

**City of Franklin**  
**Beer Board Cover Page**

Beer Board Meeting Date

2/12/2019

Permit #

19-01

Owner/Applicant

Mapco Express Inc

On Prem

Off Prem

**x**

On & Off

Special Event

Name of Business/Event

Mapco #3303

Special Event Date(s)/Hours

Location of Business/Event

501 Liberty Pk

Franklin, TN 37064

Mailing Address

Kim Martin

1603 Godfrey Ave SE

Ft. Payne AL 35967

Phone

615-994-0476

Email

Primary Contact

Kim Martin

Phone

615-994-0476

Email

kim.martin@mapcoexpress.com

Managing Agent

Keith Slater

Review Sign Off:

Police

Y

Fire

Y

BNS

Y

**COMMENTS**

Permit #

19-01

City of Franklin business account number 2019 96683

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

501 Liberty Pk, Franklin, TN 37064

Phone number of the business 615-794-3544

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

[Redacted area]

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 Kim Martin Title Admin. Assistant

Mailing Address 1603 Godfrey Ave SE

City, State, Zip Ft. Payne, AL 35967

Daytime contact phone number 615-994-0476

Email Kim.martin@mapcoexpress.com

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 NA. List the names of the restaurants or other businesses and describe their location (use additional sheet if necessary)

NA

9. Do you own the premises on which you will operate? No  
If no, please give the name and address of the property owner.

V. Sylvia Kay Porter, 1301 West Maitland  
Bld., Apt. 216, Maitland, FL 32751

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.

NA

11. Has this owner or the owners organization had a beer permit revoked, suspended, or denied in the State of Tennessee? Yes X No     If so, please give date, place and cause of said revocation.

Please see attached.

12. Give the name and address of the former beer permittee at this establishment.

NA

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

Sell off premises beer in 300+ locations  
in the southeast.

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

NA

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

Convenience Store

16. Will a full course menu be served? no

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? NA

#### 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.

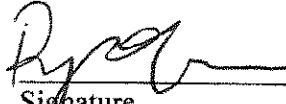
19. Please read the following and upon signature of this application, you do understand and agree to comply if you are granted a permit.

- (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.

**CITY OF FRANKLIN**  
**TENNESSEE**

**ACKNOWLEDGEMENT OF BEER BOARD MEETING**

This is to acknowledge that I, Bryan Quince, representing  
Printed name of representative  
Maple Express, Inc. have been notified that the meeting of the  
Name of business  
Beer Board will be held at City Hall in the Board Room on Tuesday, January 8<sup>th</sup>  
at 4:30 PM. The purpose of the meeting is to consider the application for a beer  
permit for the above stated business. Presence of a representative is imperative in order  
to receive a permit.

  
Signature  
12-19-18  
Date

## Application Signature Page

*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 understand that making false statement in this application shall precipitate forfeiture of permit and holder shall not be eligible to receive any permit for a period of ten 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.*

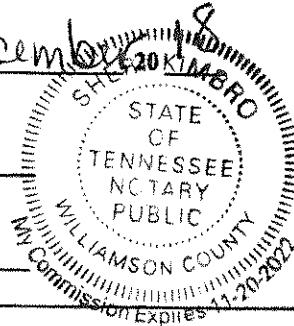
  
Signature of Applicant/Owner (or Authorized Corporate Officer)

On behalf of: Macro Express, Inc.  
Name of Business Entity

Sworn to and subscribed before me this 19 day December, 2021

  
Notary Public

My Commission Expires: 11/20/2022



### Official Use Only

Application Fee \$ \_\_\_\_\_ Date Paid \_\_\_\_\_

Privilege Tax \$ \_\_\_\_\_ Date Paid \_\_\_\_\_

Board Meeting Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_



# TRAINING POLICY

## Training Policy

At MAPCO, training is a vital part of our store operations' success. When our team members complete 100% of their training in a timely manner, they feel more comfortable in their position, are better positioned to provide outstanding service to our guests, and have the knowledge and skills needed to be great stewards of the MAPCO brand and the communities we serve.

MAPCO onboarding combines computer-based learning and on-the-job training. In order to successfully graduate from training, all team members must complete all computer-based learning courses and on-the-job training checklists assigned for their position.

### Training Completion by Position:

To ensure that our team members are best prepared to serve our guests, below is the expected training completion timeline (both computer-based learning and on-the-job training) by position. - Sales Associate/Food Service Specialist: Ideally, within three days, but no more than two weeks. Additionally, best practice is to have new team members work with an experienced team member for at least two weeks before working single coverage. - Customer Service Leader/Food Service Leader: Three weeks - Store Manager/Restaurant Manager: Four weeks - Sales Manager: Six weeks - District Manager: Eight weeks - Regional Manager: 10 weeks

### Regulatory Training Requirements:

In order for MAPCO and its team members to be compliant with state and federal regulations, the following courses and their corresponding assessment (if applicable) must be completed



and passed as soon as possible, ideally within three days, but not later than within the first 30 days of employment. - MAPCO Handbook and Code of Conduct - Responsible Vendor (varies by state): - Alabama Responsible Vendor Course and Assessment - Tennessee Responsible Vendor Course and Assessment - Responsible Vendor Course and Assessment (GA, KY, MS, VA, AR) - Tobacco Course and Assessment - PCI Compliance Course and Assessment - Anti-Money Laundering Course and Assessment - Class C UST Operator Course - Global Harmonizing System Course

## Annual Training

In addition to completing regulatory training during MAPCO onboarding, the following courses and their corresponding assessments must be completed and passed on an annual basis. - MAPCO Handbook and Code of Conduct - Guest Service Fundamentals (8 steps of service) - Responsible Vendor Course and Assessment - Annual Regulatory Refresher Course and Assessment

It is every team members' responsibility to ensure that they complete and pass any required training. If a team member fails to complete their required training within the timeframe provided, it may result in disciplinary action up to and including termination.

