

CITY OF HINESVILLE GEORGIA
APPLICATION FOR CHANGE IN LICENSE

FOR THE YEAR _____ DATE _____ ACCOUNT NUMBER _____

\$65.00 CHARGE FOR RELOCATION
\$35.00 CHARGE FOR NAME CHANGE OF BUSINESS

INDICATE THE CHANGE YOU ARE APPLYING FOR:

- () NAME
- () ADDRESS
- () NAME AND ADDRESS
- () MANAGER FOR ALCOHOL LICENSE:

CURRENT INFORMATION OF BUSINESS:

NAME: (LIST NAME YOU ARE OPERATING WITH AT THIS TIME) _____

ADDRESS: _____

OWNER: _____

(LIST ALL OWNERS, PARTNERSHIPS, AND CORPORATE OFFICERS, USE ADDITIONAL SHEET IF NECESSARY)

MANAGER: _____

NATURE OF BUSINESS: _____

PHONE NUMBER: _____

COMPLETE ONLY THE SPACE THAT WOULD APPLY TO YOUR CHANGE

NEW NAME OF BUSINESS: _____

(STATE REASON FOR NAME CHANGE ON SEPARATE SHEET OF PAPER)

NEW ADDRESS OF BUSINESS: _____

NEW MANAGER: _____

NEW PHONE NUMBER: _____

THE UNDERSIGNED AFFIRMS THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF HIS/HER KNOWLEDGE AND BELIEF.

This _____ day of _____, _____

AUTHORIZED SIGNATURE OF APPLICANT

PERSONNALLY before the undersigned appeared

who on Oath has sworn that the above information given therein is true and correct.

Sworn and subscribed before me this _____ day of _____, _____

STATE OF _____ COUNTY OF _____ CITY OF _____

NOTARY PUBLIC

FOR OFFICE USE ONLY

INSPECTIONS DEPT	() APPROVED	() DISAPPROVED BY _____	DATE _____
ZONING DEPT	() APPROVED	() DISAPPROVED BY _____	DATE _____
FIRE DEPT	() APPROVED	() DISAPPROVED BY _____	DATE _____
POLICE DEPT	() APPROVED	() DISAPPROVED BY _____	DATE _____
CITY COUNCIL	() APPROVED	() DISAPPROVED BY _____	DATE _____