ROCKDALE COUNTY PLANNING AND DEVELOPMENT
Alcoholic Beverage Handling Permit

SUBMIT AND RETURN TO PLANNING & DEVELOPMENT:

☐ Completed application form
☐ Affidavit Verifying Citizenship Status form
☐ Georgia’s driver’s license or Georgia ID
☐ Total P&D Fees ($111.00 check or money order made payable to Rockdale County, credit card, or exact cash)
   -Fingerprinting fee (one-time fee $41.00)
   -Permit Fee (annually $10.00)
   -RASS Class FEE (every three years $60.00)
☐ Non-Criminal Justice Applicant’s Privacy rights signed (copy to applicant)
☐ Privacy Act Statement signed (copy to applicant)
☐ Sheriff’s Office Fee ($5 paid directly to Sheriff’s Office)

Applicants please note the following:

-Must obtain permit within 10 calendar work days after first day
-Must be renewed each year by the date of issuance
-Must receive RASS certification within 90 days of permit
-Must renew RASS every three years
-Copy of the RASS certificate to be on location with permit ID
-Copy of the RASS certificate to be returned with Alcohol Licensee renewal

Department of Planning and Development contact information:

<table>
<thead>
<tr>
<th>In person: 958 Milstead Avenue, Conyers, GA 30012</th>
<th>Monday through Friday, 8:00am to 5:00pm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mail: P.O. Box 289, Conyers, GA 3001</td>
<td>Phone: 770 278-7100</td>
</tr>
<tr>
<td>Email: <a href="mailto:planning@rockdalecountyga.gov">planning@rockdalecountyga.gov</a></td>
<td>Fax: 770 278-8940</td>
</tr>
</tbody>
</table>
ALCOHOLIC BEVERAGE HANDLING PERMIT APPLICATION

Full Legal Name

SS# | DL # | DOB

Height | Weight | Hair Color | Eyes | Race

Phone # Home & Cell

Mailing address | City | State | Zip

Email Address

Business Information

Name of Alcohol Licensee (First) (Middle) (Last)

Business Name

E-Mail Address | Work Telephone Number | Cell Telephone Number

Permit Information

First Time Permit or Renewal | Date of Hire

Expiration Date of Previous Permit | Manager Permit or Server

RASS Class Attended | Date of Class | RASS No.

This application is to be executed under the following oath: "I solemnly swear, subject to criminal penalties for false swearing that the information in this application is true and correct and that the application is herein made to procure the granting of this permit."

I certify that I have read and understand the legal restrictions related to the handling and sales of Alcoholic Beverages and the consequences that may be imposed if I do not comply with such restrictions. By filing this application I consent to the county conducting a criminal history check.

Signature: __________________________ Date: __________________________

Print Name: __________________________

Notary Public Signature: __________________________ Date: __________________________

Print Name: __________________________
AFFIDAVIT VERIFYING CITIZENSHIP STATUS
O.C.G.A. 50-36-1(e)(2)

By executing this affidavit under oath, as an applicant for a Permit or License, as referenced in O.C.G.A. 50-36-1, from Rockdale County, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

☐ I am a United States citizen.
☐ I am a legal permanent resident of the United States.
☐ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

__________________________________________

the undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. 50-36-1(e)(1), with this affidavit.

Wait to be in front of notary to sign

Applicant signature

The secure and verifiable document provided with this affidavit can best be classified as:

__________________________________________
(type of document)

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 O.C.G.A. 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in ______________, ______________, this ______ day of ______, ________, ________, 20____
(city) (state) (day) (month) (year)

For notary use only

Notary Public signature

GA Registration No. and expiration date

SEAL
CRIMINAL HISTORY CONSENT FORM

I hereby authorize Rockdale County Sheriff’s Office to receive any Criminal History record pertaining to me, which may be in the files of any State or Local Criminal Agency in Georgia for the purpose of complying with Rockdale County Unified Development Ordinance Chapter 10.

Print Full Name

Complete Address

Sex  Race  Date of Birth  Social Security Number

Signature  Date

Notary  Date

Seal
PRIVACY ACT STATEMENT

Authority: The FBI’s acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI’s Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI’s Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

I received a copy of the Privacy Act Statement.

Print Name

Signature

Date
NON-CRIMINAL JUSTICE APPLICANT’S PRIVACY RIGHTS

As an applicant that is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history record check for a non-criminal justice purpose (such as an application for a job or license, immigration or naturalization, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- If your fingerprints/biometrics are used to conduct a FBI national criminal history check, you are provided a copy of the Privacy Act Statement that would normally appear on the FBI fingerprint card.
- If you have a criminal history record, the agency making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The agency must advise you of the procedures for changing, correcting, or updating your criminal history record as set forth in Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a Georgia or FBI criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the agency denies you the job, license or other benefit based on information in the criminal history record.
- In the event an adverse employment or licensing decision is made, you must be informed of all information pertinent to that decision to include the contents of the record and the effect the record had upon the decision. Failure to provide all such information to the person subject to the adverse decision shall be a misdemeanor [O.C.G.A. § 35-3-34(b) and §35-3-35(b)].

You have the right to expect the agency receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of state and/or federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

If the employment/licensing agency policy permits, the agency may provide you with a copy of your Georgia or FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, information regarding how to obtain a copy of your Georgia, FBI or other state criminal history may be obtained at the GBI website (http://gbi.georgia.gov/obtaining-criminal-history-record-information).

If you decide to challenge the accuracy or completeness of your Georgia or FBI criminal history record, you should send your challenge to the agency that contributed the questioned information. Alternatively, you may send your challenge directly to GCIC provided the disputed arrest occurred in Georgia. Instructions to dispute the accuracy of your criminal history can be obtained at the GBI website (http://gbi.georgia.gov/obtaining-criminal-history-record-information).

I received a copy of the Applicant’s Privacy Rights.

Print Name

Signature

Date