APPLICATION FOR BEER PERMIT

STATE OF TENNESSEE CITY OF FRANKLIN

FRA!	SUANT TO SECTION 8 CHAPTER 2 OF THE CODE OF THE CITY OF NKLIN, TENNESSEE, AND THE REQUIREMENTS OF 57-5-101 ET. SEQ. OF THE NESSEE CODE ANNOTATED, I HEREBY MAKE APPLICATION FOR:
	ON PREMISES PERMIT OF PREMISES PERMIT ON AND OFF PREMISES PERMIT MANUFACTURER'S OR DISTRIBUTOR'S PERMIT SPECIAL EVENTS PERMIT HOURS OF EVENT Special
DATI	E PERMIT NEEDED Jan, 2018
	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) Heritage Foundation of Williamson County, to Downtown Franklin Association Person Firm Corp LLC Joint-stock co. Syndicate 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. See A Hacked (a)
	If the applicant is a corporation, are they authorized to do business in the State of Tennessee?
! .	Under what trade name will this business operate? Franklin Main Street Brewfest
4	City of Franklin hasinges account number

Phone number of the business 615.591.8500 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 Driver Date of Home 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 Heritage Foundation of Fault Williamson County Name Address City, State, Zip Franklin, TN 37065 Daytime contact phone number 615.591.8500 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	5.	Location of the business by street address. For special event, list location of the event.
Phone number of the business	Square.	50 Main Street from 2nd Ave to 4th Ave /1+block of 3'
Name Driver Date of Home 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 Heritage Foundation of Taxara Title Mailing Address P. O. Box 723 City, State, Zip Frank In TN 37065 Daytime contact phone number 615. 591. 8500 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		•
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	If no, please give the name and address of the property owner.
	City of Franklin and
	City of Franklin and Various building owners
t (las any person having at least 5% ownership interest, managers or employees of the ousiness been convicted of any violation of beer or alcoholic beverage laws or any crimother than minor traffic violations) within last ten (10) years? If so, given 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.
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15.	(Re	staurant, tavern, motel, etc.) Special Eurot			
16.	Wil	Special Event I a full course menu be served? We will ensure food is available Food Venders and/or Restaurants/March I separate and sanitary facilities be maintained for men and for women?			
17.	Wil	I separate and sanitary facilities be maintained for men and for women?			
18.	Will dancing be allowed on your premises? It may happen during hours If yes, do you acknowledge that section 9-102 of the Franklin Municipal Cod prohibits the operation of establishments allowing dancing between 1:30 AM an 8:00 AM?				
TRA	NINC	S POLICY:			
		oplications must have a training policy submitted with application. This policy			
must		le training regarding the sale of beer to minors.			
19.		se read the following and upon signature of this application, you do understand 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			
\times		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.

Kush William
Signature of Applicant/Owner (or Authorized Corporate Officer)
Signature of Applicant/Owner (or Authorized Corporate Officer) On behalf of: Name of Business Entity Name of Business Entity
Sworn to and subscribed before me this 20 day of Necember, 20 17 STATE OF
Jour Maligui TENNESSEE NOTARY PUBLIC PUBLIC
My Commission Expires: 01 17 202
Official Use Only
Application Fee \$ 350.00 Date Paid 13 30 17
Privilege Tax \$ Date Paid
Board Meeting Date B / 13, 18

Farmer
Garrett
Heiler
Herrington
Isaacs
Johnson
Jones
Knopf Carroll
Chandler
DeMeyers
Denton
Douglas Anderson Magid
Marshall
Parker
Schroer
Sills
Smith
Tutler Brian
Sean
Parm
Marianne
Josh
Donna
Stephanie Pavid
Kay
Kevin
Chuck
Ann
Cassie
Chris
Parin
Emily
Andy
Jennifer
Marianne
Allen
Nancy Danny