

APPLICATION FOR LICENSE TO SALE OR SERVE ALCOHOLIC BEVERAGES IN THE UNINCORPORATED AREA OF MILLER COUNTY, GEORGIA

License Requested:	Temporary	On-Premise Consumption
	Other	Off-Premise Consumption

Note: Application must be typed or legibly printed in ink and accompanied by the proper license Application fee and investigation fee or the application will not be accepted.

NAME:	PHONE:	CELL	:
ADDRESS:	CITY:	STATE:	ZIP:
NAME OF PROPOSED BUSINESS:			
ADDRESS:	CITY:	STATE:	ZIP:
RECORD OWNER OF PROPERTY:			
ADDRESS:	CITY:	STATE:	ZIP:
REGISTERED AGENT'S NAME:			
ADDRESS:	CITY:	STATE:	ZIP:
REGISTERED AGENT MUST SIGN AND	D DATE WHERE INDIC	ATED.	
I certify that I am the registered agent for Miller County, Georgia and that I do cons Applicant herein named.			
Signature:		Date:	

LIST THE NAME AND ADDRESS OF ALL PERSONS OR, IF A CORPORTAION, ALL PERSONS HOLDING MORE THAN 10% OF ANY CLASS OF STOCK. IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL PAGES: MANAGER'S NAME: _____

ADDRESS:

_____ CITY: _____ STATE: _____ ZIP: _____

COMPLETE THIS QUESTION ONLY IF APPLICATION IS FOR ON PREMISE CONSUMPTION LIST THE NAME AND ADDRESS OF ALL PERSONS EXPECTED TO HANDLE, SERVE OR SELL ALCOHOLIC BEVERAGES. IF MORE SPACE IS NEEDED. ATTACH ADDITIONAL PAGES.

_____, being a person of good moral character, hereby Ι, Make application for a license to engage in the sale of alcoholic beverages in Miller County, Georgia. I also State that I am a citizen of the United States or an alien lawfully admitted for permanent residence. I have never been convicted of a felony or misdemeanor involving moral turpitude within ten years of the date of this application. I have not had revoked, for cause, any license issued to me by the county of Miller, State of Georgia, or any other state to sell alcoholic beverages of any kind. I understand and agree that the license which I am applying for shall not, if granted, become a civil contract between myself and Miller County, but shall operate purely as a permit to sell alcoholic beverages and that said license may be revoked by the Commissioners at any time. I further understand and agree that any violations of any of the regulations of Miller County concerning the sale of alcoholic beverages within the unincorporated areas of the county shall subject my license to immediate revocation. ONLY BEER AND WINE WILL BE SERVED.

By signing this application I swear or affirm that all information contained herein is true and accurate. I further acknowledge that I have received and read a copy of the Ordinance of Miller County, Georgia regulating the sale of alcohol in the unincorporated areas of the county.

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WITNESS MY HAND AND SEAL THIS	
WITNESS WIT HAND AND SEAL THIS	·

APPLICANT

Sworn to and subscribed before me

NOTARY PUBLIC