

AGENDA
CITY OF MORRISTOWN, TENNESSEE
BEER BOARD MEETING
April 6, 2021
5:00 P.M.

1. CALL TO ORDER

Mayor Gary Chesney

2. ROLL CALL

3. APPROVAL OF MINUTES

1. February 2, 2021

4. CITIZEN COMMENTS ABOUT AGENDA ITEMS ONLY

5. OLD BUSINESS

6. NEW BUSINESS

1. Special Occasion Permit for All Saints Episcopal School Spring Auction Fundraiser Event on April 17, 2021, located at the Dean Coffman Activity Center-ASES, 3275 Maple Valley Road, Morristown, TN.
2. Special Occasion Permit for the Chamber of Commerce, Skymart Arts & Crafts Festival on May 1, 2021 located at downtown Main St. from Mill St. to Cumberland Ave., Morristown, TN.
3. Special Occasion Permit for each of the four Chamber of Commerce, "Concerts on the Downtown Green" to be held on May 7, 2021, June 4, 2021, July 2, 2021 and August 6, 2021 located at the Downtown Farmers Market, Morristown, TN.
4. Off-premise Permit for Traders Corner Inc. DBA as Traders Corner located at 922 S. Cumberland St. (old Rite Aid), Morristown, TN. Owner and General Manager Jatin Patel.

7. ADJOURN

**STATE OF TENNESSEE
COUNTY OF HAMBLLEN
CORPORATION OF MORRISTOWN
BEER BOARD – FEBRUARY 2, 2021**

The Beer Board for the City of Morristown, Hamblen County, Tennessee, met in session at the regular meeting place of the Beer Board in the Morristown City Center at 5:36 p.m., Tuesday, February 2, 2021 with the Honorable Mayor Gary Chesney presiding and the following Beer Board members present: Al A'Hearn, Chris Bivens, Bob Garrett, Tommy Pedigo, Kay Senter and Ken Smith.

Mayor Chesney opened the floor for members of the audience to speak subject to the guidelines provided. No one spoke.

Beer Board member A'Hearn made a motion to approve the January 5, 2021, minutes as circulated. Beer Board member Bivens seconded the motion and upon roll call; all voted "aye".

Beer Board member Bivens made a motion to approve the Off-premise Permit for AB & Sons Inc.- DBA as Family Market, located at 710 N. Morelock Road. Owner Rikitaben Patel, General Manager Kevin Patel. Beer Board member Pedigo seconded the motion and upon roll call; all voted "aye".

Mayor Chesney adjourned the February 2, 2021, meeting of the City of Morristown, Beer Board at 5:41 p.m.

MAYOR

ATTEST:

CITY ADMINISTRATOR



SPECIAL OCCASION
CITY OF MORRISTOWN BEER PERMIT
CITY OFFICIALS CHECKLIST



TAX OFFICE CHECKLIST

Current Taxes Verified

_____ City Taxes
_____ County Taxes

POLICE DEPARTMENT CHECKLIST

Public Notices

_____ Notice of Beer Board Meeting
_____ Signs Posted at Location of Business – Date Posted: N/A
_____ Newspaper Notice of Application – Date Ran in Newspaper: _____
✓ _____ Background Investigation
_____ Date of Beer Board Approval: _____
_____ Copy of Permit (Number _____) Issued
_____ Prorated Privilege Tax Paid

_____ Signature of person verifying completion of checklist

PLANNING CHECKLIST

Requested location is in a (check one)
ordinances of the City of Morristown.

☐ Non-conforming

☒ Conforming location under the zoning laws and

Signature of City Planner

[Signature]

INSPECTIONS CHECKLIST

Have occupancy issues been addressed by City Inspections? ☐ Non-Conforming ☒ Conforming

Signature of City Inspector

[Signature]

FIRE DEPARTMENT CHECKLIST

Have the fire code inspections been completed? ☐ Non-conforming ☒ Conforming

Signature of Fire Marshall

[Signature]

Date of event:

4/17/21

Name of event:

