| MEETING OF June 19, 2017 | WARD | 3 (ta) |
|--------------------------|-------------|--------|
| | ITEM NUMBER | |
| | \$ IMPACT | |

ISSUE:

New application for privilege licenses for Wade Concord LLC dba Wade's for the sale of beer, wine, and liquor (retail pouring). Wade Concord LLC is the owner and Jason McClure is the agent applicant.

SUMMARY:

Jason McClure as the registered agent for Wade Concord LLC dba Wade's requests privilege licenses for the sale of beer, wine, and liquor (retail pouring) at 1061 Concord Road.

BACKGROUND:

Jason McClure will be the registered agent, responsible for the sale of alcohol at the referenced location. Jason McClure 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. Jason McClure 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) for Wade Concord LLC dba Wade's with Jason McClure as the registered agent.

CITY OF SMYRNA BUSINESS LICENSE DEPARTMENT APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

Phone (678) 631-5321 Fax (770) 431-2814

Web site: www.smyrnacity.com

| PLEASE TYPE APPLICATION AND ANSWER ALL QUESTIONS. | | | | | |
|--|--|--|--|---|----------|
| TYPE OF LICENSE: [CHECK APPROPRIA | TE SPACES] | | | , | |
| LIQUOR: | BEER: | © | WINE | <u>:</u> | © |
| MANUFACTURER WHOLESALER PKG. BEER/WINE PKG. DIST. SPIRITS RETAIL POURING Restaurant Package Store Dancing/Live Ent Private Other Wades Co | MANUFACTURER WHOLESALER PKG. BEERWINE PKG. DIST. SPIRITS RETAIL POURING Restaurant Package Store Dancing/Live Ent. Private Other Oncord, LLC | | WHO PKG. PKG. RET/ Resta Pack | | |
| Operating name of the Business Wad | e's | | | | |
| Is the Business a: proprietorshi | p (partnership | Corporation | O foreig | n | |
| 2. Location 1061 Concord Rd. | | P | 77037 | 785040 | |
| 3. Is business within the designated distan | ce of any of the following? | | | | |
| PACKAGE DISTILLED SPIRITS | | | YES | NO | |
| SCHOOL | 600 F | EET | 0 | lefts | |
| CHURCH/PARK/PUBLIC BUILDIN | | | _ | _ | |
| LIBRARY/RESIDENCE | 300 F | EET | ledot | 0 | |
| POURING DISTILLED SPIRITS | | | _ | | |
| SCHOOL | 600 F | EET | O | lefton | |
| CHURCH/PARK/PUBLIC BUILDIN | | | 6 | | |
| LIBRARY/RESIDENCE | 200 F | | • | O | |
| [BUILDING NO CLOSER THAN 75 | FEET FROM PROPERTY | LINE] | | | |
| PACKAGE WINE, MALT BEVERAGE | 000 F | | _ | | |
| SCHOOL CHURCH/PARK/PUBLIC BUILDIN | 600 FI | : | O | ◉ | |
| LIBRARY | | - | _ | _ | |
| | 300 F | | ledot | 0 | |
| [EXCEPT GROCERY STORES AS POURING WINE, MALT BEVERAGE | DEFINED BY ORDINANC | ᄕ | | | |
| SCHOOL | 600 FI | SET | \circ | • | |
| CHURCH/PARK/PUBLIC BUILDING | | <u>_</u> | | • | |
| LIBRARY/RESIDENCE | 200 FI | FFT | | | |
| [BUILDING NO CLOSER THAN 75 | | | • | O | |

