

**CITY OF JONESBORO**

124 North Avenue  
Jonesboro, Georgia 30236  
City Hall: (770) 478-3800  
Fax: (770) 478-3775  
www.jonesboroga.com

**Ricky L. Clark, Jr.**  
City Manager

**ALCOHOL LICENSE RENEWAL APPLICATION**

Do not complete this renewal application if there has been a change of Licensee or ownership. Please contact the Permits/License Office. Renewal must be completed and notarized by the licensee on file.

**Remit by November 15<sup>th</sup>**

**Business**

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

**Licensee**

Licensee Full Name:			Licensee Home Address
City	State	Zip	Home#
Mobile#			Email:

**License Fee**

<input type="checkbox"/> Retail consumption on the premises (Distilled spirits, malt beverages, and wine) - \$4,500.00 <input type="checkbox"/> Retail consumption on the premises (Malt beverages only) - \$1,000.00 <input type="checkbox"/> Retail consumption on the premises (Wine only) - \$1,000.00 <input type="checkbox"/> Retail Package Sales (Malt Beverages and Wine) - \$2,000.00 <input type="checkbox"/> Retail Package Sales (Malt Beverages Only) - \$1,000.00 <input type="checkbox"/> Retail Package Sales (Wine Only) - \$1,000.00 <input type="checkbox"/> Art Gallery License - \$300.00 <input type="checkbox"/> On-Premise Art License - \$500.00 <input type="checkbox"/> Retail Package Sales (Beer, Wine and Liquor) - \$5,000.00	<b>Late Penalty:</b> (remitted after November 15 <sup>th</sup> )  License Fee: \$ _____ \$75.00 (after 11/15 – before 12/1): \$ _____ \$150.00 (after 12/1 – before 12/15): \$ _____ \$250.00 or 20% (after 12/15): \$ _____ Total Amount Due: \$ _____
Total Fees (Must be in Cash, Money Order, VISA, Master Card, Discover or Cashier's Check)	

**Ownership**

Check Applicable Type: _____ Sole Proprietor _____ Partnership _____ Corporation
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**Corporation (If applicable) (Only list owners/officers who own 5% or more interest.)**

Corporate Name:	Owner/Officer:		
Home Address	City	State	Zip
% of Ownership:	Social Security#:		

**License Eligibility (Jonesboro Code of Ordinances, Chapter 6, Section 6-37 & 6-71)**

<b>Retail Consumption:</b> List your current seating capacity (not including any seating located in a lounge, bar, or other area designated primarily for serving alcoholic beverages.)  # of Seats: _____	<b>Retail Dealer:</b> List total amount of inventory including food, tobacco products, household supplies, and periodicals (alcohol and automotive supplies shall not be included.)  Amount of Inventory: _____
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## EMPLOYEE NAMES AND ALCOHOL ID BADGES

As part of the renewal application, the licensee shall submit to the city a complete list of the names, social security numbers, and photos of the current shareholders, partners, owners, license representatives, and employees of the licensed establishment for whom fingerprint cards and background checks are required under sections 6-38 and 6-101 of this chapter so that the city may confirm all such persons are being properly investigated under this chapter and may confirm all employees are being issued the requisite employee identification cards as discussed in section 6-101 below. Furthermore, this list must be continually maintained and kept up to date by the licensee and the licensee representative in order to maintain compliance with this chapter. Please note that all employees are required to have an Alcohol ID Badge. The cost of the badge is \$25.00. Please list the name of all current employees below:

Name of Employee:	Social Security Number:	Badge Issued:

I, \_\_\_\_\_, do hereby swear and affirm under oath, subject to the penalties of the State of Georgia for false swearing, that I have read and understand the City of Jonesboro alcohol beverage ordinance and that the statements, answers, and information given by me as the Licensee are true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Seal





CITY OF JONESBORO  
124 North Avenue, Jonesboro, GA 30236  
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**Affidavit Verifying Status for City Public Benefit Application**

By executing this affidavit under oath, as an applicant for a Business License or Occupation Tax Certificate, Alcohol License, Taxi Permit or other public benefit, as referenced in O.C.G.A. Section 50-36-1, from the City of Jonesboro, the undersigned applicant verifies one of the following with respect to my 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 or 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.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1 (e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

\_\_\_\_\_  
In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or 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 statute.

Executed in Jonesboro, Georgia.

Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_\_

SUBSCRIBED AND SWORN  
BEFORE ME ON THIS THE

\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_

Printed Name of Applicant: \_\_\_\_\_

\_\_\_\_\_  
Notary Public  
My Commission Expires:

\* \_\_\_\_\_  
Alien Registration number for non-citizens

\*Note: O.C.G.A. § 50-36-1(e)(2) requires that aliens under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien", legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number: \_\_\_\_\_

PLEASE SEE CHECKLIST BELOW. THESE ITEMS ARE REQUIRED WITH YOUR RENEWAL APPLICATION

**FOR OFFICE USE ONLY:**

Date Received: \_\_\_\_/\_\_\_\_/20\_\_\_\_

Type of License: \_\_\_\_\_

Fee Amount Enclosed: \$ \_\_\_\_\_

Business License No.: \_\_\_\_\_

Date Approved: \_\_\_\_/\_\_\_\_/20\_\_\_\_

State License No.: \_\_\_\_\_

Date Denied \_\_\_\_/\_\_\_\_/20\_\_\_\_

Reason (if any): \_\_\_\_\_

- ☐ Copy of official government issued photo identification (driver's license, passport, state ID card, etc.) for applicant and/or management designee
- ☐ Proof of percentage of Alcohol sales and percentage of other miscellaneous inventory sales
- ☐ Copy of State License
- ☐ Alcohol ID Card required for all employees selling or serving – (list names on page 2)
- ☐ City taxes (Personal Property and Real Estate) must be paid
- ☐ Background check (Manager, Business Owner or Registered Agent) (\$35)

Misc. Notes:

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City Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_