

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

ALCOHOL BEVERAGE APPLICATION

Alcohol Number _____ Year _____ Alcohol Account Number _____

1. Name of Business A&E SPORTS BAR AND LOUNGE
2. Business Address 2623 DEANS BRIDGE RD, AUGUSTA, GA 30906
3. City Augusta State GA Zip 30909
4. Business Phone (803) 645-4378 Home Phone (____) _____
5. Applicant Name and Address: EDWARD O HENDERSON JR
1848 FORMOSA DR
AUGUSTA, GA 30906
6. Applicant Social Security # _____ D.O.B. _____
7. If Application is a transfer, list previous Applicant:
NO TRANSFER
8. Business Location: Map & Parcel 086-1-001-00-0 Zoning B2
9. Location Manager(s) _____
10. Is Applicant an American Citizen or Alien lawfully admitted for permanent residency?
() Yes () No

OWNERSHIP INFORMATION

11. Corporation (if applicable): Date Chartered: _____
12. Mailing Address:
Name of Business _____
Attention _____
Address _____
City/State/Zip _____
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
EDWARD O HENDERSON JR			1848 FORMOSA DR AUGUSTA, GA 30906	

15. What type of business will you operate in this location?
() Restaurant () Lounge () Convenience Store
() Package Store () Other: SPORTS BAR AND LOUNGE

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"/>		
Wholesale					

Total License Fee: \$ 120.00
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: _____
17. Are you familiar with Georgia and Augusta-Richmond County laws regarding the sale of alcoholic beverages? () Yes () No If so, please initial. _____



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 Richmond County or the State Revenue Commission relating to the sale and distribution of distilled spirits? () Yes (✓) 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 (✓) 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.

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

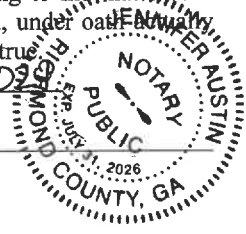
23. If a new application, attach a surveyor's plat and state the straight line distance from the property line of school, church, library, or public recreation area to the wall of the building where alcohol beverages are sold.
A.) Church .04 miles _____ C.) School 1.4 miles _____
B.) Library 2.8 miles _____ D.) Public Recreation .09 miles _____

24. State of Georgia, Augusta-Richmond County, I, EDWARD O HENDERSON JR
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.

Edward Henderson Jr
Applicant Signature

25. I hereby certify that Edward Henderson 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 13th day of November, in the year 2020

Justin Austin
Notary Public



FOR OFFICE USE ONLY

Department Recommendation	Approve	Deny	Comments
Alcohol Inspector	✓		<i>Justin Austin</i>
Sheriff	✓		
Fire Inspector			

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

Administrator Date