

Augusta - Lenoir and Co. - Development Department
1805 - 1807 - 1809 - 1811 - 1813 - 1815 - 1817
Augusta, Georgia 30903

APPLICATION

Alcohol License No. _____ V.a. _____ Alcohol Account Number _____

1. Name of Business Gas World #27
2. Business Address 3232 Deans Bridge Rd
3. City Augusta State GA Zip 30906
4. Business Phone (912) 425-1777 Home Phone ()
5. Applicant Name and Address: Deep Patel
725 Industrial Park Dr, Suite B
Evans, GA 30809
Email address deep@gasworldstores.com
6. Applicant Social Security # _____
7. If Application is a transfer, list previous Applicant:

8. Business Location: Map & Parcel _____ Zoning _____
9. Location Manager(s): Deep Patel

10. Is Applicant an American Citizen or Alien lawfully admitted for permanent residency?
 Yes No

OWNERSHIP INFORMATION

11. Corporation (if applicable); Date Chartered: Laxmi 27 LLC
12. Mailing Address:
Name of Business Gas World 27
Attention Deep Patel
Address 725 Industrial Park Dr
City/State/Zip Evans, GA 30809
13. Ownership Type Corporation Partnership Individual
14. Corporate Name: Laxmi 27 LLC
List name and other required information for each person having interest in this business.

| Name | Relation | Percentage | Address | Phone |
|-------------------|--------------|------------|--|-------|
| <u>Deep Patel</u> | <u>Owner</u> | | <u>725 Industrial Park, Evans 100%</u> | |
| | | | | |
| | | | | |
| | | | | |

15. What type of business will you conduct in this location?
 Restaurant - Full Service Liquor Convenience Store
 Restaurant - Limited Package Store Other
 Other _____

| License Information | Liquor | Spirits | Wine | Dance | Sunday Sales |
|------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| Retail Beverage Dealer | <input checked="" type="checkbox"/> |
| Convenience Store | | | | | |
| Wholesale | | | | | |

Total License Fee \$ _____
Excempted License Fee (After July 1, 1991) \$ _____

16. Have you ever applied for an Alcohol Beverage License before: Yes
If so, give year of application and its district license: all active

17. Are you familiar with Georgia and Augusta Richmond County laws regarding the sale of Alcoholic Beverages? (Yes No) If so, please initial D.P.



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

19. Has any liquor business in which you 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.
2022, Case Dismissed

21. List owner or owners of building and property.
Laxmi 27 LLC

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 plan 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 _____

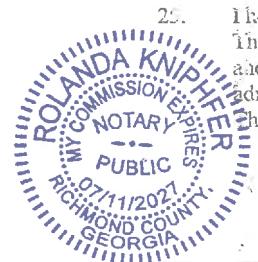
24. State of Georgia, Augusta-Richmond County, Deep Patel. Do solemnly swear, subject to the penalties of false swearing, that the statements and answers made by me as the applicant, in the foregoing alcoholic beverage application are true.

gsp
Signature

25. I hereby certify that Deep Patel 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 actually administered by me, has sworn that said statements and answers are true.

This 22 day of OCTOBER, in the year 2024.

Roland Knipffer
Notary Public



FOR OFFICE USE ONLY

| Department | Approve | Deny | Comments |
|-------------------|---------|------|----------|
| Recommendation | | | |
| Alcohol Inspector | | | |
| Sheriff | | | |
| Fire Inspector | | | |

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

Administrator

Date