Newton County Development Services Department Pouring Permit Application 678-625-1659

The following application forms are pursuant to Chapter 32, Section 32-201 of Division II (Alcoholic Beverage Ordinance) of the Code of Newton County. All required information must be submitted before an application will be accepted.

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(1) Full Name (first, middle, last):	
(2) Previous Names:	
(3) Maiden Name:	
(4) Address:	
(5) Phone Number:	
(6) Date of Birth:	
(7) Social Security Number:	
(8) Business Name: (9) Business Address:	
(10) Applicant must submit background investigation report from Sheriff's Office, including but not limited to	
fingerprinting and verification that no applicant has been convicted under any federal, state or local law of a felony, within ten years prior to the filing of this application.	ıny
(11) Applicant must include prior arrest record (the fact of an arrest record shall be used for investigative purpo	ses
only and shall give rise to no presumption or inference of guilt). Leaving this section blank indicates no prior arrest record:	
Applicant Checklist	
Applicant must submit documentation that the following standards have been/will be met:	
(1) Section IV.B.1. – Must submit citizenship affidavit. <u>See Page 2</u> .	
(2) Section IX.A. – Must read and agree to all provisions.	
(3) Section IX.A.1. – Must submit fingerprints to Sheriff's Office and have a background investigation report issued.	
(4) Section IX.A.3. – Must submit Criminal History affidavit. See Page 3.	
(5) Section IX.A.5. – Must submit all required fees. <u>See Page 4</u> .	
I hereby swear that the information contained on this application and all supplemental documentation is correct.	
Applicant: Date:	
Notary Public: Date:	
Staff Review Checklist [To be completed by staff only]	
() Section IV.B.1. – Applicant(s) are a citizen of the United States or an alien lawfully admitted for permanent	
residence.	
() Section IX.A.1. – Fingerprints were submitted to Sheriff's Office and a background investigation report was issued () Section IX.A.3. – Applicant(s) have submitted Criminal History affidavit.	1.

Alcohol Ordinance Fee Schedule:	Permit Fee	Total Amount (to be Paid to Development Services) NCSO Investigation Fee (to be paid to the Sheriff's Office)
Pouring permit- original	\$75	\$75 \$50
Pouring permit- renewal	\$50	\$50 \$50

Other fees:

Fingerprinting: **To be paid to the Sheriff's Office** -- \$10 in cash for administrative costs plus a check for \$42.50 made out to Georgia Crime Information Center for background check.

Appeal fee: \$250 to defray administrative costs associated with appeals to the Board of Commissioners

Per Section V.A.1:

Each application for a license under this Section shall be accompanied by a certified check for the full amount of the license fee, together with a separate check or cash to defray investigative and administrative costs. These fees shall be according to a fee schedule adopted by the Board of Commissioners.

- a. If the application is made from January 1 to June 30: The full amount of the license fee designated herein.
- b. If the application is made from July 1 to December 31: One-half of the full amount of the license fee designated herein.

Affidavit

County of Newton, State of Georgia

I, the undersigned, certify that the applicant has not been convicted nor has pleaded guilty or entered a plea of nolo contendere and have been released from parole or probation to any crime involving moral turpitude; illegal gambling; illegal possession or sale of controlled substances; illegal possession or sale of alcoholic beverages, including the sale or transfer of alcoholic beverages to minors in a manner contrary to law; driving while under the influence of alcohol and/or drugs; obstruction or hindering of law enforcement officers; riot; inciting to riot; giving false information to law enforcement officer; and/or hindering apprehension or punishment of a criminal within a period of five years immediately prior to such application, keeping a place of prostitution, pandering, pimping, public indecency, prostitution, solicitation of sodomy, or any sexual related crime within a period of ten years immediately prior to the filing of this application.

I further certify that I, the undersigned, have not had any license issued under the police powers of the County previously suspended or revoked within two years prior to the filing of this application.

Note: For purposes of this application, a conviction or plea of guilty or nolo contendere shall be ignored as to any offense for which defendant who was allowed to avail themselves of the Georgia First Offender Act (O.C.G.A. title 42, ch. 8, art. 3, O.C.G.A. § 42-8-60 et seq.) except, however, that any such offense shall not be ignored where the defendant violated any term of probation imposed by the court granting first offender treatment or committed another crime and the sentencing court entered an adjudication of guilt as to the crime for which defendant had previously been sentenced as a first offender.

SUBSCRIBED AND SWORN BEFORE ME ON THIS	Signature of Applicant:	Date:	
DAY OF, 20	Print Name:		_
Notary Public	First	Middle Last	
My Commission Expires:			

Affidavit Verifying Status for Public Benefit Pursuant to Georgia Immigration Laws

By executing this affidavit under oath	, as an applicant for a Newton C	County, Georgia B	usiness or Alco	holic
Beverage License, which is a public b			_	•
or on behalf of	(Business E	ntity) my persona	I presence in the	United
States as follows (check one):				
A I am a U	United States Citizen, OR			
non-immigrant under the Federal in the United States. I have provide	gal permanent resident 18 years or Immigration and Nationality Act I ded my Alien Registration Number yided another identifying number b	18 years of age or or, or in the event I o	lder and lawfully	present
O.C.G.A 50-36-1 (e)(2) requires that aliens utheir registration number. Because legal permust also provide their alien registration numidentifying number.	anent residents are included in Federa	al definition of "alien	", legal permanent	residents
 Alien Registration & Card Numb MUST PROVIDE COPY OF R 	er or Non-Citizens Doc. Expira EGISTRATION CARD FRONT		Birth Date	
SUBSCRIBED AND SWORN BEFORE ME ON THIS DAY OF, 20	Signature of Applicant:	Date	e: 	
	Print Name:			
Notary Public My Commission Expires:	First	Middle	Last	