

# **Social Circle Police Department**



138 E. Hightower Trail Social Circle, Georgia 30025 Office: (770) 464-2366 | Fax: (770) 464-4088 | www.socialcirclega.gov

### Finger Printing Form - Alcohol Applicant

#### Dear Applicant:

In accordance with the provision of the City of Social Circle Ordinance Number 2021-3, each person desiring to serve or pour alcoholic beverages for on premise consumption within the city shall first make an application in person to the Social Circle Police Department to obtain its own individual permit to carry on such activity.

Section 1, as it relates to 10-85 Employees - subsection (b) no licensee shall employ a person who has been convicted of or plead nolo contendere to a felony, misdemeanor involving moral turpitude, or any crime relating to the sale or use of alcohol in this state within ten (10) years preceding the employees employment.

- (c) All employees who are in volved in the pouring and/or dispensing of alcoholic beverages for a licensee holding a pouring license shall each year file an application and obtain an annual permit to dispense and/or sell alcoholic beverages within 30 days after becoming an employee of an establishment licensed under this chapter.
- (1) A separate permit shall be required for each separate business location where the employee serves alcohol.

Complete the enclosed application for the Employee Alcohol Pouring Permit and return it to the Social Circle Police Department with the following:

• State issued photo identification

Chief Jason Guest

- Fingerprint based background check completed at Social Circle Police Department The total charge for this is \$63.25 CASH (\$43.25 for fingerprinting and \$20.00 application fee and pouring card).
- Fingerprints must be submitted under the City of Social Circle ORI GA923328Z

Contact the Social Circle Police Department	: with any questions	regarding this	application
process.			

Regards,			



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NAME					
NAME(LAST)	(FIRST	)	(MIDDLE)	)	(MADIEN)
HOME ADDRESS	(NUMBER & STREET	(CIT	Y)	(STATE)	(ZIP)
		, (-	,	(- ,	,
SSN		PHONE NU	IMBER		
DATE EMPLOYED			DATE OF BIR	RTH	
STATE OF BIRTH	h	HEIGHT	WEIGHT	AGE	<u> </u>
HAIR	EYES	RACE_		SEX	
DRIVER'S LICENS	SE NUMBER		STATE	<u> </u>	
EMPLOYER'S NA	ME				
EMPLOYER'S AD	DRESS				
EMPLOYER'S TEL	EPHONE_NUMBER				
MANAGER'S NAM	ΛE				
BUSINESS NAME					



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Upon approval of this application and issuance of a permit, it is understood that the permit <u>must</u> be posted on the premises when on duty and the same <u>must</u> be exhibited to any duly authorized law enforcement officer or citizen upon request, and that said permit is good for one year from the date of application.

NOTE: I understand that furnishing false or incomplete information will be grounds for denial of this permit. There is <u>no refund</u> of the fee that accompanies this application if, for any reason, it is denied.

State of Ge	orgia, Walton County,	
the foregoi courer of a	ng question in this appl lcoholic beverages with	, applicant, do solemnly swear, subject to ing, that the statements and answers made by me to ication for a City of Social Circle permit as a server or in this city are true, and no false or fraudulent ring to procure the granting of such license.
to a felony, use of alcol of Social Ci fingerprint	misdemeanor involving hol in this state within to rcle and the Social Circ based criminal history copy of privacy rights a	I have not been convicted of or plead nolo contendere g moral turpitude, or any crime related to the sale or ten (10) years. By signing below, I authorize the City le Police Department the authority to conduct a background check. I further affirm that I have been and the privacy rights statement for non-criminal
Applicant's	Signature (Full Name)	
		FOR OFFICIAL USE
oersonnaly understood	all statements and ans	, applicant, is wen sufficient identification. There he/she knew and swers made therein, and under oath actually at said statement and answers are true.
This	day of	, 20
		 Notary Public Signature