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 Reporter**, confirming an advertisement for intent to sell alcohol has run once a week for two consecutive weeks; (478) 994-2358; Email: bibblegals@mymcr.net; Online: https://www.mymcr.net/submit_legal_notice/ (Additional fee required.)

☐A **Zoning Compliance Form** from the Macon-Bibb County Planning and Zoning Commission, located at 3661 Eisenhower Pkwy, Suite MB104, Macon, GA 31206; (478) 241-2554; (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 ofState

☐A completed Ownership Disclosure Form for all required individuals (*attached*)

☐Copies of Alcohol Handler's Licenses for all required individuals (*attached*)

☐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

☐A completed Agent Certification Form (*attached*)

☐Business Identification Type Form

☐A completed Security Camera Compliance Verification Form *(attached)*; Code Enforcement: (478) 803-0470, select Option "0"

☐A completed Applicant Privacy Right Signature Page for all required individuals *(attached)*

☐A completed Questionnaire

☐Armed Security Personnel Required Training Compliance Form

☐Certificate of Good Standing Form (*Business Owner(s) and Property Owner(s)*)

☐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.

☐You must register for your state alcohol license through the Georgia Tax Center in order for your application to be processed.

For Business Continuation

☐Please provide a list of the current, valid licenses issued to the named business; A record showing that all business license fees owed on the existing business have been fully paid, or a receipt showing payment thereof.

☐A statement, signed by the applicant, swearing, or affirming that the applicant has recently purchased the named business, or has a bona fide expectation of purchasing the named business soon; and

☐A record showing that all property taxes to date owned on the property have been fully paid, or a receipt showing payment thereof

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*) and 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 (25%) 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
Mail to: Tax Commissioner's Office
PO Box 4503
Macon, GA 31208-4503

Rev. April 2026

Tax Commissioner's Office
188 Third Street, Macon, GA 31201
Mail to: Tax Commissioner's Office PO Box 4503
Macon, GA 31208-4503

License Fees are Prorated by Month that Completed Application is Submitted

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 Manufacturer	**$4,300**	*Malt Manufacturer	**$2,500**	Wine Manufacturer	**$1,700**
Brewpub	**$2,500**	Out-of-Town Wholesaler	**$100**	Alcohol Beverage Caterer	**$600**
Sunday Sales	**$300**	Brown Bag	**$0**	Temporary License	**$100**
___ Please check here if you are applying for a Business Continuation License. Business Continuation License is **25% of applicable fees.**					
*Distilled Spirits (Liquor)		*Malt (Beer)		*C.O.P. (Consumed on Premise)	

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

$_____ Alcohol License Fees + $400 Application Fee $_____

Agent Information

1. Agent/Owner(s) must complete and sign the Name-Based Criminal 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 unless such individuals currently hold one or more categories of alcohol license(s) in good standing.
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 Monroe County/Macon Reporter (Legal Organ)
7. If any business entity other than Sole Ownership…Must submit a copy of the GA Secretary of State's Business information Record.
8. If NON-PROFIT entity…Proof of Non-Profit 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

Business Continuation

12. Please provide a list of the current, valid licenses issued to the named business; A record showing that all business license fees owed on the existing business have been fully paid, or a receipt showing payment thereof.
13. A statement, signed by the applicant, swearing, or affirming that the applicant has recently purchased the named business, or has a bona fide expectation of purchasing the named business soon; and
14. A record showing that all property taxes to date owned on the property have been fully paid, or a receipt showing payment thereof.

