



Development Services Division  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

**DISTILLED SPIRITS \$5000/yr  
Plus monthly excise tax**

- Restaurant
- Bar/Lounge
- Private Club
- Package Store
- Live Entertainment
- Manufacturing

**MALT BEVERAGE \$1000/yr**

- Restaurant
- Bar/Lounge
- Private Club
- Package Store
- Live Entertainment
- Convenience Store
- Grocery/Super Store
- Manufacturing

**WINE \$1000/yr**

- Restaurant
- Bar/Lounge
- Private Club
- Package Store
- Live Entertainment
- Convenience Store
- Grocery/Super Store
- Manufacturing

- New Application & Ad Fee \$700
- Sunday Sales (Consumption) \$500
- Revision \$100  
(Change of registered agent)
- Ancillary Tasting \$100
- Brown Bagging \$100

**BUSINESS INFORMATION**

*If Business Owner is Different from Applicant – Fingerprint and Consent Form required for each*

- Sole Proprietorship
- Partnership
- Corporation
- LLC

Full Name of Business: \_\_\_\_\_

D/B/A: \_\_\_\_\_

Street Address of Business: \_\_\_\_\_

Location Phone Number: \_\_\_\_\_

Name of Business Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

FEDERAL TAX ID#: \_\_\_\_\_ GA SALES & USE TAX #: \_\_\_\_\_

Owner Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**PROPERTY INFORMATION**

- Renting/Leasing
  - Owner
- If renting or leasing – attach copy of agreement.**

Name of Current Property Owner: \_\_\_\_\_  
(Owner/applicant provide a copy of the lease agreement)

Tax Map/Parcel Number: \_\_\_\_\_ Current Zoning: \_\_\_\_\_

Previous Owner/Occupant: \_\_\_\_\_

If On-Premise Consumption – give dining/service area square footage: \_\_\_\_\_



**Development Services Division**  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

**APPLICANT INFORMATION**  
*Fingerprinting and Consent Form Required*

Full Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Current Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

County: \_\_\_\_\_ # of Years: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Previous Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

County: \_\_\_\_\_ # of Years: \_\_\_\_\_

Applicant's Birthplace: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Are you a U.S. Citizen:  Yes  No If not, where are you a citizen? \_\_\_\_\_

Applicant's Current Position with Business: \_\_\_\_\_

Percent of Ownership or Interest in this Business: \_\_\_\_\_% Number of Years with this Business: \_\_\_\_\_

Occupation for Last Five Years: \_\_\_\_\_

Does the applicant own any property within the corporate boundaries of the City of Woodstock?  Yes  No

If yes, please give property tax map and parcel number and street address:

Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Street Address: \_\_\_\_\_

Are you married?  Yes  No If yes, please answer the following:

Spouse's Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Does Spouse Have 10% or More Interest in this Business?  Yes  No



**Development Services Division**  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

Have you or your spouse ever been convicted of a felony within ten (10) years and/or misdemeanor within five (5) years immediately prior to filing this application relating to any Alcohol Beverage Business or any state law, county or municipal ordinance violation relating to any Alcohol Beverage business?  Yes  No

If yes, please give name, association with business, the year of conviction and the crime as charged: \_\_\_\_\_  
\_\_\_\_\_

Are there any pending charges or citations against you by any law enforcement entity?  Yes  No If yes, please explain: \_\_\_\_\_

Are you or your spouse related to any distributor or wholesaler of malt beverages or employees thereof, within the first degree of consanguinity or affinity as computed according to the civil law so that there might be special concessions granted the license to give him a competitive advantage over others not similarly privileged?  Yes  No

**OWNERSHIP INFORMATION**  
*Fingerprint and Consent Form required for each*

For corporations or LLC, complete the following:

Name of corporation: \_\_\_\_\_

Date Incorporated: \_\_\_\_\_ Place of Incorporation: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

For partnerships, corporations, or LLC, complete the following for any partners, officers, directors and/or stockholders. If anyone listed has 10% or more interest in the business, an Owner Information Form for each is required:

Name: \_\_\_\_\_ Percent of Interest: \_\_\_\_\_ %

Name: \_\_\_\_\_ Percent of Interest: \_\_\_\_\_ %

Name: \_\_\_\_\_ Percent of Interest: \_\_\_\_\_ %

Name: \_\_\_\_\_ Percent of Interest: \_\_\_\_\_ %

Name: \_\_\_\_\_ Percent of Interest: \_\_\_\_\_ %

Name: \_\_\_\_\_ Percent of Interest: \_\_\_\_\_ %



**Development Services Division**  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

**ADDITIONAL OWNER INFORMATION**

*Fingerprint and Consent Form Required (duplicate as needed for additional Partners)*

Partner #1 Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ State \_\_\_\_\_

Current Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

County: \_\_\_\_\_ # of Years: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Previous Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

County: \_\_\_\_\_ # of Years: \_\_\_\_\_

Birthplace: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Are you a U.S. Citizen:  Yes  No If not, where are you a citizen? \_\_\_\_\_

Percentage or Interest of Ownership: \_\_\_\_\_

Occupation for Last Five Years: \_\_\_\_\_

Has this person been convicted of a felony within ten (10) years and/or misdemeanor within five (5) years immediately prior to filing this application relating to any Alcohol Beverage Business or any state law, county or municipal ordinance violation relating to any Alcohol Beverage business?  Yes  No

If yes, please give name, association with business, the year of conviction and the crime as charged: \_\_\_\_\_

Are there any pending charges or citations against you by any law enforcement entity?  Yes  No If yes, please explain: \_\_\_\_\_

Does this person own any property within the corporate boundaries of the City of Woodstock?  Yes  No

If yes, please give property tax map and parcel number and street address:

Tax Map/Parcel: \_\_\_\_\_ Street Address: \_\_\_\_\_



**Development Services Division**  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

**ACTIVE MANAGER'S INFORMATION**

*Manager's Permit Issued by Woodstock Police Department, Fingerprint and Consent Form Required*

Active Manager Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Drivers License # \_\_\_\_\_ State: \_\_\_\_\_

Current Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

County: \_\_\_\_\_ # of Years: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Previous Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

County: \_\_\_\_\_ # of Years: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Are you a U.S. Citizen?  Yes  No If not, where are you a citizen? \_\_\_\_\_

Percent of Ownership or Interest in this Business: \_\_\_\_\_% Number of Years with this Business \_\_\_\_\_

List Responsibilities as Manager: (Attach another sheet, if more room is needed). \_\_\_\_\_

Occupation for Last Five Years: \_\_\_\_\_

Does the manager own any property within the corporate boundaries of the City of Woodstock?  Yes  No

If yes, please give property tax map and parcel number and street address:

Tax Map/Parcel: \_\_\_\_\_ Street Address \_\_\_\_\_

Have you ever been convicted of a felony within ten (10) years and/or misdemeanor within five (5) years immediately prior to filing this application relating to any Alcohol Beverage Business or any state law, county or municipal ordinance violation relating to any Alcohol Beverage business?  Yes  No

If yes, please give name, association with business, the year of conviction and the crime as charged: \_\_\_\_\_

Are there any pending charges or citations against you by any law enforcement entity?  Yes  No If yes, please explain: \_\_\_\_\_



**Development Services Division**  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

Are you married:  Yes  No **If yes, please answer the following:**

Spouse's Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License # \_\_\_\_\_

Does Spouse have 10% or more interest in this business?  Yes  No

**ALCOHOL LICENSE REGISTERED AGENT INFORMATION**  
*Fingerprint and Consent Form required for each*

Registered Agent/Officer: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Current Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

County: \_\_\_\_\_ # of Years: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Previous Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

County: \_\_\_\_\_ # of Years: \_\_\_\_\_

Birthplace: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Are you a U.S. Citizen:  Yes  No **If not, where are you a citizen?** \_\_\_\_\_

Current Position: \_\_\_\_\_ # of Years w/business: \_\_\_\_\_

Does the agent own any property within the corporate boundaries of the City of Woodstock?  Yes  No

If yes: Tax Map/Parcel: \_\_\_\_\_ Street Address: \_\_\_\_\_

Has the agent/officer been convicted of a felony within ten (10) years and/or misdemeanor within five (5) years immediately prior to filing this application relating to any Alcohol Beverage Business or any state law, county or municipal ordinance violation relating to any Alcohol Beverage business?  Yes  No

If yes, please give name, association with business, the year of conviction and the crime as charged: \_\_\_\_\_

Are there any pending charges or citations against you by any law enforcement entity?  Yes  No **If yes, please explain:** \_\_\_\_\_

Date the Officer registered with the Secretary of State: \_\_\_\_\_



**Development Services Division**  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

ATTACH A LIST OF:

- Corporation Officers and Directors, their social security numbers, addresses, and the office held by each.
- Stockholders with at least 10% financial interest, their addresses, and the amount of interest of each stockholder in the corporation. (FINGERPRINT/BACKGROUND CHECK IS REQUIRED).
- The names and addresses of any Corporation Officer, Director or Stockholder who owns property within the corporate boundaries of the City of Woodstock along with street address of property and tax map and parcel number(s).

