



HALL COUNTY BUSINESS LICENSE APPLICATION

P O BOX 1435

GAINESVILLE, GA 30501

Phone 770.531.6815 Fax 770.531.4953

BUS-0032112

Date 10/11/2017 CO # COM2017-00636 Acct # BUS-0032112 - 11

Business Name VITAL FOODS LLC Phone # 470-252-5807

Business Address 2069 MEMORIAL PARK DRIVE , GAINESVILLE, GA 30504

Mailing Address _____

No. of employees 50 Beginning date 10/11/2017 State License _____

Business Type(s) POULTRY PROCESSING

Comments or Special Conditions _____

Type of Ownership Sole Proprietor Partnership Coporation, LLC, LLP, PC, etc Other

Owner(s) VITAL FOODS LLC
2069 MEMORIAL PARK DRIVE GAINESVILLE, GA 30504
Phone # 470-252-5807

Citizenship _____ Alien Reg. # _____ Exp date _____

Dr. lic # _____ DOB _____ Soc Sec # _____

JUAN C LOMAS

Citizenship _____ Alien Reg. # _____ Exp date _____

Dr. lic # _____ DOB _____ Soc Sec # _____

GABRIELA NUNEZ

Citizenship US Alien Reg. # _____ Exp date _____

Dr. lic # _____ DOB _____ Soc Sec # _____

Manager Name(s) _____

Citizenship _____ Alien Reg. # _____ Exp date _____

Dr. lic # _____ DOB _____ Soc Sec # _____

I, Gabriela Nunez, being duly sworn according to law, do swear that the facts stated by me in the above and foregoing answers to questions are true and no false or fraudulent statement is made herein.

Gabriela N.
Owner/Agent Signature

Ramona Gutierrez
Witness

Total Due	
2017 Administration Fee	\$50.00
2017 Business Occupation Tax	\$337.75
Total Due	\$387.75

Total Paid	
Cash	\$390.75
Change	-\$3.00
Total Paid	\$387.75

NOTE: Any payment submitted with this application will be deposited immediately by Hall County. Applications and payment do not entitle applicant to engage in business applied for. Only the final issuance of the Business License Certificate constitutes authority to transact such business.

HALL COUNTY BUSINESS LICENSE APPLICATION

2875 Browns Bridge Rd
Gainesville, Georgia 30504
770-531-6815

P O Box 1435
Gainesville, Ga. 30503
Fax 770-531-4953

Business Name Vital Foods LLC Business Phone 478252-5807

Business physical address 2069 Memorial Park Dr Gainesville GA 30504
Number & Street Name City State Zip

Business mailing address _____
If different from above

E-Mail Address AP.Vital Foods @ Gmail.com

Total number of people working in business, full time, or part-time equaling full time 50

E-Verify Number (10 or more people) 1124379 Authorization date from E-Verify October 2016

Beginning Date of business from THE ABOVE address 10/11/17

Federal Employer ID Number (FEI #) 47-3341-208 Georgia Sales & Use Tax # 308529655

Business Type (be very specific as to what you will be doing): poultry processing State License number _____
If applicable

OWNERSHIP

Juan Carlos Lomas _____ Gainesville GA 30501
Name of Owner if Sole Proprietorship, or name of officer if Corp. or LLC Home Address City State Zip

Home Phone number _____ Cell Number _____ Fax Number _____

Gabriela Nunez _____ Gainesville GA 30501
Additional Owner's name if partnership Home Address City State Zip

Home Phone number _____ Cell Number _____ Fax Number _____


TYPE OF OWNERSHIP Sole Proprietor Partnership Corporation LLC

If corporation or LLC, what is the EXACT, complete name as it is registered with the Georgia Secretary of State's Office:

Corporate name _____ Corporate Address _____ City _____ State _____ Zip _____

IMPORTANT ALONG WITH THIS APPLICATION, PLEASE BRING ORIGINAL GOVERNMENT ISSUED PHOTO ID ON ALL OWNERS AND/OR PRESIDENT OF THE CORPORATION (corporate officer MUST be on Georgia Secretary of State's Website), GREEN CARD (if applicable), OCCUPANCY PERMIT SHOWING THE BUSINESS PHYSICAL ADDRESS (Issued by the Planning & Zoning/Building Inspection Depts.) AND ANY OTHER REQUIRED DOCUMENTATION. ALL THESE ITEMS MUST BE SUBMITTED BEFORE ANY BUSINESS LICENSE CAN BE ISSUED.

For office use only
BL# 32112 CO# COM2017-00630e

OVER  



HALL COUNTY BUSINESS LICENSE DEPT

P O DRAWER 1435
GAINESVILLE, GA. 30503

Phone 770-531-6815

2875 Browns Bridge Rd

Fax 770-531-4953

Affidavit Verifying Legal Status Of Applicant for Hall County Business License

Please complete highlighted sections

By executing this affidavit under oath, as an owner/applicant for a Hall County Business Occupation Tax Certificate (Business License), I do swear the following, with respect to my application for a Hall County Business License for _____

Vital Foods LLC

(business name)

AND

Gabriela Nunez

(business owner)

I certify that I am a: (please check one of the following)

1) United States citizen

OR

2) A legal permanent resident of the United States, 18 years of age or older; OR I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, 18 years of age or older and lawfully present in the United States*. My country of citizenship is: _____

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of Code Section 16-10-20 of the Official Code of Georgia.

[Signature] 10/11/17 Gabriela Nunez 10/11/17
Signature of Owner date Printed Name of Owner date

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

11th DAY OF Oct, 2017

[Signature]
Notary Public

* O.C.G.A. 50.36.1(e) (2) requires that aliens under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien", legal permanent residents must also provide their alien registration number.

USA
Georgia

**IDENTIFICATION
CARD**

GOVERNOR *Nathan Deal*

666070



COMMISSIONER *Spencer F. Hogg*

UNDER 21

ID NO.

[REDACTED]

DOB

CLASS ID

EXP

[REDACTED]

DONOR

Gabriela N.
**GABRIELA
NUNEZ**

[REDACTED]

HALL

Iss **09/26/2017**
Sex **F** Eyes **BLK**
Hgt **4'-11"** Wgt **120 lb**
DD# **321142792010078690**





HALL COUNTY
 G E O R G I A
We have it all in Hall

HALL COUNTY BUSINESS LICENSE DEPT
 P.O. DRAWER 1435
 GAINESVILLE, GA 30503

Phone 770-531-6815 2875 Browns Bridge Rd Fax 770-531-4953

ENGINEERING CERTIFICATION

BUSINESS NAME VITAL FOODS LLC

BUSINESS ADDRESS 2069 Memorial park Rd.
Gainesville GA 30504

TAX PARCEL NUMBER 09121 000012
Found on your occupancy permit

BUSINESS USE Poultry Processing

BUSINESS OWNER NAME Fidel Lomas

Approved: **OR**

Approved:

Tammie Croy
 Hall County Engineering Dept.

Charles Turner
 Charles Turner
 Hall County Engineering Dept. WS

date 9/26/2017



CERTIFICATE OF OCCUPANCY

HALL COUNTY

Building Inspection Department

770-531-6809



CERTIFICATE NO: COM2018-00377

JURISDICTION:

HALL COUNTY

OWNER: VITAL FOODS LLC
400 HIGHLAND TERRACE, GAINESVILLE, GA 30501

CONTRACTOR:

JOB ADDRESS: 400 HIGHLAND TERRACE, GAINESVILLE 30501

PARCEL NO: 00128 003008

OCCUPIED SPACE:

SQ. FT

SUBDIVISION:

LOT NO:

OCCUPANCY CLASS: Business

NO. OF DWELLING UNITS:

OCCUPANCY TYPE: Occupancy

OCCUPANT LOAD:

CONSTRUCTION TYPE:

SPRINKLER SYSTEM:

No Sprinkler System

CODE: 2012 Edition IBC

PURPOSE: POULTRY PROCESSING

SPECIAL CONDITIONS:

YOU ARE HEREBY AUTHORIZED TO OCCUPY AS NOTED ABOVE.

DATE: 6/1/2018

ISSUED BY:

Building Official/Authorized Agent

THIS OCCUPANCY PERMIT IS ISSUED PURSUANT TO THE REQUIREMENTS OF THE HALL COUNTY BUILDING CODE AND THE HALL COUNTY ZONING REGULATIONS CERTIFYING THAT AT THE TIME OF ISSUANCE THAT THIS STRUCTURE OR USE OF LAND WAS IN COMPLIANCE WITH THE VARIOUS REGULATIONS OF HALL COUNTY REGULATING BUILDING CONSTRUCTION AND USE OF LAND. THIS OCCUPANCY PERMIT IS VOID IF THE USE IS CHANGED OR IF THE BUILDING IS ALTERED.

CERTIFICATE OF OCCUPANCY: POST IN A CONSPICUOUS PLACE