

20121

CITY OF MORROW  
Alcoholic Beverage Sell or Dispense Application

I request a permit to sell or dispense alcoholic beverages in the City of Morrow as prescribed in title nine of the City of Morrow Code of Ordinance. I hereby authorized the City of Morrow Police Department to receive any criminal history record information pertaining to me, which may be in the files of any state or local criminal justice agency.

**Please provide Driver's License/ID card**

PLEASE PRINT

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip Code

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State \_\_\_\_\_ Telephone #: \_\_\_\_\_

Employer: \_\_\_\_\_

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

DO NOT WRITE BELOW THIS LINE

Criminal History on file: Yes \_\_\_\_\_ No \_\_\_\_\_ Checked by: \_\_\_\_\_

Temporary Permit Expires \_\_\_\_\_

Cut along dotted line

**TEMPORARY PERMIT**

\_\_\_\_\_ is hereby granted a temporary permit to sell or dispense alcoholic beverages in the City of Morrow. This permit is subject to investigation by the Morrow Police Department and may be retrieved by any member of said department within three working days from the date of issuance.

*This permit remains the property of the City of Morrow*

Permit Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**AFFIDAVIT VERIFYING STATUS  
FOR COUNTY PUBLIC BENEFIT APPLICATION**

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Permit Number: \_\_\_\_\_

Please complete and return this affidavit with your permit application

By executing this affidavit under oath, as an applicant for a City of Morrow, Georgia public benefit, as referenced in O.C.G.A. § 50-36-1, I state the following with respect to my application for a City of Morrow Permit:

\_\_\_\_\_ (Alcohol Permit, Driver/Taxi Permit, other) Print the name of the benefit(s) applied for.

NAME: \_\_\_\_\_  
(name of person applying for business, corporation, partnership or other private entity)

I hereby swear and affirm that (please check one):

\_\_\_\_\_ I am a United States citizen.

\_\_\_\_\_ I am a Legal Permanent Resident; I-551 card# \_\_\_\_\_.

\_\_\_\_\_ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States, with an alien number issued by a Federal Agency (Department of Immigration, Department of Homeland Security).

Alien/USCIS Number for non-citizens\* \_\_\_\_\_

The undersigned applicant also hereby verifies that he or she is **18 years of age or older** and provided at least one secure and verifiable document, as required by O. C. G. A 50-26-1 (e)(l), with this affidavit. The secure documents 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 Code Section 16-10-20 of the Official Code of Georgia.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name

Sworn to and subscribed before me,  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public  
My commission expires \_\_\_\_\_

\_\_\_\_\_  
(SEAL)