BEER PERMIT APPLICATION

CITY OF MARYVILLE
CITY RECORDER'S OFFICE
406 W BROADWAY
MARYVILLE, TN 37801
(865) 273-3452

ALL APPLICATIONS MUST BE COMPLETED AND RETURNED TO THE CITY RECORDER'S OFFICE BY THE 1st OF THE MONTH IN ORDER TO BE CONSIDERED AT THE FOLLOWING MONTH'S BEER BOARD MEETING.

$250.00 NON-REFUNDABLE APPLICATION **FEE PAID DATE**_____

BEER BOARD HEARING DATE _____

Application for (choose one)

- ❑ RETAILER'S OFF PREMISE
- ❑ RETAILER'S ON/OFF PREMISE
- ❑ COMMON AREA- Additional application required
- ❑ SUBORDINATE RETAILER'S ON-PREMISE-Additional application required
- ❑ SUBORDINATE SPECIAL EVENT PERMIT- With applicable state issued special event or special occasion alcohol permit- Designated event and date(s).

Type of business (choose one)

- ❑ PACKAGE STORE
- ❑ HOTEL
- ❑ BEER MANUFACTURER
- ❑ CRAFT BEER RETAILER

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY BY PRINTING OR TYPING ALL ANSWERS

APPLICATION IS HERE MADE FOR A PERMIT TO SELL, STORE, MANUFACTURE, OR DISTRIBUTE BEER OR OTHER BEVERAGES AUTHORIZED TO BE SOLD, STORED, MANUFACTURED OR DISTRIBUTED UNDER THE PROVISIONS OF TENNESSEE CODE ANNOTATED, SECTION 57-5-101 ET SEQ. AND BASE THIS APPLICATION UPON THE ANSWERS TO THE FOLLOWING QUESTIONS:

1. Full name of applicant (owner(s)) _____

_____

Please identify which category the owner(s) fall(s) into:

Person
Firm
Corporation
Joint-Stock Co
Syndicate
Association

2. If individual ownership, please provide the following (FOR ALL OTHER TYPES OF OWNERSHIP, SKIP TO QUESTION #4)

DOB _____

Home Phone/Cell Number _____

Email Address _____

Social Security Number _____

State/Driver's License Number (include a copy) _____

3. Has the owner of the business had a beer permit revoked, suspended, or denied in the State of Tennessee? _____ If so, specify where, when, and why. _____

_____

4. Please complete the following information for all owners having, at least 5% ownership in said business (attach additional paper if needed):

Name & Title (1st owner) _____

% of Ownership _____

Home Address _____

Home Phone/Cell Number _____

Email Address _____

Date of Birth _____

Social Security # _____

State/Driver's License Number (include a copy) _____

Have you been convicted of any violation of the Laws of any City or State in the United States for the possession, sale, manufacture or transportation of intoxicating liquor; possession, sale, manufacture or transportation of drugs; vice crimes or any crime involving moral turpitude within the last ten (10) years? _____ If yes, please specify nature of conviction. _____

_____

Have you ever been issued a beer permit in any state? _____

If yes, please specify state and the name of the business. _____

_____

Have you ever had a beer permit revoked, suspended, or denied? _____

If yes, please specify as to the reason why. _____

_____

Name & Title (2nd owner) _____

% of Ownership _____

Home Address _____

Home Phone/Cell Number _____

Email Address _____

Date of Birth _____

Social Security # _____

State/Driver's License Number (include a copy) _____

Have you been convicted of any violation of the Laws of any City or State in the United States for the possession, sale, manufacture or transportation of intoxicating liquor; or any crime involving moral turpitude within the last ten (10) years? _____ If yes, please specify nature of conviction. _____

_____

Have you ever been issued a beer permit in any state? _____

If yes, please specify state and the name of the business. _____

Have you ever had a beer permit revoked, suspended, or denied? _____

If yes, please specify the State and the reason. _____

PLEASE NOTE: MARYVILLE CITY BEER PERMIT MUST BE IN THE SAME NAME AS SHOWN ON BUSINESS LICENSE, TENNESSEE STATE SALES TAX CERTIFICATE AND BUSINESS SIGN. ALL DOCUMENTS MUST BE FILED UNDER THE SAME NAME.

5. Name of the business _____
6. Name of former business (at same location) _____
7. Business street address _____
8. Business mailing address (if different) _____
9. Telephone number of business _____
10. Please indicate if the above address and phone number will be the accurate ones to send any correspondence to _____.
11. Will the permit be used to operate two or more restaurants or other businesses under the same permit as allowed by Section 57-5-103(a)(4) within the same building? _____. If so, specify number of businesses _____. List names of businesses/restaurants and describe their locations.

_____ _____

_____ _____

_____ _____

<u>SPECIAL NOTE</u>: IF THE OWNER OF THE BUSINESS PROPERTY IS DIFFERENT THAN THE APPLICANT ON THIS APPLICATION, THE CITY OF MARYVILLE REQUIRES A COPY OF THE CURRENT LEASE OF THE PREMISES AND A WRITTEN STATEMENT FROM THE PROPERTY OWNER, SIGNED AND NOTARIZED, GIVING THE APPLICANT PERMISSION TO SELL OR SERVE BEER/ALCOHOL ON THE PREMISE.

12. Name and address of **property owner**, if different than business owner _____

_____

13. Please provide the following information regarding the **resident manager:**

Name _____

DOB _____

SS # _____

State/Driver's license # (include a copy) _____

Home address _____

Home Phone/Cell Number _____

Email Address _____

14. Please list the name and address of the church (or place of worship) nearest to the business.

_____

15. Please list the name and address of the school or daycare nearest to the business. _____

_____

16. Please provide the Tennessee sales tax number for the business **at this location**. _____

I am knowledgeable of the laws prohibiting the sale of beer to minors. I hereby certify that no person having at least a 5% ownership interest, nor any person to be employed in the distribution or sale of beer in my establishment has been convicted of any violation of the beer or alcoholic beverage laws or any crime involving moral turpitude within the past 10 years.

(NOTICE: Each and every owner/applicant with a 5% ownership interest is required to sign application on separate signature pages.)

I HEREBY SWEAR OR AFFIRM THAT THE INFORMATION IN THIS APPLICATION IS TRUE AND COMPLETE.

X _____
Signature of Applicant/Owner (or Authorized Corporate Officer)

Sworn to and subscribed before me this _____ day of _____, 20 ___.

_____ My Commission Expires _____

On this _____day of _____, 20 ___ the following action is hereby taken by the Maryville Beer Board upon the forgoing application:

_____
MAYOR

APPROVED AS TO FORM:

_____
CITY ATTORNEY

ATTEST:

_____
CITY RECORDER