



IMPORTANT NOTICE

Your 2016-2017 Alcoholic Beverage license expires at midnight on December 31, 2017.

Please take note that failure to have your license renewed by this date will require you to re-apply for a new license and appear before the Alcohol Beverage Licensing Board before you can serve or sell alcohol in your establishment. The earliest available meeting will be held the first Thursday in January 2018.

THIS MEANS IF YOU DO NOT RENEW BY DECEMBER 31, 2017, YOU WILL NOT BE ABLE TO SELL ALCOHOL AT ALL UNTIL THE NEW LICENSE IS ISSUED.

Any renewal application not filed on or before the last City business day **prior** to October 31, 2017 may be assessed a late filing penalty of \$250.00.

Payment in full is required with the submission of the renewal application.

No exceptions

IMPORTANT NOTICE



October 1, 2017

**CITY OF ROSWELL
NOTICE**

PLEASE USE THE ATTACHED FORMS FOR YOUR LICENSE RENEWAL TO SELL **ALCOHOLIC BEVERAGES IN THE ORIGINAL PACKAGE FOR THE CALENDAR YEAR 2018.** PLEASE FILL OUT COMPLETELY AND RETURN WITH YOUR PAYMENT.

ALL LIQUOR, WINE AND MALT BEVERAGE LICENSE HOLDERS ARE NOTIFIED THAT REQUESTS FOR RENEWALS OF LICENSES MUST BE MADE DURING THE MONTH OF OCTOBER IN ORDER TO ENSURE THAT RENEWAL REQUESTS ARE IN PROPER FORM TO BE PRESENTED TO THE ALCOHOLIC BEVERAGE LICENSE BOARD ON DECEMBER 7, 2017.

YOUR CURRENT LICENSE IS FOR THE CALENDAR YEAR AND EXPIRES DECEMBER 31, 2017.

IF THE LICENSEE FOR THIS PREMISES CHANGES, YOU MUST REAPPLY FOR THE LICENSE.

ANY OUTSTANDING EXCISE TAX OR OTHER DELINQUENT CHARGES OWED TO THE CITY MAY DELAY THE RENEWAL OF YOUR LICENSE.

PLEASE BE ADVISED THAT FAILURE TO COMPLETE THE TIPS TRAINING REQUIREMENT MAY DELAY THE RENEWAL OF YOUR LICENSE.

(IF YOU ARE **NOT** RENEWING YOUR LICENSE, RETURN ONLY THE "**NON RENEWAL AFFIDAVIT**" INCLUDED IN THIS PACKAGE.)

RETURN BY OCTOBER 31, 2017

AFTER THIS DATE ADD \$250.00 LATE FEE

ATTACH COPY OF YOUR MOST RECENT STATE LICENSE AND YOUR TIPS CERTIFICATE IF YOU COMPLETED THE TRAINING IN 2017

PLEASE READ THE UPDATED ALCOHOL ORDINANCE AT:

<http://www.roswellgov.com>



CITY OF ROSWELL
RENEWAL APPLICATION
SALE IN ORIGINAL PACKAGE
FOR CALENDAR YEAR 2018

Name of business: _____

Name of licensee: _____

State License Number _____

Date: _____

	License Fee Enclosed
<input type="checkbox"/> Sale of Distilled Spirits (Liquor) in Original Package	\$2,000.00
<input type="checkbox"/> Sale of Wine in Original Package	\$ 900.00
<input type="checkbox"/> Sale of Beer in Original Package	\$ 900.00

*Check applicable license

Amount due: _____
For Calendar Year 2018

Full name and legal address of person making Renewal Application (Licensee):

Name:

Address:

Resident of: _____(City) _____(County)

Trade name of Business: _____

Location of Business: _____

Telephone No.: Business _____ Home: _____

Corporate or Partnership Owner of Business _____

Name

RETURN BY OCTOBER 31, 2017

AFTER THIS DATE ADD \$250.00 LATE FEE



STATE OF GEORGIA

COUNTY OF FULTON

ALCOHOLIC BEVERAGE LICENSE RENEWAL AFFIDAVIT - 2018

Personally appeared before me _____

Licensee - Print Name

who, after being duly sworn, says the following:

There have been no changes of any type in ownership of the alcoholic beverage, wine or malt beverage outlet shown on my original application. There have been no changes in any information and data contained in and furnished with my original application. I have not in the past ten (10) years been convicted of any municipal, county, State or Federal offense involving any alcoholic beverage law, ordinance and/or regulation.

Further, I have not pleaded nolo contendere to any of the above offenses. I am familiar with all laws, rules and regulations of the State of Georgia and all ordinances of the City of Roswell covering the operation of the alcoholic beverage, wine and/or beer outlet I will operate under this renewal.

I swear that all the information contained in the original application is true and I understand that such application is made a part of this renewal application and the renewal is based upon the information contained in the original application. I understand that a false statement in the original application and/or this affidavit will void the application and make me liable to prosecution for perjury under the laws of Georgia.

Licensee's Signature

Sworn to and subscribed to before me
this _____ day of _____, 2017.

Notary Public

My commission expires:

(SEAL)

RETURN BY OCTOBER 31, 2017



ALCOHOLIC BEVERAGE LICENSE 2018

Name of Establishment _____

Email(s) for Contact: _____

Web site for Establishment _____

Current Telephone Number _____



2017 - 2018

CITY OF ROSWELL TAX DEPARTMENT
38 HILL STREET
ROSWELL, GEORGIA 30075
770-641-3759

WHOLESALE DISTRIBUTORS / SUPPLIERS DELIVERING ALCOHOLIC BEVERAGES
TO THIS PREMISES ARE:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Business Name

Licensee signature



Name of Establishment _____

Licensee _____

Check Enclosed _____ Check # _____

License Due _____

Amount _____

Pay by Credit Card

Name on Credit Card _____

Credit Card Number _____

Type of Card (Visa, MasterCard, American Express) _____

Expiration Date _____

Signature _____

Phone number _____

Email _____



Return this document only if you are NOT renewing your alcoholic beverage license.

**ALCOHOLIC BEVERAGE LICENSE
NON-RENEWAL AFFIDAVIT**

2018

Name and address of Alcoholic Beverage Establishment:

Personally appeared before me _____
Licensee - Print Name
who, after being duly sworn, says the following:

This verifies my intent not to renew the ALCOHOLIC BEVERAGE LICENSE for
the
year 2018 for _____
_____,
Name of Business

and I affirm that I will not be serving or selling alcoholic beverages at this location.

Licensee's Signature

Sworn to and subscribed before me
this ___ day of _____, 201__.

Notary Public

My commission expires:

(SEAL)



**NOTICE & AFFIDAVIT
TIPS (Training Intervention Procedures)**

Chapter 3, Article 3.2, Section 3.2.10 of the Alcoholic Beverage Ordinance of the City of Roswell requires certification of the licensee of a restaurant, convenience store, grocery store and package store by attendance at TIPS (Training Intervention Procedures Program) or approved alternative program that shall be verified and signed off by the Chief of Police.

The applicant shall have 6 months from the date of the granting of the license to complete such training and submit certification to the Alcohol Beverage Licensing Board.

Licensees who have had TIPS training and have received a Certificate of Training from the Roswell Police Department need not repeat the class.

Dates and times set for the year 2018 TIPS classes are:

January 18, 2018	9:00 a.m. - 4:00 p.m.
April 19, 2018	9:00 a.m. - 4:00 p.m.
July 12, 2018	9:00 a.m. - 4:00 p.m.
November 15, 2018	9:00 a.m. - 4:00 p.m.

Registration will be limited to 24 people per session and will be conducted on a first-come, first-serve basis. Please call 770-640-4491 to register.

**The classes will be held at the Roswell-Alpharetta Public Safety Training Center – 770-641-3731 .
11565 Maxwell Road
Alpharetta, GA. 30004**

Approved alternative programs are:

Bar Code – Serving Alcohol Responsibly
1-877-216-3869

Training Institute for Responsible Vendors
Contact: Scott Wiatric
404-531-9237, 404-452-9237

Evindi, Inc.
678-336-7207
klstumpe@evindi.com

On-line Training
www.learn2serve.com

ServSafe: www.servsafe.com

AFFIDAVIT

I have read this notice and understand that I am required to present a certificate signed by the Roswell Chief of Police that I have satisfied this training requirement within six (6) months of the granting of the alcoholic beverage license, or my alcoholic beverage license shall be revoked.

Licensee (sign)

Print Name

Name of Business

**ROSWELL POLICE DEPARTMENT
CRIMINAL HISTORY RELEASE FORM FOR ALCOHOL LICENSEE
RENEWAL**

The following information is required in order to receive any criminal history information pertaining to you that is contained in the files of the State of Georgia. Your record will be checked using the Georgia Crime Information Center (GCIC) database and will be for the State of Georgia only. If no criminal history is on file, this form will be stamped stating so. If criminal history is on file with the State of Georgia, a copy will be printed for Chief Grant to review. A government issued ID will be required.

PLEASE PRINT CLEARLY AND FILL IN ALL SPACES

NAME: Last: _____ First: _____ Middle: _____

MAIDEN and/or ANY PREVIOUS LAST NAMES: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

DATE OF BIRTH: _____ SEX: _____ SOCIAL SECURITY #: _____

NAME OF BUSINESS FOR THIS BACKGROUND: _____

BUSINESS ADDRESS: _____

BUSINESS PHONE: _____ YOUR PHONE: _____

I hereby authorize the City of Roswell to obtain my criminal history for my Alcohol Beverage License Renewal.

- Please enclose a copy of your driver's license.

Your Signature

Date Signed