Beach Ball

Special Event & Special Occasion

Beer Permit Departmental Reviews

For City of Morristown Staff Use ONLY

Beach Ball - 04/17/21



Timeline	Function	Date	Signature
At least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee		
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee	3/8/21	Coral Bui
Deadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement	NG	
	Police Department: Beer Permit review- if applicable	3/9/21	S. H. [Signature]
	Fire Department: Beer Permit review- if applicable	NG	
	Finance Department: Beer Permit review- if applicable	3-8-21	[Signature]
	Finance Department: Review Certificate of Insurance	3-8-21	[Signature]
60- 20 days prior to event:	Finance Department: Provide Risk Management Assessment	3-8-21	[Signature]
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement	NG	
	Fire Department: Review and approve	3/23/21	Billy [Signature]
	Public Works Department: Review and approve	3/24/21	[Signature]
	Parks and Rec Department: Review and approve	NG	
At least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement	NG	
Deadline date:	Tax Office: Receive \$250 damage/ cleanup deposit		
	Police Department: Receive safety/emergency/traffic control plan.	3/21/21	S. H. [Signature]
	Tax Office: Receive \$1,000,000 certificate of insurance		
	Tax Office: Receive 50% Police Assistance Agreement fees		
At least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees		
Deadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
After the event:	Police Department: Determine whether Public Works needs to be called in for clean up	NA	
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.	NA	
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		Return to Agenda

CITY OF MORRISTOWN
100 W 1ST NORTH ST
MORRISTOWN TN 37814-1499

RECPT#: 640090

03/08/21 15:06 2842tbain

CUSTOMER#:0

NAME:

BEACH BALL 04/17/21

CHG: 808

BEER BOND

80.00

PAID AMT

8 PAID BY NAME

VERONICA HALLPAY METHOD

CHECK

1167

AMT TENDERED:

AMT APPLIED: 80.00

CHANGE: 80.00



CITY OF MORRISTOWN
APPLICATION FOR SPECIAL OCCASION BEER PERMIT
Information & Applicant Checklist



By making this application, the applicant assumes personal responsibility for all information provided. It is the applicant's responsibility to see that the application is complete and correct. The Beer Board could delay action on the application if any information is not accurate. The City Beer Board meets as needed on the first and third Tuesday of each month. To ensure consideration of an application, the applicant must submit the completed application to the City of Morristown Tax Office **at least 60 days prior** to the Beer Board meeting.

To be issued a beer permit for a special occasion, the following conditions must be met:

- *The special occasion permit shall not be issued for longer than one (1) twenty-four-hour period, subject to the limitations on the hours of sale imposed by law. The application for the special occasion permit shall include documents showing evidence of the type of organization, copy of IRS determination letter, and state the location of the premises upon which alcoholic beverages shall be served and the purpose for the request of the license.*
- *The fee for each special occasion license shall be fifty dollars (\$50.00).*
- *For the purpose of this section:
Bona fide charitable or nonprofit organization means any corporation or legal entity which has been recognized as exempt from federal taxes under section 501c of the Internal Revenue Code for two consecutive calendar years.*
- *No charitable or nonprofit organization possessing a special occasion permit shall purchase, for sale or distribution, beer from any source other than a licensee as provided pursuant of state law.*

The following items must be completed and copies provided (if applicable). Remember, the completed application **MUST BE SUBMITTED** to the City of Morristown Business Tax Office.

- ☒ Application completed & submitted to city business tax office.
- ☐ Agenda Date (Beer Board Meeting) _____ City Center, Council Chambers
Representative or Manager **MUST** be present at meeting for consideration of permit.
- ☒ Permit application fee (all fees non-refundable) \$50.00
- ☒ Publication fee paid \$30.00
- ☒ Copy of IRS Designation Letter showing 501c for two consecutive calendar years.

I/we hereby make application for a permit to sell or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Morristown alcoholic beverage ordinance Title 8 and base my application upon the answers to the following questions:

1. Name of Applicant(s): All Saints School
2. Applicant(s) address: 3725 Maple Valley Rd (Phone) 423-586-3280
3. Name of Special Occasion Event: Beach Ball
4. Date(s) of Event: April 17, 2020 Purpose of Event Fund Raiser
5. There are approved locations set aside for special occasion events to occur. (These are shown in attached exhibits.) Please check the location you are requesting: ☐ Downtown ☐ Farmers Market ☐ Rose Center.
If requesting approval for a different location please provide address: 3725 Maple Valley Rd
6. Event Manager Name and contact information: Paul LeBel, 423-231-0462



CITY OF MORRISTOWN
Application for SPECIAL OCCASSION BEER PERMIT
Event Manager Application



