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

## ALCOHOL BEVERAGE APPLICATION

Alcoh	ol Number LCIS	12190000764	Year	_ Alcohol Acco	ount Number		
1	N CD.	1-0:-	AL D.1	6.0			
1.	Name of Busin	ness _acizo	Mediter Canen	h Gall			
2. 3.		ress 910 Brand		State GA	7: 0	• A'- 1	
3. 4.	City Augusta	17n ) (14	1-7710	Hama Dhama (	_Zip _3	240	
4. 5.			1-1710	Home Phone (	).		
٥,	Applicant Nai	ne and Addres		7 1 1			
			3590 Adde				
,	A 11 4 0	. 10	Martinez C	# A 30907	DOR		
6.		ial Security#			D.O.B.		
7.	II Application	is a transfer, in	st previous App	licant:	,		
8.	Business Location: Map & Parcel TMP 037-3-088-00-0 Zoning						
9.	Location Manager(s) Joshua Oversun						
10.	Is Applicant a	Ν̈́ο	tizen or Alien la		-	nt residency?	
			RSHIP INF	77.6	N		
11.	Corporation (	if applicable):	Date Chartered:	2/21/2019			
12.	Mailing Addr	Mailing Address:					
	Name of Business Laziza Resources LLC Attention Nadar Month						
	Attention Nadar Wastib						
	Address 90 Bond Sr						
	City/S	State/Zip	AUGUSTA, GA 1	10901			
13.	Ownership Ty	pe: (ঠ) Corpo	ration ()	Partnership	( ) Indi	ividual	
14.	Corporate Na	Corporate Name: Loziza Restaurat LLC					
	List name and	other required	information for	each person ha	ving interest i	n this business.	
		1				9	
Nam	е .	Position	SSNO#	Addres	ss	Interest	
1 1			3445	3592 0111	3590 Pelle Buch Dr		
	Nader Whats parsmer			- 1205(			
Elizabeth Khyns a		partner		1590 Held	3500 Pelde Buch Dr		
		N. Committee					
_		<del> </del>		_		_	
15.	What type of	business will y	ou operate in thi	s location?			
	( ) Restaurant - Full ( ) Lounge ( ) Convenience Store						
	(2) Restaurant - Limited ( ) Package Store ( ) Hybrid						
	( ) Other:	`	,				
	` ′						
Licen	se Information		Liquor Bee	er Wine	Dance	Sunday Sales	
	Package Dealer			_			
	amption on Pren		///	-			
	esale						
100							
	Total License	Fee: \$					
	Prorated Lice	Prorated License Fee: (After July 1 ONLY) \$					
16.	Have you ever applied for an Alcohol Beverage License before: 455						
10.	If ea give year of application and its disnocition: ADIX / small						
	If so, give year of application and its disposition: 2018 / application						
				7.0			
17	A C	tiial Co	d= =d A	n:-1	-4 1	.1:	
17.			ia and Augusta-		nty laws regar	uing the sale of	
	alcoholic bev	erages? 🌽 ) Y	es ( ) No If so	o, please initial			

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: Have you ever been arrested, or held by Federal, State, or other law-enforcement 20. 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 ( No dismissed. ( ) Yes If yes, give reason charged or held, date and place where charged and its disposition. 21. List owner or owners of building and property. 401-903 Broad St. LLC List the name and other required information for each person, firm or corporation 22. having any interest in the business. If a new application, attach a surveyor's plat and state the straight line distance from the 23. property line of school, church, library, or public recreation area to the wall of the building where alcohol beverages are sold. C) School A) Church D) Public Recreation B) Library State of Georgia, Augusta-Richmond County, I, Made White 24. Do solemnly sear, subject to the penalties of false swearing, that the statements and answers made by me as the applicant in the forgoing alcoholic bevorage application are true. Applicant Signature I hereby certify that Nader Khatib is personally known to be, 25. That he/she signed his/her name to the forgoing allocation 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. WILLIAM KANE THRIFT **NOTARY PUBLIC** Richmond County State of Georgia Notary Public My Comm. Expires Oct. 17, 2027 FOR OFFICE USE ONLY Deny Comments Department Approve Recommendation Alcohol Inspector Sheriff Fire Inspector The Board of Commissioners on the day of in the year (Approved, Disapproved) the forgoing application Administrator Date

Attach a passport-size photograph (front view) taken within two years.