

17-48

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 10/28/17 @ The Factory of Franklin
HOURS OF EVENT 6pm. - 11pm

DATE PERMIT NEEDED by 10/28/17

PERMITS SHALL BE ISSUED TO THE OWNER OF THE BUSINESS,
WHETHER A PERSON, FIRM, CORPORATION, JOINT-STOCK COMPANY,
SYNDICATE, OR ASSOCIATION.

1. Owner (Applicant) Agape Animal Rescue, Po Box 292766,
Nashville TN 37229
Person ☐ Firm ☐ Corp ☒ LLC ☐ Joint-stock co. ☐ Syndicate ☐ Association ☐
non profit SOLC3 attached
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.
none see attached for board of
directors
3. If the applicant is a corporation, are they authorized to do business in the State of
Tennessee? yes
4. Under what trade name will this business operate?
Agape Animal Rescue
City of Franklin business account number none

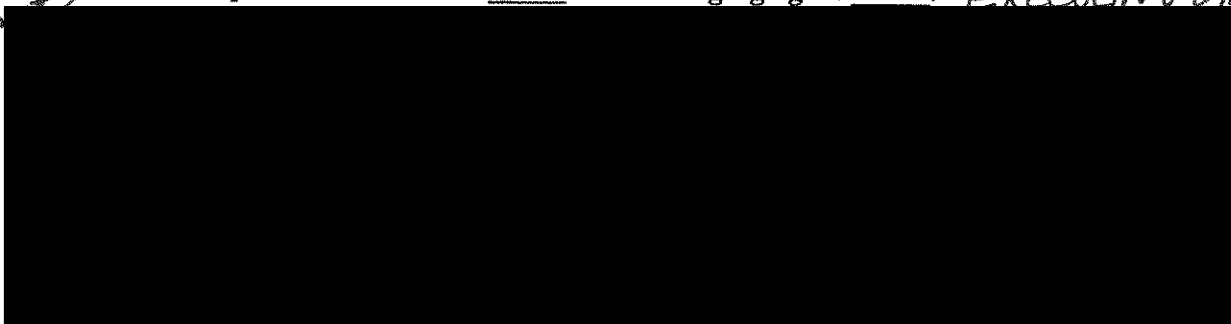
5. Location of the business by street address. For special event, list location of the event.

Events Manager, Tammi Proff, 615-291-1777
The Factory of Franklin, 230 Franklin Rd, Franklin TN 37064

Phone number of the business 615-291-1777

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

Executive Director



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 Pam Carroll Title President

Mailing Address PO Box 292766

City, State, Zip Nashville TN 37229

Daytime contact phone number 6157080115

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.

The Factory of Franklin, 230 Franklin Rd.,
Franklin TN 37064

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 ✓ 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.

none

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

none

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.)

www.agapeanimalball.org
Fundraising event on October 28, 2017

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? Yes
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? Yes

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.

N/A per Christy McCandless
because we are getting a special occasion permit from State of TN

- (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.

Sam Hill, President
Signature of Applicant/Owner (or Authorized Corporate Officer)

On behalf of: *Agape Animal Rescue*
Name of Business Entity

Sworn to and subscribed before me this 21 day of September, 20 17

Darrell Moore
Notary Public
My Commission Expires
August 18, 2018

Official Use Only

Application Fee	\$ <u>250.00</u>	Date Paid	<u>9-26-17</u>
Privilege Tax	\$ <u>17.00</u>	Date Paid	<u>9-26-17</u>
Board Meeting Date	<u>19, 10, 17</u>		



Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

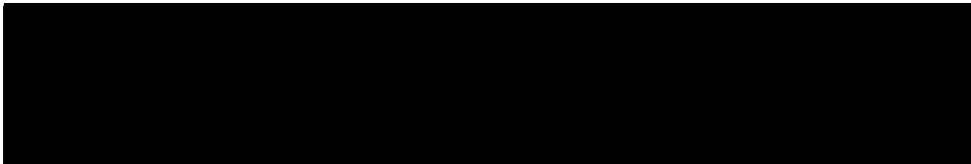


AGAPE ANIMAL RESCUE

PO BOX 292766
NASHVILLE TN 37229



020853



Dear Taxpayer:

This is in response to your Nov. 12, 2013, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in February, 2005.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section 509(a)(2).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

AGAPE ANIMAL RESCUE
% CHRIS BRYANT
PO BOX 292766
NASHVILLE TN 37229

If you have any questions, please call us at the telephone number shown in the heading of this letter.

