MEETING OF _	SEP 12, 2018	WARD	7(rf)
		ITEM NUMBER \$ IMPACT	

ISSUE:

Application for a change of agent for privilege licenses for the sale of beer & wine (retail package) for Publix Super Markets Inc. dba Publix Super Markets #0753 with James Scott Hirsch as agent. Previous agent was Jasmin Ovcina as the agent.

SUMMARY:

James Scott Hirsch as the registered agent for Publix Super Markets Inc. dba Publix Super Markets #0753 requests privilege licenses for the sale of beer & wine (retail package) at 4480 South Cobb Drive.

BACKGROUND:

James Scott Hirsch will be the registered agent responsible for the sale of alcohol at the referenced location. Mr. Hirsch 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. James Scott Hirsch 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 Publix Super Markets Inc. dba Publix Super Markets #0753 at 4480 South Cobb Drive with James Scott Hirsch as the registered agent.



APPLICATION FOR ALCOHOLIC BEVERAGE AGENT CHANGE ONLY

Phone (678) 631-5321 Fax (770) 431-2808 <u>Web site: www.smyrnacity.com</u>

	ANSWER ALL QUESTIONS.		
YPE OF LICENSE: [CHECK APPR	ROPRIATE SPACES]		
IQUOR:	BEER:	WINE:	
RANSFER () KG. BEER/WINE () KG. DIST. SPIRITS () ETAIL POURING () Restaurant () Package Store ()	TRANSFER PKG. BEER/WINE PKG. DIST. SPIRITS RETAIL POURING Restaurant Package Store	() TRANSFER (X) PKG. BEER/WINE () PKG. DIST. SPIRI () RETAIL POURING () Restaurant () Package Store	TS ()
Occupation Tax License Nun	ess Publix Super Markets, Inc.		
Location4480 S Cobb Dr	SE Smyrna, GA 30080	Phone	(770) 434-622
Full name of Owner P	ublix Super Markets, Inc.		
2.2			
Has owner ever had an alcoh If yes, attach full details.	olic beverage license revoked in	Smyrna or other jurisdiction? Ye	es()No(X)
Has owner ever had an alcoh If yes, attach full details. Full name of AgentSe		Smyrna or other jurisdiction? Ye	es () No (X)
ii yes, attacri full detalls.	cott Hirsch		
Full name of AgentSocial Security Number	cott Hirsch	te of Birth <u>05 -23 -</u> 7	2
Full name of AgentSocial Security Number	cott Hirsch	te of Birth <u>05 -23 -</u> 7	2
Full name of Agent Social Security Number Are you a Citizen of the United Current Address 2690 In	cott Hirsch	te of Birth <u>05-23-7</u> lace <u>ST. LOUIS</u> , MALIETTA, CA Zip 3006	2
Full name of Agent Social Security Number Are you a Citizen of the United Current Address 2690 In Home Telephone NA	Da States? Yes (X) No () Birthp City/State, Number of years a	te of Birth <u>O5 -23 -7</u> lace <u>ST. Louis</u> , Marena, Ca zip <u>Toole</u> t present address <u>14</u>	2 MO 2
Full name of Agent Social Security Number Are you a Citizen of the United Current Address 2690 In Home Telephone NA	Da States? Yes (X) No () Birthp City/State, Number of years a	te of Birth <u>O5 -23 -7</u> lace <u>ST. Louis</u> , Marena, Ca zip <u>Toole</u> t present address <u>14</u>	2 MO 2
Full name of Agent Social Security Number Are you a Citizen of the United Current Address 2690 In Home Telephone N/A Do you reside in Cobb County Previous address 4096	Da States? Yes (X) No () Birthp	te of Birth	2 MO 2
Full name of Agent Social Security Number Social Security Number Are you a Citizen of the United Current Address 2690 In Home Telephone N/A Do you reside in Cobb County Previous address 4096 Number of years at previous according to the United Social Security Number of years at previous according to the Indiana.	Da States? Yes (X) No () Birthp Number of years a Pres (X) No () If yes, how long Amberusy CT	te of Birth O5 23 -7 Jace ST. Louis, Marcha, CAZip 3006 ti present address IH ag 23 Years Karesaw CA Number and State de detailed list Stone N	20144 20144

	(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 ()			
	(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 ()			
	(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 ()			
	(f)	Been currently placed on parole from any governing authority? Yes () No (X)			
	Has an 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.			
7.	Do you, interest located.	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 is			
8.	Have you Yes()	J, your spouse, partner or stockholder any financial interest in the wholesale liquor business? No (X) If yes, give details.			
9.	Please <u>in</u>	itial here that you have received a copy of the City of Smyrna Alcoholic Beverage Ordinance			
10.	Are you f operation	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 a	ware you are required to apply for a State license? Yes (X) No ()			

Contact the Georgia Department of Revenue Alcohol Division (404-417-4900).

6.

Has the applicant:

Responsible Vendors, Inc Iraining Institute for

certifies that

James Scott Hirsch

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 August, 2018

Seal



President -

CITY OF SMYRNA

PRIVILEGE LICENSE APPLICATION SUMMARY

DATE:08/23/2018
TYPE OF LICENSE REQUESTED: PRIVILEGE LICENSES BEER/WINE PACKAGE
NEW APPLICATION: NO OWNERSHIP NO AGENT YES
NAME OF BUSINESS: PUBLIX SUPER MARKETS, INC. dba PUBLIX SUPER MARKETS #0753
PLACE OF BUSINESS: 4480 SOUTH COBB DRIVE
SMYRNA, GA 30080
AGENT: JAMES SCOTT HIRSCH 2690 INDIAN LAKE DR. MARIETTA, GA 30062
CITIZENSHIP YES POLICE REPORT: DATE REQUESTED 07/30/2018 DATE RECEIVED 08/02/2018
RESULTS: _INVESTIGATION FAILED TO REVEAL INFORMATION THAT WOULD
PRECLUDE ISSUANCE OF THESE LICENSES
TYPE OF BUILDINGMASONRY
DISTANCE MET: SCHOOL YES CHURCH YES LIBRARY YES PARK YES
MAP FURNISHED: N/A ADVERTISED 08/31/2018 & 09/07/2018
COMMENTS: ALL TAXES PAID

"Policing with a Purpose"



Smyrna Police Department

Chief of Police David Lee 2646 Λtlanta RD &E &myrna, GΛ 30080-2118 Phone: 770-434-9481

Fax: 678-631-5005

Deputy Chief Robert L. Harvey



Date:

08-02-18

To:

Tammi Jones, City Administrator

From:

David Lee, Chief of Police

Lt. Mark Binicewicz, Office of Professional Standards

Subject:

Application for Alcohol License

Applicant: Hirsch, James

This applicant, James Hirsch, 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 name change only, issued to 4480 S. Cobb Dr. Smyrna, GA. 30080.

The business name is Publix #753.

The business is incorporated under the name Publix #753.

A background check was conducted on this applicant. There was nothing in his background within the criminal history requirements of City of Smyrna Ordinance 6-51 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

CITY OF SMYRNA BUSINESS LICENSE DEPARTMENT APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

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

Web site: www.smyrnacity.com

GEO	RGIA	CORR	COUNTY
		. COBB	COUNT

SECTORA, CODE COOKIT	
I, JAMES SCOTT HINSELT, BEING DULY SW MADE BY ME IN THE ABOVE AND FOREGOING APPLIC STATEMENT IS MADE HEREIN AND SUCH STATEM GRANTING OF A LICENSE.	CATION ARE TRUE, AND NO FALSE, OR FRAUDULENT
Signature of Managing Applicant	(type name before signing)
Signature and title of person other	Manager Payroll Retail Account than Applicant completing this application
Phone Number: Work 803-108	NO 11-0
Sworn to and subscribed before me this 30 day of 100 day , 20 lb. Notary Public	FOR Tiana Collins signature 9th day of July, 2018 Christie J. Burnett CHRISTIEL BURNETT Commission # GG 169098 Expires December 18, 2021 Bonded Tim Budget Notiny Services
FINGERPRINTED AT SMYRNA POLICE DEPARTMENT:	Date 7/36/14
RECEIVED IN CITY OF SMYRNA BUSINESS LICENSE DEF	PARTMENT BY:
	Date



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.

	is a United States c	itizen or legal perman	ent resident at leas	t eighteen (18) years
Act. Title 8 U. United States.	.S.C., as amended, a	at least eighteen (18) yen number issued by	years old, and is lav	gration and Nationality vfully present in the Homeland Security or
YES	NO	Alien ID numbe	er	
or fraudulent s	statement of represen	y person who knowing ntation in an affidavit e Code Section 16-10-	executed pursuant	akes a false, fictitious, to this Code section
I declare, und	ler penalty of law,	that this affidavit ha		
Signature			<u>7-70</u>	
		he applicant is a corpo		
knowledge and	d understanding of a	nt signed this applicated that statements and, under the contained in this	der oath actually ad	is personally known, me his or her personal ministered by me, has
_{This} <u>30</u> da	ny of July, 2	0.18	Notary Public AFFIX	OMN MARA

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 Publix Super Market Inc. dba Publix Super Markets #0753 located at 4480 South Cobb Drive, Smyrna, Georgia, requesting a privilege license 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 September 12, 2018 at 710:00 a.m. All concerned persons are hereby notified.

James Scott Hirsch Licensee

> Publix Super Market Inc. dba Publix Super Market #0753 4480 South Cobb Drive Smyrna, Georgia 30080

Ads to Run ____ Aug 31, 2018 and ___ Sep 7, 2018