"Preserving Our Heritage, Shaping Our Future"

Historic Home of Gravel Hill Est. 1815

Paul Hawkins, MAYOR



City Hall

156 Old Sunbury Rd. Flemington, GA 31313

912.877.3223 cityhall@cityofflemington.org

ALCOHOL SUNDAY SALES LICENSE **APPLICATION & AFFADAVIT**

CLASS I – HOTELS (MARKET) **CLASS V – RETAIL & PACKAGE STORES** OFF PREMISE CONSUMPTION

APPLICATION TYPE:

□ NEW

□ RENEWAL

The Flemington code permits a hotel market, retail, or package store to sell alcoholic beverages for off-premise consumption on Sunday who holds a city business occupational tax certificate ("OTC"). To be authorized to dispense or sell alcoholic beverages on Sunday, your establishment must:

- a) Be licensed by the city to sell beer, wine, or liquor off premise.
- b) Display on your premises a current city alcoholic beverage license document which indicates that Sunday sales are permitted.

APPLICATION

License Year: Today's Date: _____

NAME OF BUSINESS:

BUSINESS LOCATION:

PHONE: APPLICANT NAME:

AFFIDAVIT

Do you understand, acknowledge, and agree that if the City should call upon you to provide documentary evidence of any claim made in this affidavit, you will provide such evidence promptly and completely, including financial records in sufficient detail to prove that the request sales income is correct?

If yes, initial here:

Do you affirm that you are familiar with and understand City ordinance and Georgia State law on Sunday sales of alcoholic beverages, and that you intend to comply fully with the law?

If yes, initial here:

TAKE NOTICE



ANY FALSE STATEMENT MADE ON THIS AFFIDAVIT SHALL BE GROUNDS FOR:

Revocation of your permit to sell alcoholic beverages on Sunday;

- Revocation of your City license to sell alcoholic beverages at any time;
- Action to prosecute you under the law for swearing to false information.

I, ______, swear all above information is given under oath, willfully, knowingly, and absolutely, and is hereby sweorn to be true, correct, and complete, under penalty for false swearing , as provided by law.

Applicant's Signature (full name)

NOTARY:

I hereby certify that ______ signed his/her/their name to the foregoing application and acknowledges that he/she/they knew and understood all statements and answers made therein and under oath actually administered by me has sworn that the statements and answers are true.

Sworn and scribed before me this _____ day of _____, 20_____,

State of _____ County of _____ City of _____

Notary	Commission Expires	
Seal:		