



City of Duluth
Alcohol Handling Permit Application

New Permit Renewal

PERMIT FEES ARE NON-REFUNDABLE

Alcohol Permits - \$70.00 (Additional permit for another company - \$10.00) Expired Permits \$105.00

Name of Applicant: (Last), (First), (Middle)

Name of Business Establishment: Job Title:

Alias/Stage Names: Social Security #:

Home Address: City: State: Zip:

Eye Color: Height: Weight: Gender: Race:

Driver's Lic #: State Issued: Age: Date of Birth:

Home Phone #: Mobile/Cell #: Email:

If renewal, expiration date on permit: Alcohol training completion date:

Have you ever had an alcohol license or permit revoked by any jurisdiction? Yes No

\*\*List any dates, locations, and charges of ANY AND ALL ARRESTS regardless of disposition or status. If you have no prior charges/citations or arrests, write "None." ALL CRIMINAL RECORDS APPEAR ON THE BACKGROUND CHECK.

APPLICANT'S AFFIDAVIT: AUTHORIZATION FOR RELEASE

By my signature below, I hereby:

Swear or affirm that all information given is true, factual and correct to the best of my knowledge and ability. I understand that it is a FELONY to knowingly and willfully make a false, fictitious or fraudulent statement or representation to a governmental agency on this application.

Swear or affirm that I have not been convicted within the previous 5 years of a felony in GA or any crime in another state or jurisdiction which would be a felony in GA and that I have not been convicted of two (2) or more offenses of driving under the influence of alcohol within 5 years. If I have any pending charge(s), I consent to future background checks to determine my continued eligibility for holding this permit.

Swear or affirm that I am authorized to work in the United States, and authorize the City Clerk or designee to receive any criminal record information pertaining to me, which may be in the file of any criminal justice agency, for the purpose of my eligibility for receiving this alcohol handling permit as well as any future renewals of the same permit.

X Signature of Applicant:

Sworn to and subscribed before me this day of, 20.

Notary Public Signature (Stamp/Seal)

Office Use Only

Table with 4 columns: Verification of ID & SS#, Paid With (check, cash, cc, mo), Temp Exp Date, Age Verify; Permit/Handling #, Renewal Date, Alcohol Class to Attend, Type of Permit; Approved, Denied, Notes, GCIC Down.