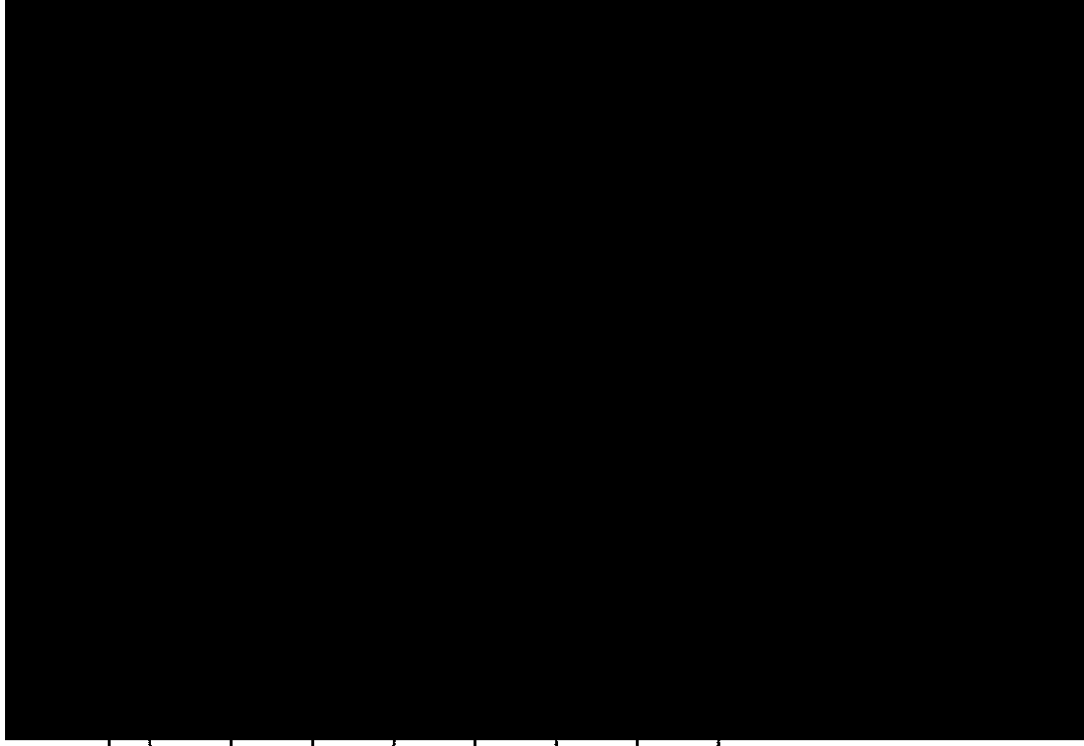
Sincerely yours,

Richard McKee

Richard McKee, Department Manager
Accounts Management Operations

**Agape Animal Rescue
Board of Directors**

Name
Tanya Willis
Pam Carroll, President
Claire Hacker
Jason Dobbs, VP
Aileen McCormick, Treasurer
Kara Allen, Secretary
Jim Day



City of Franklin

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

DATE: 9-25-17

TO: POLICE CHIEF

FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR

RE: RECORDS CHECK FOR APPLICATION FOR BEER PERMIT

BEER BOARD MEETING DATE 10-10-17

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

☒ Please return by 9-29-17 to provide information for Beer Board meeting agenda.

Name of Business Agape Animal Rescue

Location of Business 230 Franklin Rd (The Factory)

Name of applicant Agape Animal Rescue

Managing Agent

Drivers License

Date of Birth

☐ Recommended
denial of the

☐ Not recommended
recommending approval of 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: 9-25-17
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
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*Contacted Mr. Price
@ 10:37 9/26*

☒ Please return by 9-29-17 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 10-10-17

*Contact
Tami Price
615-791-1777*

Name of Business Agape Animal Rescue
Location of Business 230 Franklin Rd (The Factory)

CODES DEPT

[Signature]
Building Inspector

9/26/17
Date

FIRE DEPT

Fire Inspector

Date

Curt

City of Franklin

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

DATE: 9-25-17

TO: CODES DEPT
FIRE DEPT

FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR

RE: BUILDING INSPECTIONS FOR APPLICATION FOR BEER PERMIT

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Beer Board Meeting Date 10-10-17

Contact
Tami Price
615-791-1777

Name of Business Agape Animal Rescue

Location of Business 230 Franklin Rd (The Factory)

CODES DEPT

Building Inspector

Date

FIRE DEPT

Curt Franklin

SEP 27 2017