



# MCINTOSH COUNTY Board of Commissioners

1200 NORTH WAY; DARIEN, GA 31305

912-437-6671 phone/912-437-6416 fax

## MCINTOSH COUNTY ALCOHOLIC BEVERAGE LICENSE RENEWAL APPLICATION

APPLICANTS FULL NAME \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_

BUSINESS LOCATION (STREET) \_\_\_\_\_

APPLICANTS MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

APPLICANTS DATE OF BIRTH \_\_\_\_\_ CELL PHONE \_\_\_\_\_ HOME PHONE \_\_\_\_\_

### LICENSE APPLIED FOR:

BEER/WINE-CONSUME OFF PREMISES \$500     COMBINATION (Beer, Wine & Liquor)-CONSUME OFF PREMISES \$1250

BEER/WINE-CONSUME ON PREMISES \$750     COMBINATION (Beer, Wine & Liquor)-CONSUME ON PREMISES \$1750

### TYPE OF BUSINESS:

PACKAGE / SHIP    STORE    TAVERN    RESTAURANT    CLUB    GROCERY    LIQUOR STORE    SERVICE STATION

Have you, the applicant, or any other person having interest in business for which this application has been made, ever been arrested, indicted, or convicted for any offenses (excluding minor traffic violations) by any City, County, State, Federal or Foreign officer or any other governmental authority with in the last twelve (12) months? \_\_\_\_\_

If yes give full details (failure) to make full disclosure in response to this question will result in a denial of the application or revocation of the licenses, if information should have been given, but was not for any reason whatsoever, is forthcoming subsequent to the granting of the license.

### SIGNATURE SECTION

**BEFORE SIGNING THIS APPLICATION, CHECK ALL ANSWERS AND EXPLANATIONS TO SEE THAT ALL QUESTIONS ARE ANSWERED CORRECTLY. THIS APPLICATION IS TO BE EXECUTED UNDER OATH AND SUBJECT TO THE PENALTIES OF FALSE SWEARING AND IT INCLUDES ALL ATTACHED SHEETS SUBMITTED HEREIN.**

**I DECLARE UNDER PENALTY OF FALSE SWEARING THAT THIS APPLICATION HAS BEEN EXAMINED BY ME, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT, AND COMPLETE.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Sworn and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_