

Bibb County
Tax Commissioner
Samuel Wade McCord



188 Third Street
Macon, GA 31201
(478) 621-6500

Deputy Tax Commissioner
Business Services
Tanja Battle

INSTRUCTIONS FOR APPLICANTS IN THE STATE OF GEORGIA TO OBTAIN FINGERPRINT FOR A BACKGROUND CHECK

The Macon-Bibb Tax Commissioner's Office requires a fingerprint background check on all applicants. The Georgia Bureau of Investigation (GBI) awarded Gemalto the contract to provide a service for electronic submission of fingerprints for Georgia applicants. The service, Georgia Applicant Processing Service (GAPS), decreases the need for submitting hard-copy fingerprint cards to obtain an applicant's criminal history background check. GAPS Print Sites are strategically located throughout the State of Georgia.

The criminal history results will be available to the Tax Commissioner's Office within 48 hours after the applicant has been fingerprinted, and the prints are received by the GBI, Georgia Crime Information Center (GCIC).

The GAPS fingerprint background check process is simple and easy to use. Follow the instructions below. If assistance is required, contact the Gemalto/GAPS at 1-888-439-2512.

GAPS REGISTRATION PROCESS

1. Visit the GAPS website: <https://www.aps.gemalto.com/index.htm>
2. Select **Georgia GAPS**.
3. Locate the Registration menu at the bottom of the page and choose **Applicant Registration**.
4. On the registration options page, select **City/County and Law Enforcement tab**.
PLEASE SELECT THE CORRECT OPTION – Errors in fingerprinting results due to improper registration are the responsibility of the user.
5. Select "Alcohol and Liquor License."
6. Read and Accept the Privacy Act Terms and Conditions.
7. You are now at Step 1 of the applicant registration.

Transaction Information. In this area, you must:

- A. Enter **GA923133Z** in the “Reviewing Agency ID” field.
- B. Click on the drop box under “Reason for Fingerprinting” and select “Alcohol/Liquor Licensee.”
- C. Click on the drop box next to **Payment**, and select the Credit Card Option, you will be prompted to enter additional information on the next screen, so please have a credit card available during the registration process.

******Please Do Not Check the Box Marked Fingerprint Card User ******

Transaction Information and Address Information. In this area, you must:

1. Complete all fields marked with an asterisk.
 2. If you have a Social Security number and Driver’s License, enter the information in the appropriate fields.
 3. The next screen will allow you to verify your information.
 4. Once complete, select “Submit.”
-
8. The next screen is the payment page; complete your payment information and submit.
 9. Print your receipt page.

Identification Needed for Fingerprinting

Click on the **Identification Needed for Fingerprinting** link located under the **Print Site Locations** tab on the GAPS main web page. In addition to the **Registration ID** number, you will be asked to present **identification documents** prior to being fingerprinted. This link provides a list of acceptable identification documents.

Print Locations and Hours

Once you have completed the registration process, click on **Print Location and Hours** on the GAPS main web page to find the nearest GAPS Print Location to go to for fingerprinting. Click on the region most convenient for you. The numbers in red circles indicate sites that have GAPS Print Locations available. Under **Company**, select the site that is most convenient for you to go for fingerprinting. If you click on the link for a site, information concerning the site such as Location, Hours of Operation, Directions, etc. will be displayed. Prior to traveling to the Print Location, please verify that the site is still a GAPS Print Location and that the hours of operation are accurate.

NOTE: If a site is no longer providing fingerprint services, please email GAApplicant@gbi.ga.gov, and provide the Print Location’s name, address, phone number (if available), and the date that the applicant was told that the location is no longer providing services. Thank you.

