

Augusta-Richmond County  
1815 Marvin Griffin Road  
Augusta, GA 30906

### ALCOHOL BEVERAGE APPLICATION

Alcohol Number \_\_\_\_\_ Year 2024 Alcohol Account Number 2024-367

1. Name of Business Parker's #110
2. Business Address 3661 Mike Padgett Hwy
3. City Augusta State GA Zip 30906
4. Business Phone (706) 785-0003 Home Phone (843) 898-3634
5. Applicant Name and Address: 3113 Westwood Circle  
Beaufort, SC 29906
6. Applicant Social Security # \_\_\_\_\_ D.O.B. \_\_\_\_\_
7. If Application is a transfer, list previous Applicant: \_\_\_\_\_
8. Business Location: Map & Parcel 157-0-006-01-0 Zoning \_\_\_\_\_
9. Location Manager(s) Karl E. Hunsinger, Jr.
10. Is Applicant an American Citizen or Alien lawfully admitted for permanent residency?  
(X) Yes ( ) No

### OWNERSHIP INFORMATION

11. Corporation (if applicable): Date Chartered: \_\_\_\_\_
12. Mailing Address:  
Name of Business Gregory M. Parker, Inc.  
Attention Blake L. Greco, General Counsel  
Address 171 Crossroads Parkway  
City/State/Zip Savannah, GA 31407
13. Ownership Type: (x) Corporation ( ) Partnership ( ) Individual
14. Corporate Name: Gregory M. Parker, Inc.  
List name and other required information for each person having interest in this business.

Name	Position	SSNO #	Address	Interest
Gregory M. Parker	Owner/CEO		10 E. Taylor Street, Savannah, GA	100%

15. What type of business will you operate in this location?  
( ) Restaurant ( ) Lounge (x) Convenience Store  
( ) Package Store ( ) Other: \_\_\_\_\_

License Information	Liquor	Beer	Wine	Dance	Sunday Sales
Retail Package Dealer		x	x		x
Consumption on Premises					
Wholesale					

Total License Fee: \$ 120.00  
Prorated License Fee: (After July 1 ONLY) \$ \_\_\_\_\_

16. Have you ever applied for an Alcohol Beverage License before: Yes  
If so, give year of application and its disposition: See attached Exhibit "A"
17. Are you familiar with Georgia and Augusta-Richmond County laws regarding the sale of alcoholic beverages? (x) Yes ( ) No If so, please initial. [Signature]

18. Attach a passport-size photograph (front view) taken within two years. Write name on back of the dealer submitting the license application.



19. Has any liquor business in which you hold, or have held, any financial interest, or are employed, or have been employed, ever been cited for any violation of the rules and regulations of Augusta-Richmond County or the State Revenue Commission relating to the sale and distribution of distilled spirits? ( ) Yes (X) No  
If yes, give full details: \_\_\_\_\_

20. Have you ever been arrested, or held by Federal, State, or other law-enforcement authorities, for any violation of any Federal, State, County or Municipal law, regulation or ordinance? (Do not include traffic violations, with the exception of any offenses pertaining to alcohol or drugs.) All other charges must be included, even if they are dismissed. ( ) Yes (X) No  
If yes, give reason charged or held, date and place where charged and its disposition. \_\_\_\_\_

21. List owner or owners of building and property.

Property: Drayton-Parker Companies, LLC

Building: Gregory M. Parker, Inc.

22. List the name and other required information for each person, firm or corporation having any interest in the business.

Gregory M. Parker

23. If a new application, attach a surveyor's plat and state the straight line distance from the property line of school, church, library, or public recreation area to the wall of the building where alcohol beverages are sold.

A.) Church 872 yds

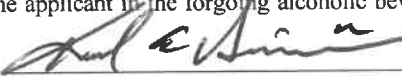
C.) School 2,235 yds

B.) Library 6,370 yds

D.) Public Recreation 1,933 yds

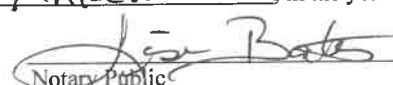
24. State of Georgia, Augusta-Richmond County, I, Karl E. Hunsinger, Jr.

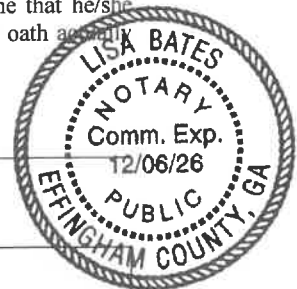
Do solemnly swear, subject to the penalties of false swearing, that the statements and answers made by me as the applicant in the foregoing alcoholic beverage application are true.

  
Applicant Signature



25. I hereby certify that Karl E. Hunsinger, Jr. is personally known to be, that he/she signed his/her name to the foregoing application stating to me that he/she knew and understood all statements and answers made herein, and, under oath administered by me, has sworn that said statements and answers are true.

This 1<sup>st</sup> day of MARCH, in the year 2024.

  
Notary Public



**FOR OFFICE USE ONLY**

Department Recommendation	Approve	Deny	Comments
Alcohol Inspector			
Sheriff			
Fire Inspector			

The Board of Commissioners on the \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_  
(Approved, Disapproved) the forgoing application.

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
Date