



TOWN OF THUNDERBOLT
APPLICATION FOR ALCHOLIC BEVERAGE LICENSE

BEFORE THE UNDERSIGNED, ATTESTING OFFICER DULY AUTHORIZED BY LAW TO ADMINISTER OATHS, PERSONALLY COMES THE PETITIONER FOR A LICENSE TO CONDUCT THE BUSINESS DESCRIBED BELOW AND, BEING FIRST DULY SWORN, ON OATH, SAYS THAT THE INFORMATION GIVEN AND THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT, AND COMPLETE.

Application is hereby made for a business license for the calendar year _____ to do business within Thunderbolt as a dealer in alcoholic beverages as indicated below:

<u>1. Kind of Business to be Operated.</u> <u>Clause</u>	<u>License Fee</u>
<input type="checkbox"/> Retail beer or other malt beverage	\$ _____
<input type="checkbox"/> Wholesale beer or other malt beverage	_____
<input type="checkbox"/> Retail liquor – sale by package only	_____
<input type="checkbox"/> Retail liquor – sale by drink only	_____
<input type="checkbox"/> Retail liquor – sale by package and drink	_____
<input type="checkbox"/> Wholesale liquor	_____
<input type="checkbox"/> Retail wine	_____
<input type="checkbox"/> Wholesale wine	_____
<input type="checkbox"/> Other	_____
TOTAL LICENSE FEE (add items checked)	\$ _____

2. Name of Business _____ Date _____
3. Is the name of business registered with the Clerk of Superior Court of this County? Yes _____ No _____
4. Business Location _____ Telephone # _____
5. Applicant's Name _____ Birthdate _____
Home Address _____ Home Telephone # _____
Applicant's Social Security # _____
6. Business Owner's Name _____
Home Address _____ Telephone # _____

7. Is the business incorporated? _____ If so, where & what date? _____
Other information to identify owner _____
8. Name of Manager or Operator _____
9. Names and addresses of all persons having an interest in said business, including stockholders, if corporation.

10. What interest do such persons have? _____
11. Name of Landlord of Business Location _____
12. Owner's Name of Said Location _____
Owner's Address _____
13. In whose name will the income taxes be due on profits arising from operation of said business? _____
14. In what will the manner will the manager or operator of said business be compensated? _____
15. By whom will such compensation be paid? _____
16. What other types of business will be conducted at said location? _____
17. Names and address of persons conducting other kinds of businesses. _____

18. Has applicant or any person connected with or having an interest in said business:
a) ever been convicted of any violation of law in any locality?
Yes _____ No _____
If yes, was conviction for a traffic violation?

Other violation? _____
- b)** ever served time in prison, or other correctional institution? _____
19. If the answer to any part of the above question is "yes," describe circumstances in detail for each person. (Attach additional sheet if necessary)

20. Has application been made for required State and Federal Licenses? Yes ___ No ___

21. Give names and addresses of three citizens as references.

22. If this application is for RENEWAL of an existing license, enter number of existing License Number

23. If RENEWAL, and the information herein is different from the information given in the original license application in the following particulars: _____

24. If eating establishment, are Sunday sales of alcoholic beverages contemplated? Yes___ No___ If "yes" a separate affidavit must be submitted for authorization.

*All of the foregoing information is hereby given and all of the foregoing statements are hereby made on oath, willfully, knowingly, and absolutely, and the same is and are hereby sworn to be true under penalty for false swearing, as provided by law.

Sworn to and subscribed before me _____
This ___ day of _____ 200__ . Applicant's Signature

Notary Public, Chatham County, Georgia

Notice: The applicant for retail license shall be a Citizen of the United States, a Resident of Chatham County, Georgia and the owner of the business or if a corporation, partnership or other legal entity is the owner, substantial and major stockholder or the applicant may be the manager of the business charged with the regular operation of said business on the premises for which the license is issued.

IMPORTANT: Applicant for an alcoholic beverage license must attach hereto a cashier's check or money order payable to the Town of Thunderbolt in the amount of the license fee to be due if said license is granted, plus other applicable charges as show below.

(For Office Use Only)	
Date Application Received: _____	
License # _____	
Amount Paid _____	
License Fee _____	Transfer Fee _____
Advertising _____	Sign _____
Total Cost _____	
Application has been examined and found to conform to the requirements of the ordinance approved by Council on _____ 200 ____, as amended, and is recommended for: _____ Approval _____ Referral to _____ Referral Council _____	
Reason _____ By _____	
INSPECTION DEPARTMENT _____ Approved _____ Disapproved _____	
By _____	
POLICE DEPARTMENT _____ Approved _____ Disapproved _____	
DATE Approved/Disapproved _____	
Comments: (Attach separate sheet if necessary) _____ _____	
This application is Approved _____ Disapproved By: _____	
If approved, authorization is hereby given to issue license: _____	
Date: _____	

THUNDERBOLT POLICE DEPARTMENT

CONSENT FORM

I, _____, do hereby authorize the Thunderbolt Police Department to receive any criminal history record information pertaining to me which may be in the files of any State or Local criminal justice agency in Georgia.

Signature of Applicant

Address

Race

Sex

Social Security Number

Notary Public

Date