| 4. Full name of Owner Uasuri Yyaus IVICCIUIS |
|--|
| If a sole proprietor, will you manage the business full time on the premises? Yes No |
| Social Security Number Date of Birth 03/04/1976 |
| Are you a Citizen of the United States? O Yes O No Birthplace Charleston, WV |
| Current Address 1891 Cedar Cliff Dr. SE City/State Smyrna, GA Zip 30080 |
| Home Telephone Number of years at present address 13 |
| Drivers License Number and State |
| What has been your occupation for the past five (5) years? Give detailed list Three Villains LLC 2013-2015 Minero - 2015 SRC, LLC 2015-present |
| If a partnership, attach list showing each partner owning 10% or more, with address, telephone number, date of birth, and social security number. |
| If a corporation, provide corporate address, phone number & name of Chief Executive Officer |
| |
| |
| Federal Tax ID# 81-2950533 State of Incorporation GA |
| Is this a new business in Smyrna? Yes No If yes, date business will begin in Smyrna |
| If yes, enclose a copy of the sales contract, closing statement. |
| 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 Manager (as Applicant) Jason Wade McClure |
| Social Security Number Date of Birth 03/04/1976 |
| Are you a Citizen of the United States? Yes O No Birthplace Charleston, WV |
| Current Address 1891 Cedar Cliff Dr. SE City/State Smyrna, GA Zip 30080 |
| Home Telephone Number of years at present address13 |
| Do you reside in Cobb County? O Yes O No If yes, how long 15 years |
| Previous address 1441 Montclair Ct. Smyrna, GA 30080 |
| Number of years at previous address 2 Drivers License Number and State 049410912 |
| What has been your occupation for the past five (5) years? Give detailed list Chef/Restaranteur - Miso Izakaya 2012 Three Villains LLC 2013-2015 Minero - 2015 SRC, LLC 2015-present |
| lanuary 2017 |
| The leader of the property of the leader that owner |
| Has the manager (as 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 |
| (b) Been discharged from any military service under dishonorable conditions? Yes No |

| computing the gross sales. Indicate gross sales for beer, wine and liquor separatel | r the previou ly. | us (12) | months | and state the d | ates used in |
|---|----------------------|----------|--|-----------------|----------------|
| | | · ····· | | | |
| | . <u>.</u> | | <u></u> | | |
| | | | ······································ | | |
| 13. Please initial here that you have received a copy of the City of Smyrna Alcoholi | ic Beverage | Ordina | ance JV | VM | |
| 14. Are you familiar with the City of Smyrna ordinances and state and federal laws business? Yes No | s and regula | ations (| joverning | the operation o | f this type of |
| 15. Are you aware you are required to apply for a State license? Contact the Georgia Department of Revenue Alcohol Division at 404-417-4900. | Yes | 0 | No | | |

No.

| (c) Within a five-year period immediately preceding the or regulations regulating such business? (The term "cothe forfeiture of bond when charged with a crime.) | | | | | |
|--|---|------------------------------------|----------------|-------------------|--------------|
| If there was an arrest, are charges still pending? | O Yes | No | | | |
| (d) Within a five-year period preceding the date of app states or of the United States? of guilt, a plea of guilty or nolo contendere or the forfeit pending? | olication, been convicted for Yes | any felony charg No (The term " | conviction" sl | hall include an a | adjudication |
| (e) Within a three-year period preceding the application involving the use or abuse of any alcoholic beverage, or include an adjudication of guilt, a plea of guilty or noto arrest, are charges still pending? Yes | piate or drug? | Yes 📵 | No (The | term "convic | tion" shal |
| (f) Been currently placed on parole from any governing | g authority? | O Yes | N | lo | |
| Has any license authorizing the sale of alcoholic bevera | iges at the location for which | n the present lice | nse is sough | t: | |
| (g) Been declared to be under suspension, at the date | the application is filed? | O Yes | • N | lo | |
| (h) Been revoked within six months of the date that the | e application is filed? | O Yes | • N | lo | |
| If yes to any of the above questions, please attach full d | letail. | | | | |
| 7. Do you own the land and building on which this bus | siness is to operate? | O Yes | ● N | lo | |
| Date Purchased | Amount Paid | | | | |
| Paid to SRC, LLC (owned by Jason McC at initial rent rate of \$18.00 per sq ft. with | - | | | | |
| Attach a copy of the lease and any other pertinent docu 8. How is the proposed location zoned? MU-Conc Attach copy of zoning certification from the City of Smyr | dtional na (Community Developme | | • | | |
| If this is an application for an original license, attack (Community Development 770-319-5387). | n proof of adequate parking | facilities as per ti | ne City of Sm | yrna zoning req | uirements |
| 10. Do you, your spouse, any family members, or an store(s)? Yes No I | ly of the other owners, part f so, state the number of sto | | | | etail liquor |
| 11. Have you, your spouse, partner or stockholder any If yes, give details. | financial interest in the who | lesale liquor busi | ness? |) Yes (| No |
| | | | | | |

