



City of Franklin

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

Meeting Agenda

Beer Board

Tuesday, June 9, 2015

4:30 PM

Board Room

Call To Order

Approval of Minutes

1. [15-0538](#) Approval of Minutes from May 12, 2015 Beer Board meeting.
2. [15-0501](#) Consider application of JRS & Associates LLC D/B/A Kate's Kitchen, 3301 Aspen Grove, #105, Judith Spivey, Managing Agent, For On Premises Consumption.

Attachments: [Kate's Kitchen.pdf](#)
3. [15-0502](#) Consider Application Of Friends Of Franklin Parks LLC D/B/A Raise The Roofs, 239 Franklin Road, (Harlinsdale), Mindy Tate, Managing Agent, For Special Event, On Premises Consumption. Event Date & Hours: August 15, 2015, 3:00 PM Until 8:00 PM.

Attachments: [Raise the Roofs.pdf](#)
4. [15-0537](#) Consider Application Of SEK Investments LLC D/B/A Lyrics Restaurant & Catering, 230 Franklin Road, Suite 11I, Patricia McCracken, Managing Agent, For On And Off Premises Consumption.

Attachments: [Lyrics.pdf](#)

Other Business

Adjournment

ANYONE REQUESTING ACCOMMODATIONS DUE TO DISABILITIES SHOULD CONTACT A.D.A. COORDINATOR, AT 550-5721 AT LEAST 10 DAYS PRIOR TO THE MEETING, IF POSSIBLE.

15-28

[illegible]

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

- Owner (Applicant) Judith Spivey JRS & Associates, LLC.
- Person ☐ Firm ☐ Corp ☐ LLC ☒ Joint-stock co. ☐ Syndicate ☐ Association ☐

Judith Spivey - 10090
118 Jamison O Station Ln, Franklin 37064

- If the applicant is a corporation, are they authorized to do business in the State of Tennessee? yes
- Under what trade name will this business operate?
Kate's Kitchen

City of Franklin business account number 2016 81378

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

#105
3301 Aspen Grove Franklin TN 37067

Phone number of the business (615) 472-1390

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

Drivers

Date of

Home p

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 Judith Spivey Title Owner

Mailing Address 3301 Aspen Grove #105

City, State, Zip Franklin, TN 37067

Daytime contact phone number 615-920-2944

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.

Eric Powers

Aspen Grove Franklin, TN
37067

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.

Kate's Kitchen - Bernie Strawn

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.

Cassidy Turley 2013-2015

Air Conditioning Service Inc. 2003-2007

Vaco 2009-2012

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

Restaurant

16. Will a full course menu be served? Yes
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? _____

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.

Janita R. Spring

Signature of Applicant/Owner (or Authorized Corporate Officer)

On behalf of:

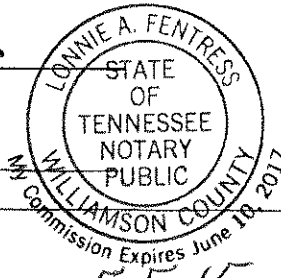
Name of Business Entity

JRS & Associates, LLC DBA Kate's Kitchen

Sworn to and subscribed before me this 5th day of May, 20 15

Donnae A. Fentress
Notary Public

My Commission Expires: _____



Official Use Only

Application Fee \$ <u>250.00</u>	Date Paid <u>5-5-15</u>
Privilege Tax \$ <u>67.00</u>	Date Paid <u>5-5-15</u>
Board Meeting Date <u>6.9.15</u>	

Kates Kitchen
3301 Aspen Grove Drive
Franklin, Tn. 37067
615-472-1390

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.

POLICE DEPARTMENT

Deborah Y. Faulkner, EdD
Chief of Police



Dr. Ken Moore
Mayor

Eric S. Stuckey
City Administrator

May 5, 2015

TO: Chief Deborah Y. Faulkner *DF*
FROM: Mary E. Casteel
Mary E. Casteel, Communications Support Coordinator
THRU: Lieutenant Eric Anderson *EA*
SUBJECT: Beer Board Background Checks

A check of Franklin Police Department records was completed on Judith Spivy, Managing Agent for Jr's & Associates, LLC and found to be clear.

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

Requested by: Christy McCandless

City of Franklin

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

DATE: 5-5-15
TO: POLICE CHIEF
FROM: CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR
RE: RECORDS CHECK FOR APPLICATION FOR BEER PERMIT
BEER BOARD MEETING DATE 6-9-15

- ☒ Applicant is requesting a temporary permit. Please return ASAP.
☐ Please return by _____ to provide information for Beer Board meeting agenda.

Name of Business Kate's Kitchen
Location of Business 3301 Aspen Grove Dr #105
Name of applicant JRS + Associates LLC

Managing Agent

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 Rebecca Creek Compton

Date _____

Approved _____

Signature

CM

City of Franklin

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

DATE: 5-15-15

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 _____ to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 6-9-15

Name of Business Kate's Kitchen

Location of Business 3301 Aspen Grove #105
(open from 11:00 - 3:00
week days)

CODES DEPT

[Signature]

Building Inspector

5-6-15

Date

FIRE DEPT

Fire Inspector

Date

City of Franklin

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

DATE: 5-5-15

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 _____ to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 6-9-15

Name of Business Kate's Kitchen

Location of Business 3301 Asper Grove #105

(open from 11:00 - 3:00
weekdays)

CODES DEPT

Building Inspector

Date

FIRE DEPT

Wesley Mobley
Fire Inspector

5-17-15
Date

15-27

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

DATE OF EVENT 8/15/15
HOURS OF EVENT 3-8 p.m.

DATE PERMIT NEEDED 8/14/15

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

1. Owner (Applicant) Friends of Franklin Parks 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.
- Non-profit organization / Board list attached
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?
- Raise the Roofs
- City of Franklin business account number M/A

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

Park at Harlinsdale, 239 Franklin Road, Franklin

Phone number of the business (615) 794-0998

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

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 _____ Title _____

Mailing Address _____

City, State, Zip _____

Daytime contact phone number _____

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 X.

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? 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.

previous event

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

Staged multiple nonprofit events with
beer + alcohol + no incidents

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.)
-

16. Will a full course menu be served? _____

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

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

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- (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.

Mundy D. Idler

Signature of Applicant/Owner (or Authorized Corporate Officer)

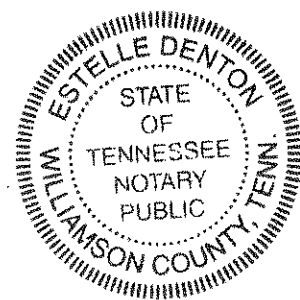
On behalf of: Friends of Franklin Parks LLC
Name of Business Entity

