

BEER PERMIT APPLICATION
CITY OF MILLERSVILLE, TENNESSEE

Application for (check one):

- On Premises Consumption Permit
- Off Premises Consumption Permit
- On and Off Premises Consumption Permit
- Manufacturer's or Distributor's Permit
- Special Event Permit

I hereby make application for a permit to sell, store, manufacture, or distribute beer or other beverages authorized to be sold, stored, manufactured or distributed under the provisions of Tennessee Code Annotated § 57-5-101 Et Seq. and base my application upon the answers to the following questions:

1. Full name of applicant (Owner) _____
Person Firm Corporation Other _____

2. Present home address: _____

3. Previous address(s): Included all addresses used within the past 10 years and relevant dates.

4. Date of birth: _____ Home Telephone: _____
Business Telephone: _____

5. List the names and addresses of all persons, firms, corporations, joint stock companies, or other entities having at least a 5% ownership interest in the business (attach additional sheet, if needed).

6. Under what name will this business operate: _____

7. Location of business by street address and phone number:

8. Is this a new business: Yes No If "no", explain: _____

9. Specify the name and address of the person to receive annual privilege tax notices and other communications from the City:

10. Name and address of the property owner, if different than the business owner:

11. Will the permit be used to operate two or more restaurants or other businesses under the same permit within the same building, as permitted by Section 57-5-103(a)(4): Yes No If so, list the name and location of all restaurants or businesses:

12. Give the name, address and date of birth of any manager other than the applicant:

13. Has any person having at least a 5% ownership interest, any of the managers listed in question 12, or any other employee of the business, been convicted of any violation of the beer or alcoholic beverage laws or any crime (other than minor traffic violations) within the last ten (10) years? Yes No If so, give particulars of each charge, court, and date convicted:

14. Has the owner or owner's organization had a beer permit revoked, suspended or denied in the State of Tennessee? Yes No If so, specify where, when and why:

15. Give the name, relationship to applicant (if any) and the address of any person or business that currently holds or previously held a beer permit at this business location:

16. What is the name and address of the church (or other place of worship) nearest to your business? (*)

(*) See note after question 17.

17. What is the name and address of the school nearest to your business?

NOTE: The City of Millersville has adopted a rule forbidding the sale, storage or manufacture of beer and like beverages within 300 feet of schools, churches and other places of public gatherings.

- 18. Please attach a detailed letter describing the business for which this permit will be used.
- 19. In making this application the applicant hereby submits to a background investigation and must provide fingerprints. The Beer Board will not issue a permit until the results of the investigation are available for review.

This application must be signed in the presence of a notary public and the signature affirms that the information provided is true and complete. The applicant further states;

I am knowledgeable 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 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 places of public gathering, or otherwise interferes with public health safety and morals.

Signature of Applicant/Owner (or Authorized Corporate Officer)

Sworn to and subscribed before me this _____ day of _____, 20__.

Notary Public

My Commission Expires: _____

NOTICE: A non-refundable \$250.00 fee must accompany this application. 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 the permit and shall not be eligible to receive a permit for a period of ten years.

A privilege tax of \$100.00 is imposed on the business of selling, distributing, storing or manufacturing beer in this state, effective January 1, 1994 and each successive January 1st. Such tax shall be paid to the City of Millersville and 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.

The City of Millersville requires the following information from the applicant for the background investigation.

Full Name: _____
(Last, First, Middle)

Other Names Used: (Aliases) _____

Home Address: (Street, City, State & Zip Code) _____

Sex: _____ Race: _____ Height: _____ Weight: _____ Eyes: _____ Hair: _____

Place of Birth: _____ Date of Birth: _____ Citizenship: _____

Armed Forces # _____ Miscellaneous # _____

TN DL # _____ Social Security # _____

I give my permission to the City of Millersville to do a background investigation on me.

Signed : _____