



**CITY OF WEST POINT
RENEWAL APPLICATION FOR THE SALE OF ALCOHOLIC BEVERAGES**

Check all that apply

- | | |
|---|---------|
| <input type="checkbox"/> Liquor Off Premise (Liquor Store \$5000.00) | Class A |
| <input type="checkbox"/> Liquor On Premise (Restaurant \$1,000.00) | Class B |
| <input type="checkbox"/> Malt Beverage Off Premise (Convenient/Gro Store (\$200.00) | Class A |
| <input type="checkbox"/> Malt Beverage On Premise (Restaurant \$200.00) | Class B |
| <input type="checkbox"/> Wine Off Premise (Liquor/Convenient/Store \$200.00) | Class A |
| <input type="checkbox"/> Wine On Premise (Restaurant \$200.00) | Class B |
| <input type="checkbox"/> Microbrewery (200.00) | Class B |
| <input type="checkbox"/> \$500.00 Bond Liquor only | |
| <input type="checkbox"/> or \$500 Cash Bond Liquor only | |

INSTRUCTIONS: Every question must be fully answered. If the space provided is not sufficient, answer questions on a separate sheet and indicate in the space provided that such separate sheet is attached. When complete it must be dated, signed and verified, under oath by the applicant and filed with the City Clerk, City Hall, West Point, Georgia, together with all supporting papers and money order or certified check for the exact fee.

Applicant Valid Picture I.D. Required

This Application is filed by: **Single Proprietor** **Partnership** **Corporation**

Note: Applicants other than individuals must take applications jointly in both the names of the partnership, association or corporation and the name of a partner, associate of officer having a substantial interest in the business.

LICENSE INFORMATION

Full name of person making application		Social Security No.	
Corporate name if corporation (Name must be as registered with Secretary of State)			
Address of legal residence (Street, Road, RFD No. and P.O. Box)			
City	State	Zip Code	County of Residence

BUSINESS INFORMATION

Trade name of business applying for license	
Business location address	Business telephone no.

MAILING INFORMATION

Mailing Address if different (Mail not received at place of business)		
City	State	Zip Code



**CITY OF WEST POINT
RENEWAL APPLICATION FOR THE SALE OF ALCOHOLIC BEVERAGES**

Has this place of business or anyone connected therewith, been cited or charged at any time within the last twelve months, with any Violation of Georgia Law, Federal Law or any rule or regulation of the State Revenue Commissioner or any rule regulation of the City or County?

Yes No If yes, give full details on separate sheet.

Signature of Applicant under oath

Date

CITY OF WEST POINT
APPLICATION FOR THE SALE OF ALCOHOL BEVERAGES

List the full name for each person, Firm, or Corporation having any interest in this application and the % (percentage) of interest.

Name	Name of Business	% Interest
_____	_____	_____
_____	_____	_____
_____	_____	_____

List all other businesses engaged in the sale of distilled spirits that any of the persons, Firms, or Corporations are interested in employed by, or associated with in any way whatsoever.

Name	Name of Business	% Interest
_____	_____	_____
_____	_____	_____
_____	_____	_____

List the full name of the father, mother, brother, sister, son, daughter, or spouse of each person, if they have any interest whatsoever in any business selling distilled spirits other than the business for which this application is made.

Name	Name of Business	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

List the full name and address of the owner of the building and the name and address of the owner of the land and the name and address of all leasers and sub leasers.

Owner	Address	Relationship to App. or to other owner
_____	_____	_____
_____	_____	_____
_____	_____	_____

How much of the capital of this business is borrowed and from whom?

Amount	Lender	Address
_____	_____	_____
_____	_____	_____

Name the Manager of the business for which this application is filed and state how he is compensated.

NOTE: Before signing this application, check all answers and explanations to see that you have answered all questions fully and correctly. This application is to be executed under oath and subject to the penalties of false swearing and it includes all attached sheets submitted herewith. Applicant understands that any license issued pursuant to this application is conditioned upon the truth of the answers and statements made herein and that any false answers and statements herein shall constitute cause for suspension or revocation of any license issued pursuant to this application.

Should any change occur during the year for which a license is issued pursuant to this application which would require a different answer to any question contained in this application, or any personnel statement which is made a part of this application, such change must be reported as an amendment to this application within 30 days. The failure to make such amendment shall be cause for the revocation of any license issued pursuant to this application. Indicate here that this is fully understood.

STATE OF GEORGIA, _____ COUNTY

I, _____, applicant,
do solemnly swear, subject to criminal penalties for false swearing, that the statements and answers made by me to the foregoing questions in this application for a State License as a dealer in alcoholic beverages and liquors for a State License as a dealer in alcoholic beverages and liquors are true, and no false or fraudulent statement or answer is made herein to procure the granting of such license.

Applicant's Signature (Full Name)

I hereby certify that _____
(Full Name of Applicant)

Is personally known to me, that he signed his name to the foregoing application after stating to me that he knew and understood all statements and answers made therein, and, under oath actually administered by me, has sworn that said statements and answers are true.

This _____ day of _____ _____

Notary Public

CITY OF WEST POINT
WEST POINT, GEORGIA
ALCOHOLIC BEVERAGES LICENSE BOND

STATE OF GEORGIA

Bond No. _____

County of _____

Calendar Year _____

NOW ALL THE MEN BY THESE PRESENTS, that we _____,
_____, AS PRINCIPAL,

and _____,

surety company incorporated and existing under the laws of the State of _____, and licensed and authorized to execute bonds and under-bound unto the Mayor and City Council Members of the City of West Point, Georgia, and their successors in office, for the use and benefit of said City, AS OBLIGEE, in the sum of FIVE HUNDRED DOLLARS (\$500,00), for the payment of which, we bind ourselves, our heirs, executors, administrators and successors, as the case may be, jointly, severally and firmly by these presents.

Signed with out hands and sealed with our seals, this _____ day of _____, _____.

WHEREAS, the above named Principal has applied to the Mayor and City Council of the City of West Point, Georgia, for a license to engage in business at _____

As a retailer of alcoholic beverages under the provisions of the Ordinance adopted December 12, 1977, and known as "An Ordinance to Control and Regulate the Sale of Alcoholic Beverages" for the period beginning on the _____ day of _____, _____, and ending on December 31, _____.

NOW, THEREFORE, the conditions of this bond are such that if the principal shall promptly pay to the Obligee all sums which may be due by said Principal as taxes, license fees, rental charges, or otherwise, including penalties and interest, by reason of the operation of said business, faithfully comply with all provisions of said Ordinance, and with all rules and regulations now, or hereafter, promulgated by the Mayor and City Council under the authority of said Ordinance, for the enforcement and administration said Ordinance, and with such other conditions as the Mayor and City Council may require in rules and regulations, then this bond shall be void; otherwise, it shall remain of full force and effect and shall be construed as a bond of forfeiture.

This bond may be cancelled by the Principal, the Surety, of the obligee by giving sixty (60) days' notice in writing to each of the other parties hereto at their last known address, but no such cancellation shall affect the liability of either the Principal of the Surety occurring before the expiration date of such notice.

This bond shall be in force for the period beginning on the _____ day of _____, _____ through the _____ day of _____, _____, inclusive, and shall not be construed as a renewal or continuation of any other bond executed by said Principal and Surety to Obligee for any other period.

(Principal/Owner's Signature)

(Principal/Owner's Signature)

(Surety Agent Signature)
Attorney in Fact