

13-53

|                                     |  |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | ON PREMISES PERMIT                             |
| <input type="checkbox"/>            | OFF PREMISES PERMIT                            |
| <input type="checkbox"/>            | ON AND OFF PREMISES PERMIT                     |
| <input type="checkbox"/>            | MANUFACTURER'S OR DISTRIBUTOR'S PERMIT         |
| <input type="checkbox"/>            | SPECIAL EVENTS PERMIT      DATE OF EVENT _____ |
|                                     | HOURS OF EVENT _____                           |

DATE PERMIT NEEDED 11/12/13

1. Owner (Applicant) BERNIE STRAWN m+k inc.  
 Person ☐ Firm ☐ Corp ☒ LLC ☐ Joint-stock co. ☐ Syndicate ☐ Association ☐

BERNIE STRAWN 1933 EDENBRIDGE way HARB, TN 37215  
JOHN STRAWN 1933 EDENBRIDGE way HARB, TN 37215

3. If the applicant is a corporation, are they authorized to do business in the State of Tennessee? YES

KATE'S KITCHEN

City of Franklin business account number 39978

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

3301 ASPEN GROVE DRIVE PLANKLIN TN 37060  
STE #105  
Phone number of the business 615-335-1340

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

Drivers license #

ate

Date of birth

Soc. Sec. #

Home phone #

time phone #

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

Title

Mailing Address

City, State, Zip

Daytime contact phone number

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

INNOVATIONS GROUP  
3310 ASPEN GROVE DRIVE FRANKLIN, TN. 37067

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? No If so, give particulars of each charge, court and date convicted.

\_\_\_\_\_  
\_\_\_\_\_

11. Has this owner or the owners organization had a beer permit revoked, suspended, or denied in the State of Tennessee? Yes \_\_\_ No 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.

N/A  
\_\_\_\_\_  
\_\_\_\_\_

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

HAVE 2 OTHER RESTAURANTS WITH BEER PERMITS  
MARK'S KATES FRANKLIN, TN. RESTAURANT HARRISBURG

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

RESTAURANT OWNER / OPERATOR  
\_\_\_\_\_  
\_\_\_\_\_

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

RESTAURANT

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.

- AB* (a) You will not sell beer or similar beverages except at the place or places for which the beer board has issued your permit.
- AB* (b) You will not sell beer or any like beverage except in accordance with the terms of said permit.
- AB* (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.
- AB* (d) You will rigidly enforce the law against sales to minors.
- AB* (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.
- AB* (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.
- AB* (g) You will not attempt to transfer this permit to anyone else.
- AB* (h) You will display this permit in a prominent place in your establishment.
- AB* (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).
- AB* (j) You will prohibit the congregation at your establishment of those who reasonably appear to be intoxicated, lawless, rowdy, or prostitutes.
- AB* (k) You will not allow any liquor with alcoholic content of greater than five percent (5%) to be consumed on the premises.

- As* (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.
- As* (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.*

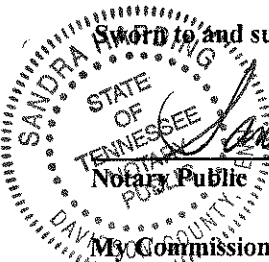
*I hereby certify that no person having at least a 5% ownership interest, nor any person to be employed in the distribution or sale of beer in my establishment has been convicted of any violation of the beer or alcoholic beverage laws or any crime involving moral turpitude within the past 10 years.*

*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.*

  
\_\_\_\_\_  
(Signature of Applicant/Owner (or Authorized Corporate Officer))

On behalf of: KATES KITCHER  
Name of Business Entity

Witnessed and subscribed before me this 18 day of OCT, 20 13



Sandra Harding  
Notary Public

My Commission Expires MAY 5, 2015

My Commission Expires: \_\_\_\_\_

**Official Use Only**

Application Fee \$ 250<sup>00</sup> Date Paid 10-29-13  
Privilege Tax \$ 17<sup>00</sup> Date Paid 10-29-13  
Board Meeting Date 11-12-13

Kates Kitchen  
3301 Aspen Grove Drive  
Franklin, Tn. 37067  
615-472-1390

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**Prohibited Conduct**

Alcoholic beverages may not be sold to anyone under 21 years of age.

Alcoholic beverages may not be sold to intoxicated persons.

Alcoholic beverages may not be sold to someone you suspect is buying it for underage people.

Alcoholic beverages may not be sold or consumed between the hours of

3:00 AM – 6:00 AM on weekdays or between the hours of 3:00 AM and 12:00 PM on Sunday.  
(Restaurants only may serve on premises only beginning at 10:00 AM)

**Checking Identification**

If someone does not clearly appear to be 21 years old, ask for, look at and read their identification. If there is any question about the age or the form of identification, do not sell alcoholic beverages to that person.

Forms of identification that should be used are (1) A valid driver's license  
(2) A State issued photo ID.

Check the identification to make sure there have not been any alterations of any kind, especially to the date of birth, such as any erasures, type style that does not match, or damaged paper surfaces. Also check for signs of altered signature. Compare the photo on the identification and the physical characteristics shown on the identification.

Check for counterfeit drivers licenses. They are completely different from the actual license; however they are designed to look like the valid state license.

**Possible actions to take**

If the ID proves the customer to be underage or there is a doubt about legally selling to this person, it is best to move the product out of reach and sight of the customer and explain why you cannot legally sell the product with something like "I'm sorry, but the law says I cannot sell you alcohol if you appear to be (underage), (intoxicated), (using false ID), etc.

Stay in control. This will show the offender, as well as other customers, that you know what to do and you are in control.

Police may be needed in some cases. If the customer becomes violent and/or makes threats, call 911 for the police.

POLICE DEPARTMENT

David Rahinsky  
Chief of Police



Dr. Ken Moore  
Mayor

Eric S. Stuckey  
City Administrator

October 29, 2013

TO: Chief David Rahinsky *DMR*  
THRU: Deputy Chief Bruce Bateman *B. Bateman*  
FROM: Mary Casteel  
Mary Casteel, Communications Support Coordinator  
SUBJECT: Beer Board Background Checks

A check of Franklin Police Department records was completed on Bernie Strawn, Managing Agent for Kate's Kitchen and revealed a minor traffic violation.

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

Requested by: Christy McCandless

# City of Franklin

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

DATE: 10-28-13  
TO: POLICE CHIEF  
FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR  
RE: RECORDS CHECK FOR APPLICATION FOR BEER PERMIT  
BEER BOARD MEETING DATE 11-12-13

- ☐ Applicant is requesting a temporary permit. Please return ASAP.  
☒ Please return by 11-1-13 to provide information for Beer Board meeting agenda.

Name of Business Kate's Kitchen  
Location of Business 3301 Aspen Grove Dr Ste 105  
Name of applicant M+K Inc  
Managing Agent [REDACTED]  
Drivers License # [REDACTED] State [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



# City of Franklin

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

DATE: 10-28-13

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

ف Applicant is requesting a temporary permit. Please return ASAP.

ف Please return by 11-1-13 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 11-12-13

Name of Business Kates Kitchen

Location of Business 3301 Aspen Grove Dr #105

## CODES DEPT

A Haman  
Building Inspector

10-30-13  
Date

## FIRE DEPT

\_\_\_\_\_  
Fire Inspector

\_\_\_\_\_  
Date



# City of Franklin

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

DATE: 10-28-13  
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 11-1-13 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 11-12-13

Name of Business Kates Kitchen

Location of Business 3301 Aspen Grove Dr #105

## CODES DEPT

\_\_\_\_\_  
Building Inspector

\_\_\_\_\_  
Date

FIRE DEPT

\_\_\_\_\_  
Fire Inspector

\_\_\_\_\_  
Date

Wayne Mobley 10-29-13  
Take care of thorough inspection