Select One: __ New Business __ Change of Location __ Change of Business

BUSINESS INFORMATION

Federal Tax ID/EIN #: _____ State Tax ID #: _____

Business Name: _____ Corp./Trade Name: _____

Local Business Address: _____ City: _____ State: _____ Zip: _____
(PO Box Not Allowed)

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

Local Business Phone #: (____) _____ Email Address:_____

Contact Person: _____ Contact Phone #: (____)_____

AGENT INFORMATION

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

Date of Birth: _____ Social Security Number: _____

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

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

Home Phone #: (____) _____ Email: _____

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: _____

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

Name-Based Criminal History Record Information Consent/Inquiry From

I hereby give consent for the _____ conduct an inquiry and receive
Criminal Justice Agency
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. I further authorize the B.C.S.O. to relay that information to Requesting Entity: _____ via:

US Mail ____ In-Person Pick-Up ___ Encrypted Email Address: _____

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

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

I, _____ 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 (Purpose Codes E and U Only) Bar Number Date

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

Purpose Code used: (Check all that apply)

	Employment (E) - Provides Georgia Criminal History Record Information
	Employment with Mentally Disabled (M)- Provides Georgia Criminal History Record Information
	Employment with Elder Care (N)- Provides Georgia Criminal History Record Information
	Employment with Children (W) - Provides Georgia Criminal History Record Information
	Public Records (P)- Provides Georgia Felony Convictions Only
	Personal Copy (U) - Includes Restricted and Sealed arrests (not to be used for employment)
	Civilian Criminal Justice (J)- State and Ill Info Received
	Sworn Criminal Justice Employment (Z) - State and Ill Info received

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]1

- **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)]

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: _____ Corporation Name: _____

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

Individual:

Name and Title: _____ Phone #: (____) _____

Date of Birth: _____ Social Security Number:_____

Residential Street Address: _____
(PO Box Not Allowed) City State Zip

Mailing Address: _____
City State Zip

Type of Entity and Business Interest:

Please check appropriate description and complete as required.

- ☐ Sole Proprietorship
- ☐ General Partnership
  - General Partner holding ___% of all outstanding 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 (LLLP)
  - 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 Member(s): ___
  - Member holdings ___% of all outstanding membership interests.
- ☐ Privately Held Corporation/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: _____

ALCOHOL HANDLER'S LICENSE

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

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.

ADDITIONAL DOCUMENTS TO BE SUBMITTED

Submit an unexpired identification card issued by any U.S. State or The United States government, bearing a current photograph of the applicant and a current color photo for alcohol handler's permit.

A certificate showing completion of an alcohol handler's training course, approved by Macon- Bibb County, within the last three years and a S.A.V.E. Affidavit. A separate fee may apply. See below for a list of approved courses.

ServSafe: (404) 467-9000; https://www.servsafe.com/ServSafe-Alcohol

Training Institute for Responsible Vendors Inc: (404) 531-9237

Cheers Hospitality Collective: (470) 377-0731; https://cheers.trainercentralsite.com/course/maconbibb

Training for Intervention Procedures (TIPS), Nicole Blossé, (800) 438-8477, ext. 390 or Email Blossen@gettips.com, www.gettips.com

Tax Commissioner's Office
188 Third Street, Macon, GA 31201
Mail to: Tax Commissioner's Office PO Box 4503
Macon, GA 31208-4503

ALCOHOL HANDLER'S BEVERAGE LICENSE APPLICATION

APPLICANT INFORMATION

First Name: _____ Last Name: _____

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

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

Date of Birth: _____ Social Security Number: _____

Home Phone #: (____) _____ Email: _____

- ☐ A certificate showing completion of an Alcohol Handler's training course taken within the last three years
- ☐ An unexpired identification card issued by any U.S. State or The United States government, bearing a current photograph of the applicant.
- ☐ Current Color photograph of applicant
- ☐ $25 cash, money order/check, debit/credit card (in office) made payable to Macon-Bibb County Tax Commissioner's Office

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

_____
Date

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 Macon-Bibb Tax Commissioner's Office 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.

Business Name: _____

Agent's Signature: _____ Date: _____

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

OWNERSHIP/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.

Business Name: _____

Title: _____

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

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

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 **beer or wine or both, but not distilled spirits, by the package to go**.*

If you are not selling alcohol by the package to go, or if you are selling distilled spirits 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 the following items: at least four pounds each of five different types of fresh fruits or vegetables; four pounds of fresh, raw beef, chicken, or pork; four dozen fresh chicken eggs; four pounds of bread; and four gallons fresh cow's milk. Food Marts shall be required to maintain a food scale certified by the Georgia Department of Agriculture for the purpose of verifying compliance with this definition. Food Marts shall purchase food items for resale from lawful fresh food wholesalers, and shall be required to produce invoices reflecting the sources of food products sold upon demand by County officials. If an insufficient quantity of an item is present in the Food Mart, Macon-Bibb County may consider receipts or other evidence to determine whether a sufficient good faith effort was made to comply with the minimum item quantity requirements. The term "Food Mart" does not include Drugstores, Gas Stations, Grocery Stores, Small Box Discount Stores, Specialty Stores, or Vice Marts; provided that 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/Distilled Spirits/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 only beer or wine or both by package to go.

_____ _____

Applicant/Agent Signature Date

SECURITY CAMERA COMPLIANCE VERIFICATION

Instructions:

This form must be completed for each new license application for locations selling alcohol ***by the package to go or operating as a bar or nightclub****.*

Pursuant to Sec. 4-1 of the Macon-Bibb County Code of Ordinances,

1. Bar shall mean any business that derives 75 percent or more total annual gross revenue from the sale of alcoholic beverages for consumption on the premises, in accordance with O.C.G.A. § 3-1-2;
2. Nightclub shall mean any business which:
   - Directly or indirectly charges patrons for admission;
   - Is licensed under this Chapter for the sale of alcoholic beverages for consumption on premises;
   - Provides entertainment using amplified sound, including, without limitation, the playing of pre-recorded music through amplified sound by a DJ or emcee or similar person; the playing of live analog, electronic, or digital musical instruments; the presentation of live human speech or dialogue through amplified sound; or any combination of the above;
   - Which does not provide a number of seats suitable for the viewing of such entertainment greater than or equal to the number of patrons present; and
   - Which does not earn at least fifty percent of its annual gross revenues from the sale of prepared meals or the letting of rooms for overnight stay.

If you are selling alcohol by the package to go or operating a bar or nightclub you must:

1. *install security cameras in your business that meet the requirements below;*
2. *call the Code Enforcement Department Office at 478-803-0470, select option "0" to schedule an appointment to have an inspection of the security camera system;*
3. *show the inspector that the security camera system meets the requirements below; and*
4. *have the inspector sign this form approving the security camera system.*

If you are not operating as a bar or nightclub or 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. Any establishment licensed to sell any alcoholic beverage for consumption on premises, which is operating as a bar or nightclub, is hereby required to install security cameras, which must, at a minimum, be of sufficient quantity, quality, and positioning so as to capture the face and clothing of persons entering into said establishment through any public entrance.

thereof; standing outside of the establishment but within fifty feet of any entrance to said establishment; making any purchase from a fixed point of sale within said establishment; or standing within any dance floor or similar area designated within said establishment.

3. A digital security camera system shall be deemed to be "of sufficient quality" of and only if each camera required under this Section meets the following criteria:
   - It is capable of producing an image with a 1080p High Definition (1920 x 1080 pixels) resolution or greater at a minimum frame rate of 15 frames per second;
   - It is maintained in a state of being free of dust or debris that would interfere with the quality of the image being produced; and
   - It is capable of operating in the actual interior or exterior lighting conditions that are present during all operations and times of operation for the establishment, and of producing a clear image of the face and clothing of the persons described in this Section in all such lighting conditions.
4. Such cameras meeting the requirements of this Section must be capable of producing a retrievable image on film, tape, or other suitable digital format that can be made a permanent record and that can be enlarged through projection or other means. Cameras meeting the requirements of this Section shall be maintained in proper working order at all times and shall be subject to periodic inspection by the Sheriff.
5. Establishments required under this Section to install security cameras shall maintain all video images captured thereby for a period of at least thirty days from the date of image capture.
6. The failure to have or maintain security cameras in good working condition, with sufficient backup storage as to permit the retrieval of images as required by this Section shall be a violation of this Section and shall be punishable in accordance with the general provisions of Section 1-6 of this Code, as well as by any adverse action against the alcohol licensure of such business, up to and including the revocation or denial of all existing alcohol licenses held by such licensee.

