

City of Richmond Hill, GA (1560)
2020 Alcohol Business Occupational Tax Renewal Application
Avenu Insights & Analytics—as administering agent
PO Box 830900
Birmingham, Alabama 35283-0900



Customer Service

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Hablamos español

Email: businesslicensesupport@avenuinsights.com

Website: www.avenuinsights.com

Avenu Occupational Tax Renewal
Business License Department
PO Box 830900
Birmingham, AL 35283-0900.

Account #: _____

Dear Business Owner / Tax Manager:

Avenu Insights & Analytics is the administering agent for the City of Richmond Hill Occupational Tax Certificates. The City of Richmond Hill Code of Ordinances mandates that all persons, firms or corporations who engage in the sale of Alcoholic Beverages within the city limits of Richmond Hill must register their business and obtain an Alcoholic/Beverage Tax Certificate by paying the required fees due.

Alcoholic/Beverage Tax Certificates are valid for a calendar year, January 1st through December 31st. the deadline to purchase your certificate is December 31st, 2019..

*******IMPORTANT PLEASE READ*******
*******Additional Documentation Required*******

Immigration Legislation (HB87) Passed on April 14, 2011 Required: Effective July 1, 2013, any private company with more than 10 full-time employees, along with every public employer, regardless of its size, must register with the federal E-Verify program to check the legal status of new hires.

Background Check Required: All Alcoholic/Beverage Tax Certificates are subject to the State recommendation of a background record check. This includes new licenses and renewals.

There is a \$25.00 charge for a background record check. All applicants must pay this fee and complete the enclosed form for "Authorization for Release of Personal Information", this also includes a License holder name change. If you hold a valid "Bar Card" you may submit a copy of that card along with your application in lieu of paying the \$25.00 background check fee. You may apply for a "Bar Card" by contacting the Richmond Hill Police Department at (912) 756-3712.

Annual Fingerprinting Required: All alcohol renewals now require annual fingerprinting (per Georgia Bureau of Investigations) of license holders to be done at the Richmond Hill Police Department (120 Richard Davis Drive, Richmond Hill, GA 31324) between the hours of 1 – 3 p.m. any Wednesday. The fee for fingerprinting is \$50. Please call RHPD at (912) 756-5645 to make an appointment.

Sunday Sales Affidavit: If applicable, any Restaurant/Caterer desiring to make sales of Alcoholic Beverages on Sunday must complete the enclosed "Restaurant/Caterer Affidavit and Application for Permit to Dispense Alcoholic Beverages on Sunday". This affidavit is to be completed each year and requires city approval.

Failure to complete the application in full, remit the required and or applicable documentation, pay the correct fee due, and submit payment in full may result in the delay of the issuance of your Alcoholic/Beverage Tax Certificate.

Remittance Information: Make your check payable to "Tax Trust Account" and mail to:

Avenu
Occupational Tax Renewal Department
PO Box 830900
Birmingham, Alabama 35283-0900

Questions? All questions regarding the payment of your business occupational tax certificate should be directed to Avenu at (800) 556-7274. You may also email us at businesslicensesupport@avenuinsights.com.

Sincerely,
Avenu Insights & Analytics
Occupational Tax Department

RICHMOND HILL, GA (1560)
2020 ALCOHOL/BEVERAGE TAX CERTIFICATE RENEWAL WORKSHEET

Account #: _____

- Check here for Mailing Address Change
 Check here for Physical Address Change

Business name and address: _____

Address: _____

City, State, Zip _____

Physical Location: _____

Return Application with Check or Money Order Made Payable To:
 Tax Trust Account
 Avenu Occupational Tax Return
 Business License Department
 PO Box 830900
 Birmingham, AL 35283-0900

All Questions Below Must Be Answered

Full Name of Legal Licensee (No Initials) _____ Business Phone _____

Trade Name of Business (DBA) (Must Be Same on Local and State License) _____

Business Address (Physical-No PO Box) _____

City _____ State _____ Zip _____

Business Address (Mailing) _____

City _____ State _____ Zip _____

General Information

Full Name of Licensee (No Initials) _____

Address of Legal Residence _____

(Street, Road, RFD No. and Route) _____ City _____ State _____ Zip _____

Age of Licensee _____ Sex of Licensee _____ How Long at Residence _____ Home Phone _____

Email Address _____

Type of Business (If none of the categories are appropriate check "Other" and write in the appropriate classification.)

Example: Marina, Bait Shop, Service Station, etc...

- () Package Store () Tavern () Restaurant () Club () Grocery () Other (Identify) _____

Type of Ownership () Individually Owned () Partnership () Corporation

*(If Ownership is any category other than **INDIVIDUAL**, list partners or corporate officers in the space provided below. Attach additional sheet if needed)*

Name	Title	Social Security Number
Resident Address		Telephone Number
Name	Title	Social Security Number
Resident Address		Telephone Number

Have you ever been convicted of any crime? If yes, name of offense _____

Alcoholic Beverage to be consumed () On Premises () Off Premises

I wish to be licensed at this location to sell () Beer Only () Wine Only () Beer and Wine Only
 () Beer, Wine, Liquor (Package Shops Only) () Beer, Wine and Liquor

Is the business location within two hundred (200) yards of any church, shrine, chapel, mortuary or other place used exclusively for religious services or any school, college campus, kindergarten, or daycare center, where more than five (5) children are kept on a regular basis? () YES or () NO

All distances set out hereunder shall be measured in accordance with the provisions of Georgia State Regulation 560-2-2-32.

ALCOHOLIC/BEVERAGE CERTIFICATE FEE SCHEDULE:	Check ALL the applicable fees due.
Beer by the package, consumption off premises only (IC 592130.00).....	\$ 500.00 ___
Wine by the package, consumption off premises only (IC 592132.00).....	\$ 500.00 ___
Beer & Wine by the package, consumption off premises only (IC 592131.00).....	\$ 1,000.00 ___
Beer, Wine, Liquor (Package Shops Only) (IC 592100.00)	\$ 1,500.00 ___
Any Beverage Consumption on Premises (IC 722410.00).....	\$ 1,750.00 ___
Sunday Sales (IC 592140.00).....	\$ 250.00 ___ (Restaurant/Caterer Affidavit Required)
Background Check Fee (IC 999.00).....	\$ 25.00 ___ (Fee required or copy of Bar Card)
Total of Alcoholic/Beverage Certificate Fees Dues	\$ _____

I, _____ do solemnly swear that the facts and statements made by me in the above and foregoing answers to questions in the application as a dealer to sell alcoholic beverages are true, and no false or fraudulent statement is made therein to procure the granting of such license.

Applicant Name: _____ Title: _____ Email: _____

Applicant Signature: _____ Date: _____ Phone: _____

RETURNED CHECK DISCLAIMER: When you make a payment by check, you authorize us to use information from your check to make a one-time electronic fund transfer from your checking account according to the terms of your check or to process that transaction as a check. When we use your check to make an electronic fund transfer, funds may be withdrawn from your checking account the same day we receive your payment, and you will not receive your check back from your financial institution. If there are insufficient funds in your checking account, you authorize us to charge a Returned Payment Fee as applicable in the amount set forth by law and collect that amount through an electronic fund transfer from your checking account, if permitted by applicable law. If another payment method is returned unpaid, by your bank, we may, if permitted by applicable law, charge a Returned Payment Fee.

Business Name: _____

Account #: _____



CITY OF RICHMOND HILL, GA PRIVATE EMPLOYER AFFIDAVIT

****REQUIRED****

Pursuant to O.C.G.A. § 36-60-6(d), by executing this affidavit under oath, as an applicant 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), from the City of Richmond Hill, the undersigned applicant representing the private employer, verifies one of the following with respect to the application for the above mentioned documents:

1. Fill out this section after December 1, 2013.

- a) ___ On January 1st of the below signed year the individual, firm, or corporation employed more than ten (10) employees.
- b) ___ On January 1st of the below signed year the individual, firm, or corporation employed less than ten (10) employees.

If the employer selected (a) please fill out section 2 below. This is not your Federal Tax ID Number (EIN).

