

**ROANE COUNTY
BEER PERMIT APPLICATION
STATE OF TENNESSE**

Application for: (check one)

- ON-PREMISES PERMIT
- OFF-PREMISES PERMIT
- ON & OFF-PREMISES PERMIT
- TEMPORARY PERMIT/SPECIAL EVENTS PERMIT
- MANUFACTURER'S OR DISTRIBUTOR'S PERMIT

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:

1. **Full name of applicant (owner of business):**

2. **List all former names used including aliases, nicknames, and maiden name:**

3. **Type of applicant (check one):** Person _____ Firm _____ Corporation _____ Joint-Stock Company _____
Syndicate _____ Association _____
4. **Give the name, address, and birth date of all persons, firms, corporations, joint-stock, syndicates, or associates who own at least 5% or more of the business (attach additional sheet if needed.)** _____

IF THE OWNER IS AN INDIVIDUAL, answer questions 5, 6, and 7. Otherwise, proceed to question 7.

5. **What is your present home address?** _____

6. **List all previous addresses within the last ten years (use additional sheet if necessary).**

7. **Applicant's date of birth:** _____
8. **Applicant's Personal Phone Number:** _____
Applicant's Landline Business Phone Number: _____
Applicant's Social Security Number: _____
9. **Under what name will this business operate?** _____

10. **Give business address and geographical location:** _____

11. **Describe the nature or type of business you will operate:** _____

12. Give name and address of real estate (property) owner if other than business owner: _____

13. Give name and address of person to receive annual tax notices and other official communications or legal correspondence: _____

14. Will this permit be used to operate two or more restaurants or other businesses within the same building? If yes, specify number: _____ and list the names of all restaurants or other businesses. Describe all locations (attach separate sheet if necessary.) _____

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

16. Has any person having at least a 5% ownership interest, any manager listed above, or any other employee of the business, been convicted of any violation of the beer or alcoholic beverage laws, felony crime, or any misdemeanor crime involving moral turpitude (defined as crimes involving theft, fraud, or false statement) within the past ten (10) years? _____
If yes, give the particulars of each charge, the court, and the date convicted: _____

IMPORTANT- If you have any doubt regarding whether or not a past criminal conviction qualifies as a misdemeanor/felony or crime involving moral turpitude, you should consult with an attorney prior to completing this application.

17. Have you, your organization, or any person who owns five percent (5%) or more of the business, ever had a beer permit previously issued, revoked, suspended, or denied in the State of Tennessee? _____
If yes, specify where, when, and why: _____

18. Give the name, relationship to the applicant, and address of the former beer permit holder at this location (if applicable): _____

**** ROANE County has adopted a rule forbidding the sale, storage and manufacture of beer and like beverages within 2000 feet (or some lesser distances) of schools, churches, and other places of public gathering. ****

19. Give the name and address of the church (or other place of worship) nearest to your business: _____

20. Give the name and address of the school nearest to your business: _____

****ROANE County has adopted a rule forbidding the sale of beer and like alcoholic beverages within 300 feet of a residential dwelling, if the owner of the dwelling objects to the issuance of a beer permit. ****

21. Give the name of the owner and the address of the residential dwelling nearest to your business: _____

I certify that this application contains true information to the best of my knowledge and belief. I am aware of my continuing obligation to amend or supplement this application promptly if a change in circumstances affects the responses provided in this application, either before or after a permit has been issued, including, but not limited to, information regarding myself, other owners, employees or the addition of new employees. I certify that I am knowledgeable of the laws prohibiting the sale of beer to minors. I am also aware that I shall not be issued a permit or my permit shall be revoked if my business location causes traffic congestion or interferes with schools, churches, or other places of public gathering, or otherwise interferes with public health, safety, and morals. I will surrender to the Beer Board any permit issued under this application within fifteen (15) days of termination of the business, change in ownership, relocation of the business, or change of the business's name.

Signature of Applicant/Owner (or Authorized Officer)

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

Notary Public

My Commission Expires: _____

NOTICE: A non-refundable \$252.00 fee must accompany this application. If the application is approved, you are required to provide documentation of sales tax registration to the county within ten (10) days of approval.

An annual privilege tax of \$100.00 is imposed on the business of selling, distributing, storing, or manufacturing beer in this state. The tax is due each January 1 and is payable to the Roane County Clerk. This tax is prorated for new permits issued after January 1 and must be paid when the permit is issued.

ANY APPLICANT MAKING A FALSE STATEMENT IN THIS APPLICATION SHALL FORFEIT HIS OR HER PERMIT AND SHALL NOT BE ELIGIBLE TO RECEIVE A PERMIT FOR TEN (10) YEARS.