

MEETING OF March 22, 2017

WARD 4 (cw)

ITEM NUMBER _____

\$ IMPACT _____

ISSUE:

Application for change of agent for The Kroger Co. dba Kroger Store #699 for privilege licenses for the sale of beer & wine (retail package) with Ward A Chapman as new agent. Previous agent was Daniel W. Portier.

SUMMARY:

Ward A Chapman as the registered agent for The Kroger Co. dba Kroger Store #699 requests privilege licenses for the sale of beer & wine (retail package) at 3240 South Cobb Drive.

BACKGROUND:

Ward A Chapman will be the registered agent responsible for the sale of alcohol at the referenced location. Ward A Chapman has been given a copy of the Alcoholic Beverage Ordinance and attended the mandatory alcohol awareness workshop. (Certificate attached)

STAFF RECOMMENDATION:

A background investigation conducted by the Smyrna Police Department failed to reveal information that would preclude issuance of these licenses. Ward A Chapman has agreed to abide by the guidelines set forth by the City of Smyrna ordinance governing the sale of alcohol.

REQUESTED ACTION:

Approval of a privilege license for the sale of beer & wine (retail package) for The Kroger Co. dba Kroger Store #699 at 3240 South Cobb Drive with Ward A Chapman as the registered agent.



APPLICATION FOR ALCOHOLIC BEVERAGE

AGENT CHANGE ONLY

Phone (678) 631-5321 Fax (770) 431-2808

Web site: www.smyrnacity.com

PLEASE TYPE APPLICATION AND ANSWER ALL QUESTIONS.

TYPE OF LICENSE: [CHECK APPROPRIATE SPACES]

LIQUOR:

TRANSFER ()
PKG. BEER/WINE ()
PKG. DIST. SPIRITS ()
RETAIL POURING ()
Restaurant ()
Package Store ()

BEER:

TRANSFER ()
PKG. BEER/WINE (X)
PKG. DIST. SPIRITS ()
RETAIL POURING ()
Restaurant ()
Package Store ()

WINE:

TRANSFER ()
PKG. BEER/WINE (X)
PKG. DIST. SPIRITS ()
RETAIL POURING ()
Restaurant ()
Package Store ()

1. Legal Name of Business The Kroger Co.
Operating name of the Business Kroger Store #699
Occupation Tax License Number #1406
Is the Business a proprietorship () partnership (X) corporation () foreign ()
2. Location 3240 S Cobb Dr Smyrna GA Phone 770-433-3410
3. Full name of Owner The Kroger Co.

Has owner ever had an alcoholic beverage license revoked in Smyrna or other jurisdiction? Yes () No ()
If yes, attach full details.

5. Full name of Agent Ward A. Chapman

Social Security Number [REDACTED] Date of Birth 9/6/61

Are you a Citizen of the United States? Yes (X) No () Birthplace Rome GA

Current Address 165 Helmswood Cir City/State Marietta, GA Zip 30064

Home Telephone [REDACTED] Number of years at present address 20

Do you reside in Cobb County? Yes (X) No () If yes, how long 20 Years

Previous address 1803 Brooks Street Dallas Ga 30132

Number of years at previous address 9 Drivers License Number and State 059485172 GA

What has been your occupation for the past five (5) years? Give detailed list _____

Kroger Store Manager

Agent's employment date with owner 03/14/1979

6. Has the applicant:

- (a) Been adjudicated as incompetent or insane, or been deemed to have insufficient mental capacity to conduct the business for which the application is made? Yes () No (X)
- (b) Been discharged from any military service under dishonorable conditions? Yes () No (X)
- (c) Within a five-year period immediately preceding the date of application, been arrested or convicted of violating any laws, ordinances, or regulations regulating such business? (The term "conviction" shall include an adjudication of guilt, a plea of guilty or nolo contendere or the forfeiture of bond when charged with a crime.) Yes () No (X) If there was an arrest, are charges still pending? Yes () No () N/A
- (d) Within a five-year period preceding the date of application, been convicted for any felony charged under any of the laws of the several states or of the United States? Yes () No (X) (The term "conviction" shall include an adjudication of guilt, a plea of guilty or nolo contendere or the forfeiture of bond when charged with a crime.) If there was an arrest, are charges are still pending? Yes () No () N/A
- (e) Within a three-year period preceding the application, been convicted of more than one misdemeanor, including traffic violations, involving the use or abuse of any alcoholic beverage, opiate or drug? Yes () No (X) (The term "conviction" shall include an adjudication of guilt, a plea of guilty or nolo contendere or the forfeiture of bond when charged with a crime.) If there was an arrest, are charges still pending? Yes () No () N/A
- (f) Been currently placed on parole from any governing authority? Yes () No (X)

Has any license authorizing the sale of alcoholic beverages at the location for which the present license is sought:

- (g) Been declared to be under suspension, at the date the application is filed? Yes () No (X)
- (h) Been revoked within six months of the date that the application is filed? Yes () No (X)

If yes to any of the above questions, please attach full detail.