Sworn to and subscribed before me this 7th day of May, 20 15

Estelle Denton

Notary Public

My Commission Expires: 8-27-2015



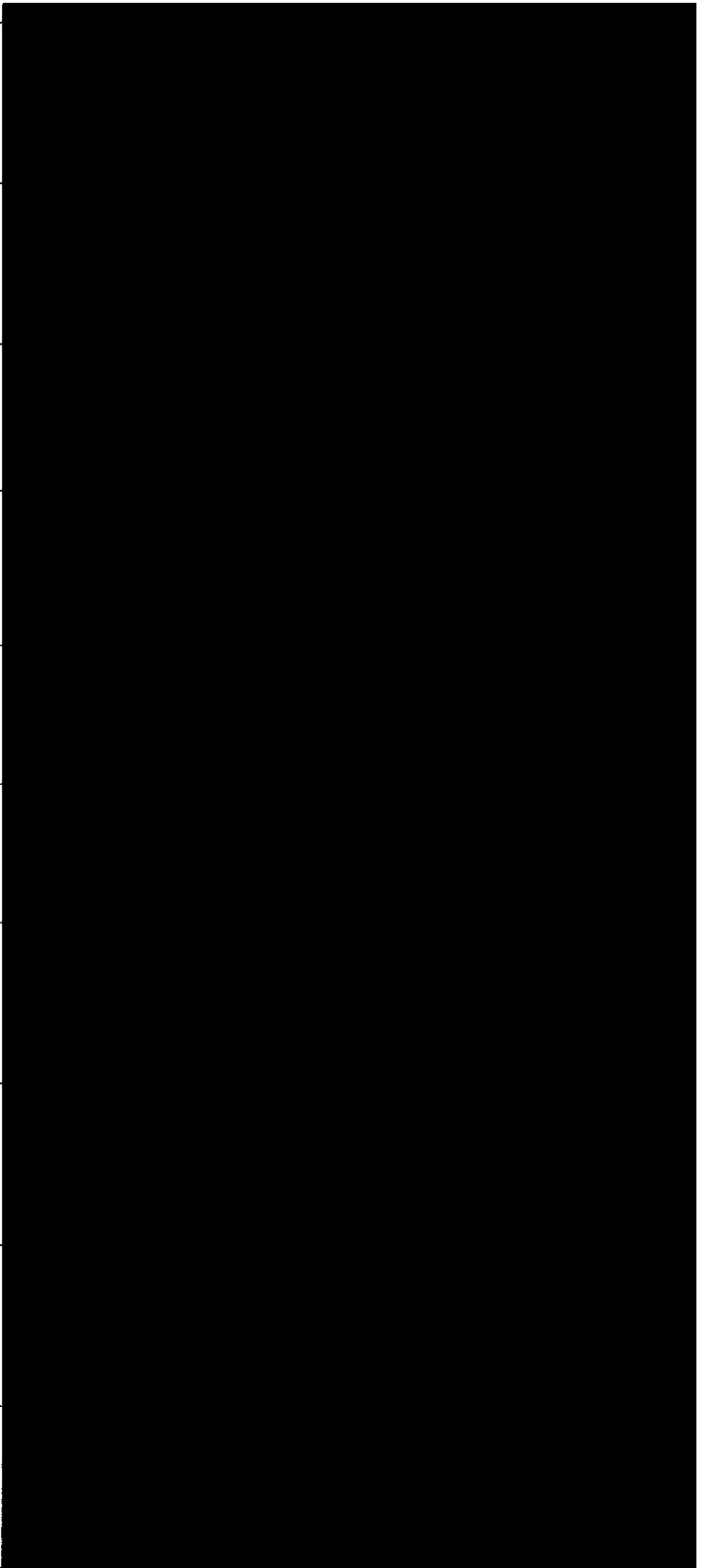
Official Use Only

Application Fee \$ 250.00 Date Paid 5-12-15

Privilege Tax \$ Date Paid

Board Meeting Date 6.9.15

Friends of Franklin Parks 2013 Board of Directors

Adam Ballash Development Manager Boyle Nashville, LLC	
Albert Menefee	
Amy Cross Nance Attorney Amy Cross, Attorney at Law	
Ashley Roberts Managing Director A Vintage Affair	
Chad Dannenfelser Executive Sale Rep Janssen, Pharmaceutical Companies of Johnson & Johnson	
Chris Cummins MyHealthDIRECT Class of 2013	
David Landrum Owner Landrum Stables	
Gary Vogrin Partner Kiser + Vogrin Design, LLC	
Greg Young Attorney Stites & Harbison, PLLC	
James "Jamey" Parker Vice President Morgan Stanley Smith Barney	

