

2015 APPLICATION GORDON COUNTY
MALT BEVERAGE, WINE AND LIQUOR LICENSE

1. Business is: _____ Sole Proprietorship
 Corporation
 _____ Private Club (check one) ___ Non-Profit ___ For Profit
 _____ Partnership

1 a. Name of owner(s) ZAHID RASHID Date of birth 9-6-64
Sole proprietorship

Corporation (list of officers) _____
Partnership (list partners) _____
Private Club (list officers) _____

1. b. Name of applicant : ZAHID RASHID Date of birth 9-6-64

2. Name of corporation (if a corporation): HNR CALHOUN INC

3. Address: 1090 REDBUD ROAD CALHOUN GA 30701 Phone # 706 602-2345

4. How long a resident of Gordon County 8 years

5. Name of business: Quick Serv Phone # 706. 602. 2345

Type of application: Beer (beer, wine, alcohol, consumption, package)

6. Location of business 1090 RedBud Road

7. Description of premises (convenience store, etc.) Convenience Store

8. Has the applicant or any interested person made a previous application for a license in Gordon County
 Yes () No
If yes: Where _____ When _____ approved or rejected Approved

9. Has applicant or any person with any interest in the application ever been convicted of a crime other than traffic violation () Yes () No
If yes: What crime _____ When _____ Where _____

10. Name and address of all persons (other than applicant) who have a direct or indirect interest in the profits or losses of the business _____

Submitted this 17 day of Dec 2014 Print Applicant's Name _____

Zahid Rashid
Signature of Applicant

Sworn to and subscribed before me this 17 day of December, 2014

Kristie Helms
Notary Public
My Commission expires: April 8, 2018



(Notary Seal)