant - Retail Consumption (Beer/Wine)	\$ 3,000.00
<input type="checkbox"/>	Retail Package Dealer (Beer/Wine)	\$ 2,000.00
<input type="checkbox"/>	Private Club – Retail Consumption	\$ 1,000.00
<input type="checkbox"/>	Sports Club – Retail Consumption	\$ 1,000.00
<input type="checkbox"/>	Distributor – Wholesale	\$ 100.00

LATE PENALTY:

(remitted after December 31, 2013)
 License Fee: \$ _____
 10% Penalty: \$ _____
 1.5% Interest: \$ _____
 Amount Due: \$ _____

Total Fees (Must be in Cash, Money Order, or Cashier's Check)

LICENSE ELIGIBILITY: (CLAYTON COUNTY CODE PART II, CHAPTER 6, SECTION 6-5)

RETAIL CONSUMPTION:

List your current seating capacity (not including any seating located in a lounge, bar or other area designated primarily for the serving of alcoholic beverages): _____

RETAIL DEALER:

List total amount of inventory including food, tobacco products, household supplies and periodicals (alcohol and automotive supplies shall not be included): _____

TYPE OF OWNERHIP: _____ Sole Proprietor _____ Partnership _____ Corporation

If a corporation: Corporate Name: _____

ONLY LIST OWNERS/OFFICERS WHO OWN 5% OR MORE INTEREST

Owner/Officer	Home Address	City, State, Zip	% of Ownership	Social Security #
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I _____, do hereby swear and affirm under oath, subject to the penalties of the State of Georgia for false swearing, that I have received the alcoholic beverage regulations of Clayton County, Georgia, that I have read and understand the regulations and that the statements, answers and information given by me as the Licensee are true and correct.

Licensee Signature _____ Date _____

Sworn under oath on _____ - _____ - _____
 Month Day Year Notary Signature and Seal _____