GENERAL INFORMATION

1. Does the applicant, spouse of applicant, partner, registered agent/officer or stockholder hold any alcohol beverage license in any other jurisdiction?  Yes  No (Section 6-82)

If yes, please give person's name, business name, and jurisdiction:

2. Does the applicant, or any member of the family of the applicant, own, lease or sub-lease any real estate which is occupied by a retail alcohol beverage establishment?  Yes  No

If yes, please answer the following:

Name of owner: \_\_\_\_\_

Relationship to business: \_\_\_\_\_

Name of Renter/Lessee: \_\_\_\_\_

Location: \_\_\_\_\_

Amount of Rent: \_\_\_\_\_

3. Does the applicant or any member of the applicant's family, the executor, administrator, beneficiary, heir or trustee of any estate or trust fund have any interest in a retail alcohol beverage establishment?  
 Yes  No

If yes, please answer the following:

Capacity with Estate: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Location: \_\_\_\_\_

Amount of Interest: \_\_\_\_\_ Amount of Income: \$ \_\_\_\_\_



**Development Services Division**  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

**RESTAURANT (ONLY)  
ON-PREMISE CONSUMPTION VERIFICATION**

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Street Address

Total Yearly Sales: \$ \_\_\_\_\_ (all sales other than alcohol)  
\_\_\_\_\_ Actual (or) \_\_\_\_\_ Estimated

Total Alcohol Sales: \$ \_\_\_\_\_ (include Beer/Wine/Distilled Spirits)

Food Sales: \_\_\_\_\_ %  
(50% of gross annual income will be derived from the sale of food to qualify for On-Premise Consumption)

\_\_\_\_\_  
Signature of Auditor/Accountant/Owner/Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_,

\_\_\_\_\_  
Signature of Notary Public

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





**Development Services Division**  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

## ADDITIONAL INFORMATION

### Application Process Checklist:

- Applicant shall complete entire application by answering all questions, having signed all necessary forms, submitting all fingerprint cards necessary and having all signatures notarized where applicable and submitting **all applicable fees**.
- Applicant must obtain a survey plat for the affected location which shows detail dimensions of the site, distance to schools, churches, day care centers, hospitals, nursing homes and residential multi-family and single family areas.
- Applicant shall bear the cost of advertisement for two (2) consecutive weeks and shall post a sign on property of business as per Section 6-9. Reimbursements for these ads must be issued prior to the Council Meeting beginning. The advertisements shall be placed by City staff when the application is ready to be forwarded to City Council.
- Applicant/Agent must provide a letter of clearance from Clerk of Federal Court in Atlanta, 2211 US Courthouse, 75 Ted Turner De SW or call (404) 215-1635 as per Section 6-12 & 6-13d. This document may be obtained by mailing your request with a self addressed stamped envelope or in person. There is a fee of \$30.00.
- Applicant shall attach a partnership agreement or articles of incorporation.
- Applicant shall furnish plans and renderings of the proposed premises, and the applicant certifies that such plans and renderings are correct as per Section 6-8.
- Fingerprinting - Everyone on the application must be fingerprinted at City of Woodstock Police Department located at 12453 Hwy 92, Woodstock, GA. (By appointment only)**  
**\*\*ALSO: On premise serving must obtain a Manager's Permit from the Woodstock Police Dept. Sec. 6-102: At least one manager shall be at the licensee's premises during all times that alcoholic beverages are being consumed.**
- Applicant/Agent must submit a copy of the Georgia Department of Revenue Sales & Use Tax ID certificate.
- Applicant/Agent/Manager must provide proof of legal authorization to work in the United States. O.C.G.A 50-36-01
- Applicant/Agent must supply written proof of residency for past three years, i.e., property tax bill, mortgage bill, utility bill, Georgia driver's license, etc. Sec.6-13 (a)

The Alcohol Ordinance for the City of Woodstock is available for review at [www.woodstockga.gov](http://www.woodstockga.gov). Please read carefully and follow the instructions accordingly. If you have any questions, please contact our Development Services Office at 770.592.6054.



