APPLICANT INFORMATION

_____ 1. Copy of state application, personnel statement and certificate of residence.
_____ 2. Attached signed beverage bonds.
_____ 3. Current photograph of applicant.
_____ 4. Fingerprints of applicant
_____ 5. Clearance letter from Laurens County Superior Court.
_____ 6. Clearance letter from Laurens County Probate Court.

LOCATION INFORMATION

_____ 7. Affidavit of distance requirement.
_____ 8. Proof of zoning compliance.
_____ 9. Legal or lease description of property.
_____10. Affidavit of newspaper advertising.
_____11. A limited inspection of the structure located at above business address has been performed and the structure (appears/ does not appear) to be in suitable condition for occupancy.

_____ _____
Building Inspection Dept. *Date*

_____13. The Fire Department has inspected the above location and hereby (approves / disapproves) it for use as a _____.

_____ _____
Fire Department *Date*

_____14. Attach items 1-11 to completed application and return to Chief of Police, City of East Dublin.

NOTE: *APPLICATION FOR TRANSFER OF OWNERSHIP OR MANAGEMENT SHOULD COMPLETE 1 - 7. APPLICATION FOR TRANSFER OF LOCATION SHOULD COMPLETE ITEMS 8 - 13.*

I _____, APPLICANT DO SOLEMNLY SWEAR SUBJECT TO CRIMINAL PENALTIES FOR FALSE SWEARING, THAT THE STATEMENTS AND ANSWERS MADE BY ME TO THE FOREGOING QUESTIONS IN THIS APPLICATION ARE TRUE, AND NO FALSE OR FRAUDLENT STATEMENTS OR ANSWERS ARE MADE HEREIN TO PROCURE THE GRANTING OF SUCH LICENSE.

_____ _____
Signature of Applicant *Date*