

5. Location of the business by street address. For special event, list location of the event.

401 Cheltenham Ave

Phone number of the business 791-6740

6. Please give the following information on the person who will be managing the business. This person is an owner W/A or a managing agent X.

Name [REDACTED]

Drivers license [REDACTED] State [REDACTED]

Date of birth [REDACTED] Soc. Sec. [REDACTED]

Home phone [REDACTED] Daytime phone [REDACTED]

7. Specify the identity, address and daytime contact phone number of the person to receive annual privilege tax notices and any other communication from the City.

Name ~~Mark~~ Mark McCutcheon Title [REDACTED]

Mailing Address 401 Cheltenham Ave

City, State, Zip Franklin TN 37064

Daytime contact phone number 394-7782

8. Will the permit be used to operate two or more restaurants or other businesses under the same permit as permitted by T.C.A. Section 57-5-103(a)(4) within the same building? Yes ___ No X.

If so, specify number ____. List the names of the restaurants or other businesses and describe their location (use additional sheet if necessary)

9. Do you own the premises on which you will operate? No
If no, please give the name and address of the property owner.

Westhaven Residential Dist.
401 Cheltenham Ave.

10. Has any person having at least 5% ownership interest, managers or employees of the business been convicted of any violation of beer or alcoholic beverage laws or any crime (other than minor traffic violations) within last ten (10) years? ____ If so, give particulars of each charge, court and date convicted.

N/A - (no)

11. Has this owner or the owners organization had a beer permit revoked, suspended, or denied in the State of Tennessee? Yes ___ No If so, please give date, place and cause of said revocation.

12. Give the name and address of the former beer permittee at this establishment.

~~nta~~ special event Franklin for
the cure at this location for 4 years

13. Give applicant's history of involvement in the beer business, if any.

~~nta~~ special event held for
4th year

14. Give applicant's employment record for the past 10 years.

N/A

15. What is the exact nature of the business in which you are applying for a beer permit?
(Restaurant, tavern, motel, etc.)

Special event

16. Will a full course menu be served? Yes

17. Will separate and sanitary facilities be maintained for men and for women? Yes

18. Will dancing be allowed on your premises? No
If yes, do you acknowledge that section 9-102 of the Franklin Municipal Code prohibits the operation of establishments allowing dancing between 1:30 AM and 8:00 AM? _____

TRAINING POLICY:

All beer applications must have a training policy submitted with application. This policy must include training regarding the sale of beer to minors.

19. Please read the following and upon signature of this application, you do understand and agree to comply if you are granted a permit.

- (a) You will not sell beer or similar beverages except at the place or places for which the beer board has issued your permit.
- (b) You will not sell beer or any like beverage except in accordance with the terms of said permit.
- (c) If this application is made for permit to sell and not for consumption on the premises, you will not sell for consumption on the premises and not allow consumption on the premises.
- (d) You will rigidly enforce the law against sales to minors.
- (e) You will prohibit gambling at your establishment and understand that the conduct of such activities on the premises will result in revocation of your permit.
- (f) You will secure a certificate or statement from the health department or health officer that the premises covered by the application meet the requirements of the ordinances of the City of Franklin and the laws of the State of Tennessee.
- (g) You will not attempt to transfer this permit to anyone else.
- (h) You will display this permit in a prominent place in your establishment.
- (i) You will not sell or distribute beer between the hours of 3:00 AM and 6:00 AM (8:00 AM for on premises consumption) during the week and between the hours of 3:00 AM Sunday and 12:00 Noon Sunday (10:00 AM for on premises consumption).
- (j) You will prohibit the congregation at your establishment of those who reasonably appear to be intoxicated, lawless, rowdy, or prostitutes.
- (k) You will not allow any liquor with alcoholic content of greater than five percent (5%) to be consumed on the premises.

- (l) You will not allow any sale or delivery of beer for consumption on the premises outside of the building, it being the intention to prohibit the sale of beer by what is commonly known as "curb service" or "curb sales" of beer.
- (m) You will comply with all requirements of section 2-201 through 2-229 of the municipal code of the City of Franklin.

A non-refundable \$250 fee must accompany this application and the application shall be submitted at least fifteen (15) days prior to the Beer Board meeting at which it is to be considered. If the application is approved you are required to provide documentation of sales tax registration to the city within ten days of approval. Any applicant making false statement in this application shall forfeit his permit and shall not be eligible to receive any permit for a period of ten years.

A privilege tax of \$100 is imposed on the business of selling, distributing, storing or manufacturing beer in this state effective January 1, 1994 and each successive January 1. Any holder of a beer permit issued after January 1, 1994 shall pay a pro rata portion of this annual tax when the permit is issued.

I hereby make application to the City of Franklin Beer Board for a beer permit.

The signing of this application acknowledges that I am aware 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.

I am also aware that I shall not be issued a permit or my permit shall be revoked if my business location causes traffic congestion or interferes with schools, churches, or other public places of public gathering, or otherwise interferes with public health, safety and morals.

