

7. U.S. CITIZEN LEGAL ALIEN OTHER, EXPLAIN:

8. SINGLE MARRIED WIDOWED
 DIVORCED SEPARATED

IF MARRIED OR SEPARATED, COMPLETE BELOW INFORMATION:

FULL NAME OF SPOUSE: _____ SSN: _____

MAIDEN NAME: _____ PLACE OF BIRTH: _____

DATE OF BIRTH: _____ NAME AND ADDRESS OF SPOUSE'S EMPLOYER: _____

9. STATE ANY OTHER NAMES WHICH YOU HAVE USED: MAIDEN NAME,
 NAMES BY FORMER MARRIAGES, FORMER NAMES CHANGED LEGALLY OR
 OTHERWISE, ALIASES, NICKNAMES, ETC. SPECIFY WHICH, SHOW DATES,
 ETC. _____

10. GIVE NAME AND ADDRESSES OF ALL CHILDREN AND STEPCHILDREN
(REGARDLESS OF AGE):

FULL NAME ADDRESS AGE PLACE OF BIRTH

11. GIVE NAMES AND ADDRESSES OF ALL IMMEDIATE LIVING RELATIVES:

NAME ADDRESS AGE PLACE OF BIRTH

FATHER

MOTHER

BROTHER/SISTER

FATHER-IN-LAW

MOTHER-IN-LAW

12. EMPLOYMENT RECORD FOR THE PAST TEN YEARS: (GIVE THE MOST RECENT EXPERIENCE FIRST)

<u>From</u> <u>mo/yr</u>	<u>To</u> <u>mo/yr</u>	<u>Occupation and</u> <u>Duties performed</u>	<u>Salaries</u> <u>Received</u>	<u>Employer</u>	<u>Reason for</u> <u>leaving</u>
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13. LIST IN REVERSE CHRONOLOGICAL ORDER ALL OF YOUR RESIDENCES FOR THE PAST TEN YEARS:

<u>From</u>	<u>To</u>	<u>Street</u>	<u>City</u>	<u>State</u>
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14. DO YOU HAVE ANY FINANCIAL INTEREST, OR ARE YOU EMPLOYED IN ANY OTHER WHOLESALE OR RETAIL BUSINESS ENGAGED IN DISTILLING, BOTTLING, RECTIFYING OR SELLING ALCOHOLIC BEVERAGES? _____

IF YOUR ANSWER IS YES TO NUMBER 14, GIVE NAMES AND LOCATIONS AND AMOUNT OF INTEREST IN EACH: _____

15. HAVE YOU EVER HAD ANY FINANCIAL INTEREST IN AN ALCOHOLIC BEVERAGE BUSINESS WHICH WAS DENIED A LICENSE? _____

IF SO, GIVE DETAILS: _____

16. HAS ANY ALCOHOLIC BEVERAGE BUSINESS IN WHICH YOU HOLD, OR HAVE HELD, ANY FINANCIAL INTEREST OF, OR EMPLOYED, OR HAVE BEEN EMPLOYED, EVER BEEN CITED FOR ANY VIOLATION OF THE RULES AND REGULATIONS OF THE STATE REVENUE COMMISSIONER RELATING TO THE SALE AND DISTRIBUTION OF ALCOHOLIC BEVERAGES? _____

IF SO, GIVE DETAILS: _____

16(CONT). _____

17. IF DURING THE PAST TEN YEARS YOU HAVE BOUGHT OR SOLD ANY ALCOHOLIC BUSINESS, GIVE DETAILS. (DATE, LICENSE NUMBER, PERSONS AND CONSIDERATIONS INVOLVED): _____

18. HAVE YOU EVER BEEN DENIED BOND BY A COMMERCIAL SECURITY COMPANY? _____

IF SO, GIVE DETAILS: _____

19. ARE YOU A REGISTERED VOTER? _____ IN WHAT STATE? _____

IN WHAT COUNTY? _____

20. HAVE YOU EVER BEEN ARRESTED, OR HELD BY FEDERAL, STATE OR OTHER LAW ENFORCEMENT AUTHORITIES, FOR ANY VIOLATION OF ANY FEDERAL LAW, STATE LAW, COUNTY OR MUNICIPAL LAW, REGULATION OR ORDINANCES? (Do not include traffic violations. All other charges must be included even if they were dismissed. Give reason charged or held, date, place where charged and disposition. If no arrest, write no arrest. After last arrest is listed, please write no other arrest.)

1. _____
2. _____
3. _____
4. _____

21. LIST BELOW FOUR REFERENCES (PERSONAL AND BUSINESS). GIVE COMPLETE ADDRESS AND PHONE NUMBER INCLUDING AREA CODE. IF GIVING A BUSINESS REFERENCE, NAME A PERSON AT THAT LOCATION TO BE CONTACTED. DO NOT INCLUDE RELATIVES OR EMPLOYERS OR FELLOW EMPLOYEES OF PARTICULAR BUSINESS.

1. _____

2. _____

21 (CONT).

3. _____

4. _____

22. HAVE YOU HAD ANY LICENSE UNDER THE REGULATORY POWERS OF GWINNETT COUNTY DENIED, SUSPENDED OR REVOKED WITHIN TWO (2) YEARS PRIOR TO THE FILING OF THIS APPLICATION? _____ IF SO, GIVE DETAILS: _____

23. ATTACH PHOTOGRAPH (FRONT VIEW) TAKEN WITHIN THE PAST YEAR.

(Attach here)

NOTE: Before signing this statement, check all answers and explanations to see that you have answered all questions fully and correctly. This statement is to be executed under oath and subject to the penalties of false swearing, and it includes all attachments submitted herewith.

STATE OF GEORGIA, GWINNETT COUNTY.

I, _____, DO SOLEMNLY SWEAR, SUBJECT TO THE PENALTIES OF FALSE SWEARING, THAT THE STATEMENTS AND ANSWERS MADE BY ME AS THE APPLICANT IN THE FOREGOING PERSONNEL STATEMENT ARE TRUE AND CORRECT.

APPLICANT'S SIGNATURE

I HEREBY CERTIFY THAT _____ SIGNED HIS/HER NAME TO THE FOREGOING APPLICATION STATING THAT HE/SHE KNEW AND UNDERSTOOD ALL STATEMENTS AND ANSWERS MADE THEREIN, AND, UNDER OATH ACTUALLY ADMINISTERED BY ME, HAS SWORN THAT SAID STATEMENTS AND ANSWERS ARE TRUE AND CORRECT.

THIS _____ DAY OF _____, 20_____.

NOTARY PUBLIC

(SEAL)