



City of East Ridge use only:
Date Received_____
Date Approved_____
Date Denied_____

**APPLICATION FOR A BEER PERMIT  
STATE OF TENNESSEE  
CITY OF EAST RIDGE**

Application for (check one):

- \_\_\_\_\_ ON PREMISES PERMIT (Class 1 or Class 2)
- \_\_\_\_\_ OFF PREMISES PERMIT (Class 3)
- \_\_\_\_\_ ON AND OFF PREMISES PERMIT
- \_\_\_\_\_ MANUFACTURER’S OR DISTRIBUTOR’S PERMIT
- \_\_\_\_\_ MANUFACTURER/RETAILER PERMIT
- \_\_\_\_\_ RETAILER’S SELF-SERVICE PERMIT

I HEREBY MAKE APPLICATION FOR A PERMIT TO SELL, STORE, MANUFACTURE, OR DISTRIBUTE BEER OR OTHER BEVERAGES AUTHORIZED TO BE SOLD, STORED, MANUFACTURED OR DISTRIBUTED UNDER THE PROVISIONS OF TENNESSEE CODE ANNOTATED SECTION 57-5-101 ET SEQ. AND BASE MY APPLICATION UPON THE ANSWERS TO THE FOLLOWING QUESTIONS:

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

\_\_\_\_\_

Person\_\_ Firm\_\_ Corporation\_\_ Joint-Stock Co.\_\_ Syndicate\_\_ Association\_\_

2. List all persons, firms, corporations, joint-stock companies, syndicates, or associations having at least a 5% ownership interest in the business (attach addition sheet, if needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What is your present home address?

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4. Previous address(es) (within the last 10 years)

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5. Date of birth \_\_\_\_\_ Home telephone \_\_\_\_\_

Business telephone number \_\_\_\_\_

6. Under what name will this business operate?

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7. Location of business by street address or other geographical description and phone number of the business.

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8. Specify the identity and address of the person to receive annual privilege tax notices and any other communication from the City.

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9. Give name and address of property owner, if other than business owner.

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

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

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12. Has any person having at least 5% ownership interest, any of the managers listed in question 11, or any other employee of the business, been convicted of any violation of the beer or alcoholic beverage laws or any crime (other than minor traffic violations) within the last ten (10) years? Yes \_\_\_ No \_\_\_. If yes, give particulars of each charge, court, and date convicted.

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13. Has this owner or the owner's organization had a beer permit revoked, suspended, or denied in the State of Tennessee? Yes\_\_\_ No\_\_\_. If so, specify where, when and why.

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14. Give the name, relationship to applicant (if applicable) and address of the former beer permittee at this location.

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**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 ten (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.**

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Notary Public

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

**NOTICE:** A non-refundable \$250 fee must accompany this application. If the application is approved, you are required to provide documentation of sales tax registration to the city within ten (10) days of approval. Any applicant making false statements in this application shall forfeit his permit and shall not be eligible to receive any permit for a period of ten (10) 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<sup>st</sup>. Any holder of a beer permit issued after January 1, 1994 shall pay a pro rate portion of this annual tax when the permit is issued.

## INSTRUCTION SHEET

Permits shall be issued to the owner of the business, whether a person, firm, corporation, joint-stock company, syndicate, or association.

A permit is only for a single location and is valid for all decks, patios, and other outdoor serving areas that are contiguous to the exterior of the building in which the business is located.

Where an owner operates two or more restaurants or other businesses within the same building, the owner may, in his or her discretion, operate some or all of such businesses under the same permit.

A permit holder must return a permit to the county or city that issued it within fifteen (15) days of termination of the business, change in ownership, relocation of the business or change of the business name. A change in ownership occurs for a corporate owner when at least fifty percent (50%) of the stock of the corporation is transferred to a new owner.

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FOR CITY USE ONLY:

MAP NO. \_\_\_\_\_

PARCEL NO. \_\_\_\_\_



**CITY OF EAST RIDGE**  
**1517 Tombras Avenue, East Ridge, TN 37412**

**AUTHORIZATION TO RELEASE RECORDS**

TO: The City of East Ridge

THIS FORM, OR ANY COPY THEREOF, AUTHORIZES MY RELEASE TO THE CITY OF EAST RIDGE WITH ALL INFORMATION REGARDING MY ARREST (CRIMINAL RECORD) IN ANY STATE, ALONG WITH THE RIGHT TO RECEIVE FULL AND COMPLETE INFORMATION PERTAINING THERETO, INCLUDING COPIES OF ALL SUCH RECORDS.

PLEASE PRINT:

\_\_\_\_\_  
Last Name First Name M.I.

\_\_\_\_\_  
Maiden Name (any other name used) if applicable

\_\_\_\_\_  
Current Address – Street # Street Name

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Previous Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Date of Birth Race/Sex SS#

\_\_\_\_\_  
Signature Date

SWORN TO AND SUBSCRIBED BEFORE ME THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

NOTARY PUBLIC: \_\_\_\_\_

MY COMMISSION EXPIRES: \_\_\_\_\_



**CITY OF EAST RIDGE**

Dear \_\_\_\_\_:  
(print name)

The City of East Ridge has received an application for a beer permit from \_\_\_\_\_, who gave your name as a reference. Please fill out the questionnaire below and return it to City Hall within five (5) days. Thank you.

**ANSWER YES OR NO:**

- 1. Is the applicant reliable? \_\_\_\_\_
- 2. Do you have any knowledge of applicant having a police record? \_\_\_\_\_
- 3. Is applicant liked in the community? \_\_\_\_\_
- 4. Does applicant have any traits that would be detrimental if he or she sold beer? \_\_\_\_\_
- 5. Does applicant possess good moral standards? \_\_\_\_\_
- 6. Do you recommend this applicant be issued a beer permit? \_\_\_\_\_

(The above information will be held in strictest confidence.)

SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: \_\_\_\_\_

DATE: \_\_\_\_\_





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ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE: \_\_\_\_\_

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ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: \_\_\_\_\_

DATE: \_\_\_\_\_