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.

_____ _____

Code Enforcement Department Designee Date

☐ **Exempt:** Check this box if you are not licensed, not applying for package to go license, or not operating as a bar or nightclub.

_____ _____

Applicant/Agent Signature Date

NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulation (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared or retained.
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a 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 officials deny you the employment, license, or other benefit based on the information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at https://www.fbi.gov/services/cjis/identity-history-summary-checks and https://www.edo.cjis.gov. You may find information regarding how to obtain a copy of your Georgia criminal history record on the GBI website: https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via https://www.edo.cjis.gov. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) If the disputed arrest occurred in the State of Georgia, you may send your challenge directly to the GCIC. Contact information for the GCIC can be found at https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions.
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for the authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

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

ALCOHOL LICENSE QUESTIONNAIRE

Name of Business: _____

Owner(s) Name(s): _____

Address: _____

_____

1. Do you own or are you leasing your business location? Own ____ Lease ____
2. If you purchased the building, what was the final sale price as reflected in public records? $_____
3. If you are leasing the building, what relation, if any, is there between the building owner and the owner(s) of your business?

   Please check one: No Relation ☐ Relation, see below ☐

_____

_____

_____

_____

4. If you are leasing the building, will your landlord be involved in the day-to-day business operations? Yes ☐ No ☐
5. Was the previous operator at this location in any legal or regulatory trouble with local government, state government, law enforcement, or the Georgia Lottery in the year prior to the transfer to your business? Yes ☐ No ☐
6. Will the previous operator or any family member of the previous operator remain involved in the day-to-day business operations? Yes ☐ No ☐
7. Was the sale of the building, business, or lease an "arm's length" or "fair market value" transaction? Yes ☐ No ☐

_____ _____ _____

Signature Print Name Date

Rev. April 2026

ARMED SECURITY PERSONNEL REQUIRED TRAINING COMPLIANCE FORM

Instructions:

This form must be completed by any bar or nightclub operating with an alcohol license which allows or requires security personnel to carry firearms while working. The form shall be submitted upon applying or renewing any license to sell alcohol on the premises. This form is not required for businesses employing certified peace officers in good standing with the Georgia Peace Officer Standards and Training Counsel. Applicants applying for special events which employ armed security personnel are required to submit this form.

Pursuant to the licensing requirements of Sec. 4-550 of the Macon-Bibb County Code of Ordinances, attach the following documentation to this form prior to submission:

1. A copy of the applicant's valid private security business license, issued by the Georgia Board of Private Detective and Security Agencies.
2. A list containing the names and dates of birth of all persons who will be working as armed security personnel at the applicant's place of business or special event location. Use the attached form.
   NOTE: IT IS A VIOLATION TO ALLOW ANY PERSON NOT LISTED TO WORK AS AN ARMED SECURITY PERSONNEL WITHOUT FIRST SUBMITTING AN UPDATED COPY OF THIS FORM TO THE TAX COMMISSIONER'S OFFICE. PENALTIES FOR VIOLATING THIS RULE MAY INCLUDE THE LOSS OF YOUR ALCOHOL LICENSES.
3. A copy of a valid private security license from the Georgia Board of Private Detective and Security Agencies for each person named who will be working as armed security personnel at the applicant's place of business or special event location.

If you are not operating as a bar or nightclub with armed security personnel, simply check the box on this form for "Exempt" and sign at the bottom.

Business Name: _____

Business Address: _____

☐ **Exempt:** Check this box if you certify that you will **NOT** hire any armed security personnel, or that you are not operating as a bar or nightclub.

