

# BEER PERMIT APPLICATION

CITY OF MARYVILLE  
CITY RECORDER'S OFFICE  
406 W BROADWAY  
MARYVILLE, TN 37801  
(865) 273-3450

ALL APPLICATIONS MUST BE COMPLETED AND RETURNED TO THE CITY RECORDER'S OFFICE BY THE 1st OF THE MONTH IN ORDER TO BE CONSIDERED ON THE FOLLOWING MONTH'S BEER BOARD MEETING AGENDA. THE CITY OF MARYVILLE HAS NO PROVISIONS FOR A SPECIAL EVENT BEER PERMIT.

**\$250.00 NON-REFUNDABLE APPLICATION**

**FEE PAID DATE** \_\_\_\_\_

**BEER BOARD HEARING DATE** \_\_\_\_\_

**Application for(choose one)**

- ON PREMISE
- OFF PREMISE
- ON/OFF PREMISE

**Type of business (choose one)**

- WHOLESALE/DISTRIBUTOR PERMIT
- RESTAURANT
- GROCERY/FOOD STORE
- TAVERN
- CONVENIENCE STORE/MARKET
- PACKAGE STORE
- HOTEL

**PLEASE READ THE FOLLOWING INFORMATION CAREFULLY BY  
PRINTING OR TYPING ALL ANSWERS**

APPLICATION IS HERE MADE 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, SECTION 57-5-101 ET SEQ. AND BASE THIS APPLICATION UPON THE ANSWERS TO THE FOLLOWING QUESTIONS:

1. Full name of applicant (owner(s)) \_\_\_\_\_

\_\_\_\_\_

Please identify which category the owner(s) fall(s) into:

- Person
- Firm
- Corporation
- Joint-Stock Co
- Syndicate
- Association

2. If individual ownership, please provide the following (FOR ALL OTHER TYPES OF OWNERSHIP, SKIP TO QUESTION #4)

**DOB** \_\_\_\_\_

**Home Phone Number** \_\_\_\_\_

**Cell Number** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_

**State/Driver's License Number (include a copy)** \_\_\_\_\_

3. Has the owner of the business had a beer permit revoked, suspended, or denied in the State of Tennessee? \_\_\_\_\_ If so, specify where, when, and why. \_\_\_\_\_

\_\_\_\_\_

4. Please complete the following information for all owners having, at least 5% ownership in said business (attach additional paper if needed):

**Name & Title (1<sup>st</sup> owner)** \_\_\_\_\_

**% of Ownership** \_\_\_\_\_

**Home Address** \_\_\_\_\_

**Home Phone** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

**Social Security #** \_\_\_\_\_

**State/Driver's License Number (include a copy)** \_\_\_\_\_

Have you been convicted of any violation of the Laws of any City or State in the United States for the possession, sale, manufacture or transportation of intoxicating liquor; possession, sale,

manufacture or transportation of drugs; vice crimes or any crime involving moral turpitude within the last ten (10) years? \_\_\_\_\_ If yes, please specify nature of conviction. \_\_\_\_\_

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Have you ever been issued a beer permit in any state? \_\_\_\_\_

If yes, please specify state and the name of the business. \_\_\_\_\_

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Have you ever had a beer permit revoked, suspended, or denied? \_\_\_\_\_

If yes, please specify as to the reason why. \_\_\_\_\_

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**Name & Title (2nd owner)** \_\_\_\_\_

**% of Ownership** \_\_\_\_\_

**Home Address** \_\_\_\_\_

**Home Phone** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

**Social Security #** \_\_\_\_\_

**State/Driver's License Number (include a copy)** \_\_\_\_\_

Have you been convicted of any violation of the Laws of any City or State in the United States for the possession, sale, manufacture or transportation of intoxicating liquor; or any crime involving moral turpitude within the last ten (10) years? \_\_\_\_\_ If yes, please specify nature of conviction. \_\_\_\_\_

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Have you ever been issued a beer permit in any state? \_\_\_\_\_

If yes, please specify state and the name of the business. \_\_\_\_\_

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Have you ever had a beer permit revoked, suspended, or denied? \_\_\_\_\_

If yes, please specify the State and the reason. \_\_\_\_\_

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**PLEASE NOTE: MARYVILLE CITY BEER PERMIT MUST BE IN THE SAME NAME AS SHOWN ON BUSINESS LICENSE, TENNESSEE STATE SALES TAX CERTIFICATE AND BUSINESS SIGN. ALL DOCUMENTS MUST BE FILED UNDER THE SAME NAME.**

5. Name of the business \_\_\_\_\_

6. Name of former business (at same location) \_\_\_\_\_

7. Business street address \_\_\_\_\_

8. Business mailing address (if different) \_\_\_\_\_

9. Telephone number of business \_\_\_\_\_

10. Please indicate if the above address and phone number will be the accurate ones to send any correspondence to \_\_\_\_\_.

11. Will the permit be used to operate two or more restaurants or other businesses under the same permit as allowed by Section 57-5-103(a)(4) within the same building? \_\_\_\_\_. If so, specify number of businesses \_\_\_\_\_. List names of businesses/restaurants and describe their locations.

_____	_____
_____	_____
_____	_____

**SPECIAL NOTE: IF THE OWNER OF THE BUSINESS PROPERTY IS DIFFERENT THAN THE APPLICANT ON THIS APPLICATION, THE CITY OF MARYVILLE REQUIRES A COPY OF THE CURRENT LEASE OF THE PREMISES AND A WRITTEN STATEMENT FROM THE PROPERTY OWNER, SIGNED AND NOTARIZED, GIVING THE APPLICANT PERMISSION TO SELL OR SERVE BEER/ALCOHOL ON THE PREMISE.**

12. Name and address of **property owner**, if different than business owner \_\_\_\_\_

\_\_\_\_\_

13. Please provide the following information regarding the **resident manager**:

**Name** \_\_\_\_\_

**DOB** \_\_\_\_\_

**SS #** \_\_\_\_\_

**State/Driver's license # (include a copy)** \_\_\_\_\_

**Home address** \_\_\_\_\_

**Home phone** \_\_\_\_\_

**Cell phone** \_\_\_\_\_

14. Please list the name and address of the church (or place of worship) nearest to the business.

\_\_\_\_\_

15. Please list the name and address of the school or daycare nearest to the business. \_\_\_\_\_

\_\_\_\_\_

16. Please provide the Tennessee sales tax number for the business **at this location.** \_\_\_\_\_

**I am knowledgeable of the laws prohibiting the sale of beer to minors. I hereby certify that no person having at least a 5% ownership interest, nor any person to be employed in the distribution or sale of beer in my establishment has been convicted of any violation of the beer or alcoholic beverage laws or any crime involving moral turpitude within the past 10 years.**

**(NOTICE: Each and every owner/applicant with a 5% ownership interest is required to sign application on separate signature pages.)**

**I HEREBY SWEAR OR AFFIRM THAT THE INFORMATION IN THIS APPLICATION IS TRUE AND COMPLETE.**

**X** \_\_\_\_\_  
Signature of Applicant/Owner (or Authorized Corporate Officer)

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_.

\_\_\_\_\_ My Commission Expires \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_ the following action is hereby taken by the Maryville Beer Board upon the forgoing application:

\_\_\_\_\_  
MAYOR

APPROVED AS TO FORM:

\_\_\_\_\_  
CITY ATTORNEY

ATTEST:

\_\_\_\_\_  
CITY RECORDER