MEETING OF <u>JUNE 14, 2017</u>	WARD $\underline{6}$ (ds)		
		ITEM NUM	IBER
		\$ IMPACT	

## **ISSUE:**

Application for change of agent for GI Bakery II, Inc. dba Atlanta Bread Company for privilege licenses for beer, wine, and liquor (retail pouring). Kerry Nichols is the new applicant. Previous agent was Maria C. Ramos.

## **SUMMARY:**

Kerry Nichols as the registered agent for GI Bakery II, Inc. dba Atlanta Bread Company requests privilege licenses for the sale of beer, wine, and liquor (retail pouring) at 4490 S Cobb Dr. STE B, Smyrna, GA.

## **BACKGROUND:**

Kerry Nichols will be the registered agent, responsible for the sale of alcohol at the referenced location. Ms. Nichols 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 this license. Kerry Nichols has agreed to abide by the guidelines set forth by the City of Smyrna ordinance governing the sale of alcohol.

## **REQUESTED ACTION:**

Approval of privilege licenses for the sale of beer, wine, and liquor (retail pouring) GI Bakery II, Inc. dba Atlanta Bread Company with Kerry Nichols 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 APPL	ICATION AND	ANSWER ALL QUESTION	NS.		
TYPE O	F LICENSE: {	CHECK APPRO	PRIATE SPACES	•		
LIQUOR	<u>t:</u> .		BEER:		WINE:	,
PKG. BE PKG. DI RETAIL Restau	EER/WINE ST. SPIRITS POURING rant je Store	( )	TRANSFER PKG. BEER/WINI PKG. DIST. SPIR RETAIL POURING Restaurant Package Store	E () ITS () G (x)	TRANSFER PKG. BEER/WINE PKG. DIST. SPIRITS RETAIL POURING Restaurant Package Store	, ,
1.	Operating na	me of the Busine	GI Bakery II, Inc. essAtlanta Bread Conber671			
2.	Location	4490 B South Co	obb Drive , Smyrna, GA 30	0 <u>80</u> Phone	770-438-6800	
3.	Full name o	f OwnerJ	erry Couvaras		<del> </del>	
	Has owner e		nolic beverage license revo	oked in Smyrna	or other jurisdiction? Yes ,	( )No (x)
5.	Full name o	f AgentK	Cerry Nichols	<u> </u>		
	Social Secur	ity Number		Date of Bir	th 10/03/1969	
	Are you a Ci	tizen of the Unite	ed States? Yes (x) No (	) Birthplace _	Columbus, OH	<del></del>
	Current Add	ress <u>3170 Moss</u>	Creek Dr	City/State _M	larietta, GA. Zip 30	062
	Home Telep	hone	Number of year	ars at present ac	idress <u>6 r</u>	nonths
	Do you resid	ie in Cobb Coun	ty? Yes (x ) No {x ) If y	es, how long	· · · · · · · · · · · · · · · · · · ·	
	Previous ad	dress <u>100 Senti</u>	el Walk Carrolton, GA			
	Number of y	ears at previous	address 2 vr Drivers Lic	ense Number ar	nd State <u>029777023</u>	GA
	·		tion for the past five (5) ye			
		anchisee Operati			,	
			-	,		
	Agent's emi	nlovment date wi	th owner 11/2007	,		

(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 or violating any laws, ordinances, or regulations regulating such business? (The term "conviction" shall include an adjudication of guilt, a plea of guilty or noto 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 ( )
(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 noto contendere or the forfeiture of bond when charged with a crime.) If there was an arrest, are charges are still pending? Yes ( ) No ( )
(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 noto contendere or the forfeiture of bond when charged with a crime.) If there was an arrest, are charges still pending? Yes ( ) No ( )
(f)	Been currently placed on parole from any governing authority? Yes ( ) No (x)
Has ar sought	ny license authorizing the sale of alcoholic beverages at the location for which the present license is:
(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.
Do you interest is locate	a, your spouse, any family members, or any of the other owners, partners, or stockholders have an in a retail liquor store(s)? Yes ( ) No (x ) If so, state the number of stores and where each stores ed.
Have yo	ou, your spouse, partner or stockholder any financial interest in the wholesale liquor business?  No ( x ) If yes, give details.
Please j	initial here that you have received a copy of the City of Smyrna Alcoholic Beverage Ordinance
Are you	familiar with the City of Smyrna ordinances and state and federal laws and regulations governing the in of this type of business? Yes (x) No ()
Are you	aware you are required to apply for a State license? Yes (x) No () the Georgia Department of Revenue Alcohol Division (404-417-4900)

6.