7. Do you, your spouse, any family members, or any of the other owners, partners, or stockholders have an interest in a retail liquor store(s)? Yes () No (X) If so, state the number of stores and where each stores is located.

8. Have you, your spouse, partner or stockholder any financial interest in the wholesale liquor business? Yes () No (X) If yes, give details.

9. Please initial here that you have received a copy of the City of Smyrna Alcoholic Beverage Ordinance.



10. Are you familiar with the City of Smyrna ordinances and state and federal laws and regulations governing the operation of this type of business? Yes (X) No ()

11. Are you aware you are required to apply for a State license? Yes (X) No ()
Contact the Georgia Department of Revenue Alcohol Division (404-417-4900).

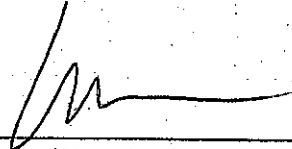
**CITY OF SMYRNA
BUSINESS LICENSE DEPARTMENT
APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE**

Phone (678) 631-5321 Fax (770) 431-2808

Web site: www.smyrnacity.com

GEORGIA, COBB COUNTY

I, Ward Chapman, BEING DULY SWORN TO LAW, DO SWEAR THAT THE STATEMENTS MADE BY ME IN THE ABOVE AND FOREGOING APPLICATION ARE TRUE, AND NO FALSE, OR FRAUDULENT STATEMENT IS MADE HEREIN AND SUCH STATEMENTS WERE MADE IN ORDER TO PROCURE THE GRANTING OF A LICENSE.



Ward Chapman

Signature of Managing Applicant (type name before signing)

Signature and title of person other than Applicant completing this application

Phone Number: Work 770-433-3410 Home 770-425-1904

Sworn to and subscribed before me
this 23 day of Feb, 2017



Notary Public

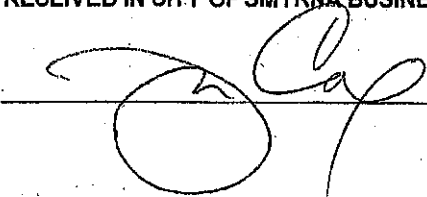
FINGERPRINTED AT SMYRNA POLICE DEPARTMENT:

MPRIBUSS

Date

2/3/17

RECEIVED IN CITY OF SMYRNA BUSINESS LICENSE DEPARTMENT BY:



Date

2/3/17

CERTIFICATE OF ATTENDANCE

This certificate is awarded to

**Chapman, Ward
Kroger #451**



EVINDI

INCORPORATED

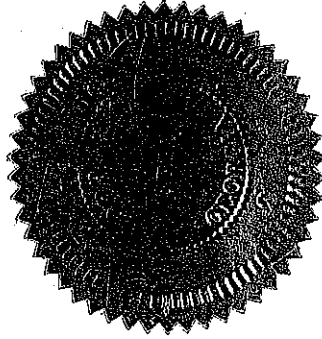
For satisfactory completion of Evindi, Inc.'s

***It's the Law Responsible Alcohol Sales & Service
Workshop (3 hours)***



Michele L. Stumpe, President of Evindi, Inc.

4-07-2009
Date



This workshop has been approved to satisfy the following alcohol ordinance requirements:
Cobb County §6-96 as amended 7-10-01; City of Kennesaw §6-69 as amended 10-1-02; City
of Roswell §3.2.10; City of Powder Springs §§3-103 & 3-182; Douglas County §3-27; City of
Holly Springs §6-48; and City of Smyrna §6-129 as amended 8-02-04.

Certificate to be posted in conspicuous location at licensed premises.

CITY OF SMYRNA

PRIVILEGE LICENSE APPLICATION SUMMARY

DATE: 03/07/17 LICENSE/VARIANCE BOARD: 03/22/17

TYPE OF LICENSE REQUESTED: PRIVILEGE LICENSES BEER/WINE PACKAGE

NEW APPLICATION: NO OWNERSHIP NO AGENT YES

NAME OF BUSINESS: THE KROGER CO.
dba KROGER STORE #699

PLACE OF BUSINESS: 3240 SOUTH COBB DRIVE
SMYRNA, GA 30080

AGENT: WARD A CHAPMAN
165 HELMSWOOD DR
MARIETTA, GA 30064

CITIZENSHIP YES
POLICE REPORT: DATE REQUESTED 02/03/17 DATE RECEIVED 02/21/17

RESULTS: INVESTIGATION FAILED TO REVEAL INFORMATION THAT WOULD
PRECLUDE ISSUANCE OF THESE LICENSES

TYPE OF BUILDING MASONRY
DISTANCE MET: SCHOOL YES CHURCH YES LIBRARY YES PARK YES

MAP FURNISHED: N/A
ADVERTISED 03/10/17 AND 03/17/17

COMMENTS: ALL TAXES PAID



"Policing with a Purpose"

