

CITY OF ATHENS, TENNESSEE

APPLICATION FOR CERTIFICATE OF COMPLIANCE

RETAIL SALE OF WINE IN FOOD STORES

Date received: _____

Received by: _____

The Certificate of Compliance must be issued by the City of Athens before application to the TN Alcoholic Beverage Commission.

Pursuant to T.C.A. § 57-3-803

RETAIL FOOD STORE INFORMATION

Business Name (DBA): _____

Business Address: _____

City: _____ **State:** _____ **Zip:** _____

Mailing Address (if different): _____

Phone Number: _____

Email Address: _____

Type of Business Entity: ☐ Sole Proprietor ☐ Partnership ☐ Corporation ☐ LLC

☐ Other: _____

Federal EIN: _____

Business Tax License Number (Athens): _____

APPLICANT INFORMATION

If the Applicant is a corporation, partnership, limited liability company, or other legally recognized entity, state the name of every person who will be in actual charge of the Retail Food Store. "...For the purposes of this section, an individual who owns or has a 50 percent ownership interest or greater in the partnership, limited liability company, or corporation shall be considered or deemed to be in control of the business". (ACC 8-136 (1))

Full Name: _____ **Date of Birth:** _____
(Owner / Agent / Officer / Member)

Title / Role: _____

Street Address: _____

Email: _____ **Phone #:** _____

Full Name: _____ **Date of Birth:** _____
(Owner / Agent / Officer / Member)

Title / Role: _____

Street Address: _____

Email: _____ **Phone #:** _____

QUALIFICATIONS

1. Zoning Compliance:

Is the business located in a zone that permits the retail sale of wine?

☐ Yes ☐ No

Zone: ☐ B-1 ☐ B-2 ☐ B-3

2. Does the location of this Retail Food Store comply with all applicable zoning laws of the City of Athens?

☐ Yes ☐ No

3. Is the business a retail food store as defined by T.C.A. § 57-3-802?

☐ Yes ☐ No

“Retail food store” means an establishment that is open to the public that derives at least twenty percent (20%) of its sales taxable sales from the retail sale of food and food ingredients for human consumption taxed at the rate provided in T.C.A §67-6-228(a) and has retail floor space of at least one thousand two hundred square feet (1,200 sq. ft.)

4. Has any owner or officer been convicted of a felony or any crime involving alcohol, controlled substances, or moral turpitude within the past ten (10) years?

☐ Yes ☐ No

5. Are you in compliance with all local health, building, and fire codes?

☐ Yes ☐ No

REQUIRED ATTACHMENTS

Please attach the following with this application:

- ☐ Copy of driver’s license or government-issued ID for each owner.
- ☐ Zoning verification letter or approval from Community Development Department.
- ☐ Copy of the business’s state sales tax certificate.
- ☐ Proof of property ownership or lease of business premises.

APPLICANT SIGNATURE

I, the undersigned, declare under penalty of perjury that the information provided in this application is true and correct to the best of my knowledge. I further affirm that I have read and understand the qualifications under state and local law for the retail sale of wine. I understand that any false statement or material misrepresentation may be grounds for denial of this application and could subject me to criminal penalties under applicable law.

Applicant's Signature

Date

Applicant's Printed Name

STATE OF _____)

COUNTY OF _____)

The applicant named above in my presence and who, after being duly sworn according to law, made oath that the facts as stated therein are true, signed this application.

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

{ seal }

Notary Public

My commission expires: _____

Submit Application To:
Office of the City Manager
City of Athens, Tennessee
815 North Jackson Street
Athens, TN 37303
admin@athenstn.gov