

2025 DEKALB COUNTY ALCOHOL LICENSE AND BUSINESS RENEWAL NOTICE AND APPLICATION INSTRUCTIONS

The DeKalb County renewal period will commence October 1st, 2024 and ends December 31, 2024

This renewal period is for businesses that maintain an alcohol license only

BEFORE YOU BEGIN

- All required documentation must be scanned and saved as individual PDF files.
- Applications must be uploaded to the E-Permitting Customer Portal
- To access all applications and forms please visit our webpage
<https://tinyurl.com/DeKalbRenewal>
- Only upload application to the business license account. The alcohol license will be processed simultaneously
- For customer portal assistance please email: PlanITHelp@dekalbcountyga.gov

REQUIRED DOCUMENTS

- 2025 Business-Alcohol application
- Government-Issued Photo ID
- 2023 Tax Return
- No Change Affidavit
- 2024/2024 Secretary of State Certificate of Organization
- Private Employer Affidavit
- SAVE Affidavit

HOW TO RENEW

- Log into [Home - CIVICS \(dekalbcountyga.gov\)](https://dekalbcountyga.gov) (Click the link)
- Go to your Dashboard, select the "Business License Number" for renewal
- Complete the "Annual Renewal Receipt Information Details"
- Complete the requested information. "The work authorization fed id" is the E-verify number
- Verify account information
- Save input and upload required documents

Georgia law requires that anyone registering for or holding an Alcohol License or Permit must submit a Citizenship Affidavit and Secure and Verifiable Document. If the individual signing the Affidavit is not a U.S. citizen, the Affidavit and Secure and Verifiable Document must be submitted annually when renewing the License or Permit. The Secure and Verifiable document for Non-U.S. citizens must be the document used to show your residency status.

The online instructions are available on our webpage:

<https://tinyurl.com/DeKalbRenewal>

For questions, concerns or inquiries, please email blicense@dekalbcountyga.gov

2025 DEKALB COUNTY ALCOHOL LICENSE AND BUSINESS RENEWAL NOTICE AND APPLICATION INSTRUCTIONS

Letter of Entertainment Instructions:

If you are operating after 12:30 AM an approved Letter of Entertainment (LOE) will be required to submit with your application. The document is attached to the application. To obtain your approved LOE please email dekalbloee@dekalbcountyga.gov

Your approval must be submitted with your application package.

Please check the online portal and email for updates regarding your application or fees. After remitting fees the licenses will be sent to the email addresses on file.

DeKalb County Alcohol License	Annual license fee	
DeKalb County Alcohol License -Sunday Sales	Annual license fee along with sales information for the last twelve months, the business was open. If the business has been opened less than twelve months, then enter the actual sales for the time open.	
DeKalb County Business and Occupational Tax	Consist of four (4) parts: (1) Base administrative fee \$75.00, (2) Minimum gross receipts tax \$50.00, (3) Business tax on gross receipts over \$20,000, (4) Employee fee per worker including the owner/operator, and anyone working in the business.	
Payment Due Date	Business and Occupational Tax December 31, 2024	Alcohol License Fee November 30, 2024
Penalty Due Date (10%)	Received after December 31, 2024	Postmarked or received after November 30, 2024
Interest Due Date (1% per month)	Postmarked or received After December 31, 2024	Postmarked or received After November 30, 2024
Late Filing Penalty	Postmarked or received after	
	Due Dates	Amount
	February 1, 2025	\$100.00
	March 1, 2025	\$300.00
	April 1, 2025	\$600.00
NO LATE FEES WILL BE WAIVED		

