

MANAGER'S NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

COMPLETE THIS QUESTION ONLY IF APPLICATION IS FOR **ON PREMISE CONSUMPTION**
LIST THE NAME AND ADDRESS OF ALL PERSONS EXPECTED TO HANDLE, SERVE OR
SELL ALCOHOLIC BEVERAGES. IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL PAGES.

I, _____, being a person of good moral character, hereby
Make application for a license to engage in the sale of alcoholic beverages in Miller County, Georgia. I also
State that I am a citizen of the United States or an alien lawfully admitted for permanent residence. I have
never been convicted of a felony or misdemeanor involving moral turpitude within ten years of the date of
this application. I have not had revoked, for cause, any license issued to me by the county of Miller, State of
Georgia, or any other state to sell alcoholic beverages of any kind. I understand and agree that the license which
I am applying for shall not, if granted, become a civil contract between myself and Miller County, but shall operate
purely as a permit to sell alcoholic beverages and that said license may be revoked by the Commissioners at any
time. I further understand and agree that any violations of any of the regulations of Miller County concerning
the sale of alcoholic beverages within the unincorporated areas of the county shall subject my license to immediate
revocation. ONLY BEER AND WINE WILL BE SERVED.

By signing this application I swear or affirm that all information contained herein is true and accurate. I further
acknowledge that I have received and read a copy of the Ordinance of Miller County, Georgia regulating the
sale of alcohol in the unincorporated areas of the county.

WITNESS MY HAND AND SEAL THIS _____ DAY OF _____.

APPLICANT

Sworn to and subscribed before me

NOTARY PUBLIC