

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

**ALCOHOL BEVERAGE APPLICATION**

Alcohol Number \_\_\_\_\_ Year \_\_\_\_\_ Alcohol Account Number \_\_\_\_\_

1. Name of Business Lotto Market 2, LLC DBA : Lotto Market
2. Business Address 2762 Tobacco Rd.
3. City Hephzibah State Georgia Zip 30815
4. Business Phone (\_\_\_\_) \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_
5. Applicant Name and Address: Karthik Kumar Allati  
4720 Laural Oak Dr.  
Hephzibah, GA. 30815
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) Karthik Kumar Allati
10. Is Applicant an American Citizen or Alien lawfully admitted for permanent residency?  
 Yes  No

**OWNERSHIP INFORMATION**

11. Corporation (if applicable): Date Chartered: 07/18/2024
12. Mailing Address:  
 Name of Business Lotto Market  
 Attention Karthik K. Allati  
 Address 4720 Laural Oak Dr.  
 City/State/Zip Hephzibah, GA, 30815
13. Ownership Type:  Corporation  Partnership  Individual
14. Corporate Name: Lotto Market 2, LLC  
 List name and other required information for each person having interest in this business.

Name	Position	SSNO #	Address	Interest
Karthik Kumar Allati	Member-Owner		4720 Laural Oak Dr. Hephzibah, GA. 30815	100%

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

License Information	Liquor	Beer	Wine	Dance	Sunday Sales
Retail Package Dealer		X	X		
Consumption on Premises					
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: \_\_\_\_\_
17. Are you familiar with Georgia and Augusta-Richmond County laws regarding the sale of alcoholic beverages?  Yes  No  
 If so, please initial. AK



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 (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.  
Trulin Enterprises, LLC - Jagdish Patel

22. List the name and other required information for each person, firm or corporation having any interest in the business.  
Karthik K. Allati 100% Owner

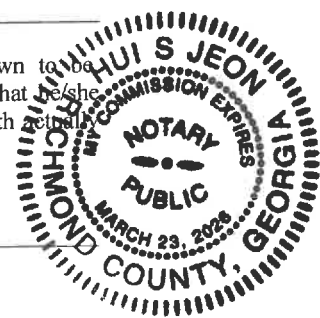
23. If a new application, attach a surveyor's plat and state the straight line distance from the property line of school, church, library, or public recreation area to the wall of the building where alcohol beverages are sold.  
A.) Church \_\_\_\_\_ C.) School \_\_\_\_\_  
B.) Library \_\_\_\_\_ D.)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

24. State of Georgia, Augusta-Richmond County, I, Karthik Kumar Allati  
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.

Karthik Kumar Allati  
Applicant Signature

25. I hereby certify that Karthik Kumar Allati is personally known to me 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 05 day of August, in the year 2024.

[Signature]  
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