CITY OF CROSSVILLE, TENNESSEE

Application No.	
Certificate Issued Date_	
Expiration Date	

APPLICATION FOR PERMIT AND CERTIFICATE OF COMPLIANCE TO SELL ALCOHOLIC BEVERAGES AT RETAIL UNDER TITLE 8, CHAPTER 3, CROSSVILLE MUNICIPAL CODE

Crossville City Council 392 N. Main St. Crossville, Tennessee		Date 2-9	_, 20		
I, or We (if a corporation or other entity, managers, members, stockholders, and organization, list all persons having an ir	other in				
Name		Address			
Janet C. Oakes	<u> </u>	54 Ozone Schoolk	Ed Rockwood, TN		
1/Ro. 4.			37854		
	-	7			
doing business as: individual, corporation, partnership, other (specify), hereby make application for a permit and certificate of good moral character to sell alcoholic beverages at retail in the following					
Proposed Y			3//		
Name of Store Dan's Wined Li	900/	Address 957 W. Aug	e. Suites 107-110		
	- ·	Crossuille	TN 38555		

INSTRUCTIONS:

- A. Each question must be fully answered.
- B. Wherever the word "you" is used, all persons of the organization (as defined in § 8-301[b] of the Crossville Municipal Code) are included, both collectively and individually.
- C. If other than individual is applying, then a list of all persons having an interest in the particular organization along with the amount of each of their interest must accompany this application. All owners, partners, officers, managers, members, stockholders, directors, and/or any person who owns any interest in the corporation or the business must individually complete a questionnaire and attach it to the application. If a corporation or entity, a copy of the charter and bylaws or other governing documents must be submitted. If a partnership, provide the terms of the partnership agreement that discuss control.

1.		In whose name is, or will be, the <u>Federal Special Tax Stamp</u> as a retail liquor dealer issued at this location? <u>Sanet</u> <u>C. Oakes</u>					
2.		Give the names and addresses of all persons other than those shown on this application who have any kind of interest, financial, stock ownership, loans, gifts, or securing loans, or otherwise, made for carrying on said business. (Specify interest)					
			•				
3.		Give the names and addresses of all persons other than those shown on this application who share in the profits from your business and state their interest.					
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4.		Who will be in active control in the management of the business?					
5.	Give the name and address of the owner of the premises on which the business is to be located and the amount of the rental, if any. Also submit for our files a copy of any lease agreement that has or may be entered into:						
		Vane Tollett Brown Dermonth	Δ,				
6.		Do you employ some person not otherwise connected with your store to keep your books? If yes, give name and address of person. <u>以论与</u>					
	,	Phyllis Woodall 112 Foothills Dr. Rickiwal, 7N378	34				
7.	•	Do you agree to accept full responsibility for the action of any member of the enterprise of any person employed by you in the conduct of your business?					
8.		Have you received any financial assistance in connection with your business during the past year?If yes, then attach a separate statement setting forth all details.					
9.	(Attach five (5) copies of a scale plan drawn to a scale of not less than one (1) inch equals fifty (50) feet, giving the following information: i. The shape, size and location of the lot upon which the liquor store is to be operated under the license; ii. The shape, size, height and location of all buildings, whether					
	1	they are to be erected, altered, moved or existing, upon the lot;					

- iii. The off-street parking space and off-street loading and unloading space to be provided including the vehicular access to be provided from these areas to a public street and;
- iv. The identification of every parcel of land within five hundred (500) feet of the lot upon which the liquor store is to be operated indicating ownership thereof and the locations of any structures situated thereon, and the use being made of every such parcel.

All data, written statements, affidavits, evidence or other documents submitted in support hereof or upon bearing hereon shall be deemed to be a part of this application and must be attached hereto.

The applicant or applicants agrees that the place for which application is made will be operated in conformity with Title 8, Chapter 4, of the Code of Ordinances, City of Crossville, Tennessee, and in conformity with all applicable rules and regulations made pursuant to law, which are now, or may hereafter, be in force. The undersigned hereby swears (affirms) that the foregoing is a true, correct, and complete statement to the best of his knowledge and belief, and that any false or misleading statement will constitute grounds for revocation or denial of a retail dealer's permit

misleading statement will constitute ground	
dealer's permit. Must Called	54 Ozune School Rd Rockwood, TR Address 37854
Signature of Applicant	Address 37854
Signature of Applicant	Address
Signature of Applicant	Address
Signature of Applicant	Address
(attach additional pages, if necessary, for signal STATE OF TENNESSEE) COUNTY OF CUMBERLAND) Before me, the undersigned authority, on this day personally ap	
before me, the undersigned authority, on this day personally ap	peared <u>Www.</u>
known to me to be the person(s) whose name is subscribed to t statements contained therein, including all attachments, are true	e and accurate to the best of his belief and knowledge.
Witnesseth my hand at office this day of	MAT DUKES INTERNATIONALES
My Commission Expires: 3.13.2018	Notary Public OF TENNESSEE NOTARY PUBLIC REAND OF TENNESSEE NOTARY PUBLIC