Does your business derive 75% or more total annual gross revenue from the sale of alcoholic beverages for consumption on the premises? Yes___ No ___

_____ _____

Applicant Signature Date

ARMED SECURITY PERSONNEL REQUIRED TRAINING COMPLIANCE FORM

Instructions:

*Please list every individual who may be working as armed security personnel at your bar or nightclub. Certified peace officers do not need to be listed and may be added in the future without updating this list. If you hire anybody in the future to work as armed security personnel at your bar or nightclub, this list **MUST** be updated to include that person before they are allowed to carry a firearm while working at your business. Use additional copies of this sheet if necessary.*

IF ANY PERSON NOT ON THIS LIST IS FOUND TO BE WORKING AS ARMED SECURITY PERSONNEL AT YOUR BAR OR NIGHTCLUB, THEN YOU MAY BE SUBJECT TO PENALTIES OF UP TO $1000 PER VIOLATION AND UP TO 6 (SIX) MONTHS IN JAIL, AS WELL AS THE LOSS OF ALL ALCOHOL LICENSES ISSUED TO YOU WITHIN MACON-BIBB COUNTY.

1. _____
   Name | Date of Birth | GBPDSA Private Security License #
2. _____
   Name | Date of Birth | GBPDSA Private Security License #
3. _____
   Name | Date of Birth | GBPDSA Private Security License #
4. _____
   Name | Date of Birth | GBPDSA Private Security License #
5. _____
   Name | Date of Birth | GBPDSA Private Security License #
6. _____
   Name | Date of Birth | GBPDSA Private Security License #
7. _____
   Name | Date of Birth | GBPDSA Private Security License #
8. _____
   Name | Date of Birth | GBPDSA Private Security License #
9. _____
   Name | Date of Birth | GBPDSA Private Security License #
10. _____
    Name | Date of Birth | GBPDSA Private Security License #

Macon-Bibb County
Certificate of Good Standing

Instructions: This Certificate is used to certify the tax compliance status of certain individuals or business entities with a connection to a person or business that is applying for or being considered for some privilege with the Macon-Bibb County Government. These privileges may include:

- Obtaining a building permit, plat approval, building inspection report, or certificate of occupancy
- Obtaining or renewing any alcohol or privilege license
- Being appointed to any board or position of trust requiring confirmation of the County Commission.
- Being awarded a contract through a formal competitive bid or proposal process
- Being awarded a non-competitive contract over $50,000.00
- Registering to bid on any surplus real property sold by the Macon-Bibb County Government or the Macon-Bibb County Tax Commissioner
- Any other privilege granted by Macon-Bibb County which may require certifying tax compliance status

If **AN INDIVIDUAL OR SOLE PROPRIETORSHIP** is applying for a privilege requiring this form, then that individual must complete this Certificate using his or her name as both the applicant and the subject.

If **AN ENTITY** is applying for a privilege requiring this form, then an owner or manager must complete this Certificate using the entity's name as both the applicant and the subject; and **ONE ADDITIONAL CERTIFICATE** must be completed **FOR EACH** individual identified as an owner in the entity's Certificate.

FOR BOTH INDIVIDUALS AND ENTITIES, if the privilege requested is a building permit, plat approval, building inspection report, certificate of occupancy, alcohol license, or other privilege license, then **ONE ADDITIONAL CERTIFICATE** must be completed listing the landowner of the construction site or business location as the subject.

All required completed certificates must be submitted together. Giving false, incomplete, or inaccurate information on this Certificate may result in the denial of any privilege the applicant is applying for, as well as the revocation of any privilege previously granted by Macon-Bibb County, and may constitute the crimes of false writing or false swearing, which carry a penalty of up to five years in prison and up to a $1,000 fine.

Rev. April 2026
See O-22-0011

Macon-Bibb County
Certificate of Good Standing

Each owner and agent or, if such owner is not a natural person, all members of the entity owning the property must complete this form.

1. Business Name: _____
2. Name of the subject of this Certificate, if different from the applicant:

   _____
3. Benefit or privilege for which the applicant is applying (mark one):

☐ Building Permit	☐ Plat Approval	☐ Building Inspection Report	☐ Certificate of Occupancy
☐ Alcohol License (Any)	☐ Privilege License (Any other than alcohol)	☐ Political Appointment	☐ Competitive Contract Bid or Proposal
☐ Non-Competitive Contract over $50,000	☐ Registering to Bid on Real Property	☐ STVR Permit	☐ Other: _____ _____

4. If the subject is an individual or sole proprietorship, then list all business entities in which the subject has a direct or indirect ownership interest of 25% or more, or legal control over. If the subject is an entity, then list all individuals who have a direct or indirect ownership interest of 25% of more in the subject entity, or who exercise legal control of the entity. Use additional sheets if needed.

