APPLICATION
FOR
ALCOHOLIC BEVERAGE LICENSE

GRADY COUNTY
GEORGIA

Complete application in its entirety
GRADY COUNTY, GEORGIA
APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

*YOU MUST COMPLETE APPLICATION IN ITS ENTIRETY*

DATE OF APPLICATION ___________ NEW ________ RENEWAL _________

Type of Business to be operated:

___________ Retail beer and wine packaged only $750.00
___________ Retail beer and wine by the drink (pouring license) $1,000.00
___________ Application Fee (due upon returning application) $50.00

Applicant’s full name: _____________________________________________

Name of business: _________________________________________________

Location of business: _____________________________________________

Type of business organization (Corporation, limited liability company, partnership, etc.)

____________________________________________________________________

Business mailing address: ___________________________________________ Phone: __________________

Applicant’s home address: __________________________________________ Phone: __________________

Applicant’s age __________ Date of birth __________ Social Security # _________________

Are you a resident U.S. Citizen?

Yes ______ No ________

Are you a resident of Grady County?

Yes ________ No ____________

If “No”, then you must designate a resident of Grady County who shall be responsible for any matter relating to the license (i.e. a designee). If you are appointing a designee, provide the following information:

Designee’s Name & Home Address _______________________________________

Designee’s Home Phone __________________________ Designee’s Age __________

Designee’s Date of Birth ____________________ Designee’s SS# __________________

Are you the owner of the business?

Yes ________ No ____________
If “Yes”, attach documentation demonstrating your ownership of the business, such as an Operating Agreement, Partnership Agreement, or Shareholder’s Agreement.

If “No”, what is your title or interest in the business? __________________________________________

List all partners, shareholders, members, or managers of the business below:

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

BE ADVISED THAT ANY PARTNER, SHAREHOLDER, MEMBER OF MANAGER LISTED ABOVE MUST COMPLETE A SEPARATE APPLICATION AND CONSENT FORM FOR A BACKGROUND CHECK AND IT IS YOUR RESPONSIBILITY TO ENSURE THIS IS DONE.

Has the applicant or designee been arrested for anything in the past 5 years?

Yes _____ No _________

If “Yes”, attach a detailed explanation to this application, and be sure to provide the date, jurisdiction, offense, and circumstances of the arrest.

Has the applicant of designee EVER been denied an alcoholic beverage license?

Yes _____ No _________

If “Yes”, attach a detailed explanation to this application, and be sure to provide the date, County or City, and the circumstances of the denial.

Has the applicant or designee EVER had an alcoholic beverage license suspended or revoked?

Yes _____ No _________

If “Yes”, attach a detailed explanation to this application, and be sure to provide the date, County or City, and circumstances of the suspension or revocation.

APPLICANT SIGNATURE: _________________________________________________________________

DATE: ________________________________

Approved _________ Rejected _________ This ________ day of ______________________, 20____

Grady County Board of Commissioners

By: ________________________________ Attest: ________________________________

Board Chair County Clerk
CONSENT FORM

I, __________________________, hereby authorize the Georgia Crime Information Center to release information on any criminal history record the State of Georgia or FBI might have access to concerning me to the Grady County Board of Commissioners and its agents or employees.

I hereby agree that the Georgia Crime Information Center or any other agency or employees of the county, state, or federal government, shall not be responsible or liable for defamation, invasion of privacy, negligence, or any other claim in connection with any dissemination of information pursuant to this record check.

I do affirm that I have been provided with the Applicant Privacy Rights Notification Policy and the Privacy Rights and Privacy Act Statement at the time of this application.

FULL NAME: __________________________

Print or Type

ADDRESS: __________________________

Street Address   City   State   Zip Code

SEX: ___________   RACE: ___________   DATE OF BIRTH: ___________

SOCIAL SECURITY NUMBER: __________________________

________________________   __________________________
Signature   Date

Sworn to and subscribed before me this

______ day of __________________________, 20______

________________________
Notary Public
SWORN STATEMENT OF APPLICANT OR DESIGNEE

I, ________________________________, hereby provide this statement under oath in support of the application of ___________________________(name of applicant) for an alcohol license pursuant to the provisions of the Grady County Alcohol Ordinance.

1. I am at least twenty-one (21) years of age, of good moral character, and a citizen of the United States.

2. I am a resident of Grady County, Georgia, or, if an applicant who is not a resident of Grady County, Georgia, I have designated a resident of Grady County, Georgia who shall be responsible for any matter relating to the license.

3. I have not been convicted of a felony or of any violations of the laws of the state of Georgia, or any other state, relating to the sale of alcoholic beverages, furnishing alcohol to minors, etc. within five (5) years of this application.

4. I have not been denied or had revoked, within five (5) years preceding the date of this application, any license to sell alcoholic beverages issued by any governmental entity.

5. By execution of this affidavit and in consideration of the issuance of any license issued as a result of this application, I agree to be bound by every provision of said Ordinance and understand and agree that a violation of any provision of said Ordinance of any law of regulation of the state Georgia pertaining to the sale of alcoholic beverages may subject me to suspension or revocation of this license or criminal charges, or both.

6. I swear and affirm that every upon my application is true and correct. I understand and acknowledge that false or misleading information contained in my application is grounds for denial of my application or revocation of my license.

________________________________________
Signature of Applicant or Designee

Sworn to and subscribed before me this

_______ day of ________________________, 20___

________________________________________
Notary Public
Affidavit Verifying Status for County Public Benefit Application

By executing this affidavit under oath, as an applicant for a Grady County, Georgia Business Occupation Tax Certificate, Alcohol License, Taxi Permit or other public benefit as referenced in O.C.G.A. Section 50-36-1, I am stating the following with respect to my application for a Grady County Business Occupation Tax Certificate, Alcohol License, Taxi Permit or other public benefit (circle one) for _______________. (Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity)

1) _____________ I am a United States citizen

OR

2) _____________ I am a legal permanent resident 18 years of age or older or I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age of older and lawfully present in the United States. *

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 of Applicant:                          Date

__________________________________________
Printed Name:

__________________________________________
* Alien Registration number for non-citizens

SUBSCRIBED AND SWORN

BEFORE ME ON THIS THE

_______ DAY OF ____________________, 20____

Notary Public

My Commission Expires:

*Note: 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 alien residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below:
This form required by the Federal Government's SAVE Program.

SAVE Affidavit

O.C.G.A. 50-36-1(e)(2)

By executing this affidavit under oath, as an applicant for doing business with Grady County Government /Occupational Tax Certificate /Alcohol License, as referenced in O.C.G.A 50-36-1, from Grady County Government the undersigned applicant verifies one of the following with respect to my application for a public benefit:

1) ______ I am a United States citizen.
2) ______ I am a legal permanent resident of the United States.
3) ______ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.
   My alien number issued by the Department of Homeland Security or other federal immigration agency is: ________________________________.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C. G. A. 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

__________________________________________

In making the above representation under oath, I understand that any person who knowingly and willfully make a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in ______________________ (city), ______________________ (state).

__________________________________________
Business Name

__________________________________________
Signature of Applicant

__________________________________________
Printed Name of Applicant

SUBSCRIBED AND SWORN BEFORE ME ON THIS
THE ________ DAY OF ________________________, 20__

__________________________________________
NOTARY PUBLIC My Commission Expires:
List of states that verify immigration status prior to issuance of a driver’s license of I.D. card and only issue to persons lawfully present in the United States, as required by O.C.G.A Section 13-10-91(b)(5).

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Secure and Verifiable Documents Under O.C.G.A. 50-36-2

Issued August 1, 2012 by the Office of the Attorney General, Georgia

The Illegal Immigration Reform and Enforcement Act of 2011 ("IREA") provides that "[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General." O.C.G.A. 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

- A United States passport or passport card [O.C.G.A. 50-36-2(b)(3); CFR 274a.2]
- A United States military identification card [O.C.G.A 50-36-2(b)(3); 8 CFR 274a.2]
- A driver’s license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, The Commonwealth of the Northern Mariana Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or list sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer[O.C.G.A. 50-36-2(b)(3); 8 CFR 274a.2]
- A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at: http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm [O.C.G.A. 50-36-2(b)(3); 8 CFR 274a.2]
- A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A 50-36-2(b)(3); 8 CFR 247a.2]
- An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. 50-36-2(b)(3); 8 CFR 274a.2]
- A passport issued by a foreign government [O.C.G.A. 50-36-2(b)(3); 8 CFR 274a.2]
- A Merchant Mariner Document of Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. 50-36-2(b)(3); 8 CFR 274a.2]
- A Free and Secure Trade (FAST) card [O.C.G.A. 50-36-2(b)(3); 22 CFR 41.2]
- A NEXUS card [O.C.G.A. 50-36-2(b)(3); 22 CFR 41.2]
- A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. 50-36-2(b)(3); 22 CFR 41.2]
- A driver’s license issued by a Canadian government authority [O.C.G.A. 50-36-2(b)(3); 8 CFR 274a.2]
- A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. 50-36-2(b)(3); 6 CFR 37.11]
- A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. 50-36-2(b)(3); 6 CFR 37.11]
- Certification of Report of Birth issued by the United States Department of State (form DS-1350) [O.C.G.A. 50-36-2(b)(3); 6 CFR 37.11]
- Certification of Birth Abroad issued by the United States Department of State (Form FS-545) [O.C.G.A. 50-36-2(b)(3); 6 CFR 37.11]
- Consular Report of Birth Abroad issued by the United States Department of State (Form FS-240) [O.C.G.A. 50-36-2(b)(3); 6 CFR 37.11]
- An original or certified copy of a birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal [O.C.G.A. 50-36-2(b)(3); 6 CFR 37.11]
- In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. 50-36-2(c)]
Applicant Fingerprint Registration Instructions

Step 1: Register on Gemalto website

A. Go to Gemalto website at https://www.aps.gemalto.com/ga/index.htm

  1. Works best in Chrome

B. Select blue REGISTER icon in Applicant Registration box

C. Select Agency icon: (Government Licensing)

D. Select: (type of license/begin fingerprinting)

E. Read both Privacy documents and mark the “I have read and accepted these terms” box then select CONTINUE. If someone beside the Applicant is completing the registration, the applicant must receive a copy of the Privacy documents and a signature acknowledgment must be maintained for an audit cycle.

F. Complete all fields marked with a red asterisk*

  1. Reviewing Agency ID: (Grady County: 923340Z)
  2. Reason for Fingerprinting: (reason if applicable)
  3. Payment Type: select Credit Card
  4. Fingerprint Card User Box: mark ONLY if you are an OUT OF STATE Applicant. *NOTE: OUT OF STATE Applicants who mark this box will need to print the directions for mailing in their fingerprint cards.
  5. *You are required to enter an email address. The email address must be the Applicant’s correct email address.

G. Select CONTINUE after you have completed all required fields

Gabe Ridley, County Attorney       HR Director – John White       Finance Director, Holly D Murkerson
H. Review your Registration and select SUBMIT to go to the payment page.

I. Complete Payment page (if Applicant is paying for the registration)

J. Receipt

1. Print this receipt that includes the barcode. You must take this with you to the fingerprint site after your agency has approved your registration.

Step 2: Receive emails

A. You will receive two emails!!

1. First email: copy of your Registration Receipt that includes a barcode. If you have not already printed this, print it now to take with you to the fingerprint site.

2. Second email: Agency Approval that notifies you to proceed to the GAPS fingerprint site. *DO NOT GO to the fingerprint site until you have received this approval email!!!