Beach Ball

Reason for Application: _____

1. Name Paul LeBel
2. Home Address _____ City _____ State _____ Zip _____
3. Home Phone (____) _____ Cellular Phone _____ Date of Birth _____
4. Driver's License # _____ State _____ Social Security # _____
5. Local Business Name _____
6. Local Business Address/Zip _____ Business Phone (____) _____
7. Have you ever been convicted of any violation of liquor and/or beer laws, controlled substance laws, felonies, or any crime involving moral turpitude, within the last ten years, or do you have any charges currently pending?
☐ Yes* ☒ No
 *If yes, give particulars of each charge, including city, county, state: court and date: _____
8. Have you ever been convicted of any misdemeanors (including Speeding, DUI, Simple Assault, etc.) within the last ten (10) years or have any charges currently pending?
☐ Yes* ☒ No
 *If yes, give of each charge, including city, county, state, court and date: _____
9. Do you understand both the state laws and local laws regulating the sale and distribution of beer in the City of Morristown?
☒ Yes ☐ No
10. Do you understand that allowing illegal gambling on the premises will subject the permit to revocation?
☒ Yes ☐ No

AFFIDAVIT

I hereby solemnly swear or affirm that each statement on this questionnaire is true and correct and agree that if my statement is false, the permit issued may be revoked by the Beer Board, upon notice and hearing, and that the burden is on the permittee to prove the correctness of all the statements in this application.

I understand that this application is subject to the Tennessee Public Records Act and shall be open for inspection and reproduction by any citizen. Tennessee Code Annotated §10-7-503.

I understand that by submitting this application a background investigation shall be conducted and any and all documents related to my investigation shall become public records.

I hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employees, agents and representatives as stated above.

I have read and understand the foregoing release and understand its provisions and voluntarily consent to abide by its requirements.

[Signature]
Signature of Applicant

3/7/21
Date

Sworn to and subscribed by me this 7th day of March, 20 21.

Notary Public: [Signature]

My Commission Expires: 5-20-2022





CITY OF MORRISTOWN
SPECIAL OCCASION PERMIT APPLICATION AFFIDAVIT



1. I/we Paul LeBel hereby solemnly swear or affirm that each statement in this application is true and correct and understand that if any statement contained herein is false, the permit issued is automatically forfeited and voided. Furthermore, that in the event of forfeiture I/we shall not be eligible to receive another permit for a period of ten (10) years pursuant to Tennessee Code Annotated § 57-5-105(d).
2. I/we understand that all applicants are charged with the responsibility of knowing the local and state beer laws. I/we are aware that the penalty for violating state or local beer laws can include revocation or suspension of the permit and/or the imposition of civil penalties up to two thousand five dollars (\$2,500) per offense.
3. I/we understand that if the business allows illegal gambling on the premises that the beer permit will be subject to revocation.
4. I/we understand that by submitting this application, a background investigation shall be conducted on the Event Manager. It is further understood that any and all documents related to that investigation shall become public record open for public inspection and reproduction pursuant to Tennessee Code Annotated § 10-7-503.
5. I/we hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives from any and all liability of whatever type for any damages, causes of actions, personal property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to my application. I/we hereby waive all possible liability of the City of Morristown, Morristown Beer Board, Morristown Police Department, its employees, agents and representatives as stated above.
6. I/we agree that the special occasion permit holder shall use servers possessing server's permits issued by the State of Tennessee Alcoholic Beverage Commission and have said permits available for inspection upon request.
7. I/we agree that the use of any server who has been convicted within the past ten (10) years of any law relating to the sale, possession, manufacture or transportation of intoxicating beverages, including beer, as defined by the City of Morristown Municipal Code Section 8-213 or the use of any server who has been convicted of any felony or crime involving moral turpitude within the past ten (10) years will be cause for possible revocation of the beer permit.
8. I/we understand if any information given in the application subsequently changes, I/we will immediately notify the Morristown Beer Board c/o Business Tax Office.
9. I/we assume full responsibility for the permit and will be accountable for full compliance with the laws of Morristown and the State of Tennessee in the sale of beer.
10. I/we have read the foregoing release. I/we fully understand its provisions, and voluntarily consent to abide by its requirements.
11. I/we acknowledge and understand that the fees paid for the beer permit application process are non-refundable.
12. The undersigned is the applicant or the bona fide and qualified agent/representative of the corporate applicant.


Applicant Signature or Agent / Representative

3-7-21

Date

Sworn to and subscribed by me this 7th day of March, 20 21

Notary Public: 

My Commission Expires: 5-30-2022





CITY OF MORRISTOWN BEER BOARD
AUTHORIZATION FOR CRIMINAL HISTORY



3/7/21

Date

I, the undersigned applicant, or duly authorized signatory for applicant, for a permit authorizing the sale of beer within the City of Morristown, Tennessee, do hereby authorize the City of Morristown, by and through its agents and representatives and employees, to make inquiry, whether verbal, written, or electronic, of any and all law enforcement agencies or clerks of courts, whether, state, federal or local, concerning my criminal history of any convictions that I have had for any misdemeanor or felony, involving other than minor traffic violations, within the last ten (10) years from the date above.