OUT-OF-STATE APPLICANTS ONLY

Georgia Applicant Processing Service

Hardcopy Fingerprint Card Submission Instructions

Overview	Applicants that are out-of-state, unable to visit an electronic fingerprinting location, or are otherwise unable to be electronically fingerprinted may submit hardcopy fingerprint cards to Gemalto Cogent.
Process	<p>Applicants who are submitting ink cards for a required Georgia background check should follow the steps below:</p> <p>All applicants must be registered prior to sending hardcopy fingerprint cards. You can register online at https://www.aps.gemalto.com. Be sure to select the Fingerprint Card User box. Applicants may also contact the Registration Call Center to register by phone: 1-888-439-2512</p> <p>Payment may be made online or a money order can be sent with your fingerprint card:</p> <p><i>Online Payment</i> Applicants may pay online at the time of registration using a credit/debit card, or the transaction may be billed to your employer using agency pay.</p> <p>Registration ID - All applicants will receive a Registration ID. Write this number on the back of your fingerprint cards.</p> <p>Submission Mail the cards (and if applicable, payment) to:</p> <p>Gemalto Cogent, Georgia CardScan APS Department #165 2964 Bradley Street Pasadena, CA 91107</p> <p>Results - Background check results will be sent directly to the Tax Commissioner's Office. Gemalto Cogent does not have access to background check results or make employment determinations. Please check with the Tax Commissioner's Office regarding questions about your background check results.</p>

Out-of- State Fingerprinting Process

Fingerprint cards are the only option for out-of-state applicants or optional for applicants who are unable to be printed electronically at a Livescan system. The instructions for Hardcopy Fingerprint Card Submissions may be found at Gemalto Website <https://www.aps.gemalto.com/ga/index.htm> , and summarized below.

Here are the steps to take to complete the process:

- Find someone (local police jurisdiction or State Police) who can take ink-based fingerprints and place them on FBI fingerprint cards. If you need fingerprint cards, you can download them from the FBI's website at <http://www.fbi.gov/about-us/cjis/background-checks/standard-fingerprint-form-fd-258>.
- Complete registration as outlined above. In Step 1 on the Applicant Registration page, select the box in the Transaction Information section next to Fingerprint Card User, and complete the registration and payment. The fee must be paid online with a credit card. Registration may also be done by phone by calling 1-888-439-2512.
- Mail in the completed cards, a copy of the registration receipt and a money order (if applicable) to the address below (address for Gemalto Cogent will be provided once you finish registering online).
- **Important Note** - The FBI needs two separate sets of ink print cards submitted before they will do a name search. So, if there are any issues with having difficulty obtaining clear prints (medical condition that doesn't allow you to fully open your hands, worn fingerprints, etc.) you might be required to submit a second set of fingerprints. This isn't always necessary, but if the first set isn't clear and the FBI rejects them this will add a significant delay if you did not get two sets completed initially. Please be sure to get two done, send them both and the second set will be held to see if the FBI rejects the first set.

Mail the completed fingerprint card to:

**Gemalto Cogent, Georgia CardScan
APS Department #165
2964 Bradley Street
Pasadena, CA 91107**

NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant that is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history record check for a non-criminal justice purpose (such as an application for a job or license, immigration or naturalization, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- If your fingerprints/biometrics are used to conduct a FBI national criminal history check, you are provided a copy of the Privacy Act Statement that would normally appear on the FBI fingerprint card.
- If you have a criminal history record, the agency making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The agency must advise you of the procedures for changing, correcting, or updating your criminal history record as set forth in Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a Georgia or FBI criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the agency denies you the job, license or other benefit based on information in the criminal history record.
- In the event an adverse employment or licensing decision is made, you must be informed of all information pertinent to that decision to include the contents of the record and the effect the record had upon the decision. Failure to provide all such information to the person subject to the adverse decision shall be a misdemeanor [O.C.G.A. § 35-3-34(b) and §35-3-35(b)].

You have the right to expect the agency receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of state and/or federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

If the employment/licensing agency policy permits, the agency may provide you with a copy of your Georgia or FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, information regarding how to obtain a copy of your Georgia, FBI or other state criminal history may be obtained at the [GBI website](http://gbi.georgia.gov/obtaining-criminal-history-record-information) (<http://gbi.georgia.gov/obtaining-criminal-history-record-information>).

If you decide to challenge the accuracy or completeness of your Georgia or FBI criminal history record, you should send your challenge to the agency that contributed the questioned information. Alternatively, you may send your challenge directly to GCIC provided the disputed arrest occurred in Georgia.

Instructions to dispute the accuracy of your criminal history can be obtained at the [GBI website](http://gbi.georgia.gov/obtaining-criminal-history-record-information) (<http://gbi.georgia.gov/obtaining-criminal-history-record-information>).

