



Georgia Department of Revenue

Alcohol and Tobacco Division

Fill in blanks – Retain the original (licensee)

KEG REGISTRATION IDENTIFICATION FORM – IDENTIFICATION # _____

Name of Purchaser (Print) _____

Type of ID shown _____ ID# _____ DOB _____

Address _____

City _____ State _____ Zip _____

Location where keg will be consumed _____ Date(s) _____

Address _____

City _____ State _____ Zip _____

I am at least 21 years of age and understand that alcoholic beverages purchased under this receipt can only be consumed at the address and on the dates listed above, that the purchasing of alcoholic beverages for a person under 21 years of age and furnishing alcoholic beverages to a person under 21 years of age are violations of O.C.G.A. 3-3-23 and that such violations may result in civil liability or criminal prosecution, or both. I further acknowledge that removal or obliteration of the keg registration label is a violation of O.C.G.A. 3-5-5 and that such violations may result in criminal prosecution as set forth in O.C.G.A. 3-3-9, and will result in the container deposit made at the time of purchase, not being returned.

Signature of Purchaser _____ (Date) _____

A total of _____ keg(s) of malt beverage was/were sold to the above individual

In the following size(s): _____

by: _____

(Name of Seller)

On: _____

(Date of Sale)

Trade name of business _____

State License number _____ Address _____

City _____ State _____ Zip _____

Date Returned _____. The Registration label was ____ was not ____ intact.

Keg registration fee: _____

FOR THE PURCHASE OF MORE THAN ONE KEG, RECORD IDENTIFICATION NUMBERS BELOW

KEG ID NUMBER

KEG ID NUMBER

KEG ID NUMBER

KEG ID NUMBER

