

CITY OF JOHNSON CITY 601 East Main Street www.JohnsonCityTN.org 423.434.6000

OFFICE OF RECORDER/TREASURER

Certificate of Compliance Retail Package Store

Pursuant to Tennessee Code Annotated, Title 57, Sections 57-3-208 and 57-3-213, this is to certify

| that | (applicant's name) d/b/a | | has |
|---------|--|---|--|
| made | application for a Certificate of Compliance to sell retail a | lcoholic beverages in | the County |
| | , State of Tennessee, at | | |
| invest | gation has been undertaken of the applicant's criminal rec | ord and of the compli | iance of said |
| | ss with local law, ordinances or resolutions, and from | | |
| certifi | ed: | | |
| | | | |
| 2. | That the applicant or applicants who are to be in actual been convicted of a felony within a ten (10) year period is the application and, if a corporation, that the executive of been convicted of a felony within a ten (10) year period is the application; and further, that it is the undersigned's of violate any provisions of Tennessee Code Annotated, That the applicant has secured a location which complied laws and ordinances of the City of Johnson City, Tennes That the issuance of this license will not exceed the number of the control of th | immediately preceding ficers or those in continuous immediately preceding opinion that the applicate 57, Chapter 3; as with all restrictions see; | g the date of trol have not g the date of cant will not |
| This _ | day of | , 20 | |
| Mayor | | | |
| (Revis | ed 8-18-17) | | |



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Application Form Certificate of Compliance Retail Package Store

| Owner's Name: | | |
|--|----------|--|
| Business Name: | | |
| Date of Birth: | - | |
| Social Security Number: | - | |
| Current Residence: | | |
| | | |
| Home Phone: | | |
| | <u> </u> | |
| Work Address: | | |
| | | |
| Work Phone: | _ | |
| List all people | | |
| who share in the | | |
| | | |
| business, including the address of each | | |
| person: | | |
| Address of liquor store | | |
| and the applicable | | |
| zoning designation | | |

Please attach a copy of each questionnaire form and other material to be filed with the Tennessee Alcoholic Beverage Commission.



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Please attach *five* copies of a scale plan drawn to a scale of not less than one inch equals twenty feet, giving the following information:

- 1) The shape, size and location of the lot upon which the liquor store is to be operated under the license:
- 2) The shape, size, height and location of all buildings, whether they are to be erected, altered, moved or existing, upon the lot;
- 3) The off-street parking space and the off-street loading and unloading space to be provided, including the vehicular access to be provided from these areas to a public street; and
- 4) The identification of every parcel of land within 100 feet of the lot upon which the liquor store is to be operated indicating ownership interest thereof and the locations of any structures situated thereof, and the use being made of every such parcel.

Each applicant signing below agrees to comply with the State, Federal, and City laws and ordinances and with rules and regulations of the Tennessee Alcoholic Beverage Commission with reference to the sale of alcoholic beverages, and each applicant signing below agrees as to the validity of and the reasonableness of the laws, ordinances, regulations, inspection fees, and taxes with reference to the sale of alcoholic beverages.

FAILURE TO APPEAR AT THE COMMISSION MEETING FOR APPROVAL OF THIS CERTIFICATE OF COMPLIANCE MAY RESULT IN DELAY OR DENIAL OF APPROVAL.

Signature of the Applicant and each person having any interest in the license either as owner, partner, or stockholder or otherwise:

| Applicant | Applicant | |
|---|--|--------|
| Applicant | | |
| I/We verify that all the informa knowledge, and belief. | on given in this application is true to the best of my information | ation, |
| Applicant | Date | |
| Applicant | Date | |
| Applicant | Date | |

Updated: March 22, 2019