

PAULDING COUNTY MARSHAL BUREAU



240 Constitution Blvd
Dallas, GA 30132

Office: 678-383-3364 Fax: 678-383-3371

Application for Alcoholic Beverage License Explanations/ Definitions

Dear Applicant/Owner:

****PLEASE READ THE FOLLOWING EXPLANATIONS/ DEFINITIONS
PRIOR TO COMPLETING APPLICATION****

Below is a brief description of the forms necessary to complete your alcohol application. Please complete all *Necessary* forms and schedule an appointment with the Marshal Bureau-Alcohol Licensing Division 678-383-3364

The Paulding County alcohol license fee schedule lists the applicable license and applications fees which are required to be paid on *two separate certified checks*; one for the license fee and one for the application fee. *Only* certified checks will be accepted and those *checks should be made payable to the Paulding Board of Commissioners.*

The enclosed forms are for all licenses; the forms required differ slightly for different applications, i.e. new applications, renewals, and transfers. *Please complete the required forms and supply the required documents applicable to your application. (*See Application Requirement List*)*

Every effort has been made to simplify the process for all parties involved. Please review the ordinance and forms in their entirety and contact our office with any questions or concerns.

-Form 1: Owner/ applicant information- This form needs to be completed and filled out by all parties involved with the business. Be sure business name is consistent on all the forms and licenses.

-Form 2: Registered Agent - The Registered agent must be a Paulding County Resident, at least 25 years of age, and willing to receive any process, notice or demand required or permitted by law or under the Paulding County Ordinance to be served upon a licensee or owner.

PAULDING COUNTY MARSHAL BUREAU

-Form 3: Surveyor's Distance Certification: Each applicant will supply a scaled drawing showing the nearest church, school, college and/or residential dwelling along with a notarized affidavit from a registered surveyor.

-Form 4: Fingerprint/Criminal History Consent: The applicant must complete the fingerprint/criminal history consent form. Fingerprints will be processed at the Marshal Bureau.

-Form 5: Tax Commissioner's Affidavit: This applies to the business, applicant, owner and anyone with a substantial interest in the business. This form needs to be taken to the 3rd floor, property tax department prior to alcohol license appointment.

-Form 6: Residential/Church Dwelling Consent: This form is required whenever a home, "residential dwelling", falls within the 300 feet of the business location. If the home is a rental property, the owner of the property must consent. There are also stipulations that must be met when dealing with church dwellings. See form 5 for the exact ordinance that explains the distance required.

-Form 7: Wholesaler Lists: A separate form needs to be completed for each wholesaler that delivers alcoholic beverages to your business or restaurant. (You will have to make the amount of copies necessary to complete one page for EACH wholesaler/ distributor)

-Form 8: Affidavit Verifying Status for Paulding County Public Benefit Application: Used to ensure only eligible applicants are receiving public benefits. If the owner/applicant has immigrated to the United States, proof of United States Citizenship or proof of legal residency is required.

-Form 9: Package Distilled Spirits Planning & Zoning Affidavit: this is an approved site plan and color elevations portraying how the proposed site and building are in compliance with the Corridor Overlay District and requirements set forth in 6-31.1 (d)(2)-(3)

*****Additional form definitions/ explanations******

- **Paulding County Alcohol License fee schedule:** *Fees for licenses set by the Paulding County Board of Commissioners*

- **Public Notice:** *At the time the application is submitted; the Marshal Bureau will provide the applicant or their representative with the language for the Public Notice and directions for publishing the notice in the local legal organ (The Dallas New Era). The Public Notice gives the public the opportunity to submit comments to the Marshal Bureau, only allowing 30 days from the first day it is published in the Dallas New Era. (Ch.6 Sec. 6-44)*

- **Publishers Affidavit:** *After the notice has run in the paper (2 consecutive weeks) the applicant is responsible for returning a notarized Publisher's Affidavit to the Marshal Bureau. The affidavit will be supplied by the legal organ.*

- **Seating Capacity Confirmation:** *This form is supplied by the Paulding County Fire Marshal, a division of the Paulding County Fire Department. This form is required for on premises consumption. The State requires a minimum seating capacity of 50 people. An appointment will be required with the Fire Department for this confirmation. Contact 770-222-1160 for an appointment.*

Paulding County Alcohol License Fee Schedule Page 1 of 2	
➤ License Fees (2 certified checks required) 1.) License Fees 2.) Application Fees-(non-refundable)	
<p>Retail Package License (Off Premises Consumption)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Malt Beverage & Wine--- \$1000 <input type="checkbox"/> Distilled Spirits--- \$2000 (Includes malt beverage, wine, & distilled spirits) 	
<p>On Premises Consumption License</p> <ul style="list-style-type: none"> <input type="checkbox"/> Limited Pouring: Malt Beverage or Wine--- \$1550 <input type="checkbox"/> Limited Pouring: Combo malt Bev. & Wine--- \$3100 <input type="checkbox"/> Limited Pouring: Combo Distilled spirits, and either 1.) Malt Bev. or 2.) Wine--- \$4950 <input type="checkbox"/> Full Pouring: Distilled spirits, Malt Bev., & Wine &--- \$6200 <input type="checkbox"/> Brew Pub: ---\$1550 <input type="checkbox"/> Farm Winery/ Tasting Room ---\$1500 <p>Non- Profit Civic Organization On Premises Consumption License</p> <ul style="list-style-type: none"> <input type="checkbox"/> Malt Beverage, Wine and Distilled Spirits ---\$2550 <p>Special Events Facility</p> <ul style="list-style-type: none"> <input type="checkbox"/> Limited Pouring: Malt Beverage or Wine--- \$250 <input type="checkbox"/> Limited Pouring: Combo Malt Beverage & Wine--- \$500 <input type="checkbox"/> Limited Pouring: Comb Distilled Spirits & either: 1.) Malt Bev. Or 2.) Wine--- \$750 <input type="checkbox"/> Full Pouring: Distilled Spirits, Malt Bev., and wine--- \$1000 	
<p>Whole Sale License</p> <ul style="list-style-type: none"> <input type="checkbox"/> Malt Beverage--- \$500 <input type="checkbox"/> Wine--- \$500 <input type="checkbox"/> Combo Malt Beverage & Wine--- \$1000 <input type="checkbox"/> Combo Malt Beverage & Wine (principal place of business outside of Paulding Co. Only)--- \$100 	
<p>Manufacturing License</p> <ul style="list-style-type: none"> <input type="checkbox"/> Malt Beverage--- \$3000 <input type="checkbox"/> Wine--- \$3000 <input type="checkbox"/> Distilled Spirits--- \$3000 	
➤ Application Fees	
<p>New License</p> <ul style="list-style-type: none"> <input type="checkbox"/> New Malt Bev. and/or wine --- \$150 <input type="checkbox"/> New Malt Bev. and/ or wine + distilled spirits--- \$500 	<p>Renewals</p> <ul style="list-style-type: none"> <input type="checkbox"/> Renew Malt Bev. and/ or wine ---\$100 <input type="checkbox"/> Renew Malt Bev. and/ or wine + distilled Spirits--- \$250

Paulding County Alcohol License Fee Schedule Page 2 of 2	
➤ Permits and Other Fees	
<p><i>Retail Package Permits</i></p> <p><input type="checkbox"/> Ancillary Wine Tasting Permit ---\$50</p> <p>***On Premises Consumption Event Permits***</p> <p><i>On Premises Event Permits</i></p> <p><input type="checkbox"/> Temporary Permit (2 Hr. extension) Malt Bev. & Wine-- \$100</p> <p><input type="checkbox"/> Temporary Permit (2 Hr. extension) Distilled spirits, malt beverage & wine---\$200</p> <p><i>Nonprofit Civic Organization</i></p> <p><input type="checkbox"/> Temporary Permit (up to 3 days) Malt Bev. & Wine--- \$50</p> <p><input type="checkbox"/> Temporary Permit (up to 3 days) Malt Bev. , Wine, and Distilled Spirits--- \$100</p>	<p><i>Off Premises Event Permits (alcoholic Beverage Caterer)</i></p> <p><input type="checkbox"/> Resident Cater --No charge</p> <p><input type="checkbox"/> Non-resident --- \$50/ per event (6 max per year)</p> <p><i>Server ID's</i></p> <p><input type="checkbox"/> New card--\$30:</p> <p><input type="checkbox"/> Renewal--- \$10 (only applies if current ID is NOT expired)</p> <p><input type="checkbox"/> Replacement--\$15</p> <p><i>License Transfers</i></p> <p><input type="checkbox"/> If done during renewal season--- NO charge</p> <p><input type="checkbox"/> \$150 if not done during renewal season</p> <p><i>Temporary License</i></p> <p><input type="checkbox"/> \$500 (Good for 60 days)</p>

Alcohol License Application Requirement List –Page 1 of 2	
Please choose the type of license you are applying for and submit the required forms/documents	
Business Name:	
<input type="checkbox"/> BOX #1 New License **Please be sure you have a valid business license prior to submitting an application**	
The following forms and supporting documents are required for opening a new business serving or selling alcoholic beverages in Unincorporated Paulding County:	
<input type="checkbox"/> Form 1: Owner/ Applicant information	
<input type="checkbox"/> Form 2: Registered Agent Affidavit	
<input type="checkbox"/> Form 3: Section1: Surveyor’s Distance Certification	
<input type="checkbox"/> Form 3: Section2: Surveyor’s Diagram	
<input type="checkbox"/> Form 4: Fingerprint/Criminal History Consent and a copy of Driver’s License (<i>for applicant</i>)	
<input type="checkbox"/> Form 5: Tax Commissioner’s Affidavit	
<input type="checkbox"/> Form 6: Residential Dwelling Consent (<i>as applicable</i>)	
<input type="checkbox"/> Form 7: Wholesaler list (<i>even if they are the same; they must be resubmitted</i>)	
<input type="checkbox"/> Form 8: Affidavit Verifying Status for Paulding County Public Benefit Application (<i>for applicant</i>)	
<input type="checkbox"/> Seating Capacity Confirmation (<i>as applicable; see additional form definitions/ explanations</i>)	
<input type="checkbox"/> Evidence of Ownership, Lease, or Land Sales Contract for the real property of the proposed Business Location	
<input type="checkbox"/> (2) Certified Checks <u>or</u> (2) Money orders: (<i>SEE FEE SCHEDULE</i>)	
<input type="checkbox"/> BOX #2 Renewal of License	
<input type="checkbox"/> Form 1: Owner/ Applicant information	
<input type="checkbox"/> Form 2: Registered Agent Affidavit	
<input type="checkbox"/> Form 4: Fingerprint/Criminal History Consent and a copy of Driver’s License	
<input type="checkbox"/> Form 5: Tax Commissioner’s Affidavit	
<input type="checkbox"/> Form 7: Wholesaler lists (<i>even if they are the same; they must be resubmitted</i>)	
<input type="checkbox"/> Form 8: Affidavit Verifying Status for Paulding County Public Benefit Application & a copy of a secure and verifiable document (<i>driver’s license, permanent resident card, passport etc.</i>)	
<input type="checkbox"/> (2) Certified Checks <u>or</u> (2) Money orders: (<i>SEE FEE SCHEDULE</i>)	

.....Continued on Next Page

Alcohol License Application Requirement List—Page 2 of 2

BOX #3 Transfer of License (ONLY when applicant information changes does this apply)

- Form 1: Owner/ Applicant information
- Form 2: Registered Agent Affidavit
- Form 4: Fingerprint/Criminal History Consent and a copy of Driver's License (*for applicant*)
- Form 5: Tax Commissioner's Affidavit
- Form 7: Wholesaler lists (*even if they are the same; they must be resubmitted*)
- Form 8: Affidavit Verifying Status for Paulding County Public Benefit Application & a copy of a secure and verifiable document (*for applicant*)
- (2) Certified Checks or (2) Money orders: (SEE FEE SCHEDULE)**

Alcohol License Application Requirement List—Page 2 of 2

BOX #4 Package Distilled Spirits Application Requirement List

- All requirements for a New License application (referenced in Box #1; pg. 5)
- Form 9: Package Distilled Spirits Planning & Zoning Affidavit
- Three consecutive monthly statements from a financial institution for the period immediately preceding application submittal showing sufficient funds on deposit or a letter of credit from a financial institution in an amount equal to or greater than the value of the minimum inventory requirement set forth in subsection (d)(4) (see below)
(Section 6-31.1 (d)(4) Minimum inventory. Licensee shall maintain a minimum inventory of at least \$750,000.00 in alcohol available for sale at all times).
- Site Plan
- Color Elevations

PAULDING COUNTY MARSHAL BUREAU

FORM 1: Section 1 of 2 (Owner/Applicant information)									
BUSINESS INFORMATION (PRINT LEGIBLY OR TYPE)									
Name of Business (including d/b/a if applicable)									
Business Address/ Parcel ID#:									
Type of Ownership	Proprietorship <input type="checkbox"/>	Partnership <input type="checkbox"/>	Corporation <input type="checkbox"/>	Federal/State Tax ID Number					
County Occupational Tax Certificate Number (Business License)				Published Telephone Number					
Description of Location (i.e. convenience store, restaurant)									
APPLICANT/LICENSEE INFORMATION (THE APPLICANT CAN ALSO BE REGISTERED AGENT IF; A RESIDENT OF PAULDING)									
Applicant Is:	Owner <input type="checkbox"/>	Stockholder <input type="checkbox"/>			Fulltime Employee <input type="checkbox"/>				
Last Name		First			M.I.				
Home Address									
Home Phone		Business/Cell Phone			E-mail				
Georgia Resident For At Least One Year?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Social Security No. (required)					
Date of Birth		25 Years Old/Older?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Ever Been Arrested?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Paulding County Resident?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Have You Ever Made Application For An Alcoholic Beverage License?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	Disposition?			
Has Any Previously Issued Alcoholic Beverage License Been Revoked?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	If Yes, Reason?			
REGISTERED AGENT INFORMATION (IF DIFFERENT FROM APPLICANT/LICENSEE)									
Last Name		First			M.I.		Title		
Home Address									
Home Phone		Business/Cell Phone			E-mail				
Paulding County Resident?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Social Security No. (optional)					
Date of Birth		25 Years Old/Older?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Ever Been Arrested		YES <input type="checkbox"/>	NO <input type="checkbox"/>
United States Citizen		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
BUSINESS OWNER INFORMATION (IF DIFFERENT FROM APPLICANT/LICENSEE)									
Last Name		First			M.I.				
Address									
Home Phone		Business/Cell Phone			E-mail				
Georgia Resident For At Least One Year?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Social Security No. (optional)					
Date of Birth		25 Years Old/Older?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Ever Been Arrested?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
United States Citizen?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have You Ever Made Application For An Alcoholic Beverage License?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	Disposition?			
Has Any Previously Issued Alcoholic Beverage License Been Revoked?				YES <input type="checkbox"/>	NO <input type="checkbox"/>	If Yes, Reason?			

