	Manufacturer's or distributor's permit (Class A) Off-premises permit (Class B) On-premises permit (Class C) On and off premises permit (Class D) Special events permit (Class E)
ver ode	I hereby make application for a permit to sell, store, manufacture, or distribute beer or othe ages authorized to be sold, stored, manufactured or distributed under the provisions of Tennesse Annotated 57-5-101 <u>et seq</u> . and base my application upon the answers to the following questions:
1.	Full name of applicant (owner): THE GIZAPEVINE LLC (Class E permits must be from a bonafide charitable, non-profit or political organization.
2,	Applicant's Secial Security #:
	What is your present home address? 128 STARBOARD CT  LARRIMAN TN 37748
4.	Previous address(es) (within last 10 years): 7817 CRALEY PP POWELL TN 37849
5.	Type of Ownership: PersonFirmCorporationJoint-Stock CoSyndicateAssociation List all persons, firms, corporations, joint-stock companies, syndicates, or associations having at least a 5% ownership interest in the business (attach additional sheet if needed).
6.	Under what name will this business operate? THE BUTCHEE'S BLOCK OF STONE
7.	Location of business, or special event, by street address or other geographical description and phone number of the business: 2444 CENESIS RD SUITE IOI  CROSSVILLE TN 38571
8.	Specify the identity and address of the person to receive annual privilege tax notices and any other communication from the City: 2444 GENESIS ROAD SUITE 101  CLOSSVILLE TN 38571
9.	Give name and address of property owner, if other than business owner: ROBET R. RAMSE  31 QUALL POINT CROSSVILLE TN 38571
10.	Will the permit be used to operate two or more restaurants or other businesses under the same permit as permitted by Section 57-5-103 (a) (4) within the <u>same</u> building? Yes No If so, specify number, List the names of the restaurants or other businesses and describe their location (use additional sheet if necessary):

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

BE HIRED

To

12.	Has any person having at least a 5% ownership interest, any of the managers listed in question 11, 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?
13.	Has this owner or the owners' organization had a beer permit revoked, suspended, fined, or denied in the State of Tennessee? Yes You No If so, specify where, when, and why:
14.	Give the name, relationship to applicant (if applicable) and address of the former beer permit holder at this location:
	(The City of Crossville has adopted a rule forbidding the sale, storage and manufacture of beer and like beverages within 500 feet of schools and churches, as measured in a straight line from main entrance to main entrance.)
15.	What is the name and address of the church (or other place of worship) nearest to your business?  CHURCH OF JESUS CHRIST OF LATTER DAY SAINTS
护	1550 GENESIS RO CROSSVILLE TN 38571
<u>∕</u> ⁄16.	What is the name and address of the school nearest to your business? STONE MEANORIAL LIGHT SCHOOL, 2800 COOK RO, CROSSVILLE TJ 3857.
17.	For Class E permits only: Dates of special event:
hav bee or a issi inte	In knowledgeable of the laws prohibiting the sale of beer to minors. I hereby certify that no person ing at least a 5% ownership interest, nor any person to be employed in the distribution or sale of in my establishment has been convicted of any violation of the beer or alcoholic beverage laws any crime involving moral turpitude within the last 10 years. I am also aware that I shall not be used a permit of my permit shall be revoked if my business location causes traffic congestion or interest with sonodis, churches, or other public health, safety and morals.  The of Applicant/Owner (or Authorized Corporate Officer)
Swornt Notary Publ	o and subscribed before me this 28th day of <u>Utoliu</u> , 20_14.  My Commission Expires: <u>6/12/17</u> My My Commission Expires: <u>6/12/17</u>
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