

CITY OF LAWRENCEVILLE
PO BOX 2200, LAWRENCEVILLE, GA 30046
PLANNING, ZONING & INSPECTIONS DEPARTMENT

SPECIAL USE ALCOHOL EVENT

(as per regulations Chapter 34, section 34-101.1(b)(3) of the City of
Lawrenceville General Code of Ordinances)

<http://www.lawrencevillega.org/Portals/0/PZ/GeneralCode/CHAPTER%2034-ALCOHOLIC%20BEVERAGES%20SALES%20%20CONSUMPTION.pdf>

All application requirements must be in order for the application to be accepted.

Documents required at the time of submittal:

- 1) Application Form, signed and notarized
- 2) Completed disclosure of campaign contribution form
- 3) A letter of intent which fully describes the proposed event
- 4) A site exhibit on 11X17 or larger paper with 1- 8 1/2 X 11 copy
The Exhibit must:
 - a. Clearly depict existing conditions of the subject area
 - b. Show ingress/egress and other control points.
 - c. Identify location of alcohol sales and consumption.
- 5) A description of security measures including procedure to insure that underage consumption does not occur and that consumption is limited to the designated area.
- 6) Fee
 - a. \$2000.00 application fee
 - b. Please make checks payable to the: City of Lawrenceville.

The applicant shall appear* before the City Council. There will be presentation by the applicant, and opposition will be given time to speak. A vote would then take place either approving, approving with conditions, denying, or tabling the request.

* The applicant, or a representative on his behalf, must be present at all the meetings to answer any questions that may arise. If the applicant fails to attend the meetings, his rezoning request may be tabled until the next meeting. However, Mayor and City Council may act upon the rezoning request if they choose to do so.

6/16/11

CITY OF LAWRENCEVILLE
PLANNING, ZONING & INSPECTIONS DEPARTMENT
SPECIAL USE ALCOHOL EVENT APPLICATION

APPLICANT NAME: _____

ADDRESS: _____

CONTACT NAME: _____ EMAIL: _____

TELEPHONE NUMBER: _____ CELL #: _____

ALCOHOL PROVIDER: _____

CITY LICENSE #: _____ STATE LICENSE #: _____

LOCATION OF SPECIAL USE EVENT

SITE LOCATION: _____

ZONING: _____ SIZE OF AREA: _____

TYPE OF ALCOHOL TO BE SERVED: DISTILLED SPIRITS _____ BEER _____ Wine _____

DATE(S) OF EVENT: _____ TIME OF EVENT: _____

DESCRIPTION OF SECURITY: _____

SIGNATURE OF APPLICANT DATE

TYPED OR PRINTED NAME DATE

NOTARY PUBLIC DATE

DISCLOSURE OF CAMPAIGN CONTRIBUTIONS

Have you, within the two years immediately preceding the filing of this application, made campaign contributions aggregating \$250.00 or more to the Mayor of the City of Lawrenceville or a member of the City Council of the City of Lawrenceville?_____

If the answer is yes, please complete the following section:

NAME OF GOVERNMENT OFFICIAL	CONTRIBUTIONS (LIST ALL WHICH AGGREGATE TO \$250.00 OF MORE)	DATE WHEN CONTRIBUTION WAS MADE WITHIN LAST TWO YEARS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you, within the two years immediately preceding the filing of this application, made gifts having in the aggregate a value of \$250.00 or more to the Mayor of the City of Lawrenceville or a member of the City Council of the City of Lawrenceville?_____

If the answer is yes, please complete the following section:

NAME OF GOVERNMENT OFFICIAL	DESCRIPTION OF GIFTS VALUED AT \$250.00 OR MORE	DATE WHEN GIFT WAS MADE WITHIN LAST TWO YEARS
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____