

TOWN OF WHITE PINE

APPLICATION FOR BEER PERMIT

State of Tennessee - County of Jefferson

To the Board of Mayor and Aldermen acting as Beer Board of the Town of White Pine, Tennessee.

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:

(Please check one)

Applying for: Off-Premise Sales On-Premise Sales

1. Name of Owner of Business: _____
(T.C.A. 57-5-103 (a)(2): Permits shall be issued to the owner of the business, whether a person, firm, corporation, joint-stock company, syndicate, or association)
If owner is an individual please list home address: _____
Home Phone: _____ SS# _____

If a firm, corporation, joint-stock company, syndicate, or association please list all persons having at least a 5% ownership interest in the business:

- (1) Name: _____ Home Phone _____
Home Address: _____ SS# _____
(2) Name: _____ Home Phone _____
Home Address: _____ SS# _____
(3) Name: _____ Home Phone _____
Home Address: _____ SS# _____

(Please attach additional page if needed)

2. Name under which business will be operated: _____
3. Address of business where permit will be exercised: _____

4. Owner of premises on which business is located, **if other than business owner:**
Name: _____ Phone Number _____
Address: _____
5. Name and distance from the nearest church: _____
School: _____
Hospital: _____
(Section 8-211 of Ord. 8-07 prohibits the sale, storage, or manufacture of beer within 400' of such establishments)
6. Name and distance from the nearest residential dwelling: _____
(Section 8-211 prohibits the sale, storage, or manufacture of beer within 100' of a residential dwelling)
7. Name of manager of business for which permit is applied: _____
Home Address: _____
Home Phone: _____ DOB: _____ Drivers Lic. No. _____
8. Give name, relationship to applicant (if applicable) and home address of the former beer permit owner at this location: _____

9. Name and mailing address to which all business correspondence should be mailed: _____
Phone Number: _____

10. Have any of the owners owned or currently own any other businesses: _____
 (If yes, please list name and address of each business: _____

11. Have any of the owners, partners, or employees been convicted of any violation of the beer and alcoholic beverage laws or any crime within the last ten (10) years? _____
 If so, give particulars of each charge, court and date of conviction: _____

12. Have you or any of the owners had a beer permit revoked, suspended, or denied in the State of Tennessee? _____ If so, specify where, when, and why: _____

13. Will permit be used to operate two or more businesses under the same permit as permitted by TCA 57-5-103 (a) (4) within the same building? _____ If so, specify number _____. List the names of the other businesses and describe their location in conjunction with the other business(es): _____

14. If a restaurant, what is the seating capacity of the establishment? _____
 (Section 8-209(a) requires seating capacity of minimum of 75 people)
15. Is the restaurant located in a hotel or motel? _____ If so, how many rooms does the hotel or motel provide? _____
 (Section 8-209(a) requires the hotel/motel to provide a minimum of 30 rooms or suites)

I hereby solemnly swear that each and every statement in the above application is true and correct and agree that, if any statement therein is false, the permit issued pursuant thereto may be revoked by the Town of White Pine Beer Board upon notice and hearing, in which event the burden shall be on the applicant to prove the correctness of all the statements in this application.

I also give consent to the investigative officer of the Town of White Pine to do any necessary background checks for any violations of alcohol beverage laws.

Applicant Signature: _____ Date: _____

Sworn to and subscribed before me this _____ day of _____, _____

Notary
 My commission expires: _____

NOTICE: A non-refundable \$250 fee must accompany this application. If the application is approved you are required to provide documentation of sales tax registration to the town within ten (10) days of approval. Any applicant making false statements in this application shall forfeit the permit and shall not be eligible to receive any permit for a period of ten (10) years.

