

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 10/12/2019
HOURS OF EVENT 10am - 9pm

DATE PERMIT NEEDED 10/12/2019

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

1. Owner (Applicant) SISTER CITIES OF FRANKLIN
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.

BOARD
OF
DIRECTORS →

PEARL BRANSFORD, DOUG SHARP, MIKE THOMPSON
KYLE BROGAN, SUMMER SHELDON, TAMARA PHILLIPS
PATRICIA FITZGERALD, JASON COLLINS, KIM CANNON

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?

SISTER CITIES OF FRANKLIN & WILLIAMSON CO.
Celebration of Nations Festival
City of Franklin business account number N/A

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

4th AVE SOUTH 1 THE ALLEY NEXT TO GARAGE

Phone number of the business 615 969 2833

- 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.

Email doug@sharpsurbanplanning.com

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 DAVID HAAS Title ACCT. MNGR

Mailing Address 309 Haddon CT. FRANKLIN TN 37067

City, State, Zip _____

Daytime contact phone number 614-313-7103

Email _____

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.

CITY OF FRANKLIN
CITY HALL 109 3RD AVE SOUTH FRANKLIN, TN

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.

SCOTT DUCAT

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

WORKED IN ORGANIZING DRINK TENTS IN
ALL PAST CELEBRATION OF NATIONS EVENTS (10 years)

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

PAST 3 YEARS: SELF EMPLOYED
PREVIOUS 2 YEARS: GRESHAM SMITH
PREVIOUS 10 YEARS: SOUTHERN LAND COMPANY

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

CELEBRATION OF NATIONS FESTIVAL

16. Will a full course menu be served? Yes (Food 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.

APPLICATION FEE AND BUSINESS PRIVILEGE TAX:

For **BOTH Special Event and Business Applications**, a non-refundable fee of \$250.00 must accompany this application. Checks are payable to:

City of Franklin
Attn: Beer Board
PO Box 705
Franklin, TN 37065-0705

For **Business Applications Only**, a prorated share of the Annual Beer 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. (Please see meeting schedule below.)

APPLICATION DEADLINES:

Please see the Meeting Schedule and Application Deadlines and complete and return the “Acknowledgement of Beer Board Meeting” below. Your application must be submitted at least fifteen (15) days prior to the Beer Board meeting at which it is to be considered.

Meeting Schedule, Application Deadlines and Fees

Application Due Date	Beer Board Meeting Date	Special Event and Business Application Fee	Prorated Annual Privilege Tax (for Businesses)	Business Total Amount Due
12/17/2018	1/8/2019	\$250.00	\$100.00	\$350.00
1/29/2019	2/12/2019	\$250.00	\$92.00	\$342.00
2/26/2019	3/12/2019	\$250.00	\$83.00	\$333.00
3/26/2019	4/9/2019	\$250.00	\$75.00	\$325.00
4/30/2019	5/14/2019	\$250.00	\$67.00	\$317.00
5/28/2019	6/11/2019	\$250.00	\$58.00	\$308.00
6/25/2019	7/9/2019	\$250.00	\$50.00	\$300.00
7/30/2019	8/13/2019	\$250.00	\$42.00	\$292.00
8/27/2019	9/10/2019	\$250.00	\$33.00	\$283.00
9/24/2019	10/8/2019	\$250.00	\$25.00	\$275.00
10/29/2019	11/12/2019	\$250.00	\$17.00	\$267.00
11/26/2019	12/10/2019	\$250.00	\$8.00	\$258.00

CITY OF FRANKLIN TENNESSEE

ACKNOWLEDGEMENT OF BEER BOARD MEETING

This is to acknowledge that I, DOUG SHARP, representing
Printed name of representative
SISTER CITIES OF FRANKLIN 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, _____
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.

Doug Sharp
Signature

5-23-2019
Date

Application Signature Page

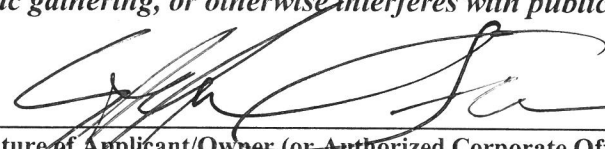
I hereby make application to the City of Franklin Beer Board for a beer permit.

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.

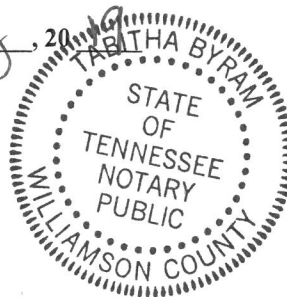
X 
Signature of Applicant/Owner (or Authorized Corporate Officer)

On behalf of: SISTER CITIES OF FRANKLIN
Name of Business Entity

Sworn to and subscribed before me this 24th day of May, 2019

Tabitha Byram
Notary Public

My Commission Expires: 01/17/21



Official Use Only

Application Fee \$ _____ Date Paid _____

Privilege Tax \$ _____ Date Paid _____

Board Meeting Date ____ / ____ / ____