

3120 Stonecrest Blvd First Floor, Suite 190 Stonecrest GA 30038 Phone: 770.224.0200 Website: www.stonecrestga.gov

City of Stonecrest

2024 ALCOHOL LICENSE RENEWAL AFFIDAVIT

The undersigned,		, being duly sworn, says the following:
	(Licensee)	

The statement and answers made by me to the questions in this renewal application are true and correct and all the information contained in the original application is accurate. I understand that such application is made a part of this renewal application. No false or fraudulent information, statements, or answers are made to procure the granting of the City Privilege License.

There have been no changes in any information and data contained in and furnished with my original City of Stonecrest Business Registration application.

I am familiar with all laws, rules, and regulations of the State of Georgia and all City of Stonecrest ordinances covering the business establishment I will operate under this renewal. Pursuant to City of Stonecrest ordinance Sec. 4.2.14(i), I understand that furnishing fraudulent or untruthful information in the original, renewal or transfer application for a license or omitting information required in the original, renewal or transfer application for a license could result in a denial, suspension or revocation of such license.

Licensee's Signature

Date

Sworn to and subscribed to before me

this______ day of ______,20____.

Notary Public