Joan Jones
Nissan North America, Inc.
Senior Manager
Sales Operations

Monty McInturff, DVM
Co-owner
Tennessee Equine Hospital

Stacey Watson
Community Development
Stites & Harbison, PLLC

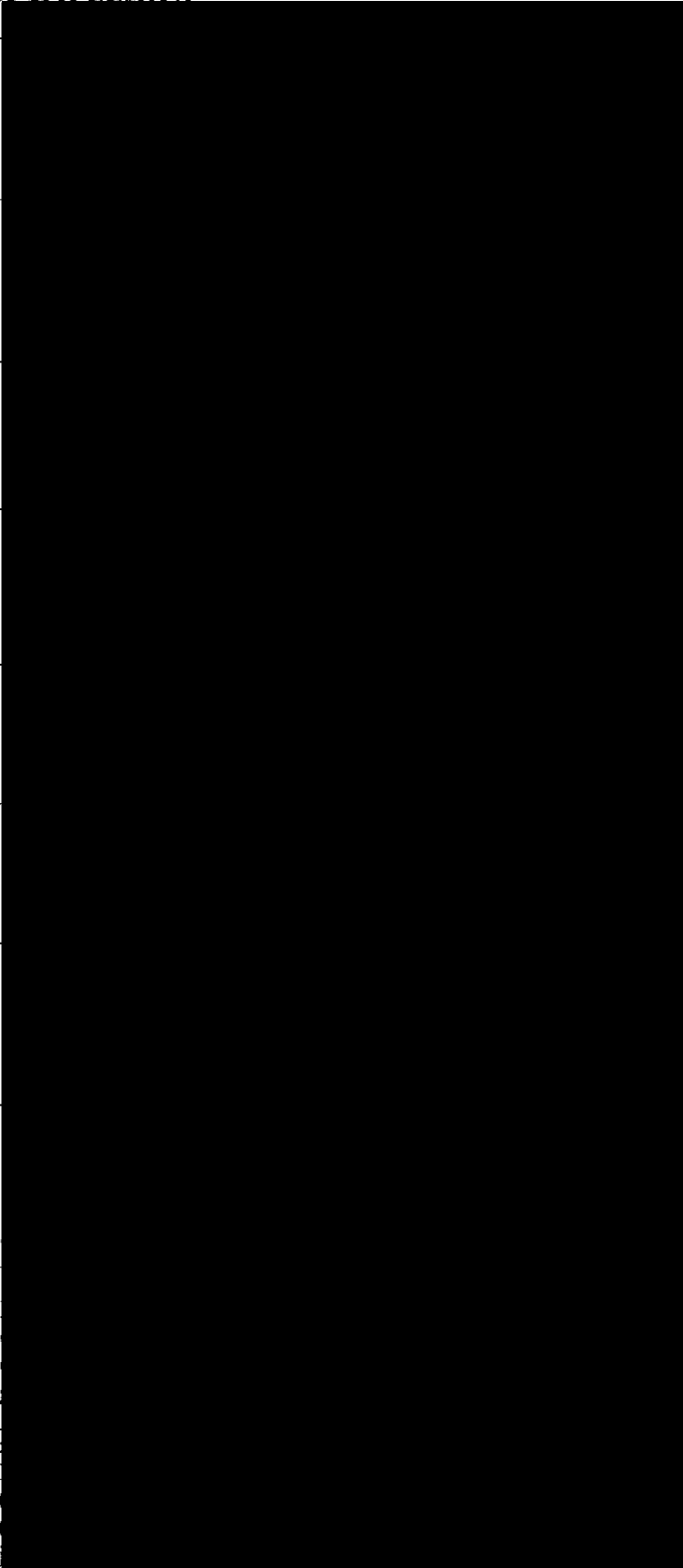
Suzy Heer
Equestrian & Community Volunteer

Zane Martin
Vice President, Private Client Services
First Tennessee Bank, N.A.

Franklin Tomorrow/Friends of Franklin Parks

Mindy Tate
Executive Director

**Friends of Franklin Parks
2013 Board of Directors**

Adam Ballash Development Manager Boyle Nashville, LLC	
Albert Menefee	
Amy Cross Nance Attorney Amy Cross, Attorney at Law	
Ashley Roberts Managing Director A Vintage Affair	
Chad Dannenfelser Executive Sale Rep Janssen, Pharmaceutical Companies of Johnson & Johnson	
Chris Cummins MyHealthDIRECT Class of 2013	
David Landrum Owner Landrum Stables	
Gary Vogrin Partner Kiser + Vogrin Design, LLC	
Greg Young Attorney Stites & Harbison, PLLC	
James "Jamey" Parker Vice President Morgan Stanley Smith Barney	

Joan Jones
Nissan North America, Inc.
Senior Manager
Sales Operations

Monty McInturff, DVM
Co-owner
Tennessee Equine Hospital

Stacey Watson
Community Development
Stites & Harbison, PLLC

Suzy Heer
Equestrian & Community Volunteer

Zane Martin
Vice President, Private Client Services
First Tennessee Bank, N.A.

Franklin Tomorrow/Friends of Franklin Parks

Mindy Tate
Executive Director



IRS Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248132325
Jan. 12, 2012 LTR 4168C E0
62-1821869 000000 00

00017063
BODC: NOBOD

FRANKLIN TOMORROW INC
PO BOX 383
FRANKLIN TN 37065

En

Dear

This is in response to your Jan. 03, 2012, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in October 2005.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

POLICE DEPARTMENT

Deborah Y. Faulkner, EdD
Chief of Police



Dr. Ken Moore
Mayor

Eric S. Stuckey
City Administrator

May 13, 2015

TO: Chief Deborah Y. Faulkner *DF*
FROM: Mary E. Casteel
Mary E. Casteel, Communications Support Coordinator
THRU: Lieutenant Eric Anderson *EA*
SUBJECT: Beer Board Background Checks

A check of Franklin Police Department records was completed on Mindy Tate, Managing Agent for Friends of Franklin Parks and revealed a minor traffic violation in 1991.