2. The employer has registered with and utilizes the federal work authorization program, also known as E-Verify, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6(a). The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are listed below:

Federal Work Authorization User Identification Number

Date of Authorization

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false statement, 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 by such statute.

Executed on the ____ day of _____, 20____ in _____ (City), _____ (State)

Signature of Authorized Officer or Agent

Business Name

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

****FORM REQUIRED**** This form must be completed and returned with your Richmond Hill Occupational Tax Renewal and payment. Failure to return this completed Private Employer Affidavit with your renewal and payment will delay the issuance of your occupational tax certificate.

Business Name: _____

Account #: _____

**AFFIDAVIT AND APPLICATION FOR PERMIT
TO DISPENSE ALCOHOLIC BEVERAGES ON SUNDAY**



RESTAURANT/CATERER

The Richmond Hill code permits a restaurant holding a city business tax certificate to dispense alcoholic beverages for consumption on the premises between the hours of 11:00 am Sunday and 12:00 am (midnight) under certain conditions.

To be authorized to dispense alcoholic beverages for consumption on the premises during the specified hours on Sunday, your establishment must:

- (a) Be licensed by the city to sell alcoholic beverages by the drink for consumption on the premises;
- (b) Be a bona fide public eating place or catering service, a licensed restaurant which actually and regularly prepares and serves food on the premises, or in case of a catering service actually delivers and serves food at the catered location;
- (c) Derive at least 50% of its total annual gross sales from the sale of prepared meals or food;
- (d) In the case of a restaurant, have a full kitchen facility open and operating to prepare food on the premises for consumption in the establishment, such kitchen to include, at a minimum, one (1) cooking stove and or oven or equivalent apparatus (this requirement is not met by a microwave oven and or food rotisserie), one (1) standard size food refrigerator and freezer, kitchen sink and any and all food service requirements of the Bryan County Health Department; in the case of a caterer, have a fully open and operating catering business to prepare and deliver food to the catered venue for consumption on the catered venue, including adequate equipment for the transportation, keeping and serving of full course meals at the catered venue, and any and all food service requirements of the Bryan County Health Department;
- (e) In the case of a restaurant, have a specific area of the establishment set aside, set up and operating to serve prepared food on the premises; in the case of a caterer, have a specific area of the catered venue set aside, set up and operating to serve prepared food at the catered venue;
- (f) Have a printed or posted menu from which selections for prepared food can be made;
- (g) Provide full food service to the public on any Sunday when alcoholic beverages are dispensed;
- (h) Complete the following affidavit and submit it to the city of Richmond Hill along with the required Sunday Sales Permit fee; and display on your premises a current city alcoholic beverage license document which indicates that Sunday sales are permitted.

- 1. License Year _____ Account Number: _____ (See Renewal Application)
- 2. Date ____/____/____
- 3. Name of Business _____
- 4. Location of Business _____
- 5. Phone _____ Email _____
- 6. Applicant Name _____
(Must be same as person holding Alcoholic Beverage License)
- 7. Current Year's City License Numbers: Alcohol _____ Business _____

8. (A) _____ **Renewal or Transfer** Check here if you are filing this affidavit for an existing business, and complete the following section.

I certify that the establishment named above (a) holds a current City of Richmond Hill restaurant/caterers business tax certificate; (b) is a bona fide public eating place, a restaurant or catering service which actually and regularly prepares and serves food on the premises; (c) derived at least fifty percent of its total annual gross food and beverage sales income from the sale of prepared meals or food during the preceding calendar year, or portion if business was in operation for less than the full calendar year; (d) has a full kitchen facility open and operating to prepare food on the premises for consumption in the establishment, and such kitchen includes at a minimum one cooking stove and or oven or equivalent apparatus, one standard size food refrigerator and freezer, kitchen sink, and meets all food service requirements of the Bryan County Health Department; (e) has a specific area of the establishment set aside, set up, and operating to serve prepared food on the premises; (f) has a printed or posted menu from which selections for prepared food can be made; (g) provides full food service to the public on any Sunday when alcoholic beverages are dispensed; (h) has provided true and correct revenue information below. **If YES, _____ initial here.**

Previous year's revenue from:

Prepared meals and food \$ _____ %

Alcoholic beverages, including all components of mixed drinks \$ _____ %

Total revenues from food and alcoholic beverage sales \$ _____ %

(B) _____ **New Business** Check here if you are filing this affidavit for a new business, and complete the following.

I certify that the establishment named above (a) holds a current City of Richmond Hill restaurant/caterers business tax certificate; (b) is a bona fide public eating place, a restaurant or catering service which will actually and regularly prepare and serve food on the premises; (c) fully intends and expects to derive at least 50% of its total annual gross food and beverage income from the sale of prepared meals or food during the remainder of the current calendar year; (d) will provide full food service to the public on any Sunday when alcoholic beverages are dispensed. Further, I understand that I must submit a renewal affidavit if authority for Sunday alcoholic beverage sales is to be continued next year. **If YES, _____ initial here.**

Business Name: _____

Account #: _____

**AFFIDAVIT AND APPLICATION FOR PERMIT
TO DISPENSE ALCOHOLIC BEVERAGES ON SUNDAY
CONTINUED**



RESTAURANT/CATERER

9. ANSWER THE FOLLOWING QUESTIONS COMPLETEY AND ACCURATELY:

(A) For a restaurant: Is the full kitchen facility open and operating to prepare food on the premises for consumption in the establishment? For a caterer: Is adequate equipment available and operating for the preparation, transportation, keeping and serving of full course meals at the catered venue? YES NO

Explain _____

(B) For a restaurant: Does the kitchen include, at a minimum, one (1) cooking stove and/or oven or equivalent apparatus, one (1) standard sized food refrigerator and freezer, and kitchen sink? YES NO

Explain _____

(C) Does the kitchen meet all food service requirements of the Bryan County Health Department? YES NO

Explain _____

(D) For a restaurant: Is a specific area of the establishment set aside, set up and operating to serve prepared food on the premises? For a caterer: Will a specific area of the catered venue be set aside, set up and operating to serve prepared food at the catered venue?

YES NO

Explain _____

(E) Does the establishment have a printed or posted menu from which prepared food can be a selected? YES NO

Explain _____

10. Do you understand, acknowledge, and agree that if the City should call upon you to provide documentary evidence of any claim made in this affidavit, you will provide such evidence promptly and completely, including financial records in sufficient detail to prove that the required sales income ratio is being met? **If YES, initial here** _____.

11. Do you affirm that you are familiar with and understand City ordinance and Georgia law on Sunday sale of alcoholic beverages, and that you intend to comply fully with said ordinance and law? **If YES, initial here** _____.

Before the City of Richmond Hill will issue a Sunday Alcohol Sales Permit to your business, a city representative may inspect your facility to verify the operation of "a bona fide full service restaurant" and that all requirements of state law and city ordinances have been met; a Sunday Sales Permit will not be issued unless all requirements are met.

TAKE NOTICE: ANY FALSE STATEMENT MADE ON THIS AFFIDAVIT SHALL BE GROUNDS FOR

- (a) Revocation of your permit to sell alcoholic beverages on Sunday;**
- (b) Revocation of your City license to sell alcoholic beverage at any time;**
- (c) Action to prosecute you under the law for swearing to false information.**

ALL ABOVE INFORMATION IS GIVEN UNDER OATH, WILLFULLY, KNOWINGLY, AND ABSOLUTELY, AND IS HEREBY SWORN TO BE TRUE, CORRECT, AND COMPLETE UNDER PENALTY FOR FALSE SWEARING, AS PROVIDED BY LAW.

Sworn to and subscribed before me
 This _____ day of _____, 20____

Notary Public

Applicant's Signature

Date signed by applicant

ACCOUNTANT'S CERTIFICATION OF REVENUES

I certify that I have reviewed financial records of the business described above and based on my review of the records provided and to the best of my knowledge the revenue information given in question 8(A) truly and correctly represents the allocation of revenues of the business.

Public Accounting Firm

Date

Public Accountant

License/Professional Number

Certifying Signature