OFF PREMISE ALCOHOL EVENT APPLICATION AND PERMIT

In accordance with Section 6-114 of the Coweta County Code of Ordinances concerning off site sale and consumption permits to serve wine, and/or beer and malt beverages, and/or distilled spirits, permission is hereby granted for the following event:

Type of Permit: ☐ Distilled Spirits ☐ Malt Beverage ☐ Wine

Name of Event Facility: _____

Address: _____

Date and Time of event: _____

Type of Event: _____

BUSINESS / ALCOHOL LICENSE INFORMATION

Business Name: _____

Street: _____

City, State, Zip: _____

Full Name of Applicant: _____

Drivers License # or other form of picture identification: _____

Contact Person: _____ Telephone #: _____

Alcohol License #: _____ Expires: _____

Business License #: _____ Expires: _____

Issued By: _____

State License #: _____ Expires: _____

In Accordance with the alcoholic beverage ordinance, Coweta County, Georgia, I, the undersigned, certify that I am the person duly authorized by the business herein named to file this application / permit, including the accompanying licenses and that the information contained in this document is true, correct and complete. I understand and will comply with all local ordinances, state laws and regulations governing alcoholic beverages. By signature below, I do solemnly swear, subject to criminal penalties for false swearing, that information contained in the application is true and no false or fraudulent information is made herein to procure the granting of this permit.

_____ _____

Applicant Signature Date

OFFICE USE ONLY

_____

Coweta County Alcohol License Division

FEE: $35.00 / COLLECTED: _____

LICENSE ATTACHED: _____

DATE PERMIT ISSUED: _____