   _____

   _____

   _____

   _____

5. I, the undersigned, do hereby swear or affirm that the information contained in this Certificate is true and complete to the best of my available knowledge. I further swear or affirm that, as of today, none of the individuals or entities listed in this Certificate are more than 90 days delinquent on the payment of any ad valorem property taxes due to the Macon-Bibb County Government. I understand that giving false, incomplete, or inaccurate information on this Certificate may result in the denial of any privilege the applicant is applying for, as well as the revocation of any privilege previously granted by Macon-Bibb County, and may constitute the crimes of false writing or false swearing, which carry a penalty of up to five years in prison and up to a $1,000 fine.

_____

Print and Sign Name

Sworn to and subscribed before me

This ___ day of _____ , 20___.

_____

Notary Public

My Commission Expires:

Macon-Bibb County
Certificate of Good Standing

Each owner and agent or, if such owner is not a natural person, all members of the entity owning the property must complete this form.

1. Name and Title of the Business Owner (s): _____
2. Name of the subject of this Certificate, if different from the applicant:

   _____
3. Benefit or privilege for which the applicant is applying (mark one):

☐ Building Permit	☐ Plat Approval	☐ Building Inspection Report	☐ Certificate of Occupancy
☐ Alcohol License (Any)	☐ Privilege License (Any other than alcohol)	☐ Political Appointment	☐ Competitive Contract Bid or Proposal
☐ Non-Competitive Contract over $50,000	☐ Registering to Bid on Real Property	☐ STVR Permit	☐ Other: _____ _____

4. If the subject is an individual or sole proprietorship, then list all business entities in which the subject has a direct or indirect ownership interest of 25% or more, or legal control over. If the subject is an entity, then list all individuals who have a direct or indirect ownership interest of 25% of more in the subject entity, or who exercise legal control of the entity. Use additional sheets if needed.

   _____

   _____

   _____

   _____

5. I, the undersigned, do hereby swear or affirm that the information contained in this Certificate is true and complete to the best of my available knowledge. I further swear or affirm that, as of today, none of the individuals or entities listed in this Certificate are more than 90 days delinquent on the payment of any ad valorem property taxes due to the Macon-Bibb County Government. I understand that giving false, incomplete, or inaccurate information on this Certificate may result in the denial of any privilege the applicant is applying for, as well as the revocation of any privilege previously granted by Macon-Bibb County, and may constitute the crimes of false writing or false swearing, which carry a penalty of up to five years in prison and up to a $1,000 fine.

_____

Print and Sign Name

Sworn to and subscribed before me

This ___ day of _____ , 20___.

_____

Notary Public

My Commission Expires:

Macon-Bibb County
Certificate of Good Standing
Each owner and agent or, if such owner is not a natural person, all members of the entity owning the property must complete this form.

1. Name and Title of the Property Owner (s): _____
2. Name of the subject of this Certificate, if different from the applicant:

   _____
3. Benefit or privilege for which the applicant is applying (mark one):

☐ Building Permit	☐ Plat Approval	☐ Building Inspection Report	☐ Certificate of Occupancy
☐ Alcohol License (Any)	☐ Privilege License (Any other than alcohol)	☐ Political Appointment	☐ Competitive Contract Bid or Proposal
☐ Non-Competitive Contract over $50,000	☐ Registering to Bid on Real Property	☐ STVR Permit	☐ Other: _____ _____

4. If the subject is an individual or sole proprietorship, then list all business entities in which the subject has a direct or indirect ownership interest of 25% or more, or legal control over. If the subject is an entity, then list all individuals who have a direct or indirect ownership interest of 25% of more in the subject entity, or who exercise legal control of the entity. Use additional sheets if needed.

   _____

   _____

   _____

   _____

5. I, the undersigned, do hereby swear or affirm that the information contained in this Certificate is true and complete to the best of my available knowledge. I further swear or affirm that, as of today, none of the individuals or entities listed in this Certificate are more than 90 days delinquent on the payment of any ad valorem property taxes due to the Macon-Bibb County Government. I understand that giving false, incomplete, or inaccurate information on this Certificate may result in the denial of any privilege the applicant is applying for, as well as the revocation of any privilege previously granted by Macon-Bibb County, and may constitute the crimes of false writing or false swearing, which carry a penalty of up to five years in prison and up to a $1,000 fine.

_____

Print and Sign Name

Sworn to and subscribed before me

This ___ day of _____, 20___.

_____

Notary Public
My Commission Expires:

Rev. April 2026
See O-22-0011

the Monroe County/Macon Reporter
Covering Monroe and Bibb Counties

478-994-2358
MACON OFFICE: 1760 Bass Road • Suite 104 • Macon, GA 31210
FORSYTH OFFICE: 50 N. Jackson Street • Forsyth, GA 31029
WWW.MYMCR.NET

Bibb County Public Notice Policies

Effective January 1, 2026

Effective July 1, 2023 Legal Rate Change: $15 per 100 Words per State Law

Submit:

Email Marie Seay at **bibblegals@mymcr.net**, or call her with questions at **478-994-2358**. Submit online at **https://www.mymcr.net/submit_legal_notice/**.

Deadlines:

The Advertising/Public Notice **deadline is 12 Noon on Friday** preceding first publication date.

Billing:

- We bill regular accounts monthly.
- Option to pay automatic monthly payments by credit card.
- New customers must pre-pay their first ad to set up an account.
- Ads/Notices pulled after Noon on Monday preceding publication may incur normal advertising charges.

Pay Bill Online:

https://www.mymcr.net/site/forms/subscription_services/advertising_pay_bill/

(Sorry AMEX can only be used over the phone.)

Publisher's Affidavits:

Available upon request by email. A **$10 fee** applies as set out in Georgia law unless otherwise specified.

The Reporter is published every Wednesday and is available at most Publix, Walmart, Kroger, Circle K, and CVS stores in Macon plus other locations, and online at www.mymcr.net.

Provided to Macon-Bibb County for public notice submissions.

FINGERPRINTING

Please visit: https://ga.state.identogo.com/ue to register for fingerprints.

Registration Instructions:

1. Please type 2TGR22 for the service code.
2. Please type in GA923133Z for the Reviewing Agency and then click continue.
3. Verify the information and click “start enrollment”.
4. Please read the Non-Criminal Justice Applicant’s Privacy Rights and check the box that states, “I acknowledge that I have read, understand, and agree to the above statement” and click continue.
5. Input your personal information, then click “review” to verify your information.
6. Click “submit enrollment” and follow the steps to finish the registration process.

Please register prior to applying for your alcohol beverage license. We will need to approve you for printing once you submit a complete application and appropriate fees.

If you need guidance regarding how to navigate the system, please visit our website for more information at:

https://www.maconbibbtax.us/alcohol-and-business.html

Alcohol License Fee Schedule

LICENSE TYPE	FULL/RENEWAL	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
MALT MAUNFACTURER	$2,500.00	$2,291.67	$2,083.33	$1,875.00	$1,666.67	$1,458.33	$1,250.00	$1,041.67	$833.33	$625.00	$2,500.00	$2,500.00	$2,500.00
MALT WHOLESALER	$1,000.00	$916.67	$833.33	$750.00	$666.67	$583.33	$500.00	$416.67	$333.33	$250.00	$1,000.00	$1,000.00	$1,000.00
MALT C.O.P.	$800.00	$733.33	$666.67	$600.00	$533.33	$466.67	$400.00	$333.33	$266.67	$200.00	$800.00	$800.00	$800.00
MALT P.T.G.	$800.00	$733.33	$666.67	$600.00	$533.33	$466.67	$400.00	$333.33	$266.67	$200.00	$800.00	$800.00	$800.00
WINE MANUFACTURER	$1,700.00	$1,558.33	$1,416.67	$1,275.00	$1,133.33	$991.67	$850.00	$708.33	$566.67	$425.00	$1,700.00	$1,700.00	$1,700.00
WINE WHOLESALER	$800.00	$733.33	$666.67	$600.00	$533.33	$466.67	$400.00	$333.33	$266.67	$200.00	$800.00	$800.00	$800.00
WINE C.O.P.	$700.00	$641.67	$583.33	$525.00	$466.67	$408.83	$350.00	$291.67	$233.33	$175.00	$700.00	$700.00	$700.00
WINE P.T.G.	$700.00	$641.67	$583.33	$525.00	$466.67	$408.83	$350.00	$291.67	$233.33	$175.00	$700.00	$700.00	$700.00
DISTILLED SPIRITS MANUFACTURER	$4,300.00	$3,941.67	$3,583.33	$3,225.00	$2,866.67	$2,508.33	$2,150.00	$1,791.67	$1,433.33	$1,075.00	$4,300.00	$4,300.00	$4,300.00
DISTILLED SPIRITS WHOLESALER	$3,600.00	$3,300.00	$3,000.00	$2,700.00	$2,400.00	$2,100.00	$1,800.00	$1,500.00	$1,200.00	$900.00	$3,600.00	$3,600.00	$3,600.00
DISTILLED SPIRITS C.O.P.	$2,900.00	$2,658.33	$2,416.67	$2,175.00	$1,933.33	$1,691.67	$1,450.00	$1,208.33	$966.67	$725.00	$2,900.00	$2,900.00	$2,900.00
DISTILLED SPIRITS P.T.G.	$2,900.00	$2,658.33	$2,416.67	$2,175.00	$1,933.33	$1,691.67	$1,450.00	$1,208.33	$966.67	$725.00	$2,900.00	$2,900.00	$2,900.00
OUT-OF-TOWN WHOLESALER	$100.00	$91.67	$83.33	$75.00	$66.67	$58.33	$50.00	$41.67	$33.33	$25.00	$100.00	$100.00	$100.00
ALCOHOL CATERER	$600.00	$550.00	$500.00	$450.00	$400.00	$350.00	$300.00	$250.00	$200.00	$150.00	$600.00	$600.00	$600.00
BREWPUB	$2,500.00	$2,291.67	$2,083.33	$1,875.00	$1,666.67	$1,458.33	$1,250.00	$1,041.67	$833.33	$625.00	$2,500.00	$2,500.00	$2,500.00
BROWN BAGGING	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
SPECIAL EVENT	$250.00/day	$250.00/day	$250.00/day	$250.00/day	$250.00/day	$250.00/day	$250.00/day	$250.00/day	$250.00/day	$250.00/day	$250.00/day	$250.00/day	$250.00/day
SPECIAL EVENT FOR NON-PROFIT ORG.	$0.00/day	$0.00/day	$0.00/day	$0.00/day	$0.00/day	$0.00/day	$0.00/day	$0.00/day	$0.00/day	$0.00/day	$0.00/day	$0.00/day	$0.00/day
WINE TASTING	$500.00	$458.33	$416.67	$375.00	$333.33	$291.67	$250.00	$208.00	$166.67	$125.00	$500.00	$500.00	$500.00
SUNDAY SALES	$300.00	$275.00	$250.00	$225.00	$200.00	$175.00	$150.00	$125.00	$100.00	$75.00	$300.00	$300.00	$300.00
TEMPORARY	$100.00	$100.00	$100.00	$100.00	$100.00	$100.00	$100.00	$100.00	$100.00	$100.00	$100.00	$100.00	$100.00
ALCOHOL HANDLER	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00	$25.00
APPLICATION	$400.00	$400.00	$400.00	$400.00	$400.00	$400.00	$400.00	$400.00	$400.00	$400.00	$400.00	$400.00	$400.00
BUSINESS CONTINUATION	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees	25% of Applicable Fees

* Distilled Spirits (Liquor)
* Malt (Beer)
* C.O.P. (Consumed on Premise)
* P.T.G. (Packaged to Go)