DEKALB COUNTY ALCOHOL LICENSE AND BUSINESS REGISTRATION 2025 RENEWAL APPLICATION

178 SAMS STREET | DECATUR, GA 30030 | (404) 371-2461

THIS FORM MUST BE FULLY COMPLETED, SIGNED BY LICENSEE AND NOTARIZED

BUSINESS INFORMATION			
RENEWAL TYPE <input type="checkbox"/> Initial <input type="checkbox"/> Subsequent		BUSINESS ACCOUNT#: ALCOHOL ACCOUNT#: EXCISE ACCOUNT #:	<input type="checkbox"/> CHECK HERE IF NO LONGER OPERATING DATE CLOSED:
<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Corporation <input type="checkbox"/> Other			
Legal/ Entity Name:		Trade Name:	
Physical (Location) Address (Street, City, State, Zip) P. O. Box Not Permitted			
		GA	
LICENSEE INFORMATION (MUST MATCH LICENSEE ON FILE WITH OUR OFFICE)			
Licensee First Name:		Licensee Last Name:	
Licensee Phone:		Licensee Email:	
Licensee Home Address (Street, City, State, Zip)			
ALCOHOL LICENSE FEE			
CHECK LICENSE(S) TO RENEW		ANNUAL FEE/RATE	AMOUNT DUE
<input type="checkbox"/> Beer Only		\$600.00	
<input type="checkbox"/> Wine Only		\$600.00	
<input type="checkbox"/> Beer & Wine Combination		\$900.00	
<input type="checkbox"/> Liquor - Package/ Wholesaler/ Consumption on Premises Only		\$4,000.00	
<input type="checkbox"/> Sunday Sales - Consumption on Premises Only *		\$1,100.00	
<input type="checkbox"/> Additional Fixed Bar(s)	# _____ multiple	\$600.00	
<input type="checkbox"/> Additional Movable Bar(s)	# _____ multiple	\$300.00	
<input type="checkbox"/> Patio Permit		\$100.00	
<input type="checkbox"/> Wholesaler/Importer - Beer		\$600.00	
<input type="checkbox"/> Wholesaler/Importer - Wine		\$600.00	
<input type="checkbox"/> Fraternal Org - Beer and/or Wine		\$500.00	
<input type="checkbox"/> Fraternal Org - Liquor		\$1,000.00	
SUBTOTAL DUE			
LATE PAYMENT PENALTY (10% of Subtotal Due Renewal postmark after November 30th)			
INTEREST (1%/month of Subtotal Due Renewal postmark after November 30th)			
A. TOTAL ALCOHOL LICENSE FEE DUE			
*MUST BE COMPLETED IF SUNDAY SALES - CONSUMPTION ON PREMISES IS CHECKED			
Provide last twelve (12) months of Sales information, if less than twelve (12) months of sales, provide date of sales		Start Date:	End Date:
GROSS RECEIPTS/ SALES FROM (CHECK ONLY ONE)		Gross Sales (\$)	Percentage
<input type="checkbox"/> Food and Food Service <input type="checkbox"/> Rental Of Rooms For Overnight Lodging			
GROSS RECEIPTS/ SALES FROM BEER, WINE, AND/OR LIQUOR			
TOTAL GROSS RECEIPTS/ SALES			100%

**2025 DEKALB COUNTY ALCOHOL LICENSE AND BUSINESS RENEWAL
NOTICE AND APPLICATION INSTRUCTIONS**

<p>Required Documents</p>	<ul style="list-style-type: none"> ▪ Evidence of State Registration (i.e. Dept. of Agriculture, Dept. of Health, etc.) ▪ Current Secretary of State documentation for Corporations, LLC's, etc. ▪ 2023 Federal Tax Return or Letter from Accounting Firm ▪ No Change Affidavit ▪ Letter of Entertainment (LOE) (if applicable) ▪ 2025 Alcohol License and Business Occupational Tax Renewal Application ▪ Copy of Licensee's secure & verifiable document (Government Issued Identification) ▪ Current Excise Account (if applicable) 		
<p>How to Submit for Local Alcohol License:</p>	<table border="1"> <tr> <td data-bbox="345 705 1021 1050"> <ul style="list-style-type: none"> • Log into Home - CIVICS (dekalbcountyga.gov) • Access your dashboard and select the BUSINESS account you would like to renew-do not select the associated alcohol license account • Complete requested information • Upload application and required documents • Save and Submit </td><td data-bbox="1021 705 1588 1050"> <p><u>DO NOT MAIL APPLICATIONS</u></p> </td></tr> </table>	<ul style="list-style-type: none"> • Log into Home - CIVICS (dekalbcountyga.gov) • Access your dashboard and select the BUSINESS account you would like to renew-do not select the associated alcohol license account • Complete requested information • Upload application and required documents • Save and Submit 	<p><u>DO NOT MAIL APPLICATIONS</u></p>
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DEPARTMENT OF PLANNING & SUSTAINABILITY

BUSINESS OCCUPATION TAX			
1. GEORGIA GROSS RECEIPTS (2025 ESTIMATE)			
2. <input type="checkbox"/> EMPLOYEE FEE <input type="checkbox"/> PROFESSIONALS ELECTION * (At least one, include owner/operator) * E-Verify #required for 10 or More Employees		Number of Employees or Professionals: _____	
2023 GROSS RECEIPT	<u>Gross Receipts-Actual 2023</u>	<u>Gross Receipts-Estimated 2023</u>	
2023 EMPLOYEES/ PROFESSIONALS ELECTION*	<input type="checkbox"/> EMPLOYEE <input type="checkbox"/> PROFESSIONAL	ACTUAL # OF EMPLOYEES-2023	ESTIMATED # OF EMPLOYEES-2023
ACCEPTANCE AND ACKNOWLEDGEMENT			
I certify that the 2023 ACTUAL figures are true and correct, and the 2025 ESTIMATE for this year is a good faith estimate or last year's actual.	Print Owner's /Authorized Agent Full Name:		Signature:
	_____		Date: _____

Please contact our office if there are any changes in your primary line of business or physical address

Please submit all required and supporting documents to prevent any delay in the processing of your application

ACCEPTANCE AND ACKNOWLEDGEMENT

- **Alcohol Renewal Application:** are due by November 30 for the next calendar year. Renewal application postmarked after November 30 will be charged a ten (10) percent late payment penalty and interest charges of one (1) percent. License will be revoked if not received by Dec 31 and will have to be reapplied for.
- **Licensee:** must always be a person and the licensee on file with our office must sign the renewal form. Do not complete this renewal form if you are planning any changes. Please contact our office for additional information.
- **Arrest Record:** Has the licensee, registered agent, partner or any other person having any financial interest in this business been arrested, indicted or convicted for an offense by any City, County, state, Federal Officer or any Governmental Authority within the last twelve (12) months? ☐ Yes ☐ No. If yes, please give full details:

