

CITY OF PARIS, TENNESSEE
APPLICATION FOR BEER LICENSE

The undersigned hereby applies to the Alcoholic Beverage Control Board of the City of Paris, Tennessee, for permission and license to exercise the privilege of:

_____ **A PERMIT** Selling, storing and distributing beer for consumption off the premises where sold and not to be consumed on said premises.

_____ **B PERMIT** Selling, storing and serving beer on the premises where sold.

.....
 Name of Applicant _____ Date of Birth _____ / _____ / _____

Social Security No. _____ Driver's License No. _____ State _____ Phone No. _____

Residence _____

Name of Business _____ Bus. Phone _____

Business Location _____

1. Are you a citizen of the U. S. ? **YES OR NO** Place of Birth _____ If a naturalized citizen give date and place of naturalization _____

2. Is business a partnership, corporation or individually owned? _____
 (If partnership, all parties must fill out a separate application. If a corporation, question number nine must be filled out and any person owning in excess of 5% of the stock in the corporation must fill out a separate application.)

3. Will this business be managed by you? _____ Do you own the premises or lease? _____; Term of Lease _____
(If the answer is "no" to #3 then any manager or agent must fill out a separate application.)

4. Have you made application previously for the same or a similar permit? **YES OR NO** If "yes", what was the disposition of application? _____

Have you ever had a previous/similar permit revoked/suspended by any State or subdivision thereof? **YES OR NO**
 If "yes", give details: _____

5. What type of business will this be? _____ Length of time applicant has been in this business _____

6. Have you or any other owner been convicted of any violation of the liquor laws or any crime involving a felony within ten years of this date? **YES OR NO** If "yes", please explain: _____

7. Have you obtained or applied for : A) State Sales Tax Registration # _____
 B) City Business License # _____ C) County Business License # _____

8. (Please answer this question only if the applicant is a corporation)

Corporate Name _____ Date Charter Issued _____
 Objects of the Corporation _____

Names and addresses of officers and directors: _____

9. References:

Name	Address	Phone No.
_____	_____	_____
_____	_____	_____
_____	_____	_____

10. List history of personal residences for the past twenty (20) years beginning with the current address:

Street Address	City	County	State	Zip Code

STATE OF TENNESSEE
COUNTY OF HENRY

The undersigned makes oath that all of the statements contained in the foregoing application are true. Applicant also waives his right to privacy for the purpose of a mandatory background investigation to be performed by the Paris Police Department.

Applicant

Sworn and subscribed before me, this _____ day of _____, 20_____.

Notary Public

My commission expires _____.

The following action was taken upon this application:

Member, Alcoholic Beverage Control Board

Member, Alcoholic Beverage Control Board

Member, Alcoholic Beverage Control Board

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 days of approval.

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.