*If you marked the FINGERPRINT CARD USER box, you will need to get fingerprinted in your state and mail your two (2) fingerprint cards to the address in the instructions on the GAPS website. There may be an extra fee to the fingerprint site in your state.

Step 3: Proceed to Fingerprint Site

A. Please make sure you take an approved form of photo identification and your receipt with you to the fingerprint site.

Step 4: Your results will be sent directly to the Agency

A. You may obtain a copy of your criminal history record by visiting the GAPS Registration website and selecting Registration Status and Result under the Applicants Tab in the top right-hand corner of the homepage. An applicant will be emailed a temporary passcode to their email address entered during the GAPS Registration. The passcode will only be sent to the email address entered during the Applicant Registration process. Return to the GAPS website to enter your passcode and retrieve your criminal history record. The passcode is valid for ten minutes.
Georgia Crime Information Center

Reference Material

Non-Criminal Justice

Applicant Privacy Rights Notification Policy

Standard Operating Procedure Grady County Board of Commissioners

Subject:
Applicant Notification Policy for Information derived from the Georgia Crime Information Center (GCIC) Criminal Justice Information System (CJIS) Network.

Effective Date: 07/19/2021 Revised Date: 07/19/2021

Notification

The Grady County Board of Commissioners licenses the sale of Alcoholic Beverages and as a part of the process conducts fingerprint based background checks through the Georgia Crime Information Center. Prior to fingerprinting, each individual must complete an application and receive a copy of both the Applicant Privacy Rights and the Privacy Act Statement. The Grady County Board of Commissioners provides the applicant with the privacy rights via

• GAPS registration in which the applicant is responsible for registering
• A copy is provided as part of the application packet

Once the applicant had read and understands the Applicant Privacy Rights and the Privacy Act Statement, they will sign a form stating the notification was received and maintain such document for no less than 3 years.

Record Challenge/Correction

Gabe Ridley, County Attorney    HR Director – John White    Finance Director, Holly D Muckerson

33 17th Ave NW • CAIRO, GEORGIA 39827 • P: 229.377.1512 • F: 229.377.1039
If an applicant chooses to challenge the accuracy of the criminal history record or needs to correct or update a record they will be given 10 (Ten) days to do so. The applicant is notified that the procedures for challenging an FBI record are set forth in 28 CFR 16.30 through 16.34 and the procedures for challenging a Georgia can be found on the GBI website. The applicants will/will not be given a copy of the criminal history record.

Appeal Process

The applicant is provided an opportunity to appeal an adverse decision based on the criminal history record information provided from the fingerprint-based background check. The procedures for the appeal process are as follows: Contact the County Clerk and ask for an appeal to the County Commissioners at the next regularly scheduled meeting. The Board of Commissioners will take the appeal under advisement and issue a decision within 10 days of the appeal.
NON-CRIMINAL JUSTICE APPLICANT’S PRIVACY RIGHTS

As an applicant who is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulation (CFR), 50.12, among other authorities.

- You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared or explained.
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on the information in the criminal history record.
- If agency policy permits, the officials may provide you with a copy of your criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may find information regarding how to obtain a copy of your Georgia criminal history record at the GBI website: https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions Information regarding how to obtain a copy of your FBI criminal history record is located at the FBI website: https://www.edo.cjis.gov
- If you decide to challenge the accuracy or completeness of your criminal history record, you should contact and send your challenge to the agency that contributed the questioned information. If the disputed arrest occurred in the State of Georgia, you may send your challenge directly to the GCIC. Contact information for the GCIC can be found at https://gbi.georgia.gov/services/obtaining-criminal-history-record-information-frequently-asked-questions Alternatively, you may send your challenge directly to the FBI by submitting a request via https://www.edo.cjis.gov. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenge entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for the authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.
Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

Authority: The FBI’s acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI’s Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI’s Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 02/04/2021