Has the applicant:

## 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,\_Kerry Nichols , 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. Signature of Managing Applicant (type name before signing) Signature and title of person other than Applicant completing this application Phone Number: Work\_\_770-438-6800 Home 678-994-6342 Sworn to and subscribed before me Notary/Public FINGERPRINTED AT SMYRNA POLICE DEPARTMENT: RECEIVED IN CITY OF SMYRNA BUSINESS LICENSE DEPARTMENT BY: Date

# DE SOOLON DOS OOS DA

certifies that

## XOLUZION ZONOS

entitling them to all the rights and privileges appertaining thereto has successfully completed training in our RASS Workshop thus

In witness thereof the undersigned have affixed their names this 23rd day of March, 2017



President

Seal

## CITY OF SMYRNA

## PRIVILEGE LICENSE APPLICATION SUMMARY

DATE: 05/30/17	LICENSE/VARIANCE: 06/14/213			
	QUESTED: BEER, WINE, & LIQUOR (RETAIL POURING)			
	O OWNERSHIP NO AGENT YES			
NAME OF BUSINESS: GI BAKERY II, INC.				
	dba ATLANTA BREAD COMPANY			
PLACE OF BUSINESS:_	4490 S. COBB DR STE B			
	SMYRNA, GEORGIA 30080			
AGENT:	KERRY NICHOLS			
HOME ADDRESS:	3170 MOSS CREEK DR.			
	MARIETTA, GA 30062			
CITIZENSHIP	YES			
POLICE REPORT: DATE REQUESTED 3/21/17 RECEIVED 4/06/17				
RESULTS: _INVESTIGATION FAILED TO REVEAL INFORMATION THAT WOULD				
PRECLUDE ISSUANCE OF THIS LICENSE				
TYPE OF BUILDING MASONRY				
DISTANCE MET: SCHOOL NA CHURCH NA LIBRARY NA PARK NA				
MAP FURNISHED: N/A				
ADVERTISED: 06/02/17 & 06/09/17				

COMMENTS: NONE

"Policing with a Purpose"



## Smyrna Police Department

Chief of Police David Lee 2646 Atlanta DD 8E 8myrna, GA 30080-2118 Phone: 770-454-9481

Doputy Chief Robert L. Harvey



Date:

April 6, 2017

To:

Michael Jones, City Administrator

From:

David Lee, Chief of Police

Lt. Rick James, Office of Professional Standards,

Subject:

Application for Alcohol License, Agent Name Change Only

Applicant: Kerrie Marie Nichols

This applicant, Ms. Kerrie M. Nichols, 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 4490 South Cobb Drive Ste. B, Smyrna, GA 30082.

The business name is GI Bakery II, Inc. DBA Atlanta Bread Company.

The business is incorporated under the name Atlanta Bread Company International, Inc.

A background check was conducted on this applicant, and she was arrested and convicted for possession of marijuana (less than one ounce / misdemeanor) and furnishing, purchasing, and possession of alcoholic beverages by persons below the age of a minor (misdemeanor) in Houston County, GA in April 1989. There was nothing else in her background that would prohibit her from holding the license as long as she meets all the other requirements of the ordinances that regulate this type of business.

CC:

Terri Graham, City Clerk

Jim Cox, Business License

File



## 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 old. YES	united States cit	rizen or legal pe	rmanent resident a	at least cighteen (18) yea	ars
Act. Title 8 U.S.C United States. The	C., as amended, at	t least eighteen ( en number issue	(18) years old, and d by the Departme	Immigration and Nation is lawfully present in the ent of Homeland Securit	he
YES	NO	Alien ID ı	number		
or fraudulent stat	I states that "Any tement of represer a violation of the	ntation in an affi	idavit executed pu	fully makes a false, fictions are fully makes a false, fiction of this Code sect	ious, ion
	penalty of law,	that this affida	vit has been com	pleted by me and is tru	ıe
and correct.	J			11	
Buy	<u></u>		***	1/25/17	
Signature /				date	
(Must be signed the corporation.)	by applicant. If to A STAMPED S	he applicant is a SIGNATURE I	a corporation, mus S NOT ACCEPT	st be signed by an office FABLE.	rof
I hereby certify t	that Kerry	Nichols		is personally kno	own,
or verified by me	e that the applica	nt signed this ar	oplication after sta	ating to me his or her pe	rsonal
knowledge and t	understanding of	all statements ar	nd, under oath acti	ually administered by m	e, has
	tatements and ans		in this atticayit ar	e true.	
Thisday	of Jamery.	20 <u>1</u>	SEP TO SPIAN	Boolic AETX SEAL	
		•	NAV GEORGIA	I. I	

You 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 GI BAKERY II, INC. dba ATLANTA BREAD COMPANY located at 4490 S COBB DR STE B, SMYRNA, Georgia, requesting privilege licenses for the sale of beer, wine, & liquor (retail pouring). This application will be heard before the License and Variance Board for the City of Smyrna, 2800 King Street, Smyrna, Georgia on June 14, 2017 at 10:00 a.m. All concerned persons are hereby notified.

Kerrie M Nichols Licensee

> GI BAKERY II, INC. ATLANTA BREAD COMPANY 4490 S Cobb Dr. STE B Smyrna, GA 30082

Ads to Run \_\_\_\_\_ Jun 02, 2017 \_\_\_ and \_\_\_ Jun 09, 2017