#### **CITY OF KINGSPORT**

#### **APPLICATION FOR BEVERAGE PERMIT**

#### DATE OF APPLICATION:

Please read instructions carefully.

- In addition to this initial application, a separate abbreviated application must be completed by each person 1. who owns (five) 5% or greater interest of the business entity that is seeking a permit to sell beer in the City of Kingsport. Answer all questions completely or check appropriate box. If a question is not applicable, write "NA". Write "unknown" only if you do not know the answer. Use blank space at the end of the form for extra details on any question for which you have insufficient space or attach additional sheets as necessary.
- 2. Type, print, or write in ink. Illegible or incomplete forms will not receive consideration.
- 3. All information supplied must be accurate. FALSE INFORMATION MAY RESULT IN THE DENIAL OF A BEER PERMIT FOR A PERIOD OF TEN (10) YEARS. Your signature at the end of this form will certify the correctness of all responses.

#### **SECTION I - BUSINESS ENTITY INFORMATION**

- 1. Name of business entity seeking permit:
- Under what name will this business operate: 2.
- 3. Check one for the type of business:
  - () Sole Proprietorship () Partnership () Other
  - () Corporation
    - () Limited Liability Corporation
- 4. Current mailing address of the business:
- 5. Current email address of the business:

# **SECTION II - GENERAL DATA**

- 1. Full Name or the person completing the application (last, first, middle)
- 2. Your relationship to business entity identified in Section I above:
  - () Owner (sole proprietor)
    - () Partner
  - () 5% or greater owner in corporation
  - () Other (identify position with business entity, i.e. director, officer, manager, etc.):
- \*Please state the actual % of ownership you have in this business 3.

\*Any individual owning 5% or greater in addition to the initial applicant must submit a supplemental application.

- CHECK HERE IF SUPPLEMENTAL APPLICATION(S) ATTACHED Yes No
- Month \_\_\_\_\_ Day \_\_\_\_ Year \_\_\_\_, City \_\_\_\_\_ 4. Date & Place of Birth:
  - State/Providence\_\_\_\_\_, Country\_\_\_\_\_
- Gender: \_\_\_\_\_Male \_\_\_\_\_Female \_\_\_\_\_Prefer not to answer 5.
- 6. Social Security No.
- Drivers License No. & State Issued: 7.

Employer		ten years):	ddress		Inclusive Date From - T
Current Residential	Address (Number	, Street, City, Stat			
	reet	<u>C</u>	t residence first) ity	State	Inclusive Dat <u>From - T</u>
Telephone: Home (					)
Nicknames or other have ever used these					
SECTIO	N III - CITIZEN	SHIP			
Is the business entity of Tennessee?					
I have been a citizen the date upon which					
-Nonimmig to such emp -Qualified	nanent resident grant applicant for ployment, or a nor alien (Plea	*If yo professional/com nimmigrant under se indicate which	ur answer is No, plo mercial license wh the Immigration ar category):	ose visa for en Id Nationality A	try into the U.S. is
-R -P U.	efugees who meet ersons who have .S.C. 1182(d)(5) _	t the qualification been "paroled in	set out in 8 U.S.C. s set out in 8 U.S.C to the U.S." for a p withheld under 8 U	. 1157 period of at lea	st one (1) year u
-C of -P	Cuban or Haitian er 1980 ersons granted cor	ntrants as defined nditional entry int	by section 501(e) of o the U.S. under 8	f the Refugee E U.S.C. 1153(a)	(7) before April 1
or -A	because of being an alien who has b	uprooted by catas been "battered" of y 8 U.S.C.1641(c	secution on account trophic national cal subjected to "extra (2) and (3), victin cense(s) as qualified	amity eme cruelty" in 1s' children, or	the U.S. by a par
	IILITARY SERV	VICE			
wl	ganization Have Y	You Served?			pplicable

## **SECTION V - ADDITIONAL INFORMATION**

Special Instructions: If your answer is "yes" to any of the questions in this section, please provide complete details for each question on a separate signed sheet and attach the sheet to this form. A "yes" answer does not mean automatic denial of a beer permit; however, failure to disclose will result in such a denial.

