City of Camilla P.O. Box 328 Camilla, Georgia 31730



Phone: (229) 336-2207 Fax: (229) 330-2230 www.camillaga.net

LIQUOR POURING LICENSE APPLICATION

Select One:		Complete:	
LIQUOR POURING LICENSE (NEW)		License Year:	
☐ LIQUOR POURING LICENSE (RENEWAL)		Previous License #:	
		License Fee: <u>\$1,500.00</u>	
1. BUSINESS 1	1. BUSINESS NAME:		
Doing Business As (if applicable):			
BUSINESS PHONE:		TAX ID #:	
PHYSICAL ADDRESS OF BUSINESS:			
2. BUSINESS (2. BUSINESS OWNER:		
HOME ADD	RESS:		
TELEPHON	E:	SSN:	
3. BUSINESS MANAGER:			
TELEPHONE:SSN:_			
4. ALARM COMPANY (if applicable):			
ADDRESS:			
TELEPHONE:			
5. HAVE YOU HAD A LIQUOR POURING LICENSE DENIED and/or REVOKED? ☐ YES ☐ NO			
	ADDITIONAL APPLICA	ANT INFORMATION:	
lew Applications: Manager(s) require approval by the City of Camilla City Council			
Application Renewal: New manager(s) required to have a background check and application Renewal: Council			
Identification: Copy of driver's license/valid picture identific with application		entification and birth certificate/citizenship papers submitted	
I CERTIFY I HAVE	EXAMINED THE INFORMATION	N CONTAINED IN THIS APPLICATION AND IT IS	
TRUE AND ACCUI	RATE TO THE BEST OF MY KNO	WLEDGE.	
APPLICANT SIGNATURE		DATE	