PRIVACY ACT STATEMENT

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Applicant Privacy Rights Notification Signature Form

Applicant Notification and Record Challenge:

Your fingerprints will be used to check the criminal history records of the FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction or updating an FBI identification record is set forth in Title 28 Code of Federal Regulations 16.34.

Procedures for obtaining a copy of the FBI criminal history record are set forth in 28 CFR 16.30 – 16.33 or go to the FBI website at <http://fbi.gov/about-us/cjis/background-checks>.

Signature

Print Name

Date

PACKAGE TO GO BUSINESS TYPE IDENTIFICATION FORM

Business Name: _____

Business Address: _____

Instructions:

This form must be completed for each new license or renewal license application for locations selling alcohol by the package to go.

If you are not selling alcohol by the package to go, simply check the last box on this form for “Exempt” and sign at the bottom.

If you are selling alcohol by the package to go, please read the definitions below and check the box next to the definition which best matches how the business is currently operated or expected to operate under this license. Any intentional failure to identify or misrepresentation on this form may be grounds for denial or revocation of any license issued to you.

Definitions:

- Drugstore:** a retail store that provides assorted items including medical or healthcare supplies, that may also provide other items or services such as over-the-counter drugs; processed food and drink items; beauty products; small toys; or photo processing services; and that is licensed by the Georgia State Board of Pharmacy to operate a pharmacy.
- Food Mart:** a retail store licensed by the Georgia Commissioner of Agriculture as a food sales establishment, which has a total retail floor space of less than 10,000 square feet, of which at least 85 percent is reserved for the sale of food and other nonalcoholic items, and which regularly sells, at a minimum and among other products: at least five different types of fresh fruits or vegetables; fresh, raw beef, chicken, or pork; fresh chicken eggs; bread; and fresh cow’s milk. A Food Mart may or may not be licensed by the Georgia State Board of Pharmacy to operate a pharmacy.
- Gas Station:** a Vice Mart that is also licensed by the Georgia Safety Fire Commissioner for the storage and sale of liquefied petroleum gas and that actually regularly sells liquefied petroleum gas.
- Grocery Store:** a retail store licensed by the Georgia Commissioner of Agriculture as a food sales establishment, which has a total retail floor space of at least 10,000 square feet, of which at least 85 percent is reserved for the sale of food and other nonalcoholic items, and which sells, at a minimum and among other products at least ten different types of fresh fruits or vegetables; fresh, raw beef, chicken, or pork; fresh chicken eggs; bread; and fresh cow’s milk. A Grocery Store may or may not be licensed by the Georgia State Board of Pharmacy to operate a pharmacy.
- Small Box Discount Store:** a retail store that provides assorted, inexpensive items that are continuously offered at a discounted price that is usually under \$10 per item. These stores are commonly referred to by names such as “dollar stores,” “99 cent stores,” “five dollar stores,” “discount stores,” or “variety stores.” Products sold typically include processed food and drink items, personal hygiene products, office supplies and decorations. Retail floor space is typically less than 15,000 square feet.
- Specialty Store:** a retail store that derives at least 50% of its annual gross sales from the sale of certain specialized classes or types of food or beverage products, or related accessories or non-food items. Such products are typically of a superior quality or more limited market availability than those general products commonly found in Grocery Stores. This includes brewpubs, malt beverage taprooms, and cocktail rooms. Other examples of Specialty Stores include, without limitation: (a) imported or luxury products; (b) products associated with a particular culture, global region, cuisine, or nationality; (c) products conforming to or supporting the dietary requirements of any sincerely held religious practice or belief; (d) restaurants; (e) organic, vegan, or natural products; (f) meats (e.g., butcher shops, delis, or seafood markets); (g) cheese or dairy products; (h) oils, seasonings, or spices; (i) growlers, craft beers, or wine; (j) breads or baked goods; (k) cigars; (l) honey or beeswax products; (m) products grown or produced within the State of Georgia or any particular location therein; or (n) any similarly specialized products or classes of products.

