



# Sunday Sales Affidavit (Renewal)

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Updated SEPT 2023

## NOTICE TO APPLICANT

The City of Pooler permits eating establishment (restaurants) and hotels holding a license to dispense alcoholic beverages for consumption on the premises under certain conditions. To be authorized to dispense alcoholic beverages for consumption on Sunday, an establishment must:

- A. Be licensed by the City to sell alcoholic beverages by the drink for consumption on the premises;
- B. Be a licensed establishment that derives at least 50 percent of its annual gross income from the rental of rooms for overnight lodging; or
- C. Be an eating establishment whose primary business is the sale of prepared meals, Derive at least 50 percent of its total annual gross food and beverage sales from the sale of prepared meals or food;
- D. Have its primary floor area specifically designed, set aside, set up and operating to serve meals and food on the premises and shall have a fully equipped commercial kitchen to include inappropriate stove, refrigerator, food preparation area, sink and other items required by the county health department and city inspections department for the preparation of food;
- E. Have a printed or posted menu from which selections of prepared meals can be made;
- F. Provide full food service to the public during its entire operating hours, including Sunday; and
- G. Include the following certified affidavit from your certified public accountant (CPA) or Registered public accountant (RPA) and submit it along with the required Sunday sales renewal payment.

## ACCOUNTANT'S CERTIFICATION OF REVENUES

I hereby certify that I have reviewed and attest to the accuracy of the financial records supplied to me from the food serving establishment described above; and further attest that the establishment derived at least 50 percent of its gross revenues for the last 12 months of business under present or previous ownership, from the sale of prepared meals.

Public Accounting: \_\_\_\_\_ Firm Date: \_\_\_\_\_

Accountant Printed Name: \_\_\_\_\_ Certifying Signature: \_\_\_\_\_

License Number: \_\_\_\_\_ Notary Public: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 202\_

## Business Information

Business Name

Business Location

Business Phone