- **Sunday Sales:** I certify that I have a working knowledge of the books and records of the above establishment and to the best of my knowledge that these figures are true and correct. I hereby affirm in accordance with DeKalb County Ordinances 4-128; 4-149; and 4-164 that at least 60% of this establishment's food and beverage service for the last 12 months (365 days) is derived from the sales of food and food products. I further affirm that DeKalb County may request an audit, at any time, at the licensee's expense to verify these figures. I acknowledge Sunday Sales are only authorized from 11:30 noon Sunday until 2:30 a.m. Monday Morning.

I, hereby certify that said applicant and licensee signed this renewal application for after stating to me personal knowledge and understanding that all statements and answers made herein are complete, correct and true

ON THIS THE _____ DAY OF _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

I, do solemnly swear subject to criminal penalties that the statement and answers made by me to the foregoing questions in this renewal application are true and correct and no false or fraudulent information, statements or answers are made to procure granting of the County Privilege License on

THIS THE _____ DAY OF _____, 20_____.

Print Licensee Name

Licensee Signature

BUSINESS LICENSE RENEWAL AFFIDAVIT – 20____

The undersigned, _____, being duly sworn, says the following:
(Licensee)

1. Have there been changes of ownership of the establishment? ☐ Yes ☐ No If yes, please explain

2. There have been no changes in any information and data contained in and furnished with my original DeKalb County Business Registration application.

3. In the past year, have you been convicted of or pleaded nolo contendere to a violation of any federal, state, or county law concerning crime of moral turpitude, misdemeanor, or violation of this Code directly relates to the business for which the certificate is sought? If yes, please explain the violation and provide the date of adjudication and the court of adjudication:

4. I am familiar with all laws, rules and regulations of the State of Georgia and all ordinances of DeKalb County covering the operation of the business establishment I will operate under this renewal.

I swear that all the information contained in the original application is true and I understand that such application is made a part of this renewal application and the renewal is based upon the information contained in the original application. DeKalb County sec. 15-45(a). A license issued pursuant to the provisions of this division shall be denied, suspended or revoked by the director if the licensee furnishes fraudulent or untruthful information in the original, renewal or transfer application for a license or omits information required in the original, renewal or transfer application for a license and for failure to pay all fees, taxes or other charges imposed under the provisions of this chapter.

Sworn to and subscribed to before me

Licensee's Signature

this _____ day of _____, 20____.

Notary Public

My commission expires:
(SEAL)

Effective Date 9.11.2020

Business Name

License #/Occupation Tax #

- ☐ Business Occupation Tax Certificate
☐ Alcohol License

(S.A.V.E)AFFIDAVIT VERIFYING STATUS FOR COUNTY PUBLIC BENEFIT APPLICATION**O.C.G.A. § 50-36-1(e)(2)**

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

Do not check more than ONE option.

- ☐ 1) I am a United States citizen, 18 years of age or older.
- ☐ 2) I am a legal permanent resident of the United States 18 years of age or older.
- ☐ 3) 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. The secure and verifiable document provided with this affidavit can best be classified as: (i.e. driver's license, I-551, I-766, Passport, etc.)

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, of the Official Code of the State of Georgia.

Executed on this the _____ day of _____, 20_____.

Signature of Applicant

Printed Name of Applicant

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 20_____.

Applicant Phone Number

NOTARY PUBLIC

My Commission Expires: _____

BUSINESS NAME _____ LICENSE #/OCCUPATION TAX # _____
NUMBER OF EMPLOYEES (COMPANY-WIDE) _____

PRIVATE EMPLOYER AFFIDAVIT PURSUANT TO O.C.G.A. § 36-60-6(d)

By executing this affidavit under oath, the undersigned private employer verifies one of the following with respect to its application for a business license, occupational tax certificate, or other document required to operate a business as referenced in O.C.G.A. § 36-60-6(d):

SECTION 1. Please check only one:

(A) On January 1st of the below-signed year, the individual, firm, or corporation employed **more than ten (10)** employees¹

*** If you select Section 1(A), please fill out Section 2 and then execute below.

(B) On January 1st of the below-signed year, the individual, firm, or corporation employed **ten (10) or fewer** employees.

*** If you select Section 1(B), please **skip** Section 2 and execute Section 3 below.

SECTION 2.

The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6. The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as follows:

Name of Private Employer

Federal Work Authorization User Identification Number

Date of Authorization

SECTION 3.

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, ____, 20____ in _____(city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME
ON THIS THE _____ DAY OF _____, 20____.

NOTARY PUBLIC

My Commission Expires: _____

¹Sec. 15-27 Employee means an individual whose work is performed under the direction and supervision of the employer and whose employer withholds FICA, federal income tax, or state income tax from such individual's compensation or whose employer issues to such individual for purposes of documenting compensation a form I.R.S. W-2 but not a form I.R.S. 1099.