I, the undersigned, further authorize any and all law enforcement agencies or clerks of courts, whether state, federal or local, or any state, federal, local or national entity storing and providing criminal history data, to release the afore stated information to the City of Morristown.

Residences for Past 10 Years

Street Address

City, State and Zip Code

Signature

Paul LeBel

Name – Printed (include Maiden Name if Applicable)

Date of Birth

Social Security Number

Current Home Street Address

City, State and Zip Code

Signature

Veronica Hall

Name of Witness – Printed

Veronica Hall



City of Morristown
Office of the Police Department
Support Services



FAX TRANSMITTAL
COVER SHEET

FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 10, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

COMMENTS:

Background check request is for the LAST 10 YEARS

THANK YOU

NOTICE

THIS MATERIAL IS INTENDED ONLY FOR THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED. IT MAY CONTAIN PRIVILEGED, CONFIDENTIAL INFORMATION THAT IS EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAWS. IF YOU ARE NOT THE INTENDED RECIPIENT, PLEASE NOTE THAT YOU ARE STRICTLY PROHIBITED FROM DISSEMINATING OR DISTRIBUTING THIS MATERIAL (other than to the intended recipient) OR COPYING THIS MATERIAL. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THIS MATERIAL (and all copies) TO US BY MAIL TO THE *Morristown Police Department, P. O. Box 1283, Morristown, TN 37816-1283*.

IF THERE WAS A PROBLEM RECEIVING THIS FAX, PLEASE CONTACT THIS OFFICE AT **(423) 585-4681**.

THANK YOU.

(700.03 REV) MPD 2019

[Return to Agenda](#)



Morristown Police Department

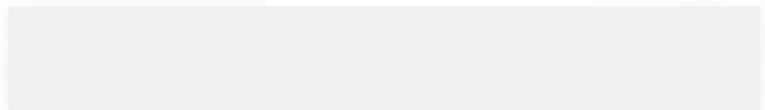
ROGER OVERHOLT
Chief of Police

Hamblen County Sheriff's Dept.
Records Division

March 10, 2021

I am requesting a records check for the purpose of a Special Occasion Beer Permit on the following individual:

Paul Lebel



If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department

Esco R. Jarnagin
Sheriff

Wayne Mize
Chief Deputy



Sheriff of Hamblen County

510 Allison Street
Morristown, Tennessee 37814

HAMBLEN CO. ARREST RECORD SEARCH

DATE: 3/10/21

AN ARREST RECORD SEARCH WAS PROVIDED FOR THE FOLLOWING
INDIVIDUAL:

NAME: Paul Lebel

DATE OF BIRTH: [REDACTED]

INDIVIDUAL HAS NO RECORD AT THE HAMBLEN CO. SHERIFF'S DEPT. ✓

Has Arrest with Morristown Police Department, Please Contact MPD-423-585-2710

INDIVIDUAL HAS THE FOLLOWING RECORD AT THE HAMBLEN CO. SHERIFF'S DEPT:

THIS RECORDS CHECK COVERS
APPROXIMATELY THE LAST 15 YEARS

NO RECORD

MAR 10 2021

HCSD

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT THE HAMBLEN CO.
SHERIFF'S DEPT. RECORDS OFFICE AT (423) 585-2769. THIS
RECORD CHECK IS A COUNTY RECORD CHECK ONLY.

Kim Spe

PHONE: (423) 586-3781 - Administrative
(423) 585-2720 - Jail
FAX: (423) 587-1658 - Administrative
(423) 587-1329 - Jail



City of Morristown
Office of the Police Department



LOCAL ARREST HISTORY
MORRISTOWN, TN (CITY LIMITS ONLY)

Subject of Inquiry: LEBEL, PAUL
Last First Middle

Date of Birth: _____

Address: Street _____

City: _____

ID Presented: ☐ DL (State TN) ☐ SSN ☐ Military ☐ Other ID Number: 066083632

☐ Check if information is same as above

Person Requesting: Hinkle, Kenneth
Last First Middle

Date of Birth: _____

Address: Street: MPD

City: _____

State: _____

Zip Code: _____

ID Presented: ☐ DL (State _____) ☐ SSN ☐ Military ☐ Other ID Number: _____

"I understand this information is regulated by law."

Sgt. [Signature]
Signature

☒ No Record was found with the name and DOB provided.

☐ The following record was found with the name and DOB provided.