- Vice Mart:** a retail store that provides assorted, inexpensive items for neighborhood residents or travelers, such as processed shelf-stable or refrigerated food and drink items; fountain and brewed drinks; handheld prepared food items; automotive items; tobacco products; family planning products; lottery products; gifts; over-the-counter medications; or similar items. Stores are typically designed for expediency – with customers typically buying few items per transaction and spending only a short time in the store. Retail floor space is typically less than 10,000 square feet.
- Other Small Box Retail Store:** a retail store that meets each of the following criteria:
1. the store has a total retail floor space of less than 15,000 square feet; 2. the store does not meet the definition of Drug Store, Food Mart, Gas Station, Grocery Store, Small Box Discount Store, Specialty Store, or Vice Mart; and 3. the store is not licensed or applying for a license for the sale of distilled spirits by the package to go.
- Other/None of the Above/Exempt:** Check this box if none of the above definitions apply to your store, or if you are not licensed or applying for a license to sell by the package to go.

Applicant/Agent Signature

Date

Macon-Bibb County Alcoholic Beverage License Application

Instructions

INDIVIDUAL INFORMATION

1. All applications are submitted in the name of an individual, not a business. An individual may apply for a license on behalf of a business.
2. The application must be completed by either the agent on the license (*see below*) or one of the following individuals:
 - (A) If the business that will be operating pursuant to such license, if granted, is a sole proprietorship, then the sole proprietor;
 - (B) If the business that will be operating pursuant to such license, if granted, is a general partnership, limited partnership, limited liability partnership, or limited liability limited partnership, then a general partner;
 - (C) If the business that will be operating pursuant to such license, if granted, is a limited liability company, then a managing member, if any, or a member with a twenty-five percent or greater ownership interest, if any, or one member from among those members with the greatest ownership interest if no individual member holds a twenty-five percent or greater ownership interest in the business;
 - (D) If the business that will be operating pursuant to such license, if granted, is a privately held corporation, then any corporate officer or shareholder holding twenty- five percent or greater ownership interest; and
 - (E) If the business that will be operating pursuant to such license, if granted, is a publicly traded company, or the entity that will be operating pursuant to such license, if granted, does not otherwise fall under any of the categories described above, then the applicant must be the agent on the license.
- (F) Please mail completed application, fee and supporting documents to:

Macon- Bibb Tax Commissioner's Office
188 Third Street
Macon, Ga. 31201



Tax Commissioner's Office
188 Third Street · Macon, GA 31201

License Fees are Prorated by Month that Completed Application is Submitted

2021 LICENSE FEES (Check All That Apply)					
*Distilled Spirits Packaged to Go	\$2,900	*Malt Packaged to Go	\$800	Wine Packaged to Go	\$700
*Distilled Spirits C.O.P.	\$2,900	*Malt C.O.P.	\$800	Wine *C.O.P.	\$700
*Distilled Spirits Wholesaler	\$3,600	*Malt Wholesaler	\$1,000	Wine Wholesaler	\$800
*Distilled Spirits Manufacturers	\$4,300	*Malt Manufacturer	\$2,500	Wine Manufacturer	\$1,700
Brewpub	\$2,500	Out-of-Town Wholesaler	\$100	Brown Bag	\$300
Malt Beverage Taproom	\$2,500	Cocktail Room	\$2,500	Alcohol Beverage Caterer	\$600
				Temporary Alcohol License	\$100
<p>_____ Please check here if you are applying for a Business Continuation License.</p> <p>The \$400 application is not applicable for the following: Business Continuation License 25% of applicable licensing fees</p>					
<p>*Distilled Spirits (Liquor)</p> <p>*Malt (Beer)</p> <p>*C.O.P. (Consumed on Premises)</p>					

A BUSINESS LICENSE IS REQUIRED BEFORE AN ALCOHOL LICENSE MAY BE ISSUED.

\$ _____ Prorated Alcohol License Fees + \$ 400 Application Fee, if applicable = Total \$ _____

Agent Information

1. Agent/Owner(s) must complete and sign the History Record Information Consent Form
2. Provide an Unexpired Identification Card Issued by Any U.S. State or United States government, bearing a current photograph of the applicant.
3. Agent/Owner(s) Must be Fingerprinted once application & fees are Completed and Paid
4. Proof of Alcohol Handler's Permit from Agent and Owners
5. Complete (S.A.V.E.) Systematic Alien Verification for Entitlements O.C.G.A. § 50-36-1 (e) (2) Affidavit

Location/Business Information

6. Affidavit of Intent to Sale Alcohol from the Macon Telegraph Newspaper
7. If any business entity other than Sole Ownership...Must submit copy of GA Secretary of State Business information.
8. If NON-PROFIT entity...Proof on Nonprofit Status
9. Planning and Zoning Compliance form
10. Original Affidavit from the Macon-Bibb County Engineer's Department
11. A legal description (Lease/Deed/etc.) of the property upon which premises are located.

