

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

ALCOHOL BEVERAGE APPLICATION

- Alcohol Number _____ Year _____ Alcohol Account Number _____
- Name of Business Tee It Up Indoor Golf
 - Business Address 3626 Walton Way Ext. Suite 300 State GA Zip 30709
 - City Augusta
 - Business Phone (706) 799-7800 Home Phone () _____
 - Applicant Name and Address: Michael L. Parrish
525 Tudor Br.
Grovetown, GA 30813
 Email address mparrish0291@gmail.com
 D.O.B. _____
 - Applicant Social Security # _____
 - If Application is a transfer, list previous Applicant: _____

- Business Location: Map & Parcel _____ Zoning _____
- Location Manager(s) Michael Parrish, Christopher S. Toy,
Wendy McGhee and Houston McGhee

- Is Applicant an American Citizen or Alien lawfully admitted for permanent residency?
 Yes () No

OWNERSHIP INFORMATION

- Corporation (if applicable): Date Chartered: 8/5/2024
 - Mailing Address: _____
 Name of Business Tee It Up Indoor Golf, LLC
 Attention Michael Parrish
 Address 525 Tudor Br.
 City/State/Zip Grovetown, GA 30813
 - Ownership Type: Corporation () Partnership () Individual
 - Corporate Name: Tee It Up Indoor Golf LLC
- List name and other required information for each person having interest in this business.

Name	Position	SSNO#	Address	Interest
Michael L. Parrish	Member		525 Tudor Br. Grovetown, GA 30813	40%
Wendy McGhee	Member		204 Covington Ave Grovetown, GA 30813	40%
Christopher Toy	Member		2006 Toby Ct Augusta, GA 30907	20%

- 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) \$ _____
- Have you ever applied for an Alcohol Beverage License before: No
 If so, give year of application and its disposition: _____

- Are you familiar with Georgia and Augusta-Richmond County laws regarding the sale of alcoholic beverages? Yes () No If so, please initial MLP



18. Attach a passport-size photograph (front view) taken within two weeks of the name on back of this license, submitting the license application.

19. Has any liquor business in which you have held a 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:

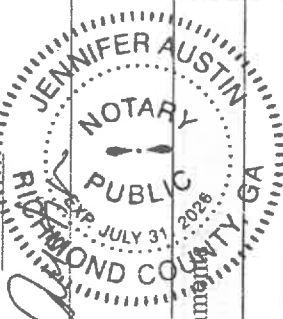
20. Have you ever been arrested, or cited by Federal, State, or other law-enforcement authorities, for any violation of any Federal, State, County or Municipal law, regulation or ordinance: (Do not include traffic violations, with the exception of any offenses pertaining to alcohol or drugs). All other 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.
Pam Parrish 2743 Perimeter Parkway
c/o Southeastern Real Estate Group, LLC Building 100, Suite 370
Augusta, GA 30909

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

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 _____
State of Georgia, Augusta-Richmond County, I Michael L. Parrish
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.

24. I hereby certify that Michael L. Parrish is personally known to be, That he/she signed his/her name to the foregoing application relating 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 4th day of October, in the year 2024



Jennifer Austin
Notary Public
Richmond County, GA

FOR OFFICE USE ONLY	
Department	Approve Deny
Recommendation	
Alcohol Inspector	
Sheriff	
Fire Inspector	

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

Administrator Date