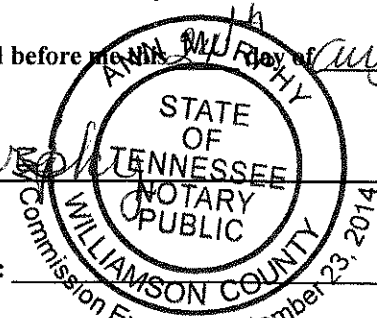
[Handwritten Signature]

Signature of Applicant/Owner (or Authorized Corporate Officer)

On behalf of: The Westhaven Foundation
Name of Business Entity

Sworn to and subscribed before me on 12th day of August, 2012

[Handwritten Signature]
Notary Public
My Commission Expires: September 23, 2014



Official Use Only	
Application Fee \$ <u>250.⁰⁰</u>	Date Paid <u>8-28-12</u>
Privilege Tax \$ <u> </u>	Date Paid <u> </u>
Board Meeting Date <u>9 / 11 / 12</u>	

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: OCT 3 2008

THE WESTHAVEN FOUNDATION INC
401 CHELTENHAM AVE
FRANKLIN, TN 37064-8664

Employer Identification Number:
26-2449732
DLN:
17053198332008
Contact Person: YVONNE LIGGETT ID# 31296
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
October 19, 2007
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter:

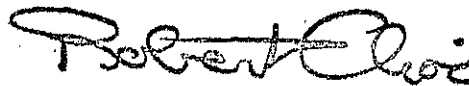
Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

THE WESTHAVEN FOUNDATION INC

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

A handwritten signature in black ink that reads "Robert Choi". The signature is written in a cursive style with a large, looping initial "R".

Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosures: Publication 4221-PC

THE WESTHAVEN

est. 2007

FOUNDATION

P.O. Box 1535 ♦ Franklin, Tennessee 37605 ♦ 615.791.6740

www.WesthavenFoundation.org

BOARD OF TRUSTEES

Mark McCutcheon
President

Charles Grimes
Vice President

Matt Magallanes
Vice President

Dina Kraus
Secretary

John Fraser
Treasurer

John W. Griffith

Daniel Klatt

Amy Law

Doug Stacey

Anne Waters

Victor White

City of Franklin

P.O. Box 705
Franklin, TN 37065
(615) 791-3225

DATE: 8/24/12
TO: POLICE CHIEF
FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR
RE: RECORDS CHECK FOR APPLICATION FOR BEER PERMIT
BEER BOARD MEETING DATE 9/11/12

- Applicant is requesting a temporary permit. Please return ASAP.
- Please return by 8/29/12 to provide information for Beer Board meeting agenda.

Name of Business Franklin 4 The Corner

Location of Business 401 Cheltenham Ave

Name of applicant [REDACTED]

Managing Agent [REDACTED]

Drivers License # [REDACTED] Sta [REDACTED]

Date of Birth [REDACTED] Soc. Sec. # [REDACTED]

- Recommend. Based on information available to date, the applicant has no record requiring denial of the permit under the provisions of Title 8 of the Franklin Municipal Code.
- Not recommending. Based on information available to date, the Police Dept. is not recommending approval of a permit.

CENTRAL RECORDS DIVISION
FRANKLIN POLICE DEPT

By _____

Date _____

Approved _____
Signature

POLICE DEPARTMENT

David Rahinsky
Chief of Police



Dr. Ken Moore
Mayor

Eric S. Stuckey
City Administrator

August 27, 2012

TO: Lt. Charles Warner* ~~CD~~
FROM: Mary Casteel
Mary Casteel, Communications Support Coordinator
SUBJECT: Beer Board Background Checks

A local check was completed on Mark McCutcheon, Managing Agent for The Westhaven Foundation and found to be clear with the exception of minor traffic violations. _____

City of Franklin

P O Box 705
Franklin, TN 37065
(615) 791-3225

RECEIVED AUG 27 2012

DATE: 8/24/12
TO: CODES DEPT
FIRE DEPT
FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR
RE: BUILDING INSPECTIONS FOR APPLICATION FOR BEER PERMIT

- ON PREMISES PERMIT
- OFF PREMISES PERMIT
- ON AND OFF PREMISES PERMIT
- MANUFACTURER'S OR DISTRIBUTOR'S PERMIT
- SPECIAL EVENTS PERMIT

Applicant is requesting a temporary permit. Please return ASAP.

Please return by 8/29/12 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 9/11/12

Name of Business Franklin H The Cure (The Weatherman Foundation)

Location of Business 401 Cheltenham Ave.

CODES DEPT

[Signature]
Building Inspector

8-27-2012
Date

FIRE DEPT

Fire Inspector

Date

City of Franklin

P O Box 705
Franklin, TN 37065
(615) 791-3225

DATE:

8/24/12

TO:

CODES DEPT
FIRE DEPT

FROM:

CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR

RE:

BUILDING INSPECTIONS FOR APPLICATION FOR BEER PERMIT

ON PREMISES PERMIT

OFF PREMISES PERMIT

ON AND OFF PREMISES PERMIT

MANUFACTURER'S OR DISTRIBUTOR'S PERMIT

SPECIAL EVENTS PERMIT

Applicant is requesting a temporary permit. Please return ASAP.

Please return by 8/29/12 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date

9/11/12

Name of Business

Franklin 4 The Cure (The Westhousen Foundation)

Location of Business

401 Cheltenham Ave

CODES DEPT

Building Inspector

Date

FIRE DEPT

Wayne Mobley
Fire Inspector

8-27-12
Date