DOCUMENTS TO BE SUBMITTED ALONG WITH APPLICATION

A complete license application will include each of the following Documents:

- An affidavit from the **Macon-Bibb County Engineer's Office** stating that the establishment complies with the distance requirements contained in the Macon-Bibb County Code of Ordinances. 780 Third Street, Macon, GA 31201. (478) 621-6660. The engineering department will charge a fee of one hundred fifty dollars (\$150.00) for this affidavit.
- An affidavit from the **Macon Telegraph**, located at 487 Cherry Street, Macon, GA 31201, confirming an advertisement for intent to sell alcohol has run once a week for two consecutive weeks. (478) 744-4200 (Additional fee required)
- A **Zoning Compliance** form from the Macon-Bibb County Planning and Zoning Commission, located at 200 Cherry Street, Suite 301, Macon, GA 31201. (478) 751-7460 (Additional fee required). info@mbpz.org
- A copy of the Georgia Secretary of State's business information record on the entity to be licensed, available at <https://ecorp.sos.ga.gov/businesssearch>, no more than ten days old; or, an affidavit certifying that the entity to be licensed is not required to register with the Georgia Secretary of State
- A completed Security Camera Compliance Verification form (*see below*)
- A completed Ownership Disclosure Form (*see below*)
- Copies of Alcohol Handler's licenses for all required individuals (*see below*)
- A current lease, property deed, management agreement, or other document demonstrating a right of possession to the property upon which the premises are located
- An unexpired identification card issued by any U.S. state or the United States government, bearing a current photograph of the applicant
- Sworn statement of oath by the Agent and Applicant (if different).
- If this application is for a non-profit entity, then include documents from either the IRS or the State of Georgia, showing that the entity is authorized to operate as a non-profit. The name on the non-profit documents must match the name on the deed or lease.

Select One: _____New Business

_____ Change of Business

BUSINESS

Business Name: _____ Corporate and Trade Name: _____

Federal Tax ID #: _____ State Tax ID #: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Local Business Phone #: _____

AGENT

Agent's Name: _____ Agent's Title: _____

Date of Birth: _____ Social Security Number: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone #: _____ Email: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

INDIVIDUAL/OWNER INFORMATION

Will the Agent named above also serve as the Applicant of this license? Yes No If no, complete the following:

Owner/Individual's Name: _____ Title: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone #: _____ Email: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

ALCOHOL HANDLER'S LICENSES

1. Macon-Bibb County now requires certain individuals responsible for the service or sale of alcoholic beverages at retail to obtain an “Alcohol Handler’s License.” This license ensures that individuals responsible for selling alcohol at retail, or overseeing the sale of alcohol at retail, are known to Macon-Bibb County, and are properly trained in the safe sales and service of alcoholic beverages.

2. In order to obtain **ANY** license that includes the sale of beer, wine, or liquor, whether for consumption on premises or packaged to go, including brewpub, malt beverage taproom, or cocktail room licenses, the following people must possess valid Alcohol Handler’s licenses:
 - (A) Any person who holds a twenty-five percent or greater ownership interest, whether directly or through any number of legal entities, in the business to be licensed, except that this requirement does not apply to publicly traded companies; and

 - (B) The agent, if any, designated on the alcohol license.

3. **NOTE:** Applicants may receive a license as long as all of the people listed above have alcohol handler’s licenses. However, for businesses selling alcohol for consumption on premises, other than restaurants earning more than 50% of their revenue from food sales, all employees or independent contractors responsible for pouring, mixing, or opening alcoholic beverages; and every person responsible with supervising or managing those employees or independent contractors, **MUST each have their own alcohol handler’s licenses** in order to work at the licensed business.



Tax Commissioner's Office
188 Third Street · Macon, GA 31201

Alcohol Handler's Beverage License Application

APPLICANT INFORMATION

First Name: _____ Last Name: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone #: _____ Email: _____

Date of Birth: _____ Social Security Number: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

1. **A certificate showing completion of an Alcohol Handler's training course taken within the last three years.**
2. **An unexpired identification card issued by any U.S. State or The United States government, bearing a current photograph of the applicant.**
3. **Two current Color (passport size) photographs of applicant.**
4. **\$25 money order, cashier's check, or personal check payable to Macon-Bibb County Tax Commissioner**

CERTIFICATION

I certify that the information disclosed in this application is true and correct, and I agree to abide by, observe, and conduct business according to the rules and regulations prescribed by Macon-Bibb County, the acts of the Georgia General Assembly, and the State Department of Revenue.

Applicant's Signature _____ Date: _____

I hereby certify that _____ signed his/her name to the forgoing statement after stating to me under oath administered by me, that all statements and answers are true and correct.

This _____ day of _____, 20_____.

NOTARY PUBLIC

MY COMMISSION EXPIRES

SECURITY CAMERA COMPLIANCE VERIFICATION

Instructions:

This form must be completed for each new license application for locations selling alcohol **by the package to go**.

If you are selling alcohol by the package to go, you must:

1. Install security cameras in your business that meet the requirements below;
2. Call the Macon-Bibb County non-emergency dispatch number, **(478) 751-7460**, to have a Sheriff's Deputy dispatched to your store location to inspect the security camera system;
3. Show the Deputy that the security camera system meets the requirements below; and
4. Have the Deputy sign this form approving the security camera system.

If you are not selling alcohol by the package to go, simply check the box on this form for "Exempt" and sign at the bottom.

Pursuant to Sec. 4-40 of the Macon-Bibb County Code of Ordinances,

1. Any establishment selling alcoholic beverages by the package to go must install security cameras, which are, at a minimum, of sufficient quantity, quality, and positioning so as to capture the face and clothing of any person entering into the establishment through any public entrance; or making any purchase from the establishment.
2. The required cameras must also be capable of producing a retrievable image on film or tape that can be made a permanent record and that can be enlarged through projection or other means. Cameras must be maintained in proper working order at all times, and shall be subject to periodic inspection by the Sheriff.

Business Name: _____

Business Address: _____

I hereby certify that on this date, I have inspected the security camera and image retrieval system located at the above business and found it to be in compliance with the requirements of Sec. 4-40 of the Macon-Bibb County Code of Ordinances, as stated hereon.

Bibb County Sheriff's Deputy

Badge No.

Date

Exempt: Check this box if you are not licensed or applying for package to go license.

Applicant/Agent Signature

Date

OWNERSHIP DISCLOSURE INFORMATION

1. An Ownership Disclosure Form must be filed to inform the County of the ownership of any entity that will be operating under an alcohol license. The information that must be provided depends on the type of the entity to be licensed.
 - (A) If the entity to be licensed is a sole proprietorship, then the sole proprietor;
 - (B) If the entity to be licensed is a general partnership, limited partnership, limited liability partnership, or limited liability limited partnership, then all general partners holding a twenty-five percent or greater share of all outstanding general partnership interests, if any, and all limited partners holding a twenty-five percent or greater partnership interest, if any;
 - (C) If the entity to be licensed is a limited liability company, then all managing members, if any, and all members holding a twenty-five percent or greater membership interest, if any;
 - (D) If the entity to be licensed is a privately held corporation, then the three highest- ranking corporate officers, and all shareholders holding a twenty-five percent or greater ownership interest, if any; and
 - (E) If the entity to be licensed is a publicly traded company, then the stock symbol for the company, the name of at least one listing exchange where the company's stock is traded, and the three highest-ranking corporate officers.
 - (F) If the entity to be licensed does not otherwise fall under any of the above categories, then the names of the three persons with the greatest operational authority over the entity, or the names of all such persons if fewer than three exist.

Ownership Disclosure Form

A separate copy of this form must be completed for each individual who has a disclosable interest in the business.

Business:

Trade Name: _____ Name of Corporation: _____

If publicly traded, Stock Symbol and Name of one Listing Exchange: _____

Individual:

Name and Title: _____ Telephone Number: () _____

Date of Birth: _____ Social Security Number: _____

Residential Street Address: _____

Mailing Address: _____

Type of Entity and Business Interest:

Please check appropriate description and complete as required.

- Sole Proprietorship
- General Partnership
 - General Partner holding ___% of all outstanding general partnership interests.
- Limited Partnership (LP)
 - General Partner holding ___% of all outstanding general partnership interests.
 - Limited Partner holding ___% of all outstanding general partnership interests.
- Limited Liability Partnership (LLP)
 - General Partner holding ___% of all outstanding general partnership interests.
- Limited Liability Limited Partnership (LLLLP)
 - General Partner holding ___% of all outstanding general partnership interests.
 - Limited Partner holding ___% of all outstanding general partnership interests.
- Limited Liability Company (LLC)
 - Managing Member, Total number of Managing Members: _____
 - Member holdings ___% of all outstanding membership interests
- Privately Held Corp./Company
 - Corporate Officer: Yes__ No__
 - Shareholder holding ___% of all outstanding ownership interests.
- Publicly Traded Company
 - Corporate Officer: Yes__ No__
- Other
 - Other person exercising operational authority over the entity: _____

AGENT INFORMATION

All applications must name one person as the agent of the licensee, who shall be responsible for any matter relating to the licenses. Mailing any notice required under the law to the agent named, at the mailing address provided shall be deemed sufficient notice to a licensee.

Any person named as agent on this application must be employed and regularly scheduled to work at the licensed location a minimum of 30 hours per week; and must be an employee with directorial authority over the operations of the enterprise, including (1) authority to hire and fire staff or oversee the process for making personnel decisions; (2) responsibility to train staff or oversee staff training, and to enforce staff policy compliance requirements; (3) authority to set and revise local business policies and practices, or to oversee the implementation or revision of local business policies and practices; and (4) authority to purchase and receive alcoholic beverage inventory for the enterprise, or to oversee alcoholic beverage inventory purchasing;

Any person named as agent on this application shall be personally and independently responsible for ensuring that all statements submitted on any license application or renewal are true and correct, and for ensuring that all state and local laws governing the commercial manufacture, distribution, and sale of alcoholic beverages are followed.

If any licensee, or any employee or other person acting at the direction thereof, shall be cited or charged with any violation of the Macon-Bibb County Code of Ordinances relating to the commercial manufacture, distribution, or sale of alcoholic beverages, then the agent of such licensee may also be charged with the offense of serving as an agent of a licensee in violation of the same Code provision if the agent in question directed, aided, participated in, ratified, or had knowledge of the actions underlying said violation; or that the agent in question had knowledge of the commission of a prior, similar violation committed by the same person, licensed entity, or employee within the previous calendar year.

If an agent becomes unwilling or unable to serve as agent for any reason, the licensee has ten business days in which to appoint a new agent, and to provide in writing all information required of agents as part of an application for a new license. Licensees and applicants may appoint a new agent by filing a written notice with the Department of Business Development Services on an approved form. Until a new agent is appointed, the mailing of any notice to the most recent agent of record shall be sufficient notice to a licensee. The new agent must also be fingerprinted and shall be responsible for paying any fees associated therewith. The failure to appoint a new agent within ten business days shall be grounds for revocation of your license.

Agent Certification

The undersigned certify that the information contained in this application and accompanying documentation is true and correct, and that the Agent named herein has directorial authority over the operations of the business to be licensed. The undersigned further agree to abide by, observe, and conduct the licensed business according to all county ordinances and state laws and regulations in respect thereof, and understand that the Agent named herein may be held personally responsible for violations of County Alcohol Code committed by others at the Agent's direction, or with the Agent's knowledge.

Agent's Signature: _____ Date: _____

Business Name: _____

I hereby certify that _____ (Agent) signed his/her name to the forgoing statement after stating to me under oath administered by me, that all statements and answers are true and correct.

This _____ day of _____, 20_____.

NOTARY PUBLIC

MY COMMISSION EXPIRES

Owner/Individual Certification

I certify that the information disclosed in this application is true and correct, and I agree to abide by, observe, and conduct business according to the rules and regulations prescribed by Macon-Bibb County, the acts of the Georgia General Assembly, and the State Department of Revenue.

Individual/Owner's Signature: _____ Date: _____
(If different from Agent)

Title: _____

Business Name: _____

I hereby certify that _____ (Applicant) signed his/her name to the forgoing statement after stating to me under oath administered by me, that all statements and answers are true and correct.