FORM 1: SECTION 2 OF 2									
BUSINESS PARTNER/CORPORATION OFFICER (IF APPLICABLE)									
Last Name			First				M.I.		
Address									
Home Phone			Business/Cell Phone				Email		
Georgia Resident For At Least One Year			YES <input type="checkbox"/>	NO <input type="checkbox"/>	Social Security No. (optional)				
Date of Birth			25 Years Old/Older?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Ever Been Arrested?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
United States Citizen?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have You Ever Made Application For An Alcoholic Beverage License?					YES <input type="checkbox"/>	NO <input type="checkbox"/>	Disposition?		
Has Any Previously Issued Alcoholic Beverage License Been Revoked?					YES <input type="checkbox"/>	NO <input type="checkbox"/>	If Yes, Reason?		
BUSINESS PARTNER/CORPORATION OFFICER (IF APPLICABLE)									
Last Name			First				M.I.		
Address									
Home Phone			Business/Cell Phone				Email		
Georgia Resident For At Least One Year			YES <input type="checkbox"/>	NO <input type="checkbox"/>	Social Security No.				
Date Of Birth			25 Years Old/Older?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Ever Been Arrested?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
United States Citizen?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.			YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have You Ever Made Application For An Alcoholic Beverage License?					YES <input type="checkbox"/>	NO <input type="checkbox"/>	Disposition?		
Has Any Previously Issued Alcoholic Beverages License Been Revoked?					YES <input type="checkbox"/>	NO <input type="checkbox"/>	If Yes, Reason?		
AFFIRMATION AND SIGNATURE **NEEDS TO BE SIGNED BY ALL PARTIES LISTED ON THE APPLICATION**									
<p>Statement of Confidentiality: Information provided by a business or practitioner to Paulding County for the purpose of determining applicability is confidential to the extent it qualifies for exemption from disclosure under Article 4, Chapter 18, Title 50 of the Official Code of Georgia. Such information may be provided to other government agencies for the purposes of criminal investigations and occupational tax purposes.</p> <p>Affidavit: I hereby certify that all information provided herein is complete. I have answered all questions completely and truthfully to the best of my knowledge. I hereby acknowledge that I have read and understand the rules and regulations for operation of a business in Paulding County. Any false statement on this application automatically voids the application and may result in prosecution.</p>									
Signature of Applicant/Licensee:						Date:			
Signature of Registered Agent:						Date:			
Signature of Owner:						Date:			
Signature of Partner/Officer:						Date:			
Signature of Partner/Officer:						Date:			

FORM 2: (REGISTERED AGENT AFFIDAVIT)



240 Constitution Blvd Dallas, GA 30132

Affidavit for Application of Registered Agent

Before the undersigned attesting officer comes _____, who being duly sworn deposes and says that (s)he is a resident of Paulding County and at least 25 years of age, designated by _____, a licensee, to receive any process, notice, or demand required or permitted by law or under the Paulding County Ordinance to be served upon a licensee or owner.

The undersigned, on oath, states that if (s)he changes residence within Paulding County or outside of Paulding County or chooses to no longer be the registered agent, (s)he will notify the Marshal Bureau, in writing, within (10) business days.

This _____ day of _____, 20____.

Affiant Signature

Sworn to and subscribed before me

This _____ day of _____, 20____

Notary Public

PAULDING COUNTY MARSHAL BUREAU

FORM 3: SECTION 1 OF 2 (Surveyor's Distance certification)	
APPLICANT BUSINESS INFORMATION	
Applicant Business' Name:	
Address of Location Surveyed:	
SURVEYOR/SURVEYING COMPANY INFORMATION	
Name of Surveying Company:	
Company Address:	
Name and Title of Surveyor:	
Georgia Land Surveyor Number:	Date of Survey:
Business/Cell Phone:	E-mail:
AFFIDAVIT	
<p>I, the undersigned, a registered land surveyor in the State of Georgia do hereby swear and affirm under penalty of perjury, that I have inspected the proposed location of the licensed premises shown on the attached plat and have measured the distance to the nearest church, school, college or residential dwelling. Unless noted on the plat, the proposed location of the licensed premises complies with the distance requirements of the Paulding County Code of Ordinances, Chapter 6, Article IV Section 6-90 and the requirements of Title 3, Chapter 3, Section 21 of the Official Code of Georgia Annotated.</p> <p>No license shall be issued for any place of business which is:</p> <p>(a) located within six hundred (600 feet) of any school building, educational building, school grounds, or college campus or adult entertainment establishment or</p> <p>(b) within five hundred (500 feet) of a church, or within three hundred feet (300) feet of a private single-family or two-family dwelling in a zoning district that permits single- and/or two family dwellings; provided, however, this prohibition shall not apply with respect to a private dwelling or church located in a zoning district in which alcoholic beverage sales are authorized.</p> <p>(c) The distances in this chapter shall be measured along the route traversed by vehicle along a public road between the front door of the business to a point at the front door of the main structure of the church, school, or residential dwelling. As used in this section, the term "school building" or "educational building" shall apply to only state, county, city or church school buildings and to such buildings at any other schools in which are taught subjects commonly taught in schools and colleges of this state and which are public schools and private schools as defined in O.C.G.A § 20-2-690(b).</p> <p>(d) If a school, church, or residential dwelling subsequently locates within the prohibited area of a preexisting licensed premises this provision shall not be applicable and such an event would not cause a license holder to be in violation of this provision or prohibit the renewal nor transfer of the license.</p> <p>(g) The owner of a residential dwelling or the official governing authority of the organizational structure of a legal church entity which is located within the prohibited area described in this subsection may consent in writing to the applicant obtaining a license for the sale of alcoholic beverages by waiving the distance requirements.</p> <p>(h) the term "school building" or "educational building" shall apply only to state, county, city or church school buildings and to such buildings at any other schools in which are taught subjects commonly taught in the schools and colleges of this state and which are public schools and private schools as defined in O.C.G.A. § 20-2-690(b). The term "school building" includes only those structures in which instruction is offered. The term "church building" as used in this section means the main structure used by any religious organization for purposes of worship. ***CONTINUED ON NEXT PAGE***</p>	

In any event, no license shall be issued for a location which would cause the licensed premises to be in violation of state law as set forth at O.C.G.A. § 3-3-21.



FORM 3: SECTION 2 OF 2

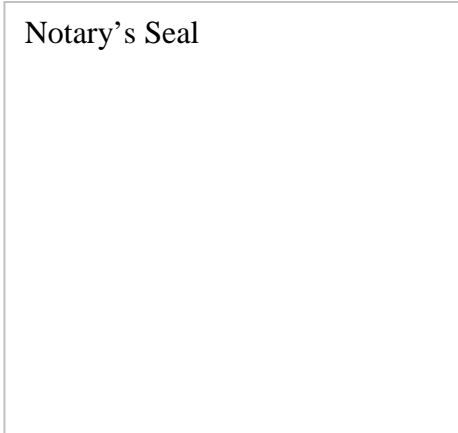
SURVEYOR:

DATE:

NOTARY PUBLIC

Sworn and subscribed before me this _____ day of _____, 20____.

Notary Public



PAULDING COUNTY MARSHAL BUREAU

FORM 4: Name-Based Criminal History Record Information Consent/Inquiry Form

I hereby authorize _____ (Agency/Company) to conduct an inquiry for the purpose listed below and receive any Georgia and/or national criminal history record information as authorized by state and federal law.

Full Name (print) _____

Address _____

Sex _____

Race _____

Date of Birth _____

Social Security Number _____

This authorization is valid for _____ days from date of signature.

I, _____ (your name), give consent to the above-named entity to perform periodic criminal history background checks for the duration of my employment.

Signature/ Date

Attorney for Individual (Pur E and U Only) Bar Number Date

OFFICE USE ONLY BELOW THIS LINE

Date of Inquiry: _____ Time of Inquiry: _____ Operator's Initials: _____

Purpose Code Used: (check one)

NON-CRIMINAL JUSTICE PURPOSES

- E - Employment
- M - Working with Mentally Disabled
- N - Working with Elderly
- W - Working with Children
- P - Public Records (no consent required)

PERSONAL REQUEST (INDIVIDUAL OR THEIR ATTORNEY)

- U - Personal Copy

CRIMINAL JUSTICE EMPLOYMENT

- J - Civilian Criminal Justice Employment (State & III Info Received)
- Z - Sworn Criminal Justice Employment (State & III Info Received)

The inquiry resulted in the following: (check all that apply)

- ___ No Criminal Record Available
- ___ Criminal Record (Attached/Released)
- ___ No NCIC/GCIC Warrant
- ___ Possible NCIC/GCIC Warrant (List Wanting Agency Below)

Wanting Agency Name: _____

Wanting Agency Telephone: _____

Agency Designee Signature and Title: _____

FORM 5: (TAX COMISSIONERS AFFIDAVIT)

Applicant Business' Name:

Business Address:

Applicant's Name:

Applicant's Address:

Owner and/or Other Parties:

AFFIDAVIT

I, Kayla Amos, as Paulding County Tax Commissioner (or his/her lawful deputy) certify that there are no delinquent taxes owned to Paulding for either real or personal property pertaining to the business and/or person(s) listed above.

Signature of Tax Commissioner (or deputy):

NOTARY PUBLIC

Sworn and subscribed before me this _____ day of _____, 20____.

Notary Public

Notary's Seal

Paulding County Tax Commissioner
Third Floor Paulding County Administration Building
240 Constitution Blvd
Dallas, Georgia 30132
Phone 770/443-7581

FORM 6: (RESIDENTIAL/CHURCH DWELLING CONSENT)	
APPLICANT BUSINESS INFORMATION	
Applicant Business' Name:	
Business Address:	
AFFIANT INFORMATION	
Affiant's Name(s):	
Affected Address:	
Affiant's Address If Different From Above:	
Affiant's Telephone Number:	
AFFIDAVIT	
<p>I or we, the undersigned, owner or owners of the residential dwelling or church located at the above listed address do hereby swear or affirm that I or we consent to the applicant obtaining a license for the sale of alcoholic beverages and have no objection to the Paulding County Board of Commissioners waiving the distance requirements as set forth in the Paulding County Code of Ordinances, Section 6-90 which states:</p> <p>(a) No alcoholic beverage license shall be issued for a location where the front door of the main structure of the business is located within six hundred (<u>600</u>) feet of any school building, educational building, school grounds, or college campus or adult entertainment establishment.</p> <p>(b) No alcoholic beverage license shall be issued for any place of business which is located within five hundred (<u>500</u>) feet of a church or within three hundred (<u>300</u>) feet of a private single-family or two-family dwelling in a zoning district that permits single- and/or two-family dwellings; provided, however, this prohibition shall not apply with respect to a private dwelling or church located in a zoning district in which alcoholic beverages sales are authorized.</p> <p>(c) The distances in this chapter shall be measured along the route traversed by vehicle along a public road between the front door of the business to a point at the front door of the main structure of the church, school, or residential dwelling.</p> <p>(d) If a school, church, or residential dwelling subsequently locates within the prohibited area of a preexisting licensed premises this provision shall not be applicable and such an event would not cause a license holder to be in violation of this provision or prohibit the renewal nor transfer of the license.</p>	
Affiant's Signature:	Date:
Affiant's Signature:	Date:

Sworn to and subscribed before me

This _____ day of _____, 20_____

 Notary Public

FORM 7: (WHOLESALE LIST *COMPLETE A FORM FOR EACH DISTRIBUTOR* COPY AS NEEDED)	
APPLICANT BUSINESS INFORMATION:	
Applicants' Business Name:	
Business Address:	
WHOLESALE INFORMATION: (Please list one wholesaler per form, use additional forms if necessary)	
Wholesaler Name:	
Wholesaler Address:	
Wholesaler Contact Number:	
Wholesaler Contact Person:	
PAULDING COUNTY ALCOHOL ORDINANCE, DIVISION 6. EXCISE TAXES	
<p>Sec. 6-116. Taxes; amount levied. There is hereby levied and imposed upon each wholesaler selling alcoholic beverages in the unincorporated area of the county, an excise tax in the following amounts: (1) Where malt beverages, commonly known as tap or draft beer, are sold in and from a barrel or bulk container a tax of \$6.00 on each container sold containing not more than 15 1/2 gallons and a proportionate tax at the same rate on all fractional parts of 15 1/2 gallons; (2) Where malt beverages are sold in bottles, cans or other containers except barrel or bulk containers, a tax of \$0.05 per 12 ounces and a proportionate tax at the same rate on all fractional parts of 12 ounces; (3) On the first sale or use of wine by the package a tax of \$0.22 per liter and a proportionate tax at the same rate on all fractional parts of a liter. (Res. No. 04-40, § 1(Exh. A), 12-14-2004)</p> <p>Sec. 6-117. Exemption. The taxes imposed by this division shall not be levied with respect to any sales of wine or beer which are exempt from taxation by federal or state law. (Res. No. 04-40, § 1(Exh. A), 12-14-2004)</p> <p>Sec. 6-118. Form of reporting and payment. (a) The taxes collected pursuant to this division by wholesalers shall be paid on or before the tenth day of the month following the calendar month in which the beverages are sold or disposed of within the unincorporated area of the county by the wholesale dealer. (b) Each licensee responsible for the payment of the taxes levied by this division shall file a report itemizing for the preceding calendar month the exact quantities of malt beverages and wine, by size and type of container, sold during the month within the unincorporated area of the county. The licensee shall file the report with the clerk of the board of commissioners. (Res. No. 04-40, § 1(Exh. A), 12-14-2004)</p> <p>Sec. 6-119. Revenue. Revenue produced from this chapter shall be used only in the unincorporated area of the county. (Res. No. 04-40, § 1(Exh. A), 12-14-2004) Secs. 6-120--6-140. Reserved.</p>	
Applicant Signature:	Date:

FORM 8: (AFFIDAVIT VERIFYING STATUS for PAULDING COUNTY PUBLIC BENEFIT)

Affidavit Verifying Status for Paulding County Public Benefit Application
O.C.G.A. § 50-36-1(e) (2) Affidavit

By executing this affidavit under oath, as an applicant for a(n) _____, as referenced in O.C.G.A. § 50-36-1, from Paulding County Board of Commissioners, 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.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____.

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 _____ (city), _____ (state).

Signature of Applicant

Printed Name of Applicant

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE

___ DAY OF _____, 20___

NOTARY PUBLIC

FORM 9: (PACKAGE DISTILLED SPIRITS PLANNING & ZONING AFFIDAVIT)

Applicant Business Name:

Business Address:

Parcel ID #:

AFFIDAVIT

I, _____ (Applicant) certify that the site plans and color elevations of front, sides, and rear of the proposed building prepared by a Registered Surveyor, Professional Engineer, land planner or architect (with preparers seal affixed) drawn to scale, portray the following requirements are met:

- ✓ The proposed building is a freestanding building of at least 7,500 square feet on a minimum ½ acre lot
- ✓ At least 5,000 square feet of showroom which shall not include cooler space, storage areas, offices, mechanical rooms, breakrooms, nor bathrooms
- ✓ The property is in compliance with the Corridor Overlay District, UDO Section 220-20, et seq.
- ✓ A front entrance and a separate front exit constructed of clear glass as required by Ordinance 6-31.1(d)(3)
- ✓ Only rear-located delivery areas. Ordinance 6-31.1(d)(8)
- ✓ If the building is equipped with a drive-thru window, the drive-thru area must be of sufficient space to ensure the orderly flow of traffic which shall not create any type of obstruction upon or approaching the county road system as set forth in Code of Ordinance Sec. 6-31.1(d)(9)
- ✓ There shall be no outside storage of any type, including the outdoor storage of shopping carts as set forth in Code of Ordinance Sec. 6-31.1(d)(10)

NOTARY PUBLIC

Sworn and subscribed before me this _____ day of _____, 20____.

Notary Public

Notary's Seal

Paulding County Planning & Zoning Division
Second Floor Paulding County Administration Building
240 Constitution Blvd
Dallas, Georgia 30132
Phone 770/443-7601