DeKalb County
Department of Finance
Division of Internal Audit & Licensing-DIAL
330 West Ponce De Leon Ave.
Decatur, Ga. 30030
Ph# 404-371-2772 Fax# 404-371-2946

Mail To:
P. O. Box 100020
Decatur, Ga. 30031-7020

Application for locations in unincorporated DeKalb County only

As provided by DeKalb County Alcohol Ordinances adopted on November 30, 1972, and
February 25, 1972, DeKalb County Code Section 4-30 authorizes non-profit organizations to
apply for a temporary alcoholic beverage license for two (2) events annually for a period of one
day per event.

Application For: NON-PROFIT ORGANIZATION TEMPORARY ALCOHOLIC BEVERAGE LICENSE

Check Appropriated License: ☐ Beer and/or Wine ($50.00) ☐ Liquor ($50.00)

Beginning Day __________, Date ____________, and Time of Event/Festival: __________(am/pm)

Ending Day __________, Date ____________, and Time of Event/Festival: __________(am/pm)

Number of Days: __________

Will the Event be Held Outdoors? _______ If Yes, Explain:

__________________________________________

Will Live Entertainment Be Offered? _______ If Yes, Explain:

__________________________________________

Will Adult Entertainment Be Offered? _______ If Yes, Explain:

__________________________________________

The following documents must be included with your application (in duplicates):

• Copy of civic organization’s 501(c)3, or other exemption letter from the IRS.
• A Statement of Acknowledgement & Consent signed by a corporate officer of the exempt
  organization signifying their knowledge of the event, and authorization for their association.
• List of Corporate Officers in verification of licensee’s position, title, or capacity with the
  exempt organization (Licensee must be a registered officer of the exempt corporation).
• Copy of licensee’s driver’s license or other government issued identification.
• An application appropriately signed and notarized.

For Events Held Indoors:
• Temporary Privilege License Supplemental Application Form.

For Events Held Outdoors:
• A Statement of Acknowledgement & Consent from the property owner or leaseholder
  authorizing the use of the property for the proposed event.
• A Statement of Acknowledgement & Approval from the DeKalb Public Safety Department
  signifying their knowledge and approval of the proposed event.
• Temporary Privilege License Supplemental Application Form.

Check one: ☐ 1st Event Annually ☐ 2nd Event Annually

Temporary Alcoholic Beverage App. Rev. 05/2005
Name of Event/Festival: ____________________________________________

Event/Festival Location: ____________________________________________

Phone: ____________________________

Non-Profit Corporation Information:

Name of Non-Profit Corp.: __________________________________________

Non-Profit Corp. Address: __________________________________________

Street

City State Zip

Phone: ____________________________

Mailing Address: _________________________________________________

Street City State Zip

St. Tax ID#: _______________ Fed Tax ID#: _______________

Licensee Information: (per State, must be corporate officer of non-profit organization)

Name of Licensee: ________________________________________________

Licensee Address: ________________________________________________

Street

City State Zip

Phone: ____________________________

Official Use Only

Fee: $________

Date Paid: __________

License#: __________

Expiration: __________

Date Issued: __________

Have you received a copy of the DeKalb County Alcoholic Beverage Ordinance? Yes ______ No ______

No application can be processed until you acknowledge receipt of the DeKalb County Alcohol Beverage Ordinance.

This application must be signed by the licensee and notarized as true under penalty of perjury.

I, ________________________, being first duly sworn under oath, state that I am the above-named licensee for a DeKalb County Temporary Privilege License. I declare under penalties of perjury and/or revocation of any license granted that I nor any officer of this organization have been convicted or have plead guilty or entered a plea of Nolo Contendere to any crime involving moral turpitude, lottery, or illegal possession or sale of narcotics or liquor within ten (10) years immediately prior to filing this application, and that the answers contained in the application and any accompanying information have been examined by me and the matters and things set forth are true, and correct and complete.

Licensee Signature __________ Title __________

Notary’s Signature

Subscribed and sworn to before me this __________ day of __________ year __________

By: ____________________________________________

Notary Public in and for State of ____________________ Commission Expires: __________

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SUPPLEMENTAL APPLICATION
FOR TEMPORARY ALCOHOLIC BEVERAGE LICENSE

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Ph# 404-371-2461 Fax# 404-371-2946

Mail To:
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Dated: ______________

LICENSEE: ________________________________

EVENT/FESTIVAL NAME: ________________________________

EVENT ADDRESS: ________________________________

Hours of Event:

Day1: ______ Date: ______ from ______ to ______
Day2: ______ Date: ______ from ______ to ______

Area: Interior
- Floor Space (sq. footage): ____________________________
- Entertainment?
  If yes, describe ____________________________
- Dance Floor?
  If yes, what are the dimensions or area: ____________________________
- Will there be any electrical or mechanical amusement devices on premises?

Area: Exterior
- Area Space (Acres): ____________________________
- Will event on-goings be observable from the public street?
  If so, what streets, and/or intersections: ____________________________
- Will Portable bathrooms facilities be provided? (Qty. _____)

Beverage Control:
- Will alcohol-serving employees be required to attend any training?
  If formal, Name or Location of Course: ____________________________
- Are there written procedures for dealing with intoxicated or unruly patrons?
- Will physical barriers be utilized to control alcoholic beverage patrons entry and exit from the event area?
  If not, what control will be employed to restrict the movement of alcoholic beverages (explain) ____________________________

Security & Control:
- Will doormen screen patrons:
  A Enter Premises? ____________________________
  B Exiting Premises? ____________________________
- Will doormen and/or alcohol-serving employees be required to perform ID checks? ____________________________
- Parking:
  A By Customer? ____________________________
  B Valet Parking? ____________________________
- Number of Security Personnel: None _____ Bouncers _____ Floor men _____
- Will Security personnel be Armed? ____________________________
STATEMENT OF ACKNOWLEDGEMENT & CONSENT FROM PROPERTY OWNER OR LEASEHOLDER FOR OUTSIDE EVENT WITH ALCOHOL

I, ____________________________________________, owner/leaseholder for the property located at:

_________________________________________

_________________________________________

_________________________________________

herewith certify that I am authorizing ___________________________________________, (non-profit organization) to use the above noted property and location for the:

_________________________________________

Event/Festival,

which is to occur on the _____ day of the month of ______________ for the year ________

I hereby note that I am aware that this authorization/affirmation will be utilized with regards to a Temporary Alcohol Beverage License application.

I CERTIFY, under penalty of perjury, that the above information is true and correct.

_________________________________________  ____________________________
Property Owner/Leaseholder                Date

Home Address

_________________________________________

City                           State                             Zip Code

_________________________________________

Phone#
STATEMENT OF ACKNOWLEDGEMENT & CONSENT FROM CORPORATE OFFICER FOR TEMPORARY ALCOHOL LICENSE

I, ______________________________________, ____________________________ and registered corporate officer for the non-profit civic organization indicated below,

____________________________________

____________________________________

____________________________________

hereewith certify that I am authorizing the ____________________________ event/festival, to be conducted in association with our non-profit organization as indicated above. I am aware that our company’s 501(c)3 exemption letter will be presented, and that its use, if approved represents one of the two events allowed annually per the DeKalb County Alcoholic Beverage Ordinance.

I hereby acknowledge that our corporate officers, Mr./Ms. ____________________________ will serve as the Licensee, and that the event will occur

At: ________________________________________________

On the ______ day of ____________________________, 2005.

During the Hours of ___________ to _____________

And will involve the sale of:

   (please initial as appropriate)
   Beer _____
   Wine _____
   Beer & Wine _____
   Liquor _____

I further note, that I am aware that this authorization/affirmation will be utilized with regards to a Temporary Alcohol Beverage License application.

I CERTIFY, under penalty of perjury, that the above information is true and correct.

_____________________________________________   ____________________________   ________________
Corporate Officer           Title           Date

_____________________________________________

Home Address

_____________________________________________
City       State       Zip Code

_____________________________________________

Phone#

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CERTIFIED REPORT OF SURVEY
FOR TEMPORARY ALCOHOLIC BEVERAGE LICENSE

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APPLICANT: ________________________________

BUSINESS/TRADE NAME: ________________________________

ADDRESS: ____________________________________________

The undersigned has examined the subject location and has made measurements to determine
compliance or non-compliance with the distance requirements pursuant to the Alcoholic Beverage
Ordinance of DeKalb County.
(Distances shall be measured from property line to property line along the shortest possible course, as
the “crow flies”.)

___________ feet to the nearest residential area. Give land lot, district parcel.

___________ feet to the nearest church. Give name & address.

___________ feet to the nearest school or college campus. Give name & address.

___________ feet to the nearest public park or playground. Give name & address.

___________ feet to the nearest adult entertainment establishment. Give name & address.

I CERTIFY, under penalty of perjury, that the above information is true and correct.

Georgia Registered Land Surveyor ________________________________

Number ________________________________

Note: For outside events, a scaled drawing of the location, showing the distances described above must
be attached.
ON-PREMISES OPERATOR/LICENSEE CONSENT FORM
FOR TEMPORARY ALCOHOLIC BEVERAGE LICENSE

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Licensee Name

Location Address

I, ____________________________________________, do hereby consent to serve as the on-premise operator for the licensee, owners, officers and/or directors and to perform all obligations of such agency pursuant to the Alcoholic Beverage Ordinance of DeKalb County.

This _____ day of _________________________, 20__.

Signature of on-premise operator/licensee

Type or print name

Licensee’s home Address

City   County   State

Approved:

Corporate Officer   Date
STATEMENT OF ACKNOWLEDGEMENT & APPROVAL FROM DEKALB COUNTY PUBLIC SAFETY FOR OUTSIDE EVENT - TEMPORARY ALCOHOL LICENSE

TO: Monroe Scott III, Business & Alcohol License Manager, Division of Internal Audit & Licensing
330 West Ponce De Leon Ave.
Decatur, Ga. 30030

Date: 

Name of Event/Festival:

Location of Event/Festival:

Name of Licensee:

Name of Non-Profit Sponsor:

A PERMIT CHECK HAS BEEN MADE AND THE RESULTS ARE AS FOLLOWS:

( ) No Special Event and/or Parade Permits are required.

( ) All Special Event and/or Parade Permits have been applied for and approved.
   Permit Type: __________________ Permit #: __________________
   Permit Type: __________________ Permit #: __________________
   Permit Type: __________________ Permit #: __________________

( ) Required Special Event and/or Parade Permit have not been applied for and/or approved. List type(s) required:
   Permit Type: __________________ Permit Type: __________________
   Permit Type: __________________ Permit Type: __________________
   Permit Type: __________________ Permit Type: __________________

Comments:

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Temporary Alcoholic Beverage App. Rev. 05/2005
OFFICIAL USE ONLY:

☐ 501(c)3 exemption letter
☐ Statements of non-profit Corp’s Acknowledgement & Authorization
☐ List of Corporate Officers & Licensee’s ID
☐ Statement of Property Holder’s Acknowledgement & Authorization
☐ Statement of Public Safety’s Acknowledgement & Approval
☐ Supplemental Application Form.