

CITY OF ALBANY
ALCOHOL LICENSE RENEWAL APPLICATION

240 Pine Avenue, Suite 150
Albany, Georgia 31701

Request Modification

Application Date: _____

Renewal Year: _____

Business Name: _____

License Number: _____

Business Address: _____ Business Phone Number: _____

Name of Licensee: _____ Licensee's Email: _____

License Type:

Consumption

- Beer \$600
- Wine \$410
- Liquor \$3,000
- ALL \$4,100

Package

- Beer \$600
- Wine \$410
- Liquor \$3,000
- ALL \$3,775

Manufacturing

- Beer \$3,000
- Wine \$1000
- Liquor \$3,000

Wholesale

- Beer \$750
- Wine \$500
- Liquor \$3000

\$ _____ + \$50 = \$ _____

Alcohol Fee + License Fee = Total amount

During the previous twelve months have you, the licensee, or any other person having any interest in the business for which this application has been made, ever been detained, arrested, indicted, or convicted for any offense by any state, county, city, federal or foreign officer, or any other governmental authority? __ yes __ no

If yes, Explain:

I declare under penalty of perjury that this statement has been examined by me and to the best of my knowledge and belief is true and correct.

SIGNATURE*

TITLE

DATE

* Signature must be the licensee or managing representative for the establishment.

The business license for this establishment must be renewed prior to receiving your alcohol license. Both licenses must be renewed before the 31st of January. The standard mailing address is City of Albany, Treasury Division, P. O. Box 447 Albany, Georgia 31702, 229-431-2118. Checks should be made payable to the City of Albany.

SWORN TO AND DESCRIBED BEFORE ME THIS

_____ DAY OF _____ 20_____.

NOTARY PUBLIC