CITY OF SMYRNA BUSINESS LICENSE DEPARTMENT APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

Phone (678) 631-5321 Fax (770) 431-2814

Web site: www.smyrnacity.com

GEORGIA, COBB COUNTY

| I. Jason Wade McClure | BEING DULV | PWODN TO LAW DO OW | |
|---|----------------------------------|-----------------------------|---|
| MADE BY ME IN THE ABOVE AND FORE MADE HEREIN AND SUCH STATEMENTS | GOING APPLICATION ARE T | 'RUE, AND NO FALSE, OR | EAR THAT THE STATEMENTS FRAUDULENT STATEMENT IS OF A LICENSE. |
| | /h. 2 | | Malle |
| Signature of Own | er (type name before signing) | 300 | Mache |
| | | | |
| Signature and title | e of person other than Owner co | ompleting this application | |
| Phone Number: 1 | Work: | Home: | |
| G- 0 | | Juse W. | MC(|
| Signature of Mana | aging Applicant (type name befo | | |
| | | | |
| Signature and title | e of person other than Applicant | completing this application | |
| Phone Number: \ | Nork: | Home: | |
| Sworn to and subscribed before me | | | |
| This // day of Man 2 | 20 | | |
| | K | | |
| Notany Public (| ? [) | | |
| | | | |
| FINGERPRINTED AT SMYRNA POLICE DE | PARTMENT: | | |
| | | Date | |
| RECEIVED IN CITY OF SMYRNA BUSINES | S LICENSE DEPARTMENT BY | <u>':</u> | |
| TIM (| OX | Dato S | =11/17 |

3180 Atlanta Road

Smyrna, Georgia 30080

(678) 431-5387 / Community Development

City of Smyrna Department of Community Development

Decision Letter for Rezoning

Dear Mr. McClure:

This letter is to certify that your application for rezoning was received on May 5, 2016. The request for rezoning was heard on July 18, 2016, at the Mayor and Council meeting. You, as the applicant, requested the following rezoning for the property located at Concord Road & Hollis Street:

Zoning Request: Z16-007 – Rezoning from GC & LC to MU-Conditional for the construction of a new restaurant.

The Mayor and Council **approved** the requested rezoning by a vote of 6-0 with the following conditions:

Standard Conditions (items 1, 2, 3, 4, 5, 7, 8, 9, 10, 12, 16 and 17 from Section 1201 of the Zoning Ordinance are not applicable)

- 1. All utilities within the development shall be underground.
- 2. No debris may be buried on the subject parcel.
- 3. The developer will comply with the city's current tree ordinance. All required tree protection measures shall be adhered to by the developer during construction.
- 4. All landscape plans must be prepared, stamped, and signed by a Georgia Registered Landscape Architect for any common areas or entrances.
- 5. All common areas are to be sodded, and landscaped. Irrigate as appropriate.

3180 Atlanta Road

Smyrna, Georgia 30080

(678) 431-5387 / Community Development

Special Conditions

6. The development shall maintain the following setbacks:

Front - 0'

Side - 0

Rear - 0°

- 7. There shall be no bells, whistles, or outdoor paging systems permitted on-site in conjunction with the restaurant. The restaurant use shall be permitted to have live music on-site.
- 8. Any proposed dumpsters shall be surrounded by a three-sided brick or stucco enclosure with an opaque gate in the front. The lid of the dumpster shall be made of rubber.
- 9. Any utility boxes, HVAC components, or accessory components to the commercial building shall be screened from the public right-of-ways and adjoining property owners.
- 10. Deliveries and trash pick-up shall only be permitted between the hours of 7:00 a.m. and 9:00 p.m.
- 11. The developer shall install directional sign that directs all delivery trucks to Concord Road.
- 12. The commercial building shall have entry doors along Concord Road.
- 13. The following uses shall be prohibited:
 - Automotive sales/repair
 - Automobile wash service
 - Boarding and breeding kennels
 - Dry cleaning plants
 - Adult Novelty Stores & Adult Entertainment
 - Pawnshops
 - Check Cashing Stores
 - Pool Hall or Arcade
 - Service stations
 - Coin Operated Laundry



3180 Atlanta Road

Smyrna, Georgia 30080

(678) 431-5387 / Community Development

- Composting Facility
- Funeral Homes
- Group Homes
- Shelter for the Homeless
- Tattoo Parlor
- 14. Approval of the Subject Property for MU--Conditional shall be conditioned upon the development of the property in substantial compliance with the submitted site plan dated 5/13/2016.
- 15. The applicant shall be bound to the building material and architectural features illustrated on the elevations submitted and dated 5/13/2016. If there is any change to the elevations, it must be approved by the Director of Community Development.

If you have any questions regarding this zoning amendment, please contact Community Development at (678) 631-5354.

Date: July 20, 2016

Russell Martin, AICP City of Smyrna, Senior Planner

All Cratin

Responsible Vendors, Inc raining Institute for

certifies that

Jason McClure

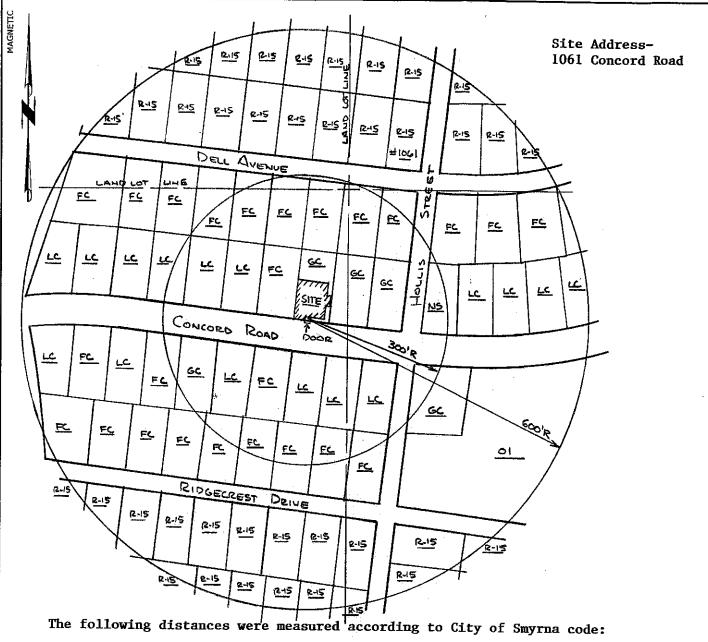
entitling them to all the rights and privileges appertaining thereto has successfully completed training in our RASS Workshop thus

In witness thereof the undersigned have affixed their names this 20th day of April, 2017

Seal



President



CHURCH-900' to Tillman United Methodist Church, @ 940 Concord Road.

1700' to King Springs Elementary School, @ 3265 Brown Road. SCHOOL-

PARK-1300' to Brinkley Park, @ 1270 Hunter Street.

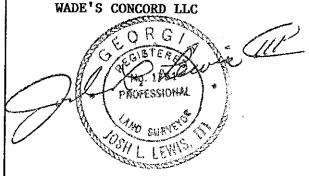
4500' to Smyrna Library, @ 100 Village Green Circle.

RESIDENCE- 470' to house @ 1061 Dell Avenue.

PUBLIC BUILDING- 3900' to Smyrna City Hall, @ 2800 King Street.

There are no alcohol treatment centers within 300' of this site.

City of Smyrna Wine, Malt and Distilled Spirits Pouring License Survey for:



| DATE: 4-26-2017 | SCALE: 0 | 100 | २०० | 400 |
|-----------------|----------|----------|---------------|---------|
| DRAWN BY: GD | 1" = 200 | GRAPH1 | C SCALE IN FE | ī |
| LAND LOT 452 | 17만 [| DISTRICT | ZHD | SECTION |
| COBB | COUNTY | | | GEORGIA |

GEORGIA LAND SURVEYING CO.

155 CLIFTWOOD DRIVE, ATLANTA, GA 30328 PH (404)255-4671 FAX (404)255-6607 WWW.GLSURVEY.COM 197517

CITY OF SMYRNA

PRIVILEGE LICENSE APPLICATION SUMMARY

| DATE: 06/07/2017 MAYOR AND COUNCIL: 06/19/2017 |
|---|
| TYPE OF LICENSES REQUESTED: BEER, WINE, & LIQUOR (RETAIL POURING) |
| NEW APPLICATION: YES OWNERSHIP YES AGENT YES |
| |
| NAME OF BUSINESS: WADE CONCORD LLC |
| dba WADE'S |
| PLACE OF BUSINESS: 1061 CONCORD ROAD |
| SMYRNA, GA 30080 |
| |
| AGENT: JASON MCCLURE |
| HOME ADDRESS: 1891 CEDAR CLIFF DRIVE SE |
| SMYRNA, GA 30080 |
| CITIZENSHIP YES |
| POLICE REPORT: DATE REQUESTED 05/11/2017 RECEIVED 06/06/2017 |
| RESULTS: INVESTIGATION FAILED TO REVEAL INFORMATION THAT WOULD |
| PRECLUDE ISSUANCE OF THIS LICENSE |
| |
| TYPE OF BUILDING MASONRY |
| DISTANCE MET: SCHOOL YES CHURCH YES LIBRARY YES PARK YES |
| MAP FURNISHED: YES |
| ADVERTISED: JUNE 9, 2017 & JUNE 16, 2017 |
| COMMENTS: ALL TAXES PAID |
| CONTINUATO. AND TAND FAID |

"Policing with a Purpose"



Smyrna Police Department

Chief of Police David Lee 2646 Atlanta QD &E Smyrna, GA 30080-2118 Phone: 770-454-9481 Fax: 678-631-5005

Deputy Chief Robert L. Harvey



Date:

June 6, 2017

To:

Tammi Jones, City Administrator

From:

David Lee, Chief of Police

Sgt. Doug Copeland, Office of Professional Standards

Subject:

Application for Alcohol License

Applicant: Jason McClure

This applicant, Mr. Jason McClure is the manager of the business listed below and has submitted an application with the business license office to obtain an alcohol beverage license, issued to, 1061 Concord Road Smyrna, GA 30080.

The business name is Wade's.

The business is incorporated under the name Wades Concord LLC.

A background check was conducted on this applicant. 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

under construction



CITY OF SMYRNA 3180 ATLANTA ROAD P.O. BOX 1226 SMYRNA, GA 30081

JL4h7 DBA WAdos

(678) 631-5321 or FAX # (770) 431-2814

| Name of Business: | Wades Concord, LLC | () , , , , , , , , , , , , , , , , , , | 770 3785040 |
|--|--|--|--------------------------------------|
| Business Address: | 1061 Concord Rd | Phone: (| 3763040 |
| | Number/Street Smyrna | | Suite # 3A 30080 |
| Mailing Address: | City 1891 Cedar Cliff Dr. SE | | State Zip |
| | Number/Street Smyrna | G | Suite # 30080 |
| Applicant/Owner: | City Jason McClure | 7 | tate Zip 70 3785040 |
| Check One: | Applicant Owner | Phone: (| 45 |
| Residential Address of | of Applicant: 1891 Cedar Cliff | | GA 30080 |
| Federal Tax ID Numb | 0.40 | City Social Security Number: 235 | State Zip 5-11-2895 |
| Driver's License Num | ber: 049410912 | Date of Birth: 03/04/1976 | |
| Check One: O | Proprietorshin Partmorehia | 0 | -Domestic |
| Full Description of Bu Spirits. | Full Service Restaura | ant- serving food, beer, | wine, and distilled |
| President: Jason M | cClure | ice President Jack Childre | 200 |
| Secretary: | V | Tooldent | |
| DOLLAR AMOUNT | OF TOTAL GROSS RECEIPTS | Treasurer: | 20.00 |
| Will there be renovation | ns of any kind, inside or outside the | 1,000,00 | |
| II yes, describe renova | tions: Croana up construction | n. | No |
| Will the outside of the | building be painted? Yes | No If yes colors must | be muted earth tone. |
| and employment eligi | am a legal resident of the United S ment will verify information cont risions of the Immigration and Nat bility of all employees hired after I all employees as required by this | tates, and further acknowledg ained in the license applicatio ionality Act, as amended, by v | e that periodically, the |
| SIGNATURE OF APP | LICANT | | 04/06/2017 |
| MATORE OF APP | T CAINI | Ī | DATE |
| 40 | | | ~ |
| FIRE MARSHAL | BUILDING I | NSPECTOR STORY | MARSHAL GC-GENERAL S. installing new |
| A CANADA AND A CAN | | SIGN N | MAKSHAL GC-GENERAL |
| signs, and for displ | e required when changing coaying banner or other te | opy area on existing sign | s, installing new |
| Community Develo | pment Department before in | mporary signs. P lea | se check with the |
| iigns at (770) 319-53 | 87.*** | staining any signs or dist | laying temporary |
| | _ | | |

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 |
| Signature Marajus Menbe April 11, 2017 |
| (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 11 day of April 2017 Cauche Cauther |
| AFFIX SEAL Notary Public Notary Public |
| All applicants must attach a copy of a second antiverifiable document as defined in O.C.G.A. 50-36-2. Such documents include a valid Georgia is a Driver's License or ID Card, a valid Driver's license issued by another State or an include it is a 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 Wades Concord LLC dba Wade's located at 1061 Concord Road requesting a privilege license for the sale of beer, wine, and liquor (retail pouring). The application will be heard by the Mayor and Council for the City of Smyrna, 2800 King Street, Smyrna, Georgia on June 19, 2017 at 7:00 p.m. All concerned persons are hereby notified.

Jason Wade McClure Licensee

> Wades Concord LLC Dba Wade's 1061 Concord Road Smyrna, GA 30080

Ads to Run _____ Jun 9, 2017 ____ and ___ Jun 16, 2017