



(706) 754-4216 P.O. Box 21 Clarkesville, GA 30523

To all applicants for a License to Serve Alcohol:

In the attached packet you are receiving the paperwork you must complete in order to be issued a server's permit from the City of Clarkesville.

1. Application: Must be filled out completely and have attached a copy of your picture Identification. City Hall personnel can make a copy of your identification.
2. Affidavit Verifying Status form: This form is required by the Department of Homeland Security. City Hall personnel can notarize the form for you.
3. Consent for Criminal History Records: If there are charges against you that your Criminal History report does not show the disposition of, then you will be required to go to the Court that heard your case and bring the City proof of the disposition of the case. The City personnel can notarize this document for you also.
4. Take the enclosed letter to the Sheriff's Dept. and have them run your fingerprints. The Clarkesville Police Dept. will pick up the fingerprint records from the Sheriff's Dept.

When you have completed these forms, you will need to pay the required \$50.00 fee.

When the City receives your fingerprint and criminal history report, if there are no adverse findings the City will then issue your server's permit. The server's permit is good for 3 years from the issue date at any business in the City limits of Clarkesville.

Thank you  
Licensing Dept.

*A Gentle ~ Friendly Place*

CITY OF CLARKESVILLE  
APPLICATION FOR  
ALCOHOLIC BEVERAGE SERVER PERMIT

DATE \_\_\_\_\_ PERMIT NUMBER ISSUED \_\_\_\_\_

NAME \_\_\_\_\_  
LAST FIRST MIDDLE

RACE \_\_\_\_\_ SEX \_\_\_\_\_ HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_

EYE COLOR \_\_\_\_\_ HAIR COLOR \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

PREVIOUS NAMES USED \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ MOBILE PHONE \_\_\_\_\_

CURRENT EMPLOYER \_\_\_\_\_

PREVIOUS CITY PERMIT ISSUED: YES \_\_\_\_\_ NO \_\_\_\_\_

PREVIOUS CITY PERMIT REVOKED: YES \_\_\_\_\_ NO \_\_\_\_\_

TO THE BEST OF MY KNOWLEDGE, ALL OF THE ABOVE INFORMATION IS TRUE AND CORRECT.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

APPROVED FOR ISSUANCE BY THE CITY:  
\_\_\_\_\_

(AFFIX COPY OF DRIVER'S LICENSE HERE)

**O.C.G.A. § 50-36-1(e)(2) Affidavit**

By executing this affidavit under oath, as an applicant for a(n) \_\_\_\_\_  
[*type of public benefit*], as referenced in O.C.G.A. § 50-36-1, from  
\_\_\_\_\_ [name of government entity], the undersigned applicant  
verifies one of the following with respect to my application for a public benefit:

- 1) \_\_\_\_\_ I am a United States citizen.
- 2) \_\_\_\_\_ I am a legal permanent resident of the United States.
- 3) \_\_\_\_\_ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: \_\_\_\_\_.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

\_\_\_\_\_.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in \_\_\_\_\_ (city), \_\_\_\_\_ (state).

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name of Applicant

SUBSCRIBED AND SWORN  
BEFORE ME ON THIS THE  
\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC  
My Commission Expires:

Name-Based Criminal History Record Information Consent/Inquiry Form

I hereby give consent for the \_\_\_\_\_ to conduct an  
Criminal Justice Agency  
 inquiry and receive any Georgia criminal history record information pertaining to me which may be contained in the files of any state or local criminal justice agency in Georgia.

Full Name (print):			
Address			
Sex	Race	Date of Birth	Social Security Number

This authorization is valid for 90/180/\_\_\_\_\_ (circle one) days from date of signature.

I, \_\_\_\_\_ give consent to the above named to perform periodic criminal history background checks for the duration of my employment with this company.

\_\_\_\_\_  
 Signature Date

Date of inquiry: \_\_\_\_\_ Time of inquiry: \_\_\_\_\_ Operator's initials: \_\_\_\_\_  
 Purpose Code used: (check one)

<input type="checkbox"/>	Employment (E) – Provides <i>Georgia</i> Criminal History Record Information
<input type="checkbox"/>	Employment with Mentally Disabled (M) - Provides <i>Georgia</i> Criminal History Record Information
<input type="checkbox"/>	Employment with Elder Care (N) - Provides <i>Georgia</i> Criminal History Record Information
<input type="checkbox"/>	Employment with Children (W) - Provides <i>Georgia</i> Criminal History Record Information
<input type="checkbox"/>	Public Records (P) – Provides <i>Georgia Felony Convictions</i> Only

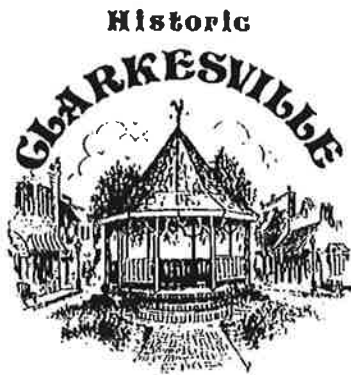
The inquiry resulted in the following: (check all that apply)

<input type="checkbox"/>	No Georgia CHRI results available.
<input type="checkbox"/>	Georgia CHRI attached/released.

<input type="checkbox"/>	No NCIC/GCIC Warrant results available.
<input type="checkbox"/>	Possible NCIC/GCIC Warrant. Contact Agency listed below.
Wanting Agency Name:	
Agency Telephone:	

\_\_\_\_\_  
 Agency Designee Signature and Title Date

Telephone:  
706-754-4216



P.O. Box 21  
Clarkesville, GA 30523

**GEORGIA**

November 6, 2012

Habersham County Sheriff's Department:

Please perform a finger print criminal background check for the bearer of this letter. The City of Clarkesville requires this for renewal of an Alcoholic Beverage License. Please use the City's ORI number for billing. The results should be forwarded to Police Chief Brad Barrett.

Thank you,

Glenda Smith, City Clerk

**A Gentle-Friendly Place**