- 1. Within the ten (10) years immediately preceding the date of this application have you ever been arrested, indicted or convicted for any alleged violation of state or federal law which is a felony or misdemeanor in such state or federal jurisdiction? If the answer is yes, describe on a separate sheet in accordance with the special instructions above.
- Yes 2. Within the ten (10) years immediately preceding the date of this application have you ever been arrested or courtmartialed under military law or regulation? If the answer is yes, describe on a separate sheet in accordance with the special instructions above. Yes No

# **SECTION VI - PERMIT DATA**

1.	Type of Permit applied for (mark only one): On Premises Off Premises   Both On and Off Premises Temporary			
2.	Type of Business: Hotel Motel Distributor Lodge Retailer Restaurant   Not for-Profit Corporation Patriotic Organization Wholesaler Manufacturer   *Private Club (&members must be over 21 years old per Kingsport City Code Section 6-210)			
3.	Does the business entity seeking a beverage permit possess a valid Business Tax License issued by the City of Kingsport? (N/A if manufacturer) Yes No Date of Issuance			
4.	Complete address where beverages are to be sold. (Owners must provide map of business location.)			
5.	The name of the owner of the premises upon which the business is to be conducted.			
6.	Do you or the business now possess a beverage permit from the City of Kingsport? Yes No If yes, please identify what type: Manufacture Store Distribute Sell			
7.	List the name, address and telephone numbers of the individual who is to receive annual tax notices and any other communication from the city.			
8.	Have you or your organization ever had a beer or beverage permit revoked, suspended or denied, or paid a fine in			

- lieu of such revocation, suspension or denial in the State of Tennessee? \_\_\_\_\_. If so, specify where, when and why:
- 9. List the name, address and telephone numbers of the agent of the business entity selling beer who can be contacted by the Beverage Board or local law enforcement authority, as needed. (The agent MUST BE a Kingsport resident.)

10. Has any brewer or wholesaler of any alcoholic beverage of not more than-8% weight (except wine as defined in T.C.A. §57-3-101) or its agent or agents made any loan or furnished any fixtures of any kind to the business? (N/A Yes No If your answer is "Yes," give complete details. if manufacturer)

11. Does any brewer, manufacturer, distributor or wholesaler of legalized beer or any alcoholic beverage of not more than 8% weight (except wine as defined in T.C.A. §57-3-101) or its agent or agents have any interest, direct or indirect, in the business or in the premises occupied by the business? (N/A if manufacturer) Yes\_\_\_\_No\_\_\_\_ If your answer is "Yes," give complete details.

No

12. Except as otherwise provided by T.C.A. §57-5-101(c), have you or any agent or agents of the entity made any loan or furnished any fixtures of any kind or have any interest, direct or indirect, in the business of any retailer of beer, or in the premises occupied by such retailer? (Manufacturers only) Yes\_\_\_\_ No \_\_\_\_ If your answer is "Yes," give complete details.

## SECTION VII - GENERAL INFORMATION AND AGREEMENTS

1.	Applicant agrees that no person will be employed in the storage, sale, manufacture or distribution of beer except those who are citizens or legal aliens of the United States
2.	Applicant agrees not to engage in the sale, storage, manufacture or distribution of beer except at the place or places for which the beverage permit is issued
3.	Applicant agrees to comply with all of the laws of the United States, the State and the City and agrees that the sale, storage, manufacture or distribution of beer will be made only in accordance with the permit granted; and with all applicable municipal, state and federal laws
4.	Applicant agrees that no sale of beer or other alcoholic beverages will be made to any person under twenty-one (21) years of age except as provided by state law
5.	Applicant agrees that no person under the age of 18 years will be allowed to sell, transport, dispense or have in his or her possession beer for any purpose
6.	Applicant agrees minors, disorderly or disreputable persons or persons heretofore connected with the violation of the liquor laws will not be permitted to loiter around the place of business
7.	Applicant agrees no beer will be sold, furnished, disposed of or given between the hours of 3:00 a.m. and 8:00 a.m. on weekdays or between the hours of 3:00 a.m. and 10:00 a.m. on Sundays and that no beer shall be consumed or opened for consumption in either bottle, glass or other container after 3:15 a.m. on the permitted premises
8.	Applicant agrees that neither the applicant nor any person employed or to be employed by him in the distribution, storage, manufacture or sale of beer has ever been convicted of any violation of the law against prohibition, sale, manufacture, storage, distribution or transportation of intoxicating liquor or of any crime involving moral turpitude (a crime of moral turpitude includes premeditated murder, all sex related crimes, selling of class I and II controlled substances illegally and theft) within the ten years preceding the filing of this application. Yes No
9.	Applicant consents to be fingerprinted by the Police Department, City of Kingsport. Yes No
10.	Applicant agrees to be investigated by municipal, county, state and federal law enforcement agencies concerning the applicant's background and record
11.	Applicant agrees to provide any additional information required by the Kingsport Beverage Board to fully investigate the application
12.	Applicant will conduct the business in person or as agent for the organization. Yes No
	SECTION VIII - REFERENCES
-	give the correct name, address, work and home telephone number of three people not related to you who have you personally for a period of at least three years:

Name	Address (street, city, state, zip)	Work & Home Telephone		
	/	/		
	/	/		
	/	/		

## SECTION IX - HOURS OF OPERATION

Please state the business hours of operation and **if different**, also specify the hours during which beer will be sold. (If these hours should ever be modified you **must** submit such changes **in writing** to the City Recorder.)

## SECTION X - ADDITIONAL INFORMATION

Use the space below to provide any additional information or to elaborate on any responses provided in the application. It is imperative that you provide complete and accurate responses to all questions in this application. Failure to provide truthful responses may result in denial of the beer permit.

## SECTION XI - FOR USE BY CITY OF KINGSPORT ONLY

Lodges, Patriotic Organizations and Clubs

Charters that have been issued by the State of Tennessee must be presented with this completed application in all cases of lodges, patriotic organizations, and clubs. These charters will be examined by the Secretary, Beverage Board, Kingsport, Tennessee, and returned to applicant at the time this application is presented.

### Secretary, Beverage Board, Kingsport

Charter Presented	Yes	No	Issued by
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In what name

issued by	
Date	

Charter Returned Yes \_\_\_\_ No \_\_\_\_

\*Signature of Beverage Board Secretary:

### **City Planner**

Is requested structure in a Nonconforming \_\_\_\_\_ Conforming \_\_\_\_\_ location under the zoning laws and ordinances of the city of Kingsport?

Is requested location within 300 feet of property on which any public or private school (K-12) is located?

Yes \_\_\_\_ No \_\_\_\_

\*Signature of City Planner

# SECTION XII - APPLICANT'S SIGNATURE

#### STATE OF \_\_\_\_\_

#### COUNTY OF

I hereby make oath and swear or affirm that all the facts and answers set forth in the above application are true and correct and are made under penalty of perjury. I understand that any applicant making a false statement in the application or withholding of information on this application shall result in the denial of a beverage permit or forfeit such applicant's permit and such person shall not be eligible to receive any permit for a period of ten (10) years. I agree to comply with the laws of the United States, and of the State of Tennessee, and Ordinances of the City of Kingsport. I have received and read a copy of Chapter 6, Article III of the Code of Ordinances of the City of Kingsport, and all amendments thereto. I understand that by submitting this application, a background investigation shall be conducted and any and all documents related to the investigation shall along with this application and documents submitted pursuant thereto become public records. I further make oath that, if the owner of the business is a corporation, firm, joint-stock company, syndicate, partnership or association, I am authorized to execute this application on behalf of the owner.

In testimony whereof witness my signature on this the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

Printed Name

Signature

Sworn to and subscribed before me, a Notary Public in and for said State and County, on this

the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_.

NOTARY PUBLIC

My commission expires: