

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

ALCOHOL BEVERAGE APPLICATION

Alcohol Number _____ Year _____ Alcohol Account Number _____

1. Name of Business 5th and Fire
 2. Business Address 551 Broad st
 3. City Augusta State GA Zip 30901
 4. Business Phone (864) 207 0688 Home Phone () _____
 5. Applicant Name and Address: James Kluga
207 Horse Head Pt Dr
Seneca SC 29672
 6. Applicant Social Security # _____ D.O.B. _____
 7. If Application is a transfer, list previous Applicant: _____
-
8. Business Location: Map & Parcel 047-1-024-0000 Zoning _____
 9. Location Manager(s) Erik Rum
-
10. Is Applicant an American Citizen or Alien lawfully admitted for permanent residency?
 Yes () No

OWNERSHIP INFORMATION

11. Corporation (if applicable): Date Chartered: 11/05/2019 5th and Fire, LLC
12. Mailing Address:
 Name of Business 5th and Fire LLC
 Attention Jay Kluga
 Address 1033 Broad st
 City/State/Zip Augusta GA 30901
13. Ownership Type: () Corporation () Partnership () Individual
14. Corporate Name: _____
 List name and other required information for each person having interest in this business.

Name	Position	SSNO#	Address	Interest
<u>James Kluga</u>	<u>CEO</u>		<u>207 Horse Head Pt Dr</u> <u>Seneca SC 29672</u>	<u>82%</u>
<u>Thomas Crowe</u>	<u>Vice Pres</u>		<u>206 Great Circle</u> <u>Clemson SC 29631</u>	<u>18%</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	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Wholesale					

Total License Fee: \$ _____
 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: 2015 - Sold Augusta - still have License
17. Are you familiar with Georgia and Augusta-Richmond County laws regarding the sale of alcoholic beverages? Yes () No If so, please initial JK



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.
SSI Broad St LLC (Klugo 82.7% / Grotz 18%)

22. List the name and other required information for each person, firm or corporation having any interest in the business.
none

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, James Klugo
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.

25. I hereby certify that James Klugo 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 16th day of May in the year _____

Applicant Signature [Signature]
Notary Public [Signature]
NOTARY PUBLIC
JENNIFER AUSTIN
RICHMOND COUNTY, GA
Exp. July 31, 2008

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 _____