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 HOURS OF EVENT DATE PERMIT NEEDED _ PERMITS SHALL BE ISSUED TO THE OWNER OF THE BUSINESS, WHETHER A PERSON, FIRM, CORPORATION, JOINT-STOCK COMPANY, SYNDICATE, OR ASSOCIATION. Agape Animal Rescue Owner (Applicant) 1. Person __Firm __Corp \(\sum_\text{LLC} __Joint-stock co. \) Syndicate Association List all persons, firm, joint-stock companies, syndicates, or associations 2. having at least a 5% ownership interest in the business (attach additional sheet, if needed). Please give name and address. 3. If the applicant is a corporation, are they authorized to do business in the State of Tennessee? \(\forall \eq \rightarrow \) Under what trade name will this business operate? 4.

City of Franklin business account number _____ WMC

Location of the business by street address. For special event, list location of the event.
The Factory at Franklin, 230 Franklin Rd, Franklin TN 37064 Ath: Tami Pryce 615.791-1777
Phone number of the business 615.791-1777
Please give the following information on the person who will be managing the business. This person is an owner or a managing agent Executive
Nam
Drive
Date
Hom
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 Bond President
Mailing Address POBOY 292766
Mailing Address POBOX 292766 City, State, Zip Namille TN 37229
Daytime contact phone number <u>U15.708.0115</u>
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

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 Fromlelin Rd.
The Factory of Franklin, 230 Franklin Rd. Franklin TN 37064
Has any person having at least 5% ownership interest, managers or employees of th business been convicted of any violation of beer or alcoholic beverage laws or any crim (other than minor traffic violations) within last ten (10) years? \(\times \tau \) If so, giv 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. N()

TRAINING All beer ap must includ	SPOLICY: We have ABC howholds. No sales. oplications must have a training policy submitted with application. This policy le training regarding the sale of beer to minors. NA per christy Mc Candless
	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 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 Mc Cardler, we reconstructed squared occurring when I of the

What is the exact nature of the business in which you are applying for a beer permit?

Will separate and sanitary facilities be maintained for men and for women? <u>VO</u>

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

15.

16.

17.

18.

(Restaurant, tavern, motel, etc.)

8:00 AM? 1140

Will a full course menu be served? 10

Will dancing be allowed on your premises? VO

- You will not allow any sale or delivery of beer for consumption on the premises **(l)** 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.
- You will comply with all requirements of section 2-201 through 2-229 (m) 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.
Jan Mell
Signature of Applicant/Owner (or Authorized Corporate Officer)
1 Deventor A Deventor
On behalf of: Agape Animal Riscur
Name of Business Entity
Sworn to and subscribed before me this 12 day of $9000000000000000000000000000000000000$
Davel Moss
Notary Public My Commission Expires
August 18, 2018
My Commission Expires:
Official Use Only
Application Fee \$ 250. W Date Paid 4-33-18
Privilege Tax \$ Date Paid
Board Meeting Date 5/8//8

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	
Kim Drake	
Lindsey Farrar (Blades)	
Caitlyn Page	
Sunny Bray (Intern)	

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

DATE: 4-23-18
TO: POLICE CHIEF
FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR
RE: RECORDS CHECK FOR APPLICATION FOR BEER PERMIT
BEER BOARD MEETING DATE 5-8-18
☐ Applicant is requesting a temporary permit. Please return ASAP.
Please return by 4.27-18 to provide information for Beer Board meeting agenda.
Name of Business <u>Agape Animal Rescue</u> Location of Business <u>230 Franklin</u> Rd (The Factory)
Location of Business 230 Franklin Rd (The Factory)
Name of applie
Managing Age
Drivers License
Date of Birth
 □ 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
Ву
Date
ApprovedSignature



State of Tennessee Alcoholic Beverage Commission



SPECIAL OCCASION LICENSE

License Number: LBDSOC-WIL-1805171

Application having been duly made in compliance with the Provisions of Chapter 211 of the Public Acts of 1967, a permit to sell Alcoholic Beverages is hereby issued to:

Name of Owner: Agape Animal Rescue

DRA

Business Address: 230 FRANKLIN RD

FRANKLIN, TN 37064

County Name: WILLIAMSON



Issuance Date:04/09/2018 Expiration Date:08/11/2018

