



Forsyth County Business License Division
110 E. Main Street | Suite 130 | Cumming, GA 30040
(678) 455-9888 | www.forsythco.com

Application for For-Profit Special Event Catering Permit

This application allows businesses with an *existing* alcohol beverage catering license to request a permit to serve alcohol at a location (inside or outside) within Forsyth County other than the licensed premises. A For Profit Special Event Permit is needed if the business will be providing alcoholic beverages for consumption at a banquet, function, luncheon, reception, festival, or other similar event, where guests either pay for alcoholic drinks on a per drink basis or pay an admission fee for access to the event where alcohol will be served.

- Please review the Forsyth County [Alcohol Ordinance](#) before applying for your alcohol license. This is also available for review in our office. For questions regarding this Ordinance, please contact:

Alcohol@forsythco.com

- Please notify the Georgia Department of Revenue of your event no later than 5 days from the event date. An Alcohol Beverage Catering Quantity & Destination Report will need to be submitted to the state and a copy provided with this application.
- Fees will be invoiced once the application has been reviewed.
- Copies of all required documents must be submitted with the application otherwise the application will be deemed incomplete.



Forsyth County Business License Division
110 E. Main Street | Suite 130 | Cumming, GA 30040
(678) 455-9888 | www.forsythco.com

Application for Special Event Alcohol Catering Permit

Business Section I: General Information

1) Identify application type by checking one of the following boxes. An invoice will be created once the application is processed by our office.

Beer and wine for consumption on the premises: \$25.00 /day

Distilled spirits for consumption on the premises: \$25.00/day

Beer, wine and distilled spirits for consumption on the premises: \$25.00/day

- 2) Provide a copy of your existing Forsyth County Alcohol Beverage Catering License.
- 3) Provide a copy of the State Alcohol Beverage Catering Quantity & Destination Report.
- 4) Has there been any changes in any of the information or data contained in or furnished with your original alcohol license application: [YES] or [NO]

a) If YES to question 4, provide details of any changes:

5) Identify the named licensee as it appears on your existing license to sell alcohol for consumption:

6) If a trade name (DBA) is identified on your existing license to sell alcohol for consumption, please provide name.

7) Provide a summary of the special event, including the location address. (Applications regarding outside events anticipating more than twenty-five patrons must include a site plan, a crowd control plan, and a security plan). The sale or consumption of alcoholic beverages is prohibited on sidewalks or parking lots.

8) Include copy of a signed and notarized letter of permission from the property owner.

9) Will alcohol sales be limited to the provision of alcoholic beverages for consumption at a banquet, function, luncheon, reception or other similar event, where guests pay for alcoholic drinks on a per drink basis or pay an admission fee that includes alcoholic beverages: [YES] or [NO]

10) What dates & days are you requesting the ability to sell alcohol, include what time sales will begin and end:

11) I understand that all bartenders and/or servers for licensed alcohol beverage caterers must be at least 21 years of age and must meet all state and local laws, age restrictions, and must possess a valid alcohol sales permit: [YES] or [NO]

12) I understand that to transport or sell alcoholic beverages for a special event on a Sunday, my business must be eligible to sell or serve alcohol on Sundays with a consumption on premises license and comply with the requirements of state law with respect to the service of alcoholic beverages on Sundays: [YES] or [NO]

Section II: Applicant Statement

To be completed by the named licensee (as identified on your existing license to sell alcohol for consumption)

13) Full Name:

14) Phone Number:

15) E-mail Address:

16) Address:

Section III: Application Certification

Application must be sworn to and signed by the applicant(s) in the presence of a notary public or other officer authorized to administer oaths. Any misstatement or concealment of fact in the application shall be grounds for denying an alcohol permit and shall make the applicant liable to prosecution for perjury under the laws of the State of Georgia.

I solemnly swear that the foregoing statements are true and complete. I understand that any falsehoods are grounds for denial of this application.

Name (Print)

Signature

Sworn to and subscribed before me this _____ day of _____, 20_____.

Notary Public



Affidavit Verifying Residency Status of an Applicant
as Required by the Georgia Security and Immigration Compliance Act
O.C.G.A. § 50-36-1(e)(2) Affidavit

Section IV: Application Certification

By executing this affidavit under oath, as an applicant for a Forsyth County, Georgia Alcohol License, or other public benefit as referenced in O.C.G.A. § 50-36-1, I am stating the following with respect to my application for a Forsyth County Alcohol License.

_____ 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 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 such as a copy of a photo identification, driver's license, passport, permanent resident card, etc., provided with this affidavit can best be classified as:

_____.

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 _____ (city), _____ (state).

Signature of Applicant

Printed Name of Applicant

Applying on Behalf of / Name of Associated Business

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

Notary Public

My Commission Expires _____