

City of Franklin
Beer Board Cover Page

Beer Board Meeting Date 10/9/2018 Permit # 18-41

Owner/Applicant Heritage Foundation of Williamson County, TN

On Prem	Off Prem	On & Off	Special Event X
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Name of Business/Event Heritage Foundation Pumpkinfest

Date(s)/Hours 10/27/2018 10:00 AM - 6:00 PM

Location of Business/Event Main Street - 1st Av to 5th Av

Mailing Address Heritage Foundation

PO Box 723

Franklin, TN 37065

Phone 615-591-8500

Primary Contact Liz Hall 615-319-0289 cell

Managing Agent Liz Hall

Email lhall@williamsonheritage.org

Review Sign Off:

Police Y Fire Y BNS Y

COMMENTS

4 Beer Sales Locations:

414 Main St-Streeside Café	McCreary's
209 E Main-1st TN Bank parking lot	Heritage Foundation - Mantra
118 4th Av N-Street Tent	Heritage Foundation - Mantra
114 E Main - Landmark Books Parking	Dntn Frnkln Rotary - Chili Cookoff

See Attached Map

Permit # 18-41

**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 10/27/2018
 HOURS OF EVENT 10 am - 6pm

DATE PERMIT NEEDED October 27, 2018

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

1. Owner (Applicant) Heritage Foundation of Williamson
 Person Firm Corp ☒ LLC Joint-stock co. Syndicate Association County, TN
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 attached
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?
Heritage Foundation Pumpkinfest
- City of Franklin business account number

NUMBERS 5 - 8 INTENTIONALLY REDACTED – SEE BEER BOARD COVER PAGE

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

Phone number of the business _____

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 # _____ State _____

Date of birth _____ Soc. Sec. # _____

Home phone # _____ Daytime 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.

City of Franklin, / Heartland-Partners - at Main St. Parking lot
Landmark Booksellers 114 E. Main at 2nd Ave

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 X 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.

Same for 15+ years

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

This event has had a beer permit for
30+ years

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

The Heritage Foundation of Williamson County, TN

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

Street Festival

16. Will a full course menu be served? multiple food vendors - At least 25 vendors
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.

- (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.

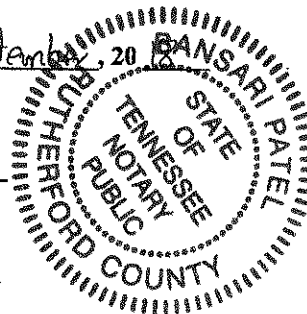
Lisa Hall
Signature of Applicant/Owner (or Authorized Corporate Officer)

On behalf of: *Heritage Foundation*
Name of Business Entity

Sworn to and subscribed before me this *12th* day of *September*, 20*18*

Bansari Patel
Notary Public

My Commission Expires: *02/17/2020*



Official Use Only

Application Fee \$ _____ Date Paid _____

Privilege Tax \$ _____ Date Paid _____

Board Meeting Date ____/____/____

Heritage Foundation of Williamson County, TN

Alcohol Sales Training Policy – Festivals

I. STAFF & VOLUNTEERS

- a. All staff and volunteers working Heritage Foundation Festivals will be briefed prior to each event on information provided by the City of Franklin concerning Prohibited Conduct; Checking Identification; and Possible Actions to Take.

II. IDENTIFICATION PROCESSES

- a. Any individual who intends to purchase alcoholic beverages on Festival premises will be required to provide photo identification with proof of age.
 - i. Photo IDs will be checked at specified locations including Heritage Foundation Information Tents and Beer Garden Tents.
 - ii. If individuals are of appropriate age a wristband will be provided to indicate they are able to purchase alcohol at the designated beer gardens. Wristbands should be applied in sight of staff or volunteer checking ID.
 - iii. If any individual with a wristband appears underage requests to purchase alcohol, the sales attendant should request to verify ID.

III. SECURITY & FENCING

- a. Alcoholic beverages may only be consumed within designated areas.
- b. Designated areas will be defined by fencing and will be staffed with security personnel to enforce containment rules.
- c. No alcohol should be served to ANY INDIVIDUAL who appears intoxicated regardless of age.
- d. Patrons who do not adhere to rules pertaining to alcohol sales and consumption will be asked to leave the festival.
- e. If needed, law enforcement officials will be contacted to address issues of violence or threats of violence.

Internal Revenue Service

Department of the Treasury

P. O. Box 2508
Cincinnati, OH 45201

Date: March 19, 2001

Person to Contact:
Richard Owens 31-00913
Customer Service Representative
Toll Free Telephone Number:
8:00 a.m. to 9:30 p.m. EST
877-829-5500
Fax Number:
513-263-3756
Federal Identification Number:
23-7042596

Heritage Foundation of Franklin and Williamson
County Tennessee
% Mary Shearer Pearce
PO Box 723
Franklin, TN 37065

Dear Sir or Madam:

This letter is in response to your request for a copy of your organization's determination letter. This letter will take the place of the copy you requested.

Our records indicate that a determination letter issued in April 1970, granted your organization exemption from federal income tax under section 501(c)(3) of the Internal Revenue Code. That letter is still in effect.

Based on information subsequently submitted, we classified your organization as one that is not a private foundation within the meaning of section 509(a) of the Code because it is an organization described in section 509(a)(2).

This classification was based on the assumption that your organization's operations would continue as stated in the application. If your organization's sources of support, or its character, method of operations, or purposes have changed, please let us know so we can consider the effect of the change on the exempt status and foundation status of your organization.

Your organization is required to file Form 990, Return of Organization Exempt from Income Tax, only if its gross receipts each year are normally more than \$25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of the organization's annual accounting period. The law imposes a penalty of \$20 a day, up to a maximum of \$10,000, when a return is filed late, unless there is reasonable cause for the delay.

All exempt organizations (unless specifically excluded) are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of \$100 or more paid to each employee during a calendar year. Your organization is not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, these organizations are not automatically exempt from other federal excise taxes.

Donors may deduct contributions to your organization as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to your organization or for its 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.



TENNESSEE DEPARTMENT OF REVENUE

SALES AND USE TAX
CERTIFICATE OF EXEMPTIONHERITAGE FOUNDATION OF FRANKLIN & W
PO BOX 723
FRANKLIN TN 37065-0723Effective Date: July 1, 2015
Exemption Number: 100091394
Expiration Date: June 30, 2019
209 E MAIN ST
FRANKLIN TN 37064-2517

The Tennessee Department of Revenue has issued a tax-exemption number for the educational, religious, historical, or charitable non-profit organization or institution named above. State law (Tenn. Code Ann. § 67-6-322) gives the Department the authority to allow this organization to make tax-exempt purchases of goods and services that it will use, consume or give away. This authorization for exemption does not extend to sales tax that the organization must collect or pay on its regular sales of goods or taxable services.

This authorization for exemption is limited to sales made directly to the above named organization. This certificate may not be used for sales made to individuals paying with personal checks or personal debit or credit cards, even if the individual is a representative or employee of the above named organization, and he or she will be reimbursed for the purchase. Sellers must refuse to accept the certificate when the sale is made to someone other than the above named organization.

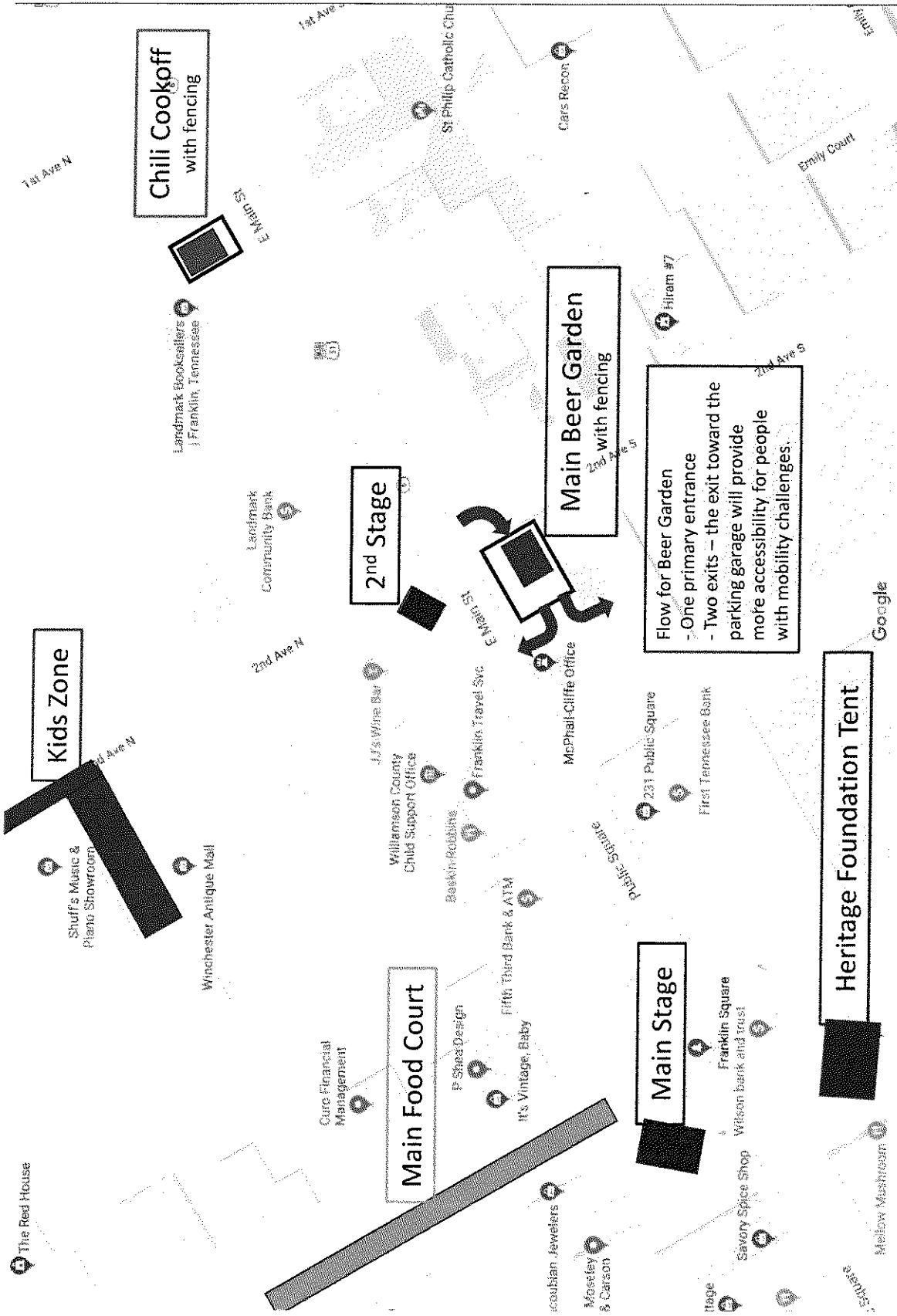
The organization must furnish its suppliers of goods and services with a copy of this certificate. The lower portion of the certificate must be properly completed. The organization must retain the original certificate for copy purposes. The supplier will maintain a file copy as evidence of the exempt sale to the organization. Later purchases made before the expiration date do not require the submission of additional copies.

The organization must notify the Department immediately if it ceases to exist or if its location or mailing address changes.

Richard H. Roberts
Commissioner of Revenue**To Be Completed by the Organization**TO: Supplier's Name Heritage Foundation
Address PO Box 723
City Franklin State TN Zip 37065I, Liz Hall, as an authorized representative of the organization named above, affirm that the purchases made under this authority will be used and consumed by the organization or will be given away.

Under penalty of perjury, I affirm this to be a true and correct statement.

Print Name of Organization Heritage Foundation
Print Name of Purchaser Liz Hall
Signature of Purchaser [Signature]Date 9/10/18



ID checks will be placed at the entrances to each location serving beer and at the Heritage Foundation Tent.

Drink tickets will be sold to individuals with appropriate wristbands. Patrons will

exchange tickets for beverages to help keep the line moving and assist with the overall flow of attendees.

Each beer garden will include tables and chairs.

