

Augusta-Richmond County Planning & Development Department
 1803 Marvin Griffin Road
 Augusta, GA. 30906

ALCOHOL BEVERAGE APPLICATION

2023-746

Alcohol Number _____ Year _____ Alcohol Account Number 2024-753

1. Name of Business Kitchen Kings x Natta's Sweet Treats LLC
2. Business Address 1370 Gordon Hwy Suite B
3. City Augusta State GA Zip 30901
4. Business Phone (706) 303-4877 Home Phone ()
5. Applicant Name and Address: Benatta Early
329 Alex Ln
Augusta GA 30909
6. Applicant Social Security # _____ D.O.B. _____
7. If Application is a transfer, list previous Applicant: _____

8. Business Location: Map & Parcel _____ Zoning _____
9. Location Manager(s) Nancy Early, Christopher Hayes
Angie Hill
10. Is Applicant an American Citizen or Alien lawfully admitted for permanent residency?
 Yes No

OWNERSHIP INFORMATION

11. Corporation (if applicable): Date Chartered: Kitchen Kings x Natta's Sweet Treats LLC
12. Mailing Address:
 Name of Business Kitchen Kings x Natta's Sweet Treats LLC
 Attention Benatta Early
 Address 1370 Gordon Hwy Suite B
 City/State/Zip Augusta GA 30901
13. Ownership Type: Corporation Partnership Individual
14. Corporate Name: Kitchen Kings x Natta's Sweet Treats LLC
 List name and other required information for each person having interest in this business.

| Name | Position | SSNO# | Address | Interest |
|----------------------|--------------|-------|------------------------------------|--------------|
| <u>Alexander Mac</u> | <u>owner</u> | | <u>1428 Florence St Augusta GA</u> | <u>30901</u> |
| <u>Benatta Early</u> | <u>owner</u> | | <u>329 Alex Ln Augusta GA</u> | <u>30909</u> |
| | | | | |

15. What type of business will you operate in this location?
 Restaurant - Full Lounge Convenience Store
 Restaurant - Limited Package Store Hybrid
 Other: _____

| License Information | Liquor | Beer | Wine | Dance | Sunday Sales |
|-------------------------|----------|----------|----------|-------|--------------|
| Retail Package Dealer | | | | | |
| Consumption on Premises | <u>X</u> | <u>X</u> | <u>X</u> | | <u>X</u> |
| Wholesale | | | | | |

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

16. Have you ever applied for an Alcohol Beverage License before: No
 If so, give year of application and its disposition: N/A
17. Are you familiar with Georgia and Augusta-Richmond County laws regarding the sale of alcoholic beverages? Yes No If so, please initial RE



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.
Virenda Engineer

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

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.

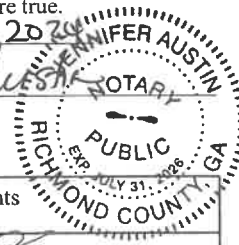
- A) Church _____ C) School _____
B) Library _____ D) Public Recreation _____

24. State of Georgia, Augusta-Richmond County, I, Renatta Early
Do solemnly swear, subject to the penalties of false swearing, that the statements and answers made by me as the applicant in the forgoing alcoholic beverage application are true.

Renatta Early
Applicant Signature

25. I hereby certify that Renatta Early is personally known to be, That he/she signed his/her name to the forgoing allocation stating to me that he/she knew and understood all statements and answers made herein, and, under oath actually administered by me, has sworn that said statements and answers are true.
This 5th day of June, in the year 2020

Jennifer Austin
Notary Public



FOR OFFICE USE ONLY

| Department Recommendation | Approve | Deny | Comments |
|---------------------------|---------|------|--------------------|
| Alcohol Inspector | ✓ | | <u>[Signature]</u> |
| Sheriff | ✓ | | <u>[Signature]</u> |
| Fire Inspector | | | |

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

Administrator Date