This _____ day of _____, 20_____.

NOTARY PUBLIC

MY COMMISSION EXPIRES

Name-Based Criminal History Record Information Consent/Inquiry Form

I hereby give consent for the **Bibb County Sheriff's Office** to conduct an inquiry and receive any Georgia criminal history record information pertaining to me, which may be contained in the files of any state or local criminal justice agency in Georgia.

Full Name (print):			
Home Address:			
Sex	Race	Date of Birth	Social Security Number

This authorization is valid for 90/180/_____(circle one) days from date of signature.
 I, _____, give consent to the above name to perform periodic criminal history background checks for the duration of my employment with this company.

Signature

Date

*****Include a copy of your valid State/Government issued identification*****

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

Purpose Code used: (check one)

	Employment (E) – Provides <i>Georgia</i> Criminal History Record Information
	Employment with Mentally Disabled (M) – Provides <i>Georgia</i> Criminal History Record Information
	Employment with Elder Care (N) - Provides <i>Georgia</i> Criminal History Record Information
	Employment with Children (W) - Provides <i>Georgia</i> Criminal History Record Information
	Public Records (P) – Provides <i>Georgia Felony Convictions</i> Only

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

	No Georgia CHRI results available.
	Georgia CHRI attached/released

	No NCIC/GCIC Warrant results available.
	Possible NCIC/GCIC Warrant. Contact Agency listed below.
Wanting Agency Name:	
Agency Telephone:	

Agency Designee Signature and Title

Date

MACON-BIBB COUNTY, GEORGIA
(S.A.V.E.) SYSTEMATIC ALIEN VERIFICATION FOR ENTITLEMENTS
O.C.G.A. § 50-36-1 (e) (2) Affidavit

By executing this affidavit under oath, as an applicant for a Macon-Bibb County, Georgia, Occupation Tax Certificate, Alcohol License, or other public benefit as referenced in O.C.G.A. § 50-36-1; the undersigned applicant verifies **one** of the following with respect to my application for a public benefit:

- 1) _____ I am a United States citizen 18 years of age or older. **Please submit a copy of your current Secure and Verifiable Document(s) such as driver's license, passport, or document as indicated on the attached list.**

- 2) _____ I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. **Please submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number.**

Please check only one option above and submit the required documents with your application.
Please note that the failure to do so will result in a processing delay.

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.

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.

Business Name: _____

Printed Name of Applicant: _____

*Signature of Applicant: _____

SUBSCRIBED AND SWORN BEFORE ME ON

THIS _____ DAY OF _____, 20_____.

NOTARY PUBLIC

MY COMMISSION EXPIRES

Secure and Verifiable Documents Under O.C.G.A. § 50-36-2 Issued February 20, 2018, by the Office of the Attorney General, Georgia

- The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”), as amended by Senate Bill 160, signed into law as Act No. 27, (2013), provides that “[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(g). The Attorney General may modify this list on a more frequent basis, if necessary.
- The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.
- An unexpired United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired driver’s license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be accessed at: <https://www.bia.gov/tribal-leaders-directory> [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired passport issued by a foreign government, provided that such passport is accompanied by a United States Department of Homeland Security (“DHS”) Form I-94, DHS Form I-94A, DHS Form I-94W, or other federal form specifying an individual’s lawful immigration status or other proof of lawful presence under federal immigration law [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An unexpired Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

- An unexpired Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- An unexpired NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- An unexpired Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- An unexpired driver's license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- Senate Bill 160 (Act No. 27), effective July 1, 2013, limited the use of passports issued by foreign nations to satisfy the requirements for submission of secure and verifiable documents to only those passports submitted in conjunction with a United States Department of Homeland Security ("DHS") Form I-94, DHS Form I-94A, DHS Form I-94W, or other federal form specifying an individual's lawful immigration status or other proof of lawful presence under federal immigration law.
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- Certification of Report of Birth issued by the United States Department of State (Form DS-1350) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- Certification of Birth Abroad issued by the United States Department of State (Form FS-545) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- Consular Report of Birth Abroad issued by the United States Department of State (Form FS-240) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- An original or certified copy of a birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]