Development Services Division  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

Applicant Initials: \_\_\_\_\_

***Affidavit Verifying Status  
for a City Public Benefit Application***

By executing this affidavit under oath, as an applicant for the City of Woodstock, Georgia Business License or Occupation Tax Certificate, Alcohol License, Taxi Permit, or other public benefit as referenced in O.C.G.A. § 50-36-1, I am stating the following with respect to my application for the City of Woodstock, Georgia Business License or Occupational Tax Certificate, Alcohol License, Taxi Permit, or other public benefit for

\_\_\_\_\_  
[Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity]

1) \_\_\_\_\_ **I am a United States citizen**

**OR**

2) \_\_\_\_\_ **I am a legal permanent resident 18 years of age or older, or I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.\***

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.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

SUBSCRIBED AND SWORN  
BEFORE ME ON THIS  
\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_  
Notary Public  
My Commission Expires:

\* \_\_\_\_\_  
Alien Registration number for non-citizens

\*Note: O.C.G.A. §50-36-1(e)(2) requires that aliens under the federal Immigration and Nationality Act, Title 8 U.S.C, as amended, provide their alien registration number Because legal permanent residents are included in the federal definition of "alien," legal permanent residents must also provide their alien registration number.





**Development Services Division**  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

## OFFICIAL OATH

I (We), hereby swear or affirm the information disclosed in this application is true and correct, and further provide, that I (We), as the Applicant, Registered Agent/Officer, and/or Owner of the business will abide by, observe and conduct this business according to the rules and regulations prescribed by the City of Woodstock, the acts of the General Assembly of the State of Georgia, known as the Georgia Alcoholic Beverage Code, as now or hereafter amended, and the rules and regulations of the Georgia State Department of Revenue in respect thereto.

\_\_\_\_\_  
**Applicant** Date: \_\_\_\_\_

\_\_\_\_\_  
Notary Public My Commission Expires

\_\_\_\_\_  
**Registered Officer** Date: \_\_\_\_\_

\_\_\_\_\_  
Notary Public My Commission Expires

\_\_\_\_\_  
**Business Owner** Date: \_\_\_\_\_

\_\_\_\_\_  
Notary Public My Commission Expires

\_\_\_\_\_  
**Business Owner** Date: \_\_\_\_\_

\_\_\_\_\_  
Notary Public My Commission Expires



**Development Services Division**  
 12453 Highway 92, Woodstock, GA 30188  
 Office: (770) 592-6054  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

**ALCOHOL LICENSE APPLICATION**  
**(For office use only)**

Business Name: \_\_\_\_\_

Street Location: \_\_\_\_\_

**OFFICE USE ONLY:** Date Received \_\_\_\_\_ Payment \$ \_\_\_\_\_

**Method of Payment Received:** \_\_\_\_\_

Note: Office recommendation: Any office recommending denial shall attach written justification and any documents necessary to support the recommendation then forward to the next office for review.

\_\_\_\_\_  Requirements met  Recommend denial  
 Development Srv Rep Signature Date  
 Comment \_\_\_\_\_

\_\_\_\_\_  Requirements met  Recommend denial  
 Community Development Signature Date  
 Comment \_\_\_\_\_

\_\_\_\_\_  Requirements met  Recommend denial  
 Records Clerk Signature Date  
 Comment \_\_\_\_\_

\_\_\_\_\_  Requirements met  Recommend denial  
 Police Signature Date  
 Comment \_\_\_\_\_

AD E-MAILED TO CHEROKEE TRIBUNE, DATE: \_\_\_\_\_ TO RUN ON THE FOLLOWING DATES: \_\_\_\_\_

COMPLETED SIGNS; NOTIFIED APPLICANT OF HEARING AND TO PLACE SIGNS AT LOCATION.

VERIFIED PUBLIC NOTICE SIGN IS PROPERLY POSTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

COMPLETE AGENDA REQUEST AND FORWARD WITH APPLICATION TO LICENSE ADMINISTRATOR.

CITY COUNCIL ACTION:  APPROVED  DENIED DATE: \_\_\_\_\_