Smyrna Police Department

Chief of Police
David Lee

2646 Atlanta RD SE
Smyrna, GA 30080-2118
Phone: 770-434-9481
Fax: 678-651-5005

Deputy Chief
Robert L. Harvey



Date: February 21, 2017
To: Michael Jones, City Administrator
From: David Lee, Chief of Police
Lt. Rick James, Office of Professional Standards *[Signature]*
Subject: Application for Alcohol License, Agent Name Change Only
Applicant: Ward A. Chapman

This applicant, Mr. Ward A. Chapman, is the manager of the business listed below and has submitted an application with the business license office to obtain an alcohol beverage license /agent change only, issued to 3240 South Cobb Drive, Smyrna, GA 30082.

The business name is Kroger Company #699.

The business is incorporated under the name The Kroger Company.

A background check was conducted on this applicant, and there was nothing in his background that would prohibit him from holding the license as long as he meets all the other requirements of the ordinances that regulate this type of business.

CC: Terri Graham, City Clerk

Jim Cox, Business License

File

THE OCCUPATION TAX CERTIFICATE WILL NOT BE ISSUED OR RENEWED
WITHOUT COMPLETION AND NOTARIZATION OF THIS FORM!

Affidavit of Compliance with O.C.G.A. 50-36-1 "Verification of Lawful Presence within the United States."

O.C.G.A. 50-36-1 requires that applicants applying for such things as licenses for public benefits complete a signed and sworn affidavit verifying the applicant's lawful presence in the United States. Therefore, the applicant must answer the following questions:

The applicant is a United States citizen or legal permanent resident at least eighteen (18) years old.

YES

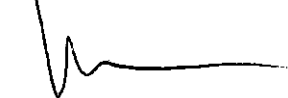
NO

IF NOT:

The applicant is a qualified alien or nonimmigrant under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, at least eighteen (18) years old, and is lawfully present in the United States. *A photo static copy of the applicant's alien card issued by the Department of Homeland Security or other federal immigration agency must be included with this document*

O.C.G.A. 50-36-1 states that "Any person who knowingly and willfully makes a false, fictitious, or fraudulent statement of representation in an affidavit executed pursuant to this Code section shall be guilty of a violation of Code Section 16-10-20."

I declare, under penalty of law, that this affidavit has been completed by me and is true and correct.



Signature

Unit Manager

Title

02-03-17

Date

(Must be signed by applicant. If the applicant is a corporation, must be signed by an officer of the corporation. A STAMPED SIGNATURE IS NOT ACCEPTABLE.)

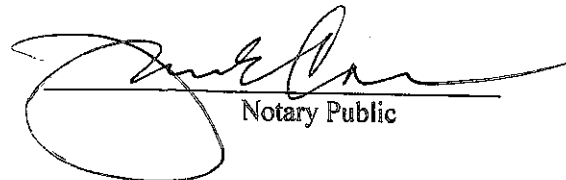
I hereby certify that _____ is personally known, or verified by me, that the applicant signed this application after stating to me his or her personal knowledge and understanding of all statements and, under oath actually administered by me, has sworn that the statements and answers contained in this affidavit are true.

This

3

day of

Feb, 2017



Notary Public

AFFIX SEAL

All applicants must attach a copy of a secure and verifiable document as defined in O.C.G.A. 50-36-2. Such documents include a valid Georgia issued Driver's License or ID Card, a valid Driver's license issued by another State or an identification document issued by the United States Government.

APPLICATION FOR PRIVILEGE LICENSE

I have made application at the Business License Office of the City of Smyrna, Georgia for The Kroger Co dba Kroger Store #699 located at 3240 S Cobb Dr. requesting privilege licenses for the sale of beer and wine (retail package). This application will be heard before the License and Variance Board for the City of Smyrna, 2800 King Street, Smyrna, Georgia on March 22, 2017 at 10:00 a.m. All concerned persons are hereby notified.

Mark A Chapman
Licensee

The Kroger Co.
dba Kroger Store #699
3240 S Cobb Dr.
Smyrna, GA 30080

Ads to Run Mar 10, 2017 and Mar 17, 2017