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

Requested by: Christy McCandless

City of Franklin

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

DATE:

5-12-15

TO:

POLICE CHIEF

FROM:

CHRISTY MCCANDLESS, ACCOUNT MGMT SUPERVISOR

RE:

RECORDS CHECK FOR APPLICATION FOR BEER PERMIT

BEER BOARD MEETING DATE

6-9-15

- ☐ Applicant is requesting a temporary permit. Please return ASAP.
- ☒ Please return by 5-19-15 to provide information for Beer Board meeting agenda.

Name of Business

Friends of Franklin Parks

Location of Business

239 Franklin Rd (Hartinsdale)

Name of applicant

Friends of Franklin Parks

Ma

Dir

Date

- ☐ 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

Records Clerk Campbell

Date

5/13/15

Approved

Signature

[Signature]

City of Franklin

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

DATE:

5-12-15

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 5-20-15 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date

6-9-15

Name of Business

Friends of Franklin Park

Location of Business

239 Franklin Rd / Hartlandale

CODES DEPT

Ataman 5-13-15
Building Inspector

5-13-15
Date

FIRE DEPT

Fire Inspector

Date

City of Franklin

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

DATE: 5-12-15

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 5-20-15 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date 6-9-15

Name of Business Friends of Franklin Parks

Location of Business 239 Franklin Rd (Hallsdale)

CODES DEPT

Building Inspector

Date

FIRE DEPT

Jonathan D. Dye
Fire Inspector

5-14-15
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 _____
 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. Owner (Applicant) SEK INVESTMENTS dba Lyrics Restaurant & Catering
 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.

PATRICIA McCracken & SAM BARCUS
102 HAMPTON LANE, FRANKLIN TN 37069

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?**

City of Franklin business account number 9420

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

230 FRANKLIN ROAD, SUITE 112 FRANKLIN TN 37064

Phone number of the business 615-791-6065

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 PATRICIA McCRACKEN Title OWNER

Mailing Address 230 FRANKLIN RD

City, State, Zip FRANKLIN TN 37064

Daytime contact phone number 615-791-6065

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.

FACTORY LEASING LLC

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.

SAME

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

~~NONE~~ previous name Stove Works

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

OWNER - STOVEWORKS RESTAURANT

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

RESTAURANT

16. Will a full course menu be served? YES
17. Will separate and sanitary facilities be maintained for men and for women? YES
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.

Patricia McCracken

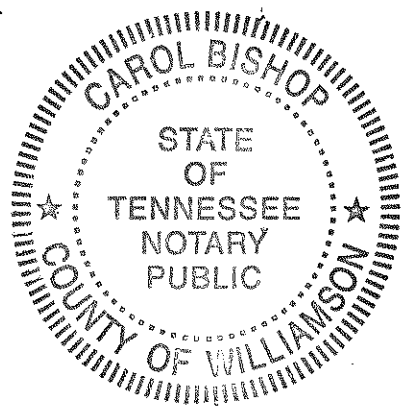
Signature of Applicant/Owner (or Authorized Corporate Officer)

On behalf of: SEK INVESTMENTS dba Lyrics
Name of Business Entity

Sworn to and subscribed before me this 21 day of May, 20 15

Carol Bishop
Notary Public

My Commission Expires: 10-11-2015



Official Use Only

Application Fee \$ 250.⁰⁰

Date Paid 5/22/15

Privilege Tax \$ 58.⁰⁰

Date Paid 5/22/15

Board Meeting Date 6/9/15

City of Franklin

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

DATE:

5/22/15

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 5/29/15 to provide information for Beer Board meeting agenda.

Beer Board Meeting Date

6/9/15

Name of Business

Lyrica Restaurant & Catering

Location of Business

230 Franklin Rd. Ste. 11-L

CODES DEPT

Building Inspector

Date

FIRE DEPT

Jonathan B. Dye
Fire Inspector

5-26-15
Date