13.32

APPLICATION FOR BEER PERMIT STATE OF TENNESSEE CITY OF FRANKLIN

PURSUANT TO SECTION 8 CHAPTER 2 OF THE CODE OF THE CITY OF FRANKLIN, TENNESSEE, AND THE REQUIREMENTS OF 57-5-101 ET. SEQ. OF THE TENNESSEE CODE ANNOTATED, I HEREBY MAKE APPLICATION FOR:

	ON PREMISES PERMIT
	OFF PREMISES PERMIT ON AND OFF PREMISES PERMIT
	MANUFACTURER'S OR DISTRIBUTOR'S PERMIT
	SPECIAL EVENTS PERMIT DATE OF EVENT 10-12-15
	HOURS OF EVENT 5-8 pm
DA	TE PERMIT NEEDED 10-(-13
	PERMITS SHALL BE ISSUED TO THE <u>OWNER</u> OF THE BUSINESS, WHETHER A PERSON, FIRM, CORPORATION, JOINT-STOCK COMPANY, SYNDICATE, OR ASSOCIATION.
1.	Owner (Applicant) Sister Cities of Franklin &
	Person_Firm_Corp_LLC_Joint-stock coSyndicate_Association_
2.	List all persons, firm, joint-stock companies, syndicates, or associations having at least a 5% ownership interest in the business (attach additional sheet, if needed). Please give name and address.
	not for profit
	See attained Board Member List
3.	If the applicant is a corporation, are they authorized to do business in the State of Tennessee?
4.	Under what trade name will this business operate?
	Sister Cities of Franklin & Williamson
	City of Franklin business account number Vendor 1D SISCO

	Ath Avenues South-Detween Main St & entrance to parking garage including Phone number of the business Over Aleyway
6.	Please give the following information on the person who will be managing the
	business. This person is an owner or a managing agent ROE TOTALING
	Name
	Drivers license State
	Date of birth Soc. Sec. #
	Home phone
7. 8.	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 Sharon Battoff Title Treasurer Mailing Address Po Boy 979 City, State, Zip frankfin TN 370 65 Daytime contact phone number 6015-512-9551 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)

	If no, please give the name and address of the property owner.
	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 crin (other than minor traffic violations) within last ten (10) years? If so, give particulars of each charge, court and date convicted.
	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.
	Give the name and address of the former beer permittee at this establishment.
•	Give applicant's history of involvement in the beer business, if any.
	Give applicant's employment record for the past 10 years. Executive Director—The Arc

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

special event- Celebration of nations

- 16. Will a full course menu be served? \bigcirc
- 17. Will separate and sanitary facilities be maintained for men and for women? 45
- 18. Will dancing be allowed on your premises? () () () 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.

Shawn Bottouth	
Signature of Applicant/Owner (or Authorized Corporate Officer)	
On behalf of: Sister Cities of Franklin and	
Nome of Progress Entity	
Sworn to and subscribed before me this 24 day of June, 20 13	4
Rita S. Dorier Do DO 2/6/1/1	
Notalsy Public STATE STATE	
My Commission Expires: May 23, 2015 TENNESSEE NOTARY NOTARY	
Official Use Only	
Application Fee \$ 250.00 Date Paid 60013 MAMSON CHIEF	
Privilege Tax \$ Date Paid	
Board Meeting Date 8/13/3	

Sister Cities of Franklin and Williamson County, Tennessee, Inc.

2013 Board of Directors

Officers

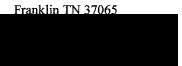
President:

Patricia Kriebel 1018 West Main Street Franklin, TN 37064



Vice President:

Mike Thompson PO Box 444 Franklin TN 37065



Immediate Past President:

Doug Sharp 306 Addison Avenue Franklin, TN 37064



1907 Green Hills Blvd. Franklin, TN 37067

Milissa Reierson 109 3rd Avenue South Franklin, TN 37064



Dr. Mike Looney 1320 West Main, Suite 202 Franklin TN 37064

Treasurer:

Sharon Bottorff 106 Valley Ridge Road Franklin, TN 37064



Secretary:

Dolores Greenwald 1314 Columbia Avenue Franklin, TN 37064

Board Members

BOMA Representative: Margaret Martin 238 Third Avenue South Franklin, TN 37064

Ramon Cisneros 250 Chatfield Way Franklin, TN 37067



Sister Cities of Franklin & Williamson County

P.O. Box 977

Franklin, TN 37065

www.sistercitiestn.org

Sister Cities of Franklin and Williamson County Alcohol Training Policy

All volunteers who will be assisting with the International Beer Tasting at Celebration of Nations will be required to attend training which is scheduled for September 12 at 6:00 at O'More College. In addition, they must read, date and sign this policy.