Date:	Charges:

☐ Continued on Reverse Side

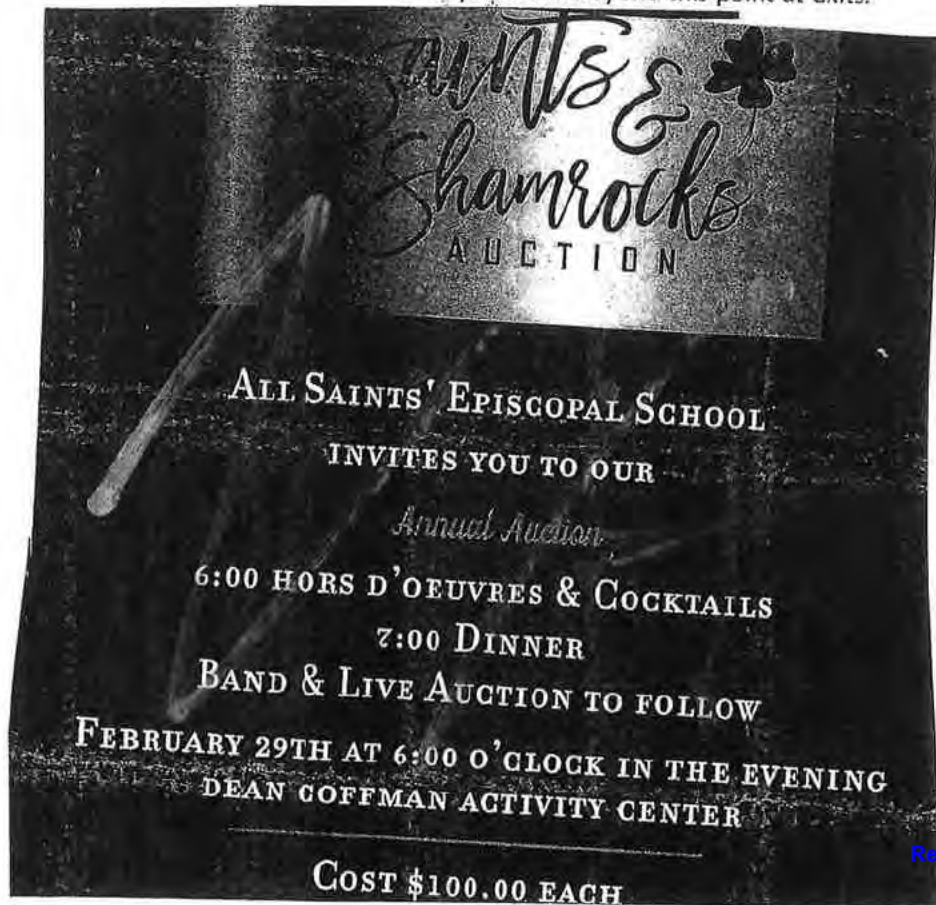
Michelle Andrews Records
Employee Processing History Title

Date: 3/10/2021



Safety Plan for All Saints' Episcopal School Auction

- Tickets \$100 each
- The event is hosted inside our building in the Dean Coffman Activity Center.
- Our Auction is a long running fundraising event.
- The auction is attended by mostly donors, parents, and local businesses.
- Event attendees are checked off a list upon arrival.
- We are expecting around 250 people this year.
- Our bartenders are all certified and are past employees of The Country Club.
- The bartenders will require guest to show ID.
- We will be serving wine, beer, and a specialty drink.
- The bar is open to all guest over the age of 21.
- There will be food provided by Jersey Girl.
- There will be no outside drinks allowed.
- There will be signs posted that no drinks are permitted beyond this point at exits.





ALL SAINTS EPISCOPAL SCHOOL
INVITES YOU TO OUR

All Saints' Annual Auction

THE BEACH BALL
FLIP-FLOPS AND DRESSY TOPS

APRIL 17
2021

• AT 6:00 O'CLOCK IN THE EVENING

THE DEAN COFFMAN ACTIVITY CENTER

• 6:00 HORS D'OEUVRES & COCKTAILS

• 7:00 DINNER

• BAND AND LIVE/ONLINE AUCTION TO FOLLOW



Cost \$100 each or \$175 a couple
ASES Parents - \$75 or \$125 a couple

DRESSY CASUAL

THE CINCINNATI INSURANCE COMPANY

A Stock Insurance Company

COMMERCIAL GENERAL LIABILITY COVERAGE PART DECLARATIONS

Attached to and forming part of POLICY NUMBER: ETD 055 39 13

Named Insured is the same as it appears in the Common Policy Declarations

LIMITS OF INSURANCE

EACH OCCURRENCE LIMIT	\$ 1,000,000	
GENERAL AGGREGATE LIMIT	\$ 3,000,000	
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT	\$ 3,000,000	
PERSONAL & ADVERTISING INJURY LIMIT	\$ 1,000,000	ANY ONE PERSON OR ORGANIZATION
DAMAGE TO PREMISES RENTED TO YOU LIMIT		ANY ONE
\$100,000 limit unless otherwise indicated herein:	\$ SEE GA252	PREMISES
MEDICAL EXPENSE LIMIT		
\$5,000 limit unless otherwise indicated herein:	\$ SEE GA252	ANY ONE PERSON

CLASSIFICATION	CODE NO.	PREMIUM BASE	RATE		ADVANCE PREMIUM	
			Products / Completed Operations	All Other	Products / Completed Operations	All Other
LOC. 1 - TN CAMPS - NFP INCL PROD AND/OR COMP OP	41422	E 512 EACH		.184		94
DAY CARE CENTERS - NFP INCL PROD AND/OR COMP OP	41716	E 23 EACH		5.601		129
PARKS OR PLAYGROUNDS INCL PROD AND/OR COMP OP	46671	E 1 EACH		249.765		250
SCHOOLS-PRIVATE-ELEMENTARY - NFP INCL PROD AND/OR COMP OP	47476	E 90 EACH		4.164		375
VACANT LAND - NFP INCL PROD AND/OR COMP OP	49452	E 20 EACH		1.795		36
EDUCATIONAL INSTITUTIONS COMMERCIAL GENERAL LIABILITY ENDORSEMENT	20293					300

The General Liability Coverage Part is subject to an annual minimum premium.

TOTAL ANNUAL PREMIUM \$ 1,184

FORMS AND / OR ENDORSEMENTS APPLICABLE TO COMMERCIAL GENERAL LIABILITY COVERAGE PART:
GA101 12/04 COMMERCIAL GENERAL LIABILITY COVERAGE FORM



The Cincinnati Insurance Company

A Stock Insurance Company

Headquarters: 6200 S. Gilmore Road, Fairfield, OH 45014-5141

Mailing address: P.O. Box 145496, Cincinnati, OH 45250-5496

www.cinfin.com ■ 513-870-2000

EDUCATIONAL INSTITUTIONS COMMON POLICY DECLARATIONS

Billing Method: **DIRECT BILL**

POLICY NUMBER ETD 055 39 13 / ETA 055 39 13

NAMED INSURED ALL SAINTS EPISCOPAL SCHOOL INC

3275 MAPLE VALLEY RD

ADDRESS MORRISTOWN, TN 37813-3420

(Number & Street,
Town, County,
State & Zip Code)

Previous Policy Number:

ETD0553913

Policy Period: At 12:01 A.M., STANDARD TIME AT YOUR MAILING ADDRESS SHOWN ABOVE

All coverages except Automobile and / or Garage

Policy number: ETD 055 39 13

FROM: 01-01-2021

TO: 01-01-2022

Automobile and / or Garage

Policy number: ETA 055 39 13

FROM: 01-01-2021

TO: 01-01-2022

Agency STRATE INSURANCE GROUP, INC. 41-144

City MORRISTOWN, TN

Legal Entity / Business Description

ORGANIZATION (ANY OTHER)

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

FORMS APPLICABLE TO ALL COVERAGE PARTS:

IL0017 11/98 COMMON POLICY CONDITIONS

IA102A 09/08 SUMMARY OF PREMIUMS CHARGED

IA904 04/04 SCHEDULE OF LOCATIONS

IA4236 01/15 POLICYHOLDER NOTICE TERRORISM INSURANCE COVERAGE

IA4521 03/20 NOTICE OF PRIVACY PRACTICES

IP404TN 06/94 IMPORTANT INFORMATION TO POLICYHOLDERS TENNESSEE

IP446 08/01 NOTICE TO POLICYHOLDERS

IA4006 07/10 SPECIAL PER OCCURRENCE DEDUCTIBLE ENDORSEMENT

IA4109TN 06/16 TENNESSEE CHANGES - CANCELLATION AND NONRENEWAL

IA4238 01/15 CAP ON LOSSES FROM CERTIFIED ACTS OF TERRORISM

IA4338 05/11 SIGNATURE ENDORSEMENT

IA4505 05/19 NOTICE TO POLICYHOLDERS EXCLUSION - NEURODEGENERATIVE INJURY

IA4519 12/19 NOTICE TO POLICYHOLDERS ATHLETIC OR SPORTS PARTICIPANTS
EXCLUSIONS/LIMITATIONS

CITY OF MORRISTOWN BEER PERMIT
CITY OFFICIALS CHECKLIST

ARTS & CRAFTS
FESTIVAL
5-1-21

TAX OFFICE CHECKLIST

Current Taxes Verified

_____ City Taxes

_____ County Taxes

POLICE DEPARTMENT CHECKLIST

Public Notices



Notice of Beer Board Meeting



Signs Posted at Location of Business – Date Posted: NA



Newspaper Notice of Application – Date Ran in Newspaper: 3-25-2021



Background Investigation



Date of Beer Board Approval: _____



Copy of Permit (Number _____) Issued



Prorated Privilege Tax Paid

L. F. [Signature]

Signature of person verifying completion of checklist

PLANNING CHECKLIST

Requested location is in a (check one)
ordinances of the City of Morristown.



Non-conforming



Conforming location under the zoning laws and

Signature of City Planner _____

INSPECTIONS CHECKLIST

Have occupancy issues been addressed by City Inspections? ☐ Non-Conforming ☐ Conforming

Signature of City Inspector _____

FIRE DEPARTMENT CHECKLIST

Have the fire code inspections been completed? ☐ Non-conforming ☐ Conforming

Signature of Fire Marshall _____

ate of event:
May 1st 2021
ame of event:
ARTS & CRAFTS
FESTIVAL

Special Event & Special Occasion Beer Permit Departmental Reviews For City of Morristown Staff Use ONLY



Timeline	Function	Date	Signature
at least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee	3/3/21	J. Powell
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee		
eadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement	3/5/21	S. [Signature]
	Police Department: Beer Permit review- if applicable	3/5/21	[Signature]
	Fire Department: Beer Permit review- if applicable	NA	
	Finance Department: Beer Permit review- if applicable	NA	
	Finance Department: Review Certificate of Insurance	3-29-21	[Signature]
1-20 days prior to event:	Finance Department: Provide Risk Management Assessment	3-24-21	[Signature]
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement	NA	
	Fire Department: Review and approve	3/24/21	[Signature]
	Public Works Department: Review and approve	3/24/21	[Signature]
	Parks and Rec Department: Review and approve	NA	
at least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement	NA	
eadline date:	Tax Office: Receive \$250 damage/ cleanup deposit	3-17-21	J. Powell
	Police Department: Receive safety/emergency/traffic control plan.	3/5/21	S. [Signature]
	Tax Office: Receive \$1,000,000 certificate of insurance	3/29/21	[Signature]
	Tax Office: Receive 50% Police Assistance Agreement fees	N/A	N/A
least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees	N/A	N/A
eadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
ter the event:	Police Department: Determine whether Public Works needs to be called in for clean up		
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.		
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		Return to Agenda

Date of event:

5/1/21

Name of event:

Skymart

Arts & Crafts

Special Event & Special Occasion

Beer Permit Departmental Reviews

For City of Morristown Staff Use ONLY

Skymart Arts & Crafts Festival

May 1, 2021



Timeline	Function	Date	Signature
At least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee		
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee		
Deadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement	3/24/21	[Signature]
	Police Department: Beer Permit review- if applicable	3/24/21	[Signature]
	Fire Department: Beer Permit review- if applicable		
	Finance Department: Beer Permit review- if applicable		
	Finance Department: Review Certificate of Insurance		
60- 20 days prior to event:	Finance Department: Provide Risk Management Assessment		
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement	3/24/21	[Signature]
	Fire Department: Review and approve		
	Public Works Department: Review and approve		
	Parks and Rec Department: Review and approve		
At least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement		
Deadline date:	Tax Office: Receive \$250 damage/ cleanup deposit		
	Police Department: Receive safety/emergency/traffic control plan.		
	Tax Office: Receive \$1,000,000 certificate of insurance		
	Tax Office: Receive 50% Police Assistance Agreement fees		
At least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees		
Deadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
After the event:	Police Department: Determine whether Public Works needs to be called in for clean up		
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.		
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		Return to Agenda

PAYMENT SUMMARY RECEIPT

CITY OF MORRISTOWN
100 W 1ST NORTH ST
MORRISTOWN TN 37814-1499

DATE: 03/23/21 CUSTOMER#: 000000000
TIME: 15:03
CLERK: 2842tba1

RECPT#: 642106 PREV BAL:
TP/YR: MS/2021 AMT PAID: 80.00
BILL: ADJSTMNT:
EFF DT: 03/23/21 BAL DUE:
MISCELLANEOUS PAYMENT

RECPT#: 642107 PREV BAL:
TP/YR: MS/2021 AMT PAID: 80.00
BILL: ADJSTMNT:
EFF DT: 03/23/21 BAL DUE:
MISCELLANEOUS PAYMENT

RECPT#: 642108 PREV BAL:
TP/YR: MS/2021 AMT PAID: 80.00
BILL: ADJSTMNT:
EFF DT: 03/23/21 BAL DUE:
MISCELLANEOUS PAYMENT

-----TOTALS-----

PRINCIPAL PAID: 240.00
INTEREST PAID: .00
ADJUSTMENTS: .00
DISC TAKEN: .00

AMT TENDERED: 240.00
AMT APPLIED: 240.00
CHANGE: .00

PAID BY: MORRISTOWN CHAMBER O
PAYMENT METH: CHECK
PAYMENT REF: 018484



CITY OF MORRISTOWN
APPLICATION FOR SPECIAL OCCASION BEER PERMIT
Information & Applicant Checklist



By making this application, the applicant assumes personal responsibility for all information provided. It is the applicant's responsibility to see that the application is complete and correct. The Beer Board could delay action on the application if any information is not accurate. The City Beer Board meets as needed on the first and third Tuesday of each month. To ensure consideration of an application, the applicant must submit the completed application to the City of Morristown Tax Office **at least 60 days prior to the Beer Board meeting.**

To be issued a beer permit for a special occasion, the following conditions must be met:

- *The special occasion permit shall not be issued for longer than one (1) twenty-four-hour period, subject to the limitations on the hours of sale imposed by law. The application for the special occasion permit shall include documents showing evidence of the type of organization, copy of IRS determination letter, and state the location of the premises upon which alcoholic beverages shall be served and the purpose for the request of the license.*
- *The fee for each special occasion license shall be fifty dollars (\$50.00).*
- *For the purpose of this section:*
Bona fide charitable or nonprofit organization means any corporation or legal entity which has been recognized as exempt from federal taxes under section 501c of the Internal Revenue Code for two consecutive calendar years.
- *No charitable or nonprofit organization possessing a special occasion permit shall purchase, for sale or distribution, beer from any source other than a licensee as provided pursuant of state law.*

The following items must be completed and copies provided (if applicable). Remember, the completed application **MUST BE SUBMITTED** to the City of Morristown Business Tax Office.

- ☐ Application completed & submitted to city business tax office.
- ☐ Agenda Date (Beer Board Meeting) _____ City Center, Council Chambers
Representative or Manager **MUST** be present at meeting for consideration of permit.
- ☐ Permit application fee (all fees non-refundable) \$50.00
- ☐ Publication fee paid \$30.00
- ☐ Copy of IRS Designation Letter showing 501c for two consecutive calendar years.

I/we hereby make application for a permit to sell or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Morristown alcoholic beverage ordinance Title 8 and base my application upon the answers to the following questions:

1. Name of Applicant(s): Morristown Area Chamber of Commerce, Inc.
2. Applicant(s) address: 825 W. First North St. P. O. Box 9 Morristown TN 37 (Phone) 423-586-6382
3. Name of Special Occasion Event: Skymart Arts & Crafts Festival
4. Date(s) of Event: Saturday May 1, 2021 Purpose of Event Promote downtown businesses
5. There are approved locations set aside for special occasion events to occur. (These are shown in attached exhibits.) Please check the location you are requesting: ☒ Downtown ☐ Farmers Market ☐ Rose Center.
If requesting approval for a different location please provide address: _____
6. Event Manager Name and contact information: Debra Williams, General Manager, Morristown Area Chamber of Commerce, P. O. Box 9, Morristown, TN 37815, 423-586-6382 or cell-423-258-8176

CITY OF MORRISTOWN
SPECIAL OCCASION PERMIT APPLICATION AFFIDAVIT

Morristown Area Chamber of Commerce

1. I/we _____ hereby solemnly swear or affirm that each statement in this application is true and correct and understand that if any statement contained herein is false, the permit issued is automatically forfeited and voided. Furthermore, that in the event of forfeiture I/we shall not be eligible to receive another permit for a period of ten (10) years pursuant to Tennessee Code Annotated § 57-5-105(d).
2. I/we understand that all applicants are charged with the responsibility of knowing the local and state beer laws. I/we are aware that the penalty for violating state or local beer laws can include revocation or suspension of the permit and/or the imposition of civil penalties up to two thousand five dollars (\$2,500) per offense.
3. I/we understand that if the business allows illegal gