



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

819 COLUMBIA AVE, FRANKLIN, TN 37064

Phone number of the business 615. 794. 1807

6. Please give the following information on the person who will be managing the business. This person is an owner \_\_\_\_\_ or a managing agent .

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 KIM MARTIN Title ADMIN ASS?

Mailing Address 7102 COMMERCE WAY

City, State, Zip BRENTWOOD, TN 37207

Daytime contact phone number 615. 771. 6701

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 .

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? \_\_\_\_\_  
If no, please give the name and address of the property owner.

NY WALKER JR.

\* 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.

- NO

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

NONE

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

SAME (DELEK US / MARCO)

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

8 BEER LICENSES IN FRANKLIN, TN, OVER 300  
NATIONALLY. THIS LOCATION PERMITTED SINCE 1965.

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

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

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★ 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.

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

8 BEER LICENSES IN FRANKLIN, TN, OVER 300  
NATIONALLY. THIS LOCATION PERMITTED SINCE 1965.

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

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

CONVENIENCE STORE

16. Will a full course menu be served? NO
17. Will separate and sanitary facilities be maintained for men and for women? NO
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.*

*A. H. [Signature]* DISTRICT MANAGER  
Signature of Applicant/Owner (or Authorized Corporate Officer)

On behalf of: DELEK US / MARCO  
Name of Business Entity

Sworn to and subscribed before me this 22 day of March, 2013

*Sheri Patrice*  
Notary Public

My Commission Expires: 09/09/2014



Official Use Only			
Application Fee	\$ <u>250.<sup>00</sup></u>	Date Paid	<u>3/22/13</u>
Privilege Tax	\$ <u>75.<sup>00</sup></u>	Date Paid	<u>3/22/13</u>
Board Meeting Date	<u>4/9/13</u>		



## Sale of Alcohol and Tobacco Acknowledgement

### **Employee's Agreement of Understanding on the Sale of Alcoholic Beverages and the Sale of Tobacco Products**

I agree to the following Company policies and rules regarding the **Sale of Alcoholic Beverages**:

1. I will not sell alcoholic beverages to any person not of legal age. It is MY responsibility to know the legal age for the sale of alcohol at my store location.
2. I will always ask for proper identification for each sale of alcohol no matter if the customer appears to be of age to make the purchase. Every sale I must check for the legal age. If I have ANY doubt about the customer's age, I will NOT make or allow the sale.  
**\*\*ONLY ALABAMA must card if the person looks under the age of 30.**
3. I will not sell alcoholic beverages to any individual during those hours when it is illegal to do so. It is MY responsibility to know the legal hours to sell alcoholic beverages at my store location.
4. I will not knowingly sell alcoholic beverages to any proper age adult for use by individuals who are not of legal age. If I think that this is or may be a "second party sale," I will NOT make or allow the sale.
5. I will not sell or allow the sale of alcoholic beverages to individuals who are obviously intoxicated or otherwise disorderly.
6. I am aware of the personal consequences of selling alcoholic beverages in any illegal manner. Those consequences include termination of my employment with MAPCO Express, Inc. and the possibility that I can be arrested, convicted, and fined.

I agree to the following Company policies and rules regarding the **Sale of Tobacco Products**:

\*NOTE: MAPCO Express, Inc. defines tobacco products as cigarettes, cigars, pipes, pipe tobacco, and smokeless tobacco (chewing tobacco and snuff).

1. I will NOT sell tobacco to any person who is not of legal age. It is MY responsibility to know the legal age for sale of tobacco products at my store location. (This age can vary from state to state.)
2. If any customer appears to be under the age of twenty-seven (27) for the purchase of tobacco products, I will ask for proper identification. If I have ANY doubt about the person's age, I will not sell or allow the sale of products.
3. I will not knowingly sell tobacco products to any adult for use by individuals who are not of legal age. If I think that a "second party sale" is happening, I will not sell or allow the sale to proceed.
4. I am aware of the personal consequences of selling tobacco products in any illegal manner. Those consequences can be and include termination of my employment with MAPCO Express, Inc. and the possibility that I can be arrested, convicted, and fined.
5. I have been trained through the "WE CARD PROGRAM" and have seen the training videotape on the management of tobacco sales. I agree to use the knowledge from the program training and video to avoid and handle any issues with illegal tobacco sales.

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**By initialing the box below I certify that I have reviewed the above information, and I agree to the conditions of hiring.**

# City of Franklin

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

DATE: ~~1/22/13~~ 3/22/13  
TO: POLICE CHIEF  
FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR  
RE: RECORDS CHECK FOR APPLICATION FOR BEER PERMIT  
BEER BOARD MEETING DATE 4/9/13

- Applicant is requesting a temporary permit. Please return ASAP.
- Please return by \_\_\_\_\_ to provide information for Beer Board meeting agenda.

Name of Business Delta Express  
Location of Business 819 Columbia Ave.  
Name of applicant Delek US-Mopco Express Inc.  
Managing Agent \_\_\_\_\_  
Drivers License # \_\_\_\_\_ State \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

- 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

March 25, 2013

TO: Lt. Charles Warner 

FROM:

  
Mary Casteel, Communications Support Coordinator

SUBJECT: Beer Application

A check of Franklin Police Department records was completed on Tony Miller, Managing Agent for Delta Express (Liberty Pke and Columbia Ave) and found to be clear.

A check was completed through LexisNexis/Accuint and found to be clear.

Requested by: Delisa Pugh