- 1. All laws prohibiting sales to minors will be strictly enforced.
- 2. Rock Solid Security will handle verification of ID's and distribution of arm bands.
- 3. No alcoholic beverages will be sold except at the place for which the Beer Board has issued a permit.
- 4. No alcoholic beverages will be sold except in accordance with the terms of the permit.

Signature of Volunteer	Date	
		
Printed Name		

POLICE DEPARTMENT

David Rahinsky Chief of Police



Dr. Ken Moore Mayor

Eric S. Stuckey City Administrator

June 28, 2013

TO:

Lt. Charles Warner

FROM:

Mary Casteel, Communications Support Coordinator

SUBJECT:

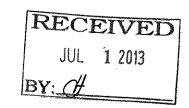
Beer Board Background Checks

A check of Franklin Police Department records was completed on, Sharon Bottorff, Managing Agent for Sister Cities of Franklin and Williamson County and revealed minor traffic violations.

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

Requested by: Christy Mcandless

2m J.1



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

DATE:	10:20-K3
TO:	POLICE CHIEF
FROM:	CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR
RE:	RECORDS CHECK FOR APPLICATION FOR BEER PERMIT BEER BOARD MEETING DATE 8/3-/3-
□ Appl	icant is requesting a temporary permit. Please return ASAP.
	e return by <u>1-22-13</u> 0 provide information for Beer Board ng agenda.
Name of Bus	1111 1 0 1 1
Location of B	icant Sister Cities of Hanklin judiciality
Managing Ag Drivers Licen	
Date of Birth	Soc. Sec. #
denial of Not reco	nend. Based on information available to date, the applicant has no record requiring f the permit under the provisions of Title 8 of the Franklin Municipal Code, mmending. Based on information available to date, the Police Dept. is not ending approval of a permit.
	ECORDS DIVISION OLICE DEPT
Ву	
Date	
Approved Sign	ature

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

DATE:	6.26.1	_3
TO:	CODES DEPT FIRE DEPT	
FROM:	CHRISTY MCCANDI	LESS, ACCOUNT MGMT SUPERVISOR
RE:	BUILDING INSPECT	IONS FOR APPLICATION FOR BEER PERMIT
OFF ON A MAN	REMISES PERMIT PREMISES PERMIT ND OFF PREMISES PE UFACTURER'S OR DIS TAL EVENTS PERMIT	CRMIT STRIBUTOR'S PERMIT
		orary permit. Please return ASAP.
Please meetin	e return by <u>J. D. J.</u> ng agenda.	2 to provide information for Beer Board
Beer Board N	Aeeting Date	3-13 [Celebration of Nations)
Name of Busi	ness <u>Sister</u>	Cities of Flanklint Win Co S between Main 5+ 4
Location of B	usiness 4th ave	S between Thanst &
CODES DEP		arking garage including
MHA	May	7-3-13
Building Insp	ector	Date
FIRE DEPT		

Date

Fire Inspector

City of Franklin POBox 705

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

DATE:	4.26.13
TO:	CODES DEPT FIRE DEPT
FROM:	CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR
RE:	BUILDING INSPECTIONS FOR APPLICATION FOR BEER PERMIT
OFF P ON AN MANU	REMISES PERMIT PREMISES PERMIT ND OFF PREMISES PERMIT UFACTURER'S OR DISTRIBUTOR'S PERMIT IAL EVENTS PERMIT
نا Applic	ant is requesting a temporary permit. Please return ASAP.
Please i	return by <u>J.J.J.</u> o provide information for Beer Board g agenda.
Beer Board M	(Celephinos)
Name of Busin	ness Sister Cities of Franklin & LSB Asiness 4th ave Spetween MainSt tentrance to
Location of Bu Park, Gara	isiness 4th ave Spetiseen Main St tentrance to ng garage including alley beside
<u>CODÉS DEPT</u>	
Building Inspe	Date Date
FIRE DEPT	