

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

ALCOHOL BEVERAGE APPLICATION

Alcohol Number 25-42 Year 2025 Alcohol Account Number WB20250000959

1. Name of Business Prosper Investments Inc DBA Dream 10110
2. Business Address 2450 D Windsor Spring Road
3. City Augusta State GA Zip 30906
4. Business Phone (262) 372-2114 Home Phone ()
5. Applicant Name and Address: Chaitanya Cherkopalli

6. Applicant Social Security # [REDACTED] D.O.B. [REDACTED]
7. If Application is a transfer, list previous Applicant: [REDACTED]

8. Business Location: Map & Parcel NO 131-0-026-00-00 Zoning Commercial
9. Location Manager(s) Ravi Menuganti
214 Howard Rd, Augusta GA, 30906

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 Prosper Investments Inc DBA Dream 10110
Attention 2450 D Windsor Spring Road
Address Augusta GA 30906

13. Ownership Type: ☒ Corporation () Partnership () Individual
14. Corporate Name: Prosper Investments Inc
List name and other required information for each person having interest in this business.

Name	Position	SSNO#	Address	Interest
Chaitanya Cherkopalli	Owner	[REDACTED]	[REDACTED]	Owner
			[REDACTED]	100%
			[REDACTED]	

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					
Wholesale					

Total License Fee. \$ 1330
Prorated License Fee: (After July 1 ONLY) \$ 665

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 cc



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 (☒) 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. AK . KALIFA commercial, SODA investments 2015
List the name and other required information for each person, firm or corporation having any interest in the business.

23. Chaitanya Charlopalli
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 2.4 mil C) School 240'
B) Library 2-3 mil D) Public Recreation 3 miles
24. State of Georgia, Augusta-Richmond County, I, Chaitanya Charlopalli
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 Chaitanya Charlopalli is personally known to me that he/she signed his/her name to the forgoing allocation stating to me that he/she is the owner of the business and understood all statements and answers made herein, and, under administration by me, has sworn that said statements and answers are true.
This 22 day of Sep., in the year 2022

Applicant 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