

RENEWAL APPLICATION <u>ALCOHOLIC BEVERAGE LICENSE (ABC)</u>

| Date: | | | |
|--|---|--|--|
| Name and Add | dress of Business (Premises): | | |
| | | Phone: | |
| APPLICATIO | N FOR: | Annual Fee | |
| that the informations that the information that the information of the information that the information that the information that the information in the information that the information in the informatio | Liquor, Package Sales Liquor, Consumption on Premises Beer, Package Sales Beer, Consumption on Premises Wine, Package Sales Wine, Consumption on Premises Beer/Wine Sales-Off Site Sunday Sales Complementary Drinks T, under penalty of license revocation for ation contained in the ABC License apple at the office of City Clerk in Toccoa, Con respect to ownership of the business and that I am familiar with all City of Toccoale of alcoholic beverages, and further the ules or regulations could result in the revolutes. | ication of the above named deorgia, is substantially d licensee qualifications. ba laws, rules and regulations at I understand that any violation | |
| Owner's | Signature | Manager's Name | |
| | | | |
| Owner's Address | | Manager's Address | |

This form, along with the appropriate fee and/or bonds and all other required documentations, must be submitted to the City Clerk, City of Toccoa, P.O. Box 579, Toccoa, GA 30577