

April '23 Council

APPLICATION FOR BEER PERMIT TO THE BEER BOARD OF THE TOWN OF ASHLAND CITY



COUNTY OF CHEATHAM

This section is for office use only

Date Received: 2.17.2023
Fee Received: 2.17.23

Zoning District: _____

Deferred: _____

Permit Type:
Off Premises _____
On Premises X
On Premises/Special Event _____
Event Date _____
Manufacturer/Distributor _____
Caterer Permit _____

Denied: _____

Granted: _____

Permit Number: _____

Applications must be completed in full. Applications should also include any application fee(s), certified criminal background checks, and a copy of the business license. Applications must be submitted by the 20th of the month to be considered for permits at the next scheduled Beer Board Meeting. Beer Board Meetings are held on the second Tuesday of every month at 6:00 p.m., unless otherwise advertised and scheduled, prior to Regularly Scheduled City Council Meeting.

Application fee(s) must be submitted with this application.

Application Fee Schedule as described in Title 8 Chapter 2 of the Municipal Code

On and/or Off-site Sales	\$250.00
Manufacturing	\$250.00
Caterer	\$250.00
Special Event	\$150.00

Applicants as well as managers of the applicant's business must provide documentation, at their expense, of a certified criminal background check from Tennessee Bureau of Investigation with this application. Applicants must certify they have not been convicted of a crime of any violation of the laws against possession, sale, manufacture, or transportation of beer or other alcoholic beverages, or of any felony, or of any crime involving moral turpitude within the last ten (10) years. Information regarding obtaining such background checks may be made online at www.tn.gov or by calling TBI at (615)744-4057.

I (WE) HEREBY APPLY FOR A PERMIT TO _____ SELL _____ MANUFACTURE or _____ DISTRIBUTE BEER OR OTHER BEVERAGES CONTAINING LESS THAN FIVE PERCENT (5%) ALCOHOL, PURSUANT TO THE PROVISIONS OF TENNESSEE CODE ANNOTATED, TITLE 57, CHAPTER 5 AND THE AMENDMENTS THERETO. THIS APPLICATION IS BASED UPON THE FOLLOWING INFORMATION:

1. Type of permit desired: Off-premises sales On-premises sales Manufacturer/distributor

2. Request is made for: New business Change in location of business
 Change in ownership of existing business Change in type of permit
 Special Event-Event Name: _____
Location: _____
Date: _____

3. Name of applicant: _____
Applicant is a(n): individual partnership for-profit corporation
 non-profit corporation other: _____

4. Name of Business: Los Girasoles

5. Business Location: 114 S Main St Ashland City

6. Name and address of person to whom correspondence should be mailed: Maric D Salas
114 S Main St Ashland city 37015

7. Describe the nature of the business/organization: Restaruant

8. Names and addresses of all persons, firms, corporations, joint-stock companies, syndicates or associations having at least 5% ownership interest in the applicant:

Maric D Salas
Silvia Ruiz Morales

9. Have any of the parties referred to in question above or any persons to be employed in the distribution or sale of beer been convicted of any violation of the laws against the possession, sale, manufacture or transportation of beer or other alcoholic beverages or any crime involving moral turpitude or any felony within the past ten years? If so, give particulars of each charge, court and date convicted:

no

10. Have any of the parties referred to in question 8 above ever had a beer permit revoked, suspended or denied? Explain:

NO

11. Name & telephone number of manager to be responsible for sale, storage or manufacture of beer: ⁷⁹²⁻¹³³⁰
Silvia Ruiz Morales (615) 886-0264 Maria D Salas (615) 788-7749

12. Name & address of property owner: Marao Hairip
Murfreesboro TN 37130

13. Name & location of the nearest church: Unity Baptist Church

14. Name & location of the nearest school: Ashland City Elementary
School

15. Describe steps which will be taken to prevent the sale of beer to minors: check ID

16. Answer each of the following questions:

Do you agree not to engage in the sale, storage, manufacture or distribution of beer except at the place or places for which a permit is issued? Yes
 No

Do you agree that the sale, storage, manufacture or distribution of beer will be made only in accordance with the permit granted? Yes
 No

Do you agree to rigidly enforce the laws against the sale of beer to minors? Yes
 No

Do you agree not to permit minors or intoxicated person to loiter around the place of business? Yes
 No

Do you agree not to employ any person in the sale or distribution of beer who has been convicted of any violation of the laws against the possession, sale, manufacturing or transportation of beer or other alcoholic beverages, or any crime involving moral turpitude within the past ten years? Yes
 No

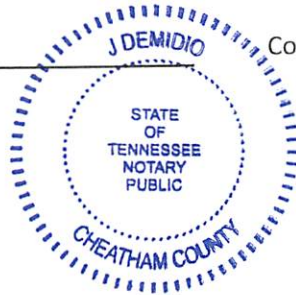
The undersigned hereby solemnly swears that each and every statement in the foregoing application is true and correct and agrees that if any statement therein is false, the permit issues pursuant thereto may be revoked by the Beer Board, upon notice of hearing, in which event the burden shall be on the permittee to prove the correctness of all the statements in this application. The undersigned certifies that he/she has read and is familiar with the beer laws of the Town of Ashland City in the event of a change in management, the undersigned agrees that the information requested in question 11 will be provided to the Town of Ashland City within seven days of such a change. If the applicant is other than an individual, the undersigned affirms that he/she is a representative of the applicant duly authorized to submit the foregoing application.

Maria O Salas
Signature

owner
Title (if other than an individual)

Sworn to and subscribed to before me this 17th day of February, 2023.

[Signature]
Notary Public



Commission expires: 7-17-2024

Receipt #R00175621

No-Reply <No-Reply@ashlandcitytn.gov>

Tue 3/14/2023 8:08 AM

To: Alicia Martin <ayoung@ashlandcitytn.gov>

The Town of Ashland City would like to thank you for your payment!

Town of Ashland City Water & Sewer
PO Box 36
Ashland City, TN 37015
(615)792-4211

DATE : 2/17/2023 12:03 PM

OPER : TC

TKBY : TRACIE CHESTER

TERM : 1

REC# : R00175621

BEER LICENSES - 32210 BEER LICENSES

LOS GIRASOLES 250.00

CC FEES - MISC TRANS CREDIT CARD FEES

Miscellaneous Receipt 2.50

Paid By:LOS GIRASOLES

7-110 GEN CC ONLINE 252.50AUTH:031656



**City of Ashland City
Business Tax Standard License**

January 18, 2023

LOS GIRASOLES MEXICAN RESTAURANT
114 S MAIN ST
ASHLAND CITY TN 37015-1610

Letter ID: L1156050816
Expiration Date: 15-May-2024
Return Due By: 15-Apr-2024

The business tax license printed below certifies the receipt and approval of your business tax license application or the renewal of a license for your existing business. The license is valid until the expiration date noted above. Your license number is 1001612208 and your classification is 3. The certificate must be displayed publicly at the location for which it is issued.

All business tax returns are required to be filed and the payment remitted electronically. Your return is due on April 15, 2024. Please visit www.tn.gov/revenue for additional information.

Note: This license does not permit operation unless properly zoned and/or in compliance with all other applicable state, county, or city laws, rules and regulations. Also, as required by Tenn. Code Ann. § 39-17-1801 et seq., businesses must comply with all provisions of the Tennessee Non-Smoker Protection Act.

DETACH LICENSE BELOW AND DISPLAY IN PUBLIC AREA



**City of Ashland City
Business Tax Standard License**

This certificate must be publicly displayed.

LOS GIRASOLES MEXICAN RESTAURANT
114 S MAIN ST
ASHLAND CITY TN 37015-1610



Date Issued: 18-Jan-2023
Classification: 3
Letter ID: L1156050816
License Number: 1001612208
Expiration Date: 15-May-2024



Bill Lee
Governor

TENNESSEE BUREAU OF INVESTIGATION

ATTN: TORIS

901 R.S. Gass Boulevard
Nashville, Tennessee 37216-2639
(615) 744-4057
Facsimile (615) 744-4289



David B. Rausch
Director

02/17/2023

MARIA DE JESUS SALAS

[REDACTED]
[REDACTED]

Tennessee Criminal History Records Request

Attached is the response to your request for a criminal history record check on the following individual in which Tennessee information was found. NOTE: All aliases submitted have been searched.

SALAS, MARIA D

Please be aware that, unless a fingerprint comparison is performed, it is impossible for the Tennessee Bureau of Investigation to be sure the record belongs to the individual you requested. A fingerprint comparison will only be performed in the event of a written appeal of criminal history results. The information you receive will be based on only those arrests which occurred within the state of Tennessee.

The Tennessee Bureau of Investigation found Tennessee criminal history based on the information provided. No criminal record check was conducted for other states or for the Federal Bureau of Investigation.

Tennessee Open Records Information Services
Tennessee Bureau of Investigation
901 R.S. Gass Blvd.
Nashville, TN 37216

Katie Peterson

Signature

State of Tennessee
County of Davidson

Subscribed and sworn before me on this 17th day of February, 2023, by
Katie Peterson, who is personally known to me or proved to me on the basis of
satisfactory evidence to be the person who appeared before me.



Notary: Denise Morris

My Commission Expires: 11-2-2026

#####

*** END OF RECORD ***

AGENCY NOLENSVILLE PD; TN0940500;

***** INDEX OF AGENCIES *****

SEVERITY UNKNOWN
 COUNTS 1
 CHARGE LITERAL DRIVING ON REVOKED/SUSPENDED LICENSE
 CHARGE TRACKING NUMBER 94000043627
 CHARGE NUMBER 105615283
 OFFENDER ID NUMBER 3063059
 SUBJECT'S NAME MARIA DEJESUS SALAS
 ARRESTING AGENCY TN0940500 NOLENSVILLE PD
 ARREST DATE 2010-04-16

TRACKING NUMBER 94000043627
 EARLIEST EVENT DATE 2010-04-16 INCIDENT DATE 2010-04-16

===== CYCLE 001 =====

***** CRIMINAL HISTORY *****

PLACE OF BIRTH MM

HAIR COLOR BROWN
 EYE COLOR BROWN
 HEIGHT 5'02"
 WEIGHT 155
 DATE OF BIRTH [REDACTED]
 SEX FEMALE
 RACE WHITE
 SKIN TONE UNKNOWN

SUBJECT DESCRIPTION:

SALAS, MARIA DEJESUS

SUBJECT NAME(S)

***** IDENTIFICATION *****

THIS RECORD IS BASED ONLY ON THE SID OR FBI NUMBER IN YOUR REQUEST (3063059) BECAUSE ADDITIONS OR DELETIONS MAY BE MADE AT ANY TIME, A NEW COPY SHOULD BE REQUESTED WHEN NEEDED FOR SUBSEQUENT USE. USE OF THE FOLLOWING RECORD IS REGULATED BY LAW, IT IS FURNISHED FOR OFFICIAL USE ONLY AND SHOULD ONLY BE USED FOR THE PURPOSE REQUESTED. WHEN EXPLANATION OF A CHARGE OR DISPOSITION IS NEEDED, COMMUNICATE DIRECTLY WITH THE AGENCY THAT CONTRIBUTED THE FINGERPRINTS. (TBI; 2005-06-28)

THE INFORMATION IN THIS RAP SHEET IS SUBJECT TO THE FOLLOWING CAVEATS: