-  98	Application for (check one):  Manufacturer's or distributor's permit	Application for Beer Permit State of Tennessee City of Crossville							
	I hereby make application for a permit to sell, store erages authorized to be sold, stored, manufactured or dist le Annotated 57-5-101 et seg. and base my application upon	ributed under the provisions of Tennessee the answers to the following questions:							
·	1. Full name of applicant (owner): Fruce A Crown (Class E permits must be from a bonafide charitable, non-proposition of Social Security #21 Date of Bird Home Telephone: 931-321 Business Te (Effective 7/1/2015, T.C.A. 57-5-103(a) requires applicants to be at least one year immediately preceding the date of applying for the documentation of such residency or citizenship during the review and the state of the state of the state of the state of applying for the documentation of such residency or citizenship during the review and the state of the st	ofit or political organization.)  th: 3/3/1964 Driver's License: Island							
3	. What is your present home address? 300 1+olid	Drive Cossulle TV 38555							
4. Previous address(es) (within last 10 years): Some									
5.	Type of Ownership: PersonFirmCorporationJoint-Stock C List all persons, firms, corporations, joint-stock companies, system ownership interest in the business (attach additional sheet)  Bruce A Compa	ndicates or conscittions to the con-							
6.	Under what name will this business operate? 300} leggi	ers Grille							
7.	Location of business, or special event, by street address or oth number of the business: 287 HUY 70 E. Crosso 931-787-1611	er geographical description and phone いいと 7ン 38583							
8.	Specify the identity and address of the person to receive annua communication from the City: 3 ruce Common Director	I privilege tax notices and any other							
9.	Give name and address of property owner, if other than busines	s owner: SAMC							
į	Will the permit be used to operate two or more restaurants or otloermitted by Section 57-5-103 (a) (4) within the <u>same</u> building? f so, specify number, List the names of the restaurants of ocation (use additional sheet if necessary):	her businesses under the same permit asYesNo r other businesses and describe their							

1	Just	Give name, date of birth, and the applicant:							
	116	Done Ho	· Dr	Not 303	Cossulle	N	2228E		
4-			·				· · · · · · · · · · · · · · · · · · ·		
12	laws or a	nv crime (o	ther than r	ninor traffic viole	p interest, any of victed of any viola tions) within the d date convicted.	ation of t	ne beer or a	in question 11, or alcoholic beverage	
13.	Has this of State of T If so, spec	wner or the ennessee? cify where, v	owners' c Ye when, and	organization had sNo why:	a beer permit rev			ned, or denied in the	
14.	Give the n this locatio	ame, relation:	onship to a	pplicant (if appli	cable) and addre	ss of the	former bee	r permit holder at	
15. <u>Ī</u>	15. For Class E permits only: Dates of special event:								
beer or an issue	in my esta y crime in d a permi	ablishment Volving me t or my ner	has been oral turpit	convicted of a	ny violation of t	ployed i he beer im also	ors. I hereby certify that no pers loyed in the distribution or sale the beer or alcoholic beverage law the also aware that I shall not be ton causes traffic congestion or the dimorals.		
Signature	of Applica	nt/Owner (c	r Authorize	ed Corporate Of	ficer)				
Sworn to a	nd subscr	bed before	<sub>f</sub> me this		Marck_, 20_/		7-6-20	20	
		,					TENANS CONTRACTOR OF THE PROPERTY OF THE PROPE		