



City of Franklin

109 3rd Ave S
Franklin, TN 37064
(615)791-3217

Meeting Agenda

Beer Board

Tuesday, July 12, 2016

4:30 PM

Board Room

Call To Order

Approval of Minutes

1. [16-0593](#) Consideration of Minutes from June 14, 2016 Beer Board Committee Meeting.

2. [16-0590](#) Consider application of Heritage Foundation of Franklin d/b/a Pumpkinfest, 1st - 5th Avenue Main Street, Abby Williams, Managing Agent, for Special Event, On Premises Consumption. Event date and hours: October 29, 2016, 10:00 AM until 8:00 PM.

Attachments: [Pumpkinfest.pdf](#)

3. [16-0592](#) Consider application of Mercy Health Services Inc. d/b/a Franklin Classic, Franklin City Square at 3rd Avenue, Allison Bender, Managing Agent, for Special Event, On Premises Consumption. Event date and hours: September 5, 2016, 9:00 AM until 2:00 PM

Attachments: [Franklin Classic.pdf](#)

4. [16-0589](#) Consider application of Bombay Bistro LLC d/b/a Bombay Bistro, 9040 Carothers Parkway, Suite #B-111, Robert Fletcher, Owner, for On and Off Premises Consumption.

Attachments: [Bombay Bistro.pdf](#)

5. [16-0588](#) Consider application of Aldi Inc. (Tennessee) d/b/a Aldi Inc. (Tennessee), 209 S. Royal Oaks Blvd. Suite #225, Jesus Lopez, Managing Agent, for Off Premises Consumption.

Attachments: [Aldi Inc..pdf](#)

6. [16-0591](#) Consider application of McKelvey Markets LLC d/b/a McKelvey's Market, 1110 West Main Street, Cindy McKelvey, Owner, for Off Premises Consumption.

Attachments: [McKelvey's Market.pdf](#)

Other Business

Adjournment

ANYONE REQUESTING ACCOMMODATIONS DUE TO DISABILITIES SHOULD CONTACT A.D.A. COORDINATOR, AT 791-3277 AT LEAST 10 DAYS PRIOR TO THE MEETING, IF POSSIBLE.

PURSUANT TO SECTION 8 CHAPTER 2 OF THE CODE OF THE CITY OF FRANKLIN, TENNESSEE, AND THE REQUIREMENTS OF 57-5-101 ET. SEQ. OF THE TENNESSEE CODE ANNOTATED, I HEREBY MAKE APPLICATION FOR:

- DATE PERMIT NEEDED by October 1, 2016

1. Owner (Applicant) Heritage Foundation of Franken
 Person ☐ Firm ☐ Corp ☐ LLC ☐ Joint-stock co. ☐ Syndicate ☐ Association ☒

- See board member list

- # Pumpkin-fest

City of Franklin business account number _____

5. Location of the business by street address. For special event, list location of the event.

1st-5th Ave Main Street

Phone number of the business 615-591-8500

6. Please give the following information on the person who will be managing the business. This person is an owner _____ or a managing agent ☒.

Name _____

Dr _____

Da _____

Ho _____

7. Specify the identity, address and daytime contact phone number of the person to receive annual privilege tax notices and any other communication from the City.

Name Heritage Foundation Title _____

Mailing Address P.O. Box 723

City, State, Zip Franklin, TN 37065

Daytime contact phone number 615-591-8500

8. Will the permit be used to operate two or more restaurants or other businesses under the same permit as permitted by T.C.A. Section 57-5-103(a)(4) within the same 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)

- McCreary's, 414 Main Street
- Tazikis, 332 Main Street

9. Do you own the premises on which you will operate? NO
If no, please give the name and address of the property owner.

City of Franklin

10. Has any person having at least 5% ownership interest, managers or employees of the business been convicted of any violation of beer or alcoholic beverage laws or any crime (other than minor traffic violations) within last ten (10) years? NO If so, give particulars of each charge, court and date convicted.

11. Has this owner or the owners organization had a beer permit revoked, suspended, or denied in the State of Tennessee? Yes ___ No X If so, please give date, place and cause of said revocation.

12. Give the name and address of the former beer permittee at this establishment.

same for 15+ years

13. Give applicant's history of involvement in the beer business, if any.

This event has had a beer permit for 30+ years.

14. Give applicant's employment record for the past 10 years.

Festival Coordinator - Heritage Foundation
BOM - Clarity Pointe of Little Rock, AR
Sales + Customer Service - The UPS Store,
Franklin, TN

15. What is the exact nature of the business in which you are applying for a beer permit?
(Restaurant, tavern, motel, etc.)

Street festival

16. Will a full course menu be served? food vendors

17. Will separate and sanitary facilities be maintained for men and for women? portable
toilets

18. Will dancing be allowed on your premises? yes
If yes, do you acknowledge that section 9-102 of the Franklin Municipal Code prohibits the operation of establishments allowing dancing between 1:30 AM and 8:00 AM? yes

TRAINING POLICY:

All beer applications must have a training policy submitted with application. This policy must include training regarding the sale of beer to minors.

19. Please read the following and upon signature of this application, you do understand and agree to comply if you are granted a permit.

- (a) You will not sell beer or similar beverages except at the place or places for which the beer board has issued your permit.
- (b) You will not sell beer or any like beverage except in accordance with the terms of said permit.
- (c) If this application is made for permit to sell and not for consumption on the premises, you will not sell for consumption on the premises and not allow consumption on the premises.
- (d) You will rigidly enforce the law against sales to minors.
- (e) You will prohibit gambling at your establishment and understand that the conduct of such activities on the premises will result in revocation of your permit.
- (f) You will secure a certificate or statement from the health department or health officer that the premises covered by the application meet the requirements of the ordinances of the City of Franklin and the laws of the State of Tennessee.
- (g) You will not attempt to transfer this permit to anyone else.
- (h) You will display this permit in a prominent place in your establishment.
- (i) You will not sell or distribute beer between the hours of 3:00 AM and 6:00 AM (8:00 AM for on premises consumption) during the week and between the hours of 3:00 AM Sunday and 12:00 Noon Sunday (10:00 AM for on premises consumption).
- (j) You will prohibit the congregation at your establishment of those who reasonably appear to be intoxicated, lawless, rowdy, or prostitutes.
- (k) You will not allow any liquor with alcoholic content of greater than five percent (5%) to be consumed on the premises.

- (l) You will not allow any sale or delivery of beer for consumption on the premises outside of the building, it being the intention to prohibit the sale of beer by what is commonly known as "curb service" or "curb sales" of beer.
- (m) You will comply with all requirements of section 2-201 through 2-229 of the municipal code of the City of Franklin.

A non-refundable \$250 fee must accompany this application and the application shall be submitted at least fifteen (15) days prior to the Beer Board meeting at which it is to be considered. If the application is approved you are required to provide documentation of sales tax registration to the city within ten days of approval. Any applicant making false statement in this application shall forfeit his permit and shall not be eligible to receive any permit for a period of ten years.

A privilege tax of \$100 is imposed on the business of selling, distributing, storing or manufacturing beer in this state effective January 1, 1994 and each successive January 1. Any holder of a beer permit issued after January 1, 1994 shall pay a pro rata portion of this annual tax when the permit is issued.

I hereby make application to the City of Franklin Beer Board for a beer permit.

The signing of this application acknowledges that I am aware 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.

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 public places of public gathering, or otherwise interferes with public health, safety and morals.

Signature of Applicant/Owner (or Authorized Corporate Officer)

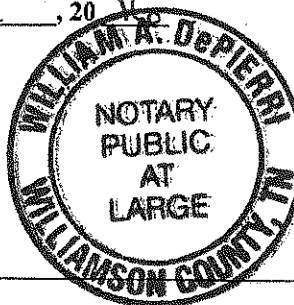
On behalf of:

Heritage Foundation of Franklin
Name of Business Entity

Sworn to and subscribed before me this 10th day of June, 20 16

Notary Public

My Commission Expires: April 13, 2019



Official Use Only

Application Fee \$ 250.00 Date Paid 6/17/16

Privilege Tax \$ N/A Date Paid _____

Board Meeting Date 8/9/16

City of Franklin

P O Box 705
Franklin, TN 37065
(615) 791-3225

DATE: 6/17/16

TO: POLICE CHIEF

FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR

RE: RECORDS CHECK FOR APPLICATION FOR BEER PERMIT

BEER BOARD MEETING DATE 8/9/16

☐ Applicant is requesting a temporary permit. Please return ASAP.

☒ Please return by 7/28/16 to provide information for Beer Board meeting agenda.

Name of Business Pumpkin Fest

Location of Business 134 2nd Ave. N. Franklin, TN 37064

Name of applicant Heritage Foundation of Franklin

Manager

Driver

Date of

- ☐ Recommend. Based on information available to date, the applicant has no record requiring denial of the permit under the provisions of Title 8 of the Franklin Municipal Code.
- ☐ Not recommending. Based on information available to date, the Police Dept. is not recommending approval of a permit.

CENTRAL RECORDS DIVISION
FRANKLIN POLICE DEPT

By _____

Date _____

Approved _____
Signature

POLICE DEPARTMENT

Deborah Y. Faulkner, EdD
Chief of Police



Dr. Ken Moore
Mayor

Eric S. Stuckey
City Administrator

June 20, 2016

TO: Chief Deborah Y. Faulkner *DF*
FROM: *Mary E. Casteel*
Mary E. Casteel, Communications Support Coordinator

SUBJECT: Beer Board Background Checks

A check of Franklin Police Department records was completed on Abby Williams, Managing Agent for Heritage Foundation of Franklin and found to be clear.

A check was completed through LexisNexis/Accurint and found to be clear.

Requested by: Delisa Pugh

City of Franklin

P O Box 705
Franklin, TN 37065
(615) 791-3225

DATE: 6/17/16
TO: **CODES DEPT**
FIRE DEPT
FROM: **CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR**
RE: **BUILDING INSPECTIONS FOR APPLICATION FOR BEER PERMIT**

- ☒ ON PREMISES PERMIT
☐ OFF PREMISES PERMIT
☐ ON AND OFF PREMISES PERMIT
☐ MANUFACTURER'S OR DISTRIBUTOR'S PERMIT
☒ SPECIAL EVENTS PERMIT

☐ Applicant is requesting a temporary permit. Please return ASAP.

☒ Please return by 7/28/16 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 8/9/16

Name of Business Pumpkinfest

Location of Business 1st - 5th Ave. Main Street

CODES DEPT

[Signature]
Building Inspector

6-21-16
Date

FIRE DEPT

Fire Inspector

Date

City of Franklin

P O Box 705
Franklin, TN 37065
(615) 791-3225

DATE: 6/17/16
TO: **CODES DEPT**
FIRE DEPT
FROM: **CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR**
RE: **BUILDING INSPECTIONS FOR APPLICATION FOR BEER PERMIT**

☒ ON PREMISES PERMIT
☐ OFF PREMISES PERMIT
☐ ON AND OFF PREMISES PERMIT
☐ MANUFACTURER'S OR DISTRIBUTOR'S PERMIT
☒ SPECIAL EVENTS PERMIT

☐ Applicant is requesting a temporary permit. Please return ASAP.

☒ Please return by 7/28/16 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 8/9/16

Name of Business Pumpkin Seed

Location of Business 1st - 5th Ave. Main Street

CODES DEPT

Building Inspector

Date

FIRE DEPT

[Signature]
Fire Inspector

June 21, 2016
Date

STATE OF TENNESSEE
CITY OF FRANKLIN

PURSUANT TO SECTION 8 CHAPTER 2 OF THE CODE OF THE CITY OF FRANKLIN, TENNESSEE, AND THE REQUIREMENTS OF 57-5-101 ET. SEQ. OF THE TENNESSEE CODE ANNOTATED, I HEREBY MAKE APPLICATION FOR:

- ☒ ON PREMISES PERMIT
☐ OFF PREMISES PERMIT
☐ ON AND OFF PREMISES PERMIT
☐ MANUFACTURER'S OR DISTRIBUTOR'S PERMIT
☒ SPECIAL EVENTS PERMIT
- DATE OF EVENT Sept 5 2016
HOURS OF EVENT 9am - 2pm
- DATE PERMIT NEEDED 7-12-16

DATE PERMIT NEEDED 1-2-6

PERMITS SHALL BE ISSUED TO THE OWNER OF THE BUSINESS,
WHETHER A PERSON, FIRM, CORPORATION, JOINT-STOCK COMPANY,
SYNDICATE, OR ASSOCIATION. *Megay Health Services Inc.*

1. Owner (Applicant) Allison Bender
 Person Firm Corp LLC Joint-stock co. Syndicate Association

2. List all persons, firm, joint-stock companies, syndicates, or associations having at least a 5% ownership interest in the business (attach additional sheet, if needed). Please give name and address.

none - non profit organization

3. If the applicant is a corporation, are they authorized to do business in the State of Tennessee? YES

4. Under what trade name will this business operate?

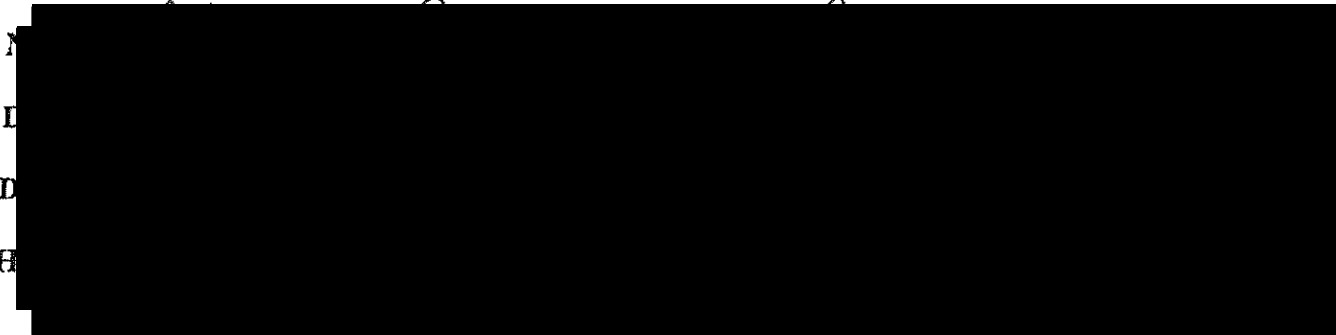
Under what trade name will this business operate? Franklin Classic
Mercy Health Services - Mercy Community
Healthcare.
City of Franklin business account number NA

City of Franklin business account number

5. Location of the business by street address. For special event, list location of the event.

at 3rd Av.
Franklin city square area downtown
Phone number of the business 615-790-0567

6. Please give the following information on the person who will be managing the business. This person is an owner ☐ or a managing agent ☒.



7. Specify the identity, address and daytime contact phone number of the person to receive annual privilege tax notices and any other communication from the City.

Name Allison Bender Title Director of Development
Mailing Address 1113 Montreesboro Rd suite 319
City, State, Zip Franklin TN 37064
Daytime contact phone number 615-790-0567
615-397-4547

8. Will the permit be used to operate two or more restaurants or other businesses under the same permit as permitted by T.C.A. Section 57-5-103(a)(4) within the same 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)

9. Do you own the premises on which you will operate? NO
If no, please give the name and address of the property owner.

City of Franklin

10. Has any person having at least 5% ownership interest, managers or employees of the business been convicted of any violation of beer or alcoholic beverage laws or any crime (other than minor traffic violations) within last ten (10) years? ____ If so, give particulars of each charge, court and date convicted.

no

11. Has this owner or the owners organization had a beer permit revoked, suspended, or denied in the State of Tennessee? Yes ____ No X If so, please give date, place and cause of said revocation.

no

12. Give the name and address of the former beer permittee at this establishment.

none

13. Give applicant's history of involvement in the beer business, if any. - (Davidson Co.)

none - special event permit
requested rarely with Muscular Dystrophy
Association many yrs ago

14. Give applicant's employment record for the past 10 years.

The Shalom Foundation, Franklin TN
Mercy Community Healthcare, Franklin TN

15. What is the exact nature of the business in which you are applying for a beer permit?
(Restaurant, tavern, motel, etc.)

Community event - food & beverages -

16. Will a full course menu be served? Franklin Classic
→ food trucks
17. Will separate and sanitary facilities be maintained for men and for women? port-o-lets
18. Will dancing be allowed on your premises? NO - a foot race
If yes, do you acknowledge that section 9-102 of the Franklin Municipal Code prohibits the operation of establishments allowing dancing between 1:30 AM and 8:00 AM? N/A

TRAINING POLICY:

All beer applications must have a training policy submitted with application. This policy must include training regarding the sale of beer to minors.

19. Please read the following and upon signature of this application, you do understand and agree to comply if you are granted a permit.

- (a) You will not sell beer or similar beverages except at the place or places for which the beer board has issued your permit.
- (b) You will not sell beer or any like beverage except in accordance with the terms of said permit.
- (c) If this application is made for permit to sell and not for consumption on the premises, you will not sell for consumption on the premises and not allow consumption on the premises.
- (d) You will rigidly enforce the law against sales to minors.
- (e) You will prohibit gambling at your establishment and understand that the conduct of such activities on the premises will result in revocation of your permit.
- (f) You will secure a certificate or statement from the health department or health officer that the premises covered by the application meet the requirements of the ordinances of the City of Franklin and the laws of the State of Tennessee.
- (g) You will not attempt to transfer this permit to anyone else.
- (h) You will display this permit in a prominent place in your establishment.
- (i) You will not sell or distribute beer between the hours of 3:00 AM and 6:00 AM (8:00 AM for on premises consumption) during the week and between the hours of 3:00 AM Sunday and 12:00 Noon Sunday (10:00 AM for on premises consumption).
- (j) You will prohibit the congregation at your establishment of those who reasonably appear to be intoxicated, lawless, rowdy, or prostitutes.
- (k) You will not allow any liquor with alcoholic content of greater than five percent (5%) to be consumed on the premises. ✓

- (l) You will not allow any sale or delivery of beer for consumption on the premises outside of the building, it being the intention to prohibit the sale of beer by what is commonly known as "curb service" or "curb sales" of beer.
- (m) You will comply with all requirements of section 2-201 through 2-229 of the municipal code of the City of Franklin.

A non-refundable \$250 fee must accompany this application and the application shall be submitted at least fifteen (15) days prior to the Beer Board meeting at which it is to be considered. If the application is approved you are required to provide documentation of sales tax registration to the city within ten days of approval. Any applicant making false statement in this application shall forfeit his permit and shall not be eligible to receive any permit for a period of ten years.

A privilege tax of \$100 is imposed on the business of selling, distributing, storing or manufacturing beer in this state effective January 1, 1994 and each successive January 1. Any holder of a beer permit issued after January 1, 1994 shall pay a pro rata portion of this annual tax when the permit is issued.

I hereby make application to the City of Franklin Beer Board for a beer permit.

The signing of this application acknowledges that I am aware 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.

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 public places of public gathering, or otherwise interferes with public health, safety and morals.

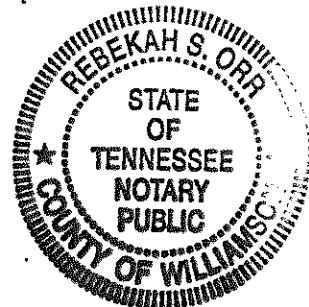
Melvin Bender
Signature of Applicant/Owner (or Authorized Corporate Officer)

On behalf of: Mercy Health Services
Name of Business Entity

Sworn to and subscribed before me this June 20 day of 16

Rebekah S. Orr
Notary Public

My Commission Expires: JAN. 19. 2020



Official Use Only

Application Fee \$ 250.00 Date Paid 6/28/16

Privilege Tax \$ _____ Date Paid _____

Board Meeting Date 7/12/16

CITY OF FRANKLIN

PURSUANT TO SECTION 8 CHAPTER 2 OF THE CODE OF THE CITY OF FRANKLIN, TENNESSEE, AND THE REQUIREMENTS OF 57-5-101 ET. SEQ. OF THE TENNESSEE CODE ANNOTATED, I HEREBY MAKE APPLICATION FOR:

- ☐ ON PREMISES PERMIT
☐ OFF PREMISES PERMIT
☒ ON AND OFF PREMISES PERMIT
☐ MANUFACTURER'S OR DISTRIBUTOR'S PERMIT
☐ SPECIAL EVENTS PERMIT
- DATE OF EVENT _____
 HOURS OF EVENT _____

DATE PERMIT NEEDED 07/01/16

PERMITS SHALL BE ISSUED TO THE OWNER OF THE BUSINESS,
WHETHER A PERSON, FIRM, CORPORATION, JOINT-STOCK COMPANY,
SYNDICATE, OR ASSOCIATION.

1. Owner (Applicant) ROBERT FLETCHER

Person Firm Corp LLC ☒ Joint-stock co. Syndicate Association

2. List all persons, firm, joint-stock companies, syndicates, or associations having at least a 5% ownership interest in the business (attach additional sheet, if needed). Please give name and address.

GABRIELA FLETCHER - MEMBER/OWNER
2663 SUNSTAN PLACE DRIVE, THOMASONS STN TN 37179.

3. If the applicant is a corporation, are they authorized to do business in the State of Tennessee? YES

4. Under what trade name will this business operate?

BOMBAY BISTRO

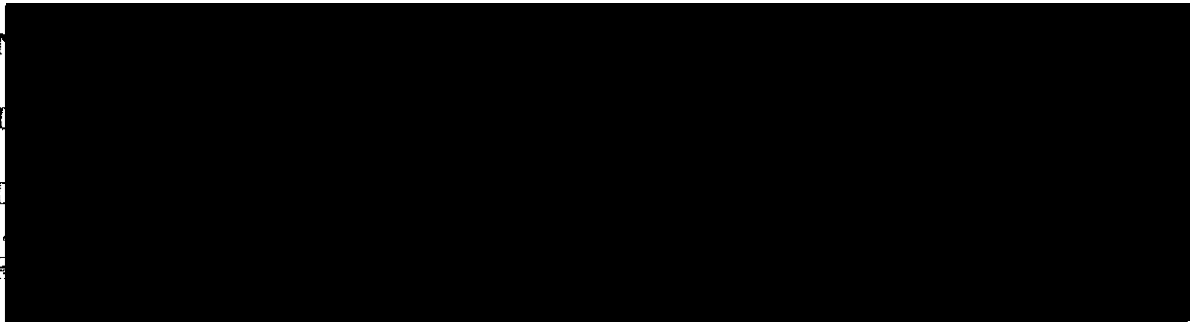
City of Franklin business account number APPLIES FOR
RECEIPT #006922
dt 6/27/16.

5. Location of the business by street address. For special event, list location of the event.

9040 CAROTHERS PKWY # B-111 FRANKLIN TN 37067

Phone number of the business 615 771 9105

6. Please give the following information on the person who will be managing the business. This person is an owner ☒ or a managing agent ☐.



7. Specify the identity, address and daytime contact phone number of the person to receive annual privilege tax notices and any other communication from the City.

Name ROBERT FLETCHER Title MEMBER/OWNER

Mailing Address 9040 CAROTHERS PKWY # B-111

City, State, Zip FRANKLIN TN 37067

Daytime contact phone number 615 771 9105

8. Will the permit be used to operate two or more restaurants or other businesses under the same permit as permitted by T.C.A. Section 57-5-103(a)(4) within the same building? Yes ☐ No ☒.

If so, specify number 0. List the names of the restaurants or other businesses and describe their location (use additional sheet if necessary)

NA

9. Do you own the premises on which you will operate? No
If no, please give the name and address of the property owner.

JOHN SCHORER, SUITE 212, 108 FOURTH AVENUE S.
FRANKLIN TN 37064

10. Has any person having at least 5% ownership interest, managers or employees of the business been convicted of any violation of beer or alcoholic beverage laws or any crime (other than minor traffic violations) within last ten (10) years? No If so, give particulars of each charge, court and date convicted.

No

11. Has this owner or the owners organization had a beer permit revoked, suspended, or denied in the State of Tennessee? Yes ___ No ☒ If so, please give date, place and cause of said revocation.

NA

12. Give the name and address of the former beer permittee at this establishment.

VIMAL GANATRA, 5005 ABINGTON RIDGE LAKE
FRANKLIN TN 37067

13. Give applicant's history of involvement in the beer business, if any.

NONE

14. Give applicant's employment record for the past 10 years.

FLEET MASTER - OWNER SINCE 1989

15. What is the exact nature of the business in which you are applying for a beer permit?
(Restaurant, tavern, motel, etc.)

FOOD SERVICE - RESTAURANT

16. Will a full course menu be served? YES
17. Will separate and sanitary facilities be maintained for men and for women? _____
18. Will dancing be allowed on your premises? NO
If yes, do you acknowledge that section 9-102 of the Franklin Municipal Code prohibits the operation of establishments allowing dancing between 1:30 AM and 8:00 AM? NA

TRAINING POLICY:

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I hereby make application to the City of Franklin Beer Board for a beer permit.

The signing of this application acknowledges that I am aware 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.

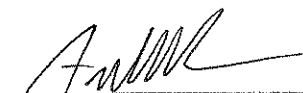
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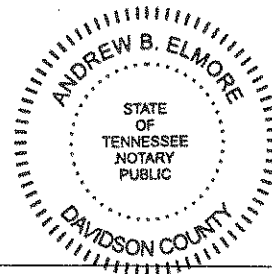
Signature of Applicant/Owner (or Authorized Corporate Officer)

On behalf of: BOMBAY BOTTLED
Name of Business Entity

Sworn to and subscribed before me this 28th day of June, 2016


Notary Public

My Commission Expires: 8 May 2018



Official Use Only

Application Fee \$ 250.⁰⁰

Date Paid 6/28/16

Privilege Tax \$ 50.⁰⁰

Date Paid 6/28/16

Board Meeting Date 7/12/16



Bombay Bistro

ALL EMPLOYEES AT BOMBAY BISTRO MUST FOLLOW PROCEDURES AS UNDER

Prohibited Conduct

Alcoholic beverages may not be sold to anyone under 21 years of age.
Alcoholic beverages may not be sold to intoxicated persons.
Alcoholic beverages may not be sold to someone you suspect is buying it for underage people.
Alcoholic beverages may not be sold or consumed between the hours of 3:00 AM – 6:00 AM on weekdays or between the hours of 3:00 AM and 12:00 PM on Sunday.
(Restaurants only may serve on premises only beginning at 10:00 AM)

Checking Identification

If someone does not clearly appear to be 21 years old, ask for, look at and read their identification. If there is any question about the age or the form of identification, do not sell alcoholic beverages to that person.

Forms of identification that should be used are (1) A valid driver's license
(2) A State issued photo ID.

Check the identification to make sure there have not been any alterations of any kind, especially to the date of birth, such as any erasures, type style that does not match, or damaged paper surfaces. Also check for signs of altered signature. Compare the photo on the identification and the physical characteristics shown on the identification.

Check for counterfeit drivers licenses. They are completely different from the actual license; however they are designed to look like the valid state license.

Possible actions to take

If the ID proves the customer to be underage or there is a doubt about legally selling to this person, it is best to move the product out of reach and sight of the customer and explain why you cannot legally sell the product with something like "I'm sorry, but the law says I cannot sell you alcohol if you appear to be (underage), (intoxicated), (using false ID), etc.

Stay in control. This will show the offender, as well as other customers, that you know what to do and you are in control.

Police may be needed in some cases. If the customer becomes violent and/or makes threats, call 911 for the police.

9040 CAROTHERS PARKWAY FRANKLIN TN 37067

TEL : 615.771.9105 Fax : 615.771.9104

APPLICATION FOR BEER PERMIT
STATE OF TENNESSEE
CITY OF FRANKLIN

PURSUANT TO SECTION 8 CHAPTER 2 OF THE CODE OF THE CITY OF FRANKLIN, TENNESSEE, AND THE REQUIREMENTS OF 57-5-101 ET. SEQ. OF THE TENNESSEE CODE ANNOTATED, I HEREBY MAKE APPLICATION FOR:

___ ON PREMISES PERMIT
X OFF PREMISES PERMIT
___ ON AND OFF PREMISES PERMIT
___ MANUFACTURER'S OR DISTRIBUTOR'S PERMIT
___ SPECIAL EVENTS PERMIT HOURS OF EVENT _____

DATE PERMIT NEEDED _____

PERMITS SHALL BE ISSUED TO THE OWNER OF THE BUSINESS, WHETHER A PERSON, FIRM, CORPORATION, JOINT-STOCK COMPANY, SYNDICATE, OR ASSOCIATION.

1. Applicant (Owner) Aldi Inc. (Tennessee)

Person ___ Firm ___ Corp X LLC ___ Joint-stock co. ___ Syndicate ___ Association ___
2. List all persons, firm, joint-stock companies, syndicates, or associations having at least a 5% ownership interest in the business (attach additional sheet, if needed). Please give name and address.

ALDI Inc. 1200 N. Kirk Road, Batavia, IL 60510

3. If the applicant is a corporation, are they authorized to do business in the State of Tennessee? yes
4. Under what trade name will this business operate?
Aldi Inc. (Tennessee)

5. Location of the business by street address. Ste. # 225
209 S. Royal Oaks Blvd., Franklin, Tennessee 37064

Phone number of the business (615) 790-6020

6. Please give the following information on the person who will be managing the business. This person is an owner _____ or a managing agent ☒ _____.

Name _____

Do _____

Do _____

Home _____

7. Specify the identity, address and daytime contact phone number of the person to receive annual privilege tax notices and any other communication from the City.

Name Darlene Thompson Title _____

Mailing Address 2080 Aldi Blvd.

City, State, Zip Mt. Juliet, TN 37122

Daytime contact phone number (615) 449-8840

8. Will the permit be used to operate two or more restaurants or other businesses under the same permit as permitted by T.C.A. Section 57-5-103(a)(4) within the same building? Yes _____ No ☒.

If so, specify number n/a. List the names of the restaurants or other businesses and describe their location (use additional sheet if necessary)

n/a

9. Do you own the premises on which you will operate? No
If no, please give the name and address of the property owner.

Centro Heritage Watson Glen LLC c/o Centro Watt; 131 Darmouth Street, Boston, MA 02116

10. Has any person having at least 5% ownership interest, managers or employees of the business been convicted of any violation of beer or alcoholic beverage laws or any crime (other than minor traffic violations) within last ten (10) years? no If so, give particulars of each charge, court and date convicted.

n/a

11. Has this owner or the owners organization had a beer permit revoked, suspended, or denied in the State of Tennessee? Yes ___ No X If so, please give date, place and cause of said revocation.

n/a

12. Give the name and address of the former beer permittee at this establishment.

none

13. Give applicant's history of involvement in the beer business, if any.
The applicant and affiliated companies sell beer across the eastern United States.

14. Give applicant's employment record for the past 10 years.

n/a

15. What is the exact nature of the business in which you are applying for a beer permit? (Restaurant, tavern, motel, etc.)

Grocery store

16. Will a full course menu be served? no

17. Will separate and sanitary facilities be maintained for men and for women? yes

18. Will dancing be allowed on your premises? no
If yes, do you acknowledge that section 9-102 of the Franklin Municipal Code prohibits the operation of establishments allowing dancing between 1:30 AM and 8:00 AM? n/a

19. Does your company have a training policy for employees regarding the sale of beer to minors? Yes X No

If yes, explain the procedure in detail or you may provide a separate attachment.

We train every employee for age identification and intoxication.

See attached training policy

If no, do you plan to implement a training policy in the future? n/a

20. Please read the following and upon signature of this application, you do understand and agree to comply if you are granted a permit.

- (a) You will not sell beer or similar beverages except at the place or places for which the beer board has issued your permit.
- (b) You will not sell beer or any like beverage except in accordance with the terms of said permit.
- (c) If this application is made for permit to sell and not for consumption on the premises, you will not sell for consumption on the premises and not allow consumption on the premises.
- (d) You will rigidly enforce the law against sales to minors.
- (e) You will prohibit gambling at your establishment and understand that the conduct of such activities on the premises will result in revocation of your permit.
- (f) You will secure a certificate or statement from the health department or health officer that the premises covered by the application meet the requirements of the ordinances of the City of Franklin and the laws of the State of Tennessee.
- (g) You will not attempt to transfer this permit to anyone else.
- (h) You will display this permit in a prominent place in your establishment.
- (i) You will not sell or distribute beer between the hours of 3:00 AM and 6:00 AM (8:00 AM for on premises consumption) during the week and between the hours of 3:00 AM Sunday and 12:00 Noon Sunday (10:00 AM for on premises consumption).
- (j) You will prohibit the congregation at your establishment of those who reasonably appear to be intoxicated, lawless, rowdy, or prostitutes.
- (k) You will not allow any liquor with alcoholic content of greater than five percent (5%) to be consumed on the premises.
- (l) You will not allow any sale or delivery of beer for consumption on the premises outside of the building, it being the intention to prohibit the sale of beer by what is commonly known as "curb service" or "curb sales" of beer.
- (m) You will comply with all requirements of section 2-201 through 2-229 of the municipal code of the City of Franklin.

A non-refundable \$250 fee must accompany this application and the application shall be submitted at least fifteen (15) days prior to the Beer Board meeting at which it is to be considered. If the application is approved you are required to provide documentation of sales tax registration to the city within ten days of approval. Any applicant making false statement in this application shall forfeit his permit and shall not be eligible to receive any permit for a period of ten years.

A privilege tax of \$100 is imposed on the business of selling, distributing, storing or manufacturing beer in this state effective January 1, 1994 and each successive January 1. Any holder of a beer permit issued after January 1, 1994 shall pay a pro rata portion of this annual tax when the permit is issued.

I hereby make application to the City of Franklin Beer Board for a beer permit.

The signing of this application acknowledges that I am aware 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.

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 public places of public gathering, or otherwise interferes with public health, safety and morals.

ALDI INC. (TENNESSEE)

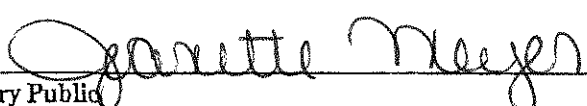
By: 

Signature of Applicant/Owner (or Authorized Corporate Officer) David Behm, President

On behalf of: ALDI INC. (TENNESSEE)

Name of Business Entity

Sworn to and subscribed before me this 30 day of June, 20 16

Notary Public 

My Commission Expires: January 4, 2019

OFFICIAL SEAL
JEANETTE MEYER
Notary Public - State of Illinois
My Commission Expires Jan 4, 2019

Official Use Only

Application Fee \$ 250.⁰⁰

Date Paid 6/22/16

Privilege Tax \$ 50.⁰⁰

Date Paid 6/22/16

Board Meeting Date 7 / 12 / 16

National Procedures for Alcohol Sales

1. Alcoholic beverages will not be sold to any person under the age of 21. This policy is to be posted on a sign in the area where alcoholic beverages are displayed.
2. Alcoholic beverages will not be sold to any person who is visibly intoxicated. If customer appears intoxicated, the store manager will be notified and will address the situation.
3. In order to be sold an alcoholic beverage, any customer who appears to be under 40 years of age is required to present documentation that shows him or her to be 21 years of age or older. Acceptable documentation is a driver's license with photo or photo identification issued by a governmental body. Only the individual attempting to purchase alcohol is required to present identification.
 - a) The employee will check the identification to ascertain that it is authentic. The manager should be informed if there is any appearance of forgery or tampering.
 - b) In the absence of authentic identification providing the individual to be 21 or older, or in the case of doubt, the employee will apologize and refuse the sale of alcohol to the customer.
4. The sale of alcoholic beverages will only occur during approved hours according to state or local laws.
5. Only employees 21 years of age or older will be permitted to sell alcoholic beverages unless state or local laws permit otherwise (i.e., 18 years of age).
6. No sale of damaged or unlabeled alcohol containers should be permitted, at any time, to either customers or employees.
7. Any damaged alcohol containers should be either returned to the supplier (according to the supplier agreement) or emptied, prior to disposal, in order to prevent consumption of this product.
8. Any return of an alcoholic beverage will result in the customer either receiving a refund on that item or a replacement product, unless state or local laws permit otherwise. Any apparent abuse of this return policy should be reported to the manager.
9. Any misplaced alcohol containers should be immediately returned to the appropriate section of the store.
10. All employees will be trained in the handling and sale of alcoholic beverages. Signed copies of the National Policy, training checklist, and store-specific procedures regarding the sale of alcoholic beverages will be placed in each employee's personnel file.
11. Consumption of alcoholic beverages by any person on ALDI premises is strictly prohibited.
12. The store manager will ensure compliance with all ALDI policies regarding the sales of alcoholic beverages (i.e., checking proof of age).

Store Employee Signature _____ Date _____

Store Employee Printed Name _____

District Manager _____ Date _____

ALCOHOL SALES TRAINING

Trainee Trainer

1. Review the two major types of "customers of concern" for whom alcohol sales are prohibited.
 - a. The underage customer
 - b. The intoxicated customer
2. Review how to identify the underage customer.
 - a. Require a valid, government-issued I.D. for any person who appears 40 years of age or younger.
 - 1) Ensure I.D. has a name, picture and/or physical description, signature, and date of birth
 - 2) Compare age, as shown on I.D., to general impression
 - 3) Compare photo on I.D. to customer
 - 4) Check for alterations or erasures on I.D.
 - 5) Check the "under 21 until" date printed on the I.D., if applicable
 - 6) Ensure the I.D. has not expired
 - b. Observe verbal and non-verbal signs to validate the I.D.
 - 1) Physical signs of nervous tension
 - 2) High-pitched or cracking voice
 - 3) Excessive talking
 - 4) Incorrect replies to questions
 - 5) Slight physical build
 - 6) Lack of facial hair for men
 - 7) Clothing inappropriate for age
 - 8) Jewelry inappropriate for age
 - c. Discuss how to handle the underage customer.
 - 1) Politely but firmly refuse to sell by explaining the legal buying age
 - 2) Call for a manager, if applicable, to diffuse the situation
3. Review how to identify the intoxicated customer.
 - a. Observe verbal and non-verbal signs to detect excessive consumption of alcohol.
 - 1) Boisterous, loud or profane language
 - 2) Incoherent, garbled or slurred speech
 - 3) Uncoordinated actions or movements
 - 4) Odor of alcohol detected from breath or clothing
 - 5) Staggered walk
 - 6) Flushed complexion
 - 7) Bloodshot or glassy eyes
 - 8) Disheveled hair or clothing
 - b. Discuss how to handle the intoxicated customer.
 - 1) Call for a manager
 - 2) Politely but firmly refuse to sell by explaining concerns about the customer's current state of insobriety
 - 3) Avoid emotionally charged words such as "drunk" or "loaded"
 - 4) Avoid confrontation at the register; do not show frustration or annoyance
 - 5) Explain that no judgment is being made about the customer; policy is merely being followed
4. Review ALDI National Procedure for Alcohol Sales.
5. Review store specific policies/procedures governing the sale of alcohol.
6. Review register system functions.
 - a. Prompts for underage seller
 - b. Prompts for underage customer

- 1) Review entry of birth date
 - 2) Review prompt that the birth date has been verified
- c. EBT is prohibited tender for alcohol purchase

I have completed my training and understand that ALDI policy prohibits the sale of any alcoholic beverages to any person under the age of 21 and/or any person appearing to be intoxicated. I also understand that any individual who appears to be 40 years of age or younger must present a valid, government-issued I.D. in order to purchase any alcoholic beverages. I have been advised of the policy and understand the penalty for violating it.

Store # Trainee's Signature Date

Store # Manager's Signature Date

Store # District Manager's Signature Date

City of Franklin

P O Box 705
Franklin, TN 37065
(615) 791-3225

DATE: 6/22/16

TO: POLICE CHIEF

FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR

RE: RECORDS CHECK FOR APPLICATION FOR BEER PERMIT

BEER BOARD MEETING DATE 7/12/16

☐ Applicant is requesting a temporary permit. Please return ASAP.

☒ Please return by 6/29/16 to provide information for Beer Board meeting agenda.

Name of Business Aldi Inc. (Tennessee)

Location of Business 209 S. Royal Oaks Blvd. Ste. 225

Name of applicant Aldi Inc. (Tennessee)

Manager

Driver

Date of

- ☐ Recommend. Based on information available to date, the applicant has no record requiring denial of the permit under the provisions of Title 8 of the Franklin Municipal Code.
- ☐ Not recommending. Based on information available to date, the Police Dept. is not recommending approval of a permit.

CENTRAL RECORDS DIVISION
FRANKLIN POLICE DEPT

By _____

Date _____

Approved _____
Signature

POLICE DEPARTMENT

Deborah Y. Faulkner, EdD
Chief of Police



Dr. Ken Moore
Mayor

Eric S. Stuckey
City Administrator

June 27, 2016

TO: Chief Deborah Y. Faulkner

FROM:

Mary E. Casteel
Mary E. Casteel, Communications Support Coordinator

SUBJECT: Beer Board Background Checks

A check of Franklin Police Department records was completed on Jesus Lopez, Managing Agent for Aldi Inc. and found to be clear.

A check was completed through LexisNexis/Accurint and revealed the following:

-
-

Requested by: Delisa Pugh

City of Franklin

P O Box 705
Franklin, TN 37065
(615) 791-3225

DATE: 6/22/16
TO: CODES DEPT
FIRE DEPT
FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR
RE: BUILDING INSPECTIONS FOR APPLICATION FOR BEER PERMIT

☐ ON PREMISES PERMIT
☒ OFF PREMISES PERMIT
☐ ON AND OFF PREMISES PERMIT
☐ MANUFACTURER'S OR DISTRIBUTOR'S PERMIT
☐ SPECIAL EVENTS PERMIT

☐ Applicant is requesting a temporary permit. Please return ASAP.

☒ Please return by 6/29/16 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 7/12/16

Name of Business Aldi Inc. (Tennessee)

Location of Business 209 S. Royal Oaks Blvd. Ste. 225

CODES DEPT

[Signature]

Building Inspector

6/22/16

Date

FIRE DEPT

Fire Inspector

Date

City of Franklin

P O Box 705
Franklin, TN 37065
(615) 791-3225

DATE:

6/22/16

TO:

CODES DEPT
FIRE DEPT

FROM:

CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR

RE:

BUILDING INSPECTIONS FOR APPLICATION FOR BEER PERMIT

- ☐ ON PREMISES PERMIT
☒ OFF PREMISES PERMIT
☐ ON AND OFF PREMISES PERMIT
☐ MANUFACTURER'S OR DISTRIBUTOR'S PERMIT
☐ SPECIAL EVENTS PERMIT

☐

Applicant is requesting a temporary permit. Please return ASAP.

☒

Please return by 6/29/16 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date

7/12/16

Name of Business

Aldi Inc. (Tennessee)

Location of Business

209 S. Royal Oaks Blvd. Ste. 225

CODES DEPT

Building Inspector

Date

FIRE DEPT

Fire Inspector

Date

Wayne Mobley

6-27-16

PURSUANT TO SECTION 8 CHAPTER 2 OF THE CODE OF THE CITY OF FRANKLIN, TENNESSEE, AND THE REQUIREMENTS OF 57-5-101 ET. SEQ. OF THE TENNESSEE CODE ANNOTATED, I HEREBY MAKE APPLICATION FOR:

DATE PERMIT NEEDED _____

PERMITS SHALL BE ISSUED TO THE OWNER OF THE BUSINESS, WHETHER A PERSON, FIRM, CORPORATION, JOINT-STOCK COMPANY, SYNDICATE, OR ASSOCIATION.

1. Owner (Applicant) McKelvey Markets, LLC
 Person ___ Firm ___ Corp ___ LLC ☒ Joint-stock co. ___ Syndicate ___ Association ___
2. List all persons, firm, joint-stock companies, syndicates, or associations having at least a 5% ownership interest in the business (attach additional sheet, if needed). Please give name and address.
Cindy McKelvey
419 Chatworth Ct. Franklin, TN 37064
3. If the applicant is a corporation, are they authorized to do business in the State of Tennessee? _____
4. Under what trade name will this business operate?
McKelvey's Market
 City of Franklin business account number _____

5. Location of the business by street address. For special event, list location of the event.

1110 West Main St. Franklin, TN 37064

Phone number of the business 615-791-9244

6. Please give the following information on the person who will be managing the business. This person is an owner ☒ or a managing agent

Name

Dr

Da

He

7. Specify the identity, address and daytime contact phone number of the person to receive annual privilege tax notices and any other communication from the City.

Name Cindy McKelvey Title Officer

Mailing Address 419 Chatsworth Ct.

City, State, Zip Franklin, TN 37064

Daytime contact phone number 931-286-6396

8. Will the permit be used to operate two or more restaurants or other businesses under the same permit as permitted by T.C.A. Section 57-5-103(a)(4) within the same 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)

9. Do you own the premises on which you will operate? No
If no, please give the name and address of the property owner.

Morgan Reynolds
205 Lancaster Dr. Franklin, TN

10. Has any person having at least 5% ownership interest, managers or employees of the business been convicted of any violation of beer or alcoholic beverage laws or any crime (other than minor traffic violations) within last ten (10) years? NO If so, give particulars of each charge, court and date convicted.

11. Has this owner or the owners organization had a beer permit revoked, suspended, or denied in the State of Tennessee? Yes ___ No ✓ If so, please give date, place and cause of said revocation.

12. Give the name and address of the former beer permittee at this establishment.

Marissa McKelvey, McKelco, Inc
511 Clearbrook Court Franklin, TN 37064

13. Give applicant's history of involvement in the beer business, if any.

Owner previously operated McKelco Inc, which sold
beer, at this same location. Business type was changed
solely for tax purposes.

14. Give applicant's employment record for the past 10 years.

store owner / self employed

15. What is the exact nature of the business in which you are applying for a beer permit?
(Restaurant, tavern, motel, etc.)

convenience store

16. Will a full course menu be served? NO
17. Will separate and sanitary facilities be maintained for men and for women? NO
18. Will dancing be allowed on your premises? NO
If yes, do you acknowledge that section 9-102 of the Franklin Municipal Code prohibits the operation of establishments allowing dancing between 1:30 AM and 8:00 AM? _____

TRAINING POLICY:

All beer applications must have a training policy submitted with application. This policy must include training regarding the sale of beer to minors.

19. Please read the following and upon signature of this application, you do understand and agree to comply if you are granted a permit.
- (a) You will not sell beer or similar beverages except at the place or places for which the beer board has issued your permit.
 - (b) You will not sell beer or any like beverage except in accordance with the terms of said permit.
 - (c) If this application is made for permit to sell and not for consumption on the premises, you will not sell for consumption on the premises and not allow consumption on the premises.
 - (d) You will rigidly enforce the law against sales to minors.
 - (e) You will prohibit gambling at your establishment and understand that the conduct of such activities on the premises will result in revocation of your permit.
 - (f) You will secure a certificate or statement from the health department or health officer that the premises covered by the application meet the requirements of the ordinances of the City of Franklin and the laws of the State of Tennessee.
 - (g) You will not attempt to transfer this permit to anyone else.
 - (h) You will display this permit in a prominent place in your establishment.
 - (i) You will not sell or distribute beer between the hours of 3:00 AM and 6:00 AM (8:00 AM for on premises consumption) during the week and between the hours of 3:00 AM Sunday and 12:00 Noon Sunday (10:00 AM for on premises consumption).
 - (j) You will prohibit the congregation at your establishment of those who reasonably appear to be intoxicated, lawless, rowdy, or prostitutes.
 - (k) You will not allow any liquor with alcoholic content of greater than five percent (5%) to be consumed on the premises.

- (l) You will not allow any sale or delivery of beer for consumption on the premises outside of the building, it being the intention to prohibit the sale of beer by what is commonly known as "curb service" or "curb sales" of beer.
- (m) You will comply with all requirements of section 2-201 through 2-229 of the municipal code of the City of Franklin.

A non-refundable \$250 fee must accompany this application and the application shall be submitted at least fifteen (15) days prior to the Beer Board meeting at which it is to be considered. If the application is approved you are required to provide documentation of sales tax registration to the city within ten days of approval. Any applicant making false statement in this application shall forfeit his permit and shall not be eligible to receive any permit for a period of ten years.

A privilege tax of \$100 is imposed on the business of selling, distributing, storing or manufacturing beer in this state effective January 1, 1994 and each successive January 1. Any holder of a beer permit issued after January 1, 1994 shall pay a pro rata portion of this annual tax when the permit is issued.

I hereby make application to the City of Franklin Beer Board for a beer permit.

The signing of this application acknowledges that I am aware 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.

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 public places of public gathering, or otherwise interferes with public health, safety and morals.

Cindy McKelvey

Signature of Applicant/Owner (or Authorized Corporate Officer)

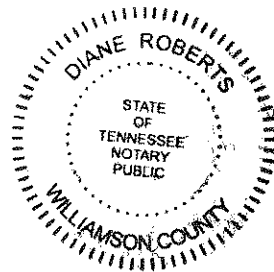
On behalf of: McKelvey Markets, LLC
Name of Business Entity

Sworn to and subscribed before me this 24 day of June, 2016

Diane Roberts

Notary Public

My Commission Expires: Jan 24, 2017



Official Use Only

Application Fee \$ 250.⁰⁰ Date Paid 6/24/16

Privilege Tax \$ 50.⁰⁰ Date Paid 6/24/16

Board Meeting Date 7/12/16

McKelvey Markets, LLC Alcohol Sales Training Policy

Although McKelvey Markets has no employees other than the owners, these are the company policies for alcohol sales:

1. No alcohol sales to anyone under the age of 21 (TWENTY-ONE) years of age.
 2. Anyone wishing to purchase alcohol must have an ID.
 3. No alcohol may be sold to anyone we suspect is trying to purchase alcohol for someone underage.
 4. No alcohol may be sold to an intoxicated customer.
 5. No alcohol may be sold to anyone with an altered ID.
 6. The face on the ID must match the face of the customer; otherwise no sale can be made.
 7. A hologram of the state must appear on the ID; otherwise no sale can be made.
 8. No alcohol may be sold between the hours of 3:00AM and 6:00AM on weekdays and Saturday.
 9. No alcohol may be sold between the hours of 3:00AM and NOON on Sunday.
 10. Our store only accepts a valid TN driver's license or TN photo ID as proper ID. We do not sell alcohol to anyone with an out of state ID.
- We own a cash register that will not ring up alcohol sales without birthdate input.

City of Franklin

P O Box 705
Franklin, TN 37065
(615) 791-3225

DATE: 7/12/16

TO: POLICE CHIEF

FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR

RE: RECORDS CHECK FOR APPLICATION FOR BEER PERMIT

BEER BOARD MEETING DATE 7/12/16

☒ Applicant is requesting a temporary permit. Please return ASAP.

☐ Please return by _____ to provide information for Beer Board meeting agenda.

Name of Business McKelvey's Market

Location of Business 1110 West Main St.

Name of applicant McKelvey Markets LLC

Managing

Drivers License

Date of Birth

- ☐ Recommend. Based on information available to date, the applicant has no record requiring denial of the permit under the provisions of Title 8 of the Franklin Municipal Code.
- ☐ Not recommending. Based on information available to date, the Police Dept. is not recommending approval of a permit.

CENTRAL RECORDS DIVISION
FRANKLIN POLICE DEPT

By _____

Date _____

Approved _____
Signature

POLICE DEPARTMENT

Deborah Y. Faulkner, EdD
Chief of Police



Dr. Ken Moore
Mayor

Eric S. Stuckey
City Administrator

June 27, 2016

TO: Chief Deborah Y. Faulkner

FROM:

Mary E. Casteel
Mary E. Casteel, Communications Support Coordinator

SUBJECT: Beer Board Background Checks

A check of Franklin Police Department records was completed on Cindy McKelvey, Managing Agent for McKelvey's Market and found to be clear.

A check was completed through LexisNexis/Accurint and found to be clear.

Requested by: Delisa Pugh

City of Franklin

P O Box 705
Franklin, TN 37065
(615) 791-3225

DATE: 6/24/16

TO: **CODES DEPT**
FIRE DEPT

FROM: **CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR**

RE: **BUILDING INSPECTIONS FOR APPLICATION FOR BEER PERMIT**

- ☐ ON PREMISES PERMIT
☒ OFF PREMISES PERMIT
☐ ON AND OFF PREMISES PERMIT
☐ MANUFACTURER'S OR DISTRIBUTOR'S PERMIT
☐ SPECIAL EVENTS PERMIT

*CHANGE IN
Ownership*

☒ Applicant is requesting a temporary permit. Please return ASAP.

☐ Please return by _____ to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 7/12/16

Name of Business McKelvey's Market

Location of Business 1110 West Main St.

CODES DEPT

[Signature]
Building Inspector

6-28-16
Date

FIRE DEPT

Fire Inspector

Date