

July 21, 2014

Ms. Terri Graham
City Clerk – City of Smyrna
2646 Atlanta, Georgia 30080
Smyrna, GA 30080

Dear Ms. Graham:

I recently applied for the Alcohol Permit in the City of Smyrna and was denied because of pending charges against me. I am writing to ask you to reconsider this decision and allow me to receive an Alcohol Permit due to the following

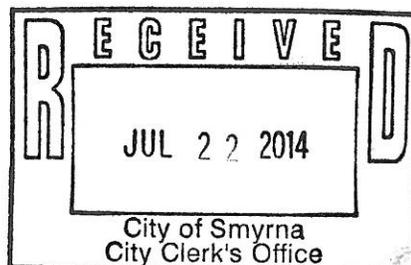
- I have been hired as a cashier by Kroger and on occasion I will have to ring the sale of beer and wine.

I would appreciate your assistance in this matter as I have never been involved in anything illegal before or since this incident.

Thank You,

Lindsey Bergen
Lindsey Bergen

770-940-7694



Smyrna Police Department

Date Printed: July 15, 2014

PM4559

**TO: LINDSEY AIDA BERGEN
1058 HUNTINGTON TRACE DR SE
SMYRNA, GA 30082**

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This is to notify you that your application for a Alcohol Permit in the City of Smyrna has been denied for the following reason:

PENDING FELONY IN COBB COUNTY

Any employee excluded from receiving or holding a photo permit under the terms of this section shall have the right to appeal such exclusion to the governing body, which may in its discretion approve the issuance of a photo permit.

The failure of an employee to get a photo permit will not prohibit the employee from applying for and receiving one if all other conditions of this section are otherwise met.

If you have any questions regarding this matter you may contact the Smyrna Permits Department at 678-631-5087.

28792
35557

SMYRNA POLICE DEPARTMENT

2646 ATLANTA RD SE SMYRNA, GA 30080 • PH: 770-434-9481

POURING/SERVING PERMIT

4559 14-

PLEASE PRINT CLEARLY

NAME:

Bergen Lindsey Aida
(LAST) (FIRST) (MIDDLE)

(OTHER NAMES USED) 770-940-7694
(PHONE #)

ADDRESS:

1058 Huntington TR DR (STREET) (APT. #)
Smyrna GA 30082
(CITY) (STATE) (ZIP)

PERSONAL INFORMATION:

BLK (RACE) F (SEX) 5'7" (HEIGHT) 220 (WEIGHT)
BROWN (HAIR COLOR) BROWN (EYE COLOR) 057487489 (DRIVERS LICENSE/ID #) GA (STATE)
3/12/96 (DATE OF BIRTH) Smyrna, GA (PLACE OF BIRTH - CITY/STATE) 258-95-1005 (SOCIAL SECURITY #)

EMPLOYMENT INFORMATION:

Kroger (NAME OF BUSINESS/WHERE YOU WILL BE EMPLOYED) Wanda Bell (SUPERVISORS NAME)
3240 South Cobb DR (ADDRESS) 770-433-3410 (PHONE #)
Cashier (JOB TITLE)

HAVE YOU BEEN ARRESTED OR CONVICTED OF A CRIME WITHIN THE LAST 5 YRS ?

PLEASE INCLUDE TRAFFIC VIOLATIONS. (YES) (NO)

DATE:	CHARGE:	AGENCY:	DISPOSITION:
1. 4/15/14	Burglary obstruction law enf. of	Cobb (Misd.)	Pending (felony)
2.			
3.			

HAVE YOU EVER BEEN DISCHARGED FROM ANY BRANCH OF THE MILITARY UNDER LESS THAN HONORABLE CONDITIONS? YES NO

CERTIFIED SECTION: I HEREBY CERTIFY THAT THE INFORMATION I AM FILLING OUT TO BE TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THERE ARE NO INTENTIONAL MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS THAT WOULD BE SUBJECT TO PROSECUTION UNDER THE OFFICIAL CODE OF GEORGIA, § 16-10-20, ENTITLED FALSE STATEMENTS, A FELONY PUNISHABLE BY A FINE OF NOT MORE THAN \$1,000.00 OR BY IMPRISONMENT FOR NOT LESS THAN 1 YEAR AND NO MORE THAN 5 YEARS, OR BOTH.

I HEREBY AUTHORIZE SMYRNA POLICE DEPARTMENT TO RECEIVE AND DISCLOSE TO MY EMPLOYER AND THE GOVERNING BODY OF THE CITY OF SMYRNA, ANY CRIMINAL HISTORY RECORD INFORMATION PERTAINING TO ME WHICH MAY BE IN THE FILES OF ANY STATE OR LOCAL CRIMINAL JUSTICE AGENCY IN GEORGIA OR ELSEWHERE. I UNDERSTAND THAT SHOULD THIS APPLICATION BE DENIED, THE APPLICATION FEE WILL BE FORFEITED AND I WILL NOT BE ENTITLED TO A REFUND.

Lindsey Bergen, ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THE EMPLOYEES ALCOHOL PERMIT HANDBOOK AND AGREE TO ABIDE BY THE RULES SET FORTH HEREIN.

SIGNATURE OF APPLICANT: Lindsey Bergen

PRINTED NAME OF APPLICANT: Lindsey Bergen

DATE: 7/15/14

SUBSCRIBED BEFORE ME THIS _____ DAY, 20____

NOTARY PUBLIC
MY COMMISSION EXPIRES:



Smyrna Police Department

2646 Atlanta Road
Smyrna, Georgia 30080



David Lee
Chief of Police

A. Max Bacon
Mayor

Affidavit Verifying Status For City of Smyrna Permit/Application

By executing this affidavit under oath, I am stating the following with respect to my application for a City of Smyrna Alcohol License, Taxi Permit, or other City issued License as referenced in O.C.G.A. Section 50-36-1.

I, Lindsey Bergen
Name of Individual

On behalf of Kroger state that:
Business/Name

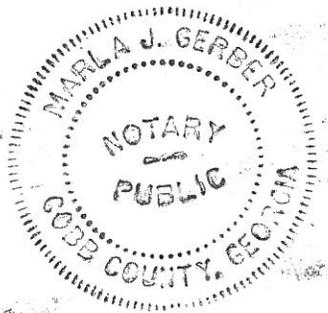
- I am a United States citizen; -- OR --
- I am a legal Permanent Resident 18 years of age or older; -- OR --

I am a qualified alien, an undocumented alien or non-immigrant under the Federal Immigration and Nationality Act, 18 years of age or older and lawfully present in the United States.

The secure and verifiable document provided with this affidavit can best be classified as: license
GA ~~drivers~~ provisional Drivers ~~license~~

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of Code Section 16-10-20 of the Official Code of Georgia.

Alien Registration number for non-citizens



Lindsey Bergen
Signature of Applicant

7/15/14
Date

Lindsey Bergen
Printed Name of Applicant

Subscribed and sworn before me this

12 DAY OF July 20 14
Marla Gerber

Notary Public

My Commission Expires Notary Public, Cobb County, Georgia
My Commission Expires June 16, 2017

AK4378172J
F/205033AEG



Kroger

\$40 check

3240 S Cobb

GA