

**CITY OF JENKINSBURG  
ALCOHOLIC BEVERAGE APPLICATION  
APPLICATION/ LICENSE FEE \$750.00**

1. Check the Type License  
for Renewal:

- Retail (Package)
- Consumption on Premises
- Wholesaler

2. Check All Beverages You  
Intend to Sell:

- Malt Beverage
- Wine
- Distilled Spirits

3. Business Name: \_\_\_\_\_

4. Location: \_\_\_\_\_

5. During the last year, has any change been made in your business ownership?

Yes  No. If so, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. During the last year, has any change been made in persons participating in your  
business, whether as owner, officer, manager, or employees?  Yes  No.

If so, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOTE: A Schedule A must be completed for each new person for which such  
Schedule A would be required under a new license.

7. During the last year, have you acquired or disposed of any other business involving  
alcoholic beverages?  Yes  No. If so, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

8. During the last year, have you or anyone associated with your business as owner,  
officer, manager, or employee, been cited for, received notice of, or been warned  
of any conduct which constitutes a violation of any federal or state law or  
administrative regulation or local ordinance regulating alcoholic beverages?

Yes  No. If so, please explain \_\_\_\_\_  
\_\_\_\_\_

9. Please provide detailed information as to any information not already disclosed which is different than that provided on your original alcoholic beverage application:

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I hereby certify that I have reviewed the current City of Jenkinsburg Alcoholic Beverage Ordinance and all information supplied in this renewal application for an Alcoholic Beverage License. I further certify that I remain qualified to hold an Alcoholic Beverage License in the City of Jenkinsburg and that all information contained in this application and its supporting documents is true and accurate.

This, the \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
On behalf of \_\_\_\_\_

Personally appeared before me  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public