COBB COUNTY BUSINESS LICENSE
P.O. Box 649
Marietta, Georgia 30061-0649
Phone 770-528-8410/ Fax 770-528-8414

If you wish for this application to be hand delivered or delivered via UPS or FedEx please do so at:
1150 Powder Springs Street, Suite 400
Marietta, Georgia 30064

CHECK LIST FOR BILLIARD ROOM APPLICATION

( ) APPLICATION AND ATTACHMENTS MUST BE TYPED AND EVERY QUESTION COMPLETED.

( ) COPIES OF STOCK CERTIFICATES (FRONT AND BACK) IN NUMERICAL ORDER AND MINUTES OF MEETINGS ON ALL STOCK TRANSFERS EXCEPT FOR PUBLICLY TRADED COMPANIES.

( ) SIGN CONSENT FORM AND APPLICATION.

( ) PURCHASE AGREEMENT - IF BUYING AN EXISTING ESTABLISHMENT.

( ) ZONING - PAGE 4 OF THE APPLICATION MUST BE SIGNED BY THE ZONING DIVISION INDICATING THE ZONING DESIGNATION.

( ) LICENSE FEES - FEES MUST BE PAID BEFORE LICENSE CAN BE ISSUED. PAYMENT MUST BE MADE WITHIN FOURTEEN DAYS AFTER APPROVAL OR APPLICATION AND LICENSE IS VOID.

( ) A COPY OF LEASE OR PROOF OF OWNERSHIP OF BUILDING OR LOCATION OF BUSINESS.

APPLICATION PROCEDURE:

EACH APPLICATION WILL REQUIRE 7 - 10 DAYS FOR PROCESSING. UPON RECEIPT OF THE APPLICATION THE BUSINESS LICENSE OFFICE WILL SEND THE APPLICATION TO THE COBB COUNTY POLICE PERMIT SECTION FOR INVESTIGATION. NO DECISION WILL BE TAKEN IN REGARDS TO THE APPLICATION UNTIL THE POLICE INVESTIGATION HAS BEEN COMPLETED. THE POLICE INVESTIGATION USUALLY REQUIRES 7 - 10 DAYS. THE APPLICATION WILL FIRST BE CONSIDERED BY THE BUSINESS LICENSE MANAGER. THIS DECISION WILL NOT BE PERFORMED IN A HEARING. THE BASIS FOR THE DECISION WILL BE SOLELY CONTINGENT ON THE APPLICATION'S COMPLIANCE WITH THE COBB COUNTY CODE OF ORDINANCE. IF THE APPLICATION MEETS ALL REQUIREMENTS OF THE CODE IT WILL BE APPROVED AND THE LICENSE FEE MUST BE PAID WITHIN TWO WEEKS OF APPROVAL. FEES ARE $110 PLUS A GROSS RECEIPTS FEE BASED ON THE ESTIMATED GROSS RECEIPTS FOR THE BALANCE OF THE CALENDAR YEAR. IF THE APPLICATION IS DENIED, THE APPLICANT WILL HAVE TEN DAYS TO APPEAL THIS DECISION TO THE LICENSE REVIEW BOARD. THE APPEAL IS FILED THROUGH THE BUSINESS LICENSE OFFICE. UPON REQUEST AN APPEAL FORM WILL BE SUPPLIED TO THE APPLICANT TO FILE AN APPEAL. THE LICENSE REVIEW BOARD ROUTINELY MEETS ON THE SECOND AND FOURTH THURSDAY OF EACH MONTH AT 3:00 P.M. THE MEETING WILL BE CONDUCTED ON THE SECOND FLOOR OF THE PURCHASING BUILDING LOCATED AT 1772 COUNTY SERVICES PKWY., MARIETTA, GA.

APPEALS WILL BE SCHEDULED FOR THE NEXT AVAILABLE LICENSE REVIEW BOARD HEARING AFTER THE DECISION OF THE BUSINESS LICENSE MANAGER REGARDING THE APPLICATION HAS BEEN MADE AND AFTER AN APPEAL REGARDING THE APPLICATION HAS BEEN APPROPRIATELY FILED. HOWEVER, APPEALS MUST BE RECEIVED A MINIMUM OF ONE WEEK IN ADVANCE OF A LICENSE REVIEW BOARD HEARING. ALL DECISIONS OF THE LICENSE REVIEW BOARD ARE FINAL UNLESS APPEALED TO THE BOARD OF COMMISSIONERS WITHIN THIRTY DAYS OF THE DECISION OF THE LICENSE REVIEW BOARD.

IF THERE ARE ANY QUESTIONS REGARDING THE APPLICATION PLEASE CONTACT THE BUSINESS LICENSE OFFICE AT 770-528-8410.

REVISED 3/10
COBB COUNTY BUSINESS LICENSE
P.O. Box 649
Marietta, Georgia 30061-0649
Phone 770-528-8410/ Fax 770-528-8414

DATE RECEIVED
COPY TO POLICE DEPARTMENT
DATE LETTER RECEIVED FROM PD
DISPOSITION: APPROVED ( ) DENIED ( )

COBB COUNTY BILLIARD ROOM APPLICATION

DATE OF MEETING
ITEM NUMBER
LICENSE NUMBER
SIC CODE LICENSE FEE

ALL QUESTIONS MUST BE ANSWERED

NEW ( ) CHANGE OF LICENSEE ( ) CHANGE OF OWNERSHIP ( ) DATE

1. NAME OF BUSINESS ______________________________ PHONE NO.

2. BUSINESS ADDRESS
   CITY____________________ STATE_________ ZIP

3. MAILING ADDRESS
   CITY____________________ STATE_________ ZIP

4. TYPE OF OWNERSHIP: PROPRIETOR ( ) PARTNERSHIP ( ) CORPORATION ( )

5. IF SOLE PROPRIETORSHIP
   OWNER'S NAME
   SS#____________________ DATE OF BIRTH
   HOME ADDRESS_________________________ HOME PHONE
   CITY____________________ STATE_________ ZIP

6. IF PARTNERSHIP
   NAME OF PARTNER____________________ SS#
   DATE OF BIRTH____________________ PERCENTAGE OF OWNERSHIP_______%
   HOME ADDRESS_________________________ HOME PHONE
   CITY____________________ STATE_________ ZIP
   NAME OF PARTNER____________________ SS#
   DATE OF BIRTH____________________ PERCENTAGE OF OWNERSHIP_______%
   HOME ADDRESS_________________________ HOME PHONE
   CITY____________________ STATE_________ ZIP
7. IF CORPORATION: NAME

PRESIDENT______________________________PERCENTAGE OF OWNERSHIP___%
DATE OF BIRTH_______________________SS#
HOME ADDRESS__________________________HOME PHONE
CITY____________________________STATE________ZIP

VICE PRESIDENT______________________________PERCENTAGE OF OWNERSHIP___%
DATE OF BIRTH_______________________SS#
HOME ADDRESS__________________________HOME PHONE
CITY____________________________STATE________ZIP

SECRETARY______________________________PERCENTAGE OF OWNERSHIP___%
DATE OF BIRTH_______________________SS#
HOME ADDRESS__________________________HOME PHONE
CITY____________________________STATE________ZIP

TREASURER______________________________PERCENTAGE OF OWNERSHIP___%
DATE OF BIRTH_______________________SS#
HOME ADDRESS__________________________HOME PHONE
CITY____________________________STATE________ZIP

8. NAME OF LICENSEE

HOME ADDRESS__________________________HOME PHONE
CITY____________________________STATE________ZIP

DATE OF BIRTH_______________________SS#

9. PLACE OF BIRTH: STATE_________COUNTY______________CITY

ARE YOU A U.S. CITIZEN?______BY BIRTH______NATURALIZED
DATE, PLACE AND COURT______________________________CERTIFICATE NO.

PETITION NO.________________DERIVED PARENTS CERTIFICATE NO.(S)
ALIEN REGISTRATION NO.________________NATIVE COUNTRY

DATE AND PORT OF ENTRY

MARRITAL STATUS: SINGLE ( ) MARRIED ( ) DIVORCED ( )

10. LIST ALL STOCKHOLDERS NAME, ADDRESS, SS# AND PERCENTAGE OF OWNERSHIP.

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

11. FULL NAME OF SPOUSE______________________________SS#____-____-____
HOME ADDRESS__________________________PHONE NO.____________
CITY____________________________STATE________ZIP__________
12. NUMBER OF YEARS AT PRESENT ADDRESS?______ NUMBER OF YEARS IN GEORGIA?____

13. WHAT HAS BEEN YOUR OCCUPATION FOR THE PAST FIVE YEARS?

<table>
<thead>
<tr>
<th>FROM</th>
<th>TO</th>
<th>OCCUPATION/DESCRIPTION OF DUTIES PERFORMED</th>
<th>SALARY</th>
<th>EMPLOYER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14. HAS THE APPLICANT OR ANY OF THE OWNERS, PARTNERS, OR STOCKHOLDERS OWNING ANY INTEREST, BEEN CONVICTED OR ENTERED A PLEA OF NOLO CONTENDED WITHIN FIVE (5) YEARS PRIOR TO FILING THIS APPLICATION FOR ANY FELONY OR MISDEMEANOR IN ANY STATE OF THE UNITED STATES?  YES ( ) NO ( ) IF YES, EXPLAIN FULLY
___________________________________________________________________________________________
___________________________________________________________________________________________

15. DISTRICT #_____________ LAND LOT #_____________ PARCEL #_____________

HOW IS PROPERTY ZONED?
IF THIS AN APPLICATION FOR AN ORIGINAL LICENSE, ATTACH HERETO PROOF OF ADEQUATE PARKING FACILITIES OF ONE (1) OFF-STREET PARKING SPACE FOR EACH ONE HUNDRED (100) SQUARE FEET OF TOTAL FLOOR AREA AVAILABLE TO APPLICANT'S PATRONS AND WITHIN FOUR HUNDRED (400) FEET OF THE PROPOSED LOCATION.

ZONING MUST BE APPROVED BY ZONING STAFF MEMBER.

SIGNATURE OF ZONING STAFF MEMBER

16. HOW MANY BILLIARD OR POOL TABLES DO YOU PLAN TO HAVE?

17. ARE YOUR POOL TABLES LICENSED THROUGH THE STATE OF GEORGIA BY YOU OR THE OWNER OF THE POOL TABLES?  YES ( ) NO ( )

18. ARE YOU FAMILIAR WITH THE COBB COUNTY ORDINANCE, STATE LAWS, AND REGULATIONS, GOVERNING THE OPERATION OF THIS TYPE BUSINESS?  YES ( ) NO ( )

19. DO YOU HAVE MALE AND FEMALE RESTROOMS FOR THE PUBLIC?  YES ( ) NO ( )

20. WILL YOUR ESTABLISHMENT SELL ALCOHOLIC BEVERAGES?  YES ( ) NO ( )
IF YES, WHAT PREPARATIONS OR PROCEDURES DO YOU HAVE TO PROHIBIT PERSONS UNDER 18 YEARS OF AGE FROM BEING IN YOUR FACILITY WHILE ALCOHOLIC BEVERAGES ARE SOLD, CONSUMED OR DISPENSED?
___________________________________________________________________________________________
___________________________________________________________________________________________

21. DO YOU PLAN TO SERVE FOOD?  YES ( ) NO ( )
IF YES, ATTACH THE VALID HEALTH PERMIT.

22. WHAT PROCEDURES DO YOU HAVE IN PLACE TO PROHIBIT GAMBLING OR BETTING IN YOUR FACILITY?
___________________________________________________________________________________________
___________________________________________________________________________________________

23. LIST NAME, ADDRESS, PHONE NUMBER OF LANDLORD FROM WHERE YOU ARE LEASING.
___________________________________________________________________________________________
GEORGIA, COBB COUNTY

I, ____________________________, BEING DULY SWORN ACCORDING TO LAW, DO SWEAR THAT THE FACTS AND STATEMENTS STATED BY ME IN THE ABOVE AND FOREGOING ANSWERS ARE TRUE. FALSE, OR FRAUDULENT STATEMENTS ARE NOT MADE HEREIN AND NONE WERE MADE IN ORDER TO PRODUCE THE GRANTING OF SUCH A LICENSE.

I FURTHER CERTIFY THAT I WILL NOTIFY COBB COUNTY BUSINESS LICENSE DIVISION OF ANY CHANGE IN MANAGEMENT, LICENSEE, OR OWNERSHIP IMMEDIATELY.

________________________________
SIGNATURE OF APPLICANT

SWORN TO AND SUBSCRIBED BEFORE ME THIS ______DAY OF ____________, 20___

________________________________
NOTARY PUBLIC
TO BE COMPLETED BY THE LICENSEE, SPOUSE OF LICENSEE, OWNER/ SHAREHOLDER, AND PARTNERS WITH 20% OR MORE OF SHARES AND THEIR SPOUSES.

CONSENT FORM

I hereby authorize COBB COUNTY BUSINESS LICENSE to receive any criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

____________________________________
Full Name Printed

____________________________________
Street Address

____________________________________
City, State, & Zip

Sex    Race   Date of Birth     SS Number

_______________________
Signature

_______________________
Notary      Date
TO BE COMPLETED BY THE LICENSEE, SPOUSE OF LICENSEE, OWNER/SHAREHOLDER, AND PARTNERS WITH 20% OR MORE OF SHARES AND THEIR SPOUSES.

CONSENT FORM

I hereby authorize COBB COUNTY BUSINESS LICENSE to receive any criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

________________________________________________________________________
Full Name Printed

________________________________________________________________________
Street Address

________________________________________________________________________
City, State, & Zip

__________________    ________________
Sex    Race    Date of Birth     SS Number

_________________________________
Signature

_________________________________
Notary                  Date
Division 3.4 Pool Rooms

Section 78-231. Applicability of division.

The rules and regulations set forth in this division shall govern the operation of all pool rooms and billiard halls in the unincorporated area of Cobb County.
(Ord. of 10-25-94; Code 1977, Section 3-7-135)

Section 78-232. Exemptions from division.

This division shall not apply to billiard tables or billiard rooms operated by private industrial concerns, Young Men's Christian Associations, religious orders, charitable institutions, state, county or city institutions, fraternal orders of bona fide clubs using such tables for members or employees only.
(Ord. of 10-25-94; Code 1977, Section 3-7-148)

Section 78-233. Enforcement of division.

It shall be the duty of the sheriff, police or other constituted authorities to inspect all public billiard rooms in the county for the purpose of ascertaining whether or not the provisions of this division are being observed; and it shall be his and their duty to report all violations promptly to the appropriate prosecuting attorney of the county and furnish him with such information and assistance as is necessary for the prosecution of such violations. Whenever the state shall revoke any permit or license held by the licensee, the license shall thereupon be automatically revoked without any action of the board of commissioners.
(Ord. of 10-25-94; Code 1977, Section 3-7-147)

Section 78-234. Sanitary and toilet facilities.

The place of business of a billiard room shall have restrooms for males and females. Such restrooms must be kept clean, and the premises shall be in compliance with all applicable rules and regulations of the health department or other department or other departments of the county.
(Ord. of 10-25-94; Code 1977, Section 3-7-140)

Section 78-235. Health certificate required for establishments serving food.

If food is served at a billiard room, the applicant shall have a valid health certificate issued by the county health department before any license can be issued.
(Ord. of 10-25-94; Code 1977, Section 3-7-141)
Section 78-236. Hours of operation.

Licensees for the operation of a billiard room shall be permitted to engage in such activities between the hours of 6:00 a.m. and 2:00 a.m. (Ord. of 10-25-94; Code 1977, Section 3-7-142)

Sections 78-237 - 78-250. Reserved.

Subdivision II. License

Section 78-251. Application.

All persons 18 years of age or older desiring to obtain a license required for the operation of a pool room shall make written application at the business license office. Such application shall state the name and address of the applicant; the place where the proposed business is to be located; the nature and character of the business to be carried on; if a partnership, the names of the partners; if a corporation, the names of the officers and stockholders; and such other information as may be required by the director of the business license office, or the police department, and be sworn to by the applicant or agent thereof. (Ord. of 10-25-94; Code 1977, Section 3-7-136)

Section 78-252. Investigation and report.

(a) All applicants for a license under this division shall be investigated by the county police department, and a report made to the business license office. This requirement shall be waived if a current investigation report is on file. For purposes of this section; the term "current" is defined as being within the past six months.

(b) The police reports shall be sent to the business license office to be placed in the applicant's file. (Ord of 10-25-94; Code 1977, Section 3-7-137)

Section 78-253. Grounds for denial.

(a) Disqualification of applicants with prior convictions. No license shall be issued to any person, partnership or corporation, or any individual having an interest, directly or indirectly, either as owner, partner or principal stockholder, who shall have been convicted or shall have taken a plea of nolo contendere, within the past five years immediately prior to filing of the application, for any felony of any state, or of the United States. For purposes of this subsection, the term "conviction" shall include an adjudication of guilt or plea of guilty or nolo contendere, or the forfeiture of a bond when charged with a crime.

(b) Other Grounds. No license shall be issued where there is evidence that the granting of such license will have an adverse effect on the community. (Ord. of 10-25-94; Code 1977, Section 3-7-138)

Section 78-254. Revocation of license for certain violations.

(a) Commission of any of the following acts by a licensee, agent or employee of a billiard room shall be a violation of law and shall be grounds for revocation of a billiard license:

(1) Permitting the use of any drug in any form in or around a place of business.

(2) Permitting any gambling or betting in the place of business or on the premises.

(3) Permitting or committing any violation of state law or county ordinance.
(b) It shall be unlawful for any person under the age of 18 years to play billiards in, or for any other purpose to enter or remain in, a billiard room during hours and times when alcoholic beverages are sold, consumed or dispensed therein. This subsection shall not apply to persons under 18 years of age who are accompanied by a parent or guardian or who possess a written permit from a parent or guardian, which permit is witnessed by a notary public with seal. Any person desiring admission thereto during hours and times when alcoholic beverages are sold, consumed or dispensed, who is or appears to be under the age of 21 years, shall produce satisfactory identification and age verification or certify his age in writing or produce a written permit before he shall be allowed entry.

(Ord. of 10-25-94; Code 1977, Section 3-7-143)

Section 78-255. Transfer.

A license for the operation of a pool room shall not be transferable except by application to the business license office in the same form and manner as an original application.

(Ord. of 10-25-94; Code 1977, Section 3-7-144)

Section 78-256. Additional grounds for revocation.

In addition to revocation or suspension of a license for the reasons specified in section 78-254, the license to operate a billiard room or parlor may be further revoked for violation of any of the following standards:

(1) If the licensee permits public drunkenness and disorderly conduct among his patrons or employees after warning by the county officer, such failure to act shall be grounds for revocation or suspension.

(2) If the licensee receives notice from police or county officials of any violations of any ordinance other than as provided in subsection (1) of this section, without correction thereof, such failure to act shall be grounds for automatic revocation.

(3) In the event of the violation of any state or federal laws by the licensee or his agents or servants on the premises, said violations shall be grounds for revocation or suspension.

(4) In the event of conviction of a crime involving moral turpitude by the licensee off the premises, such conviction shall be grounds for revocation or suspension.

(Ord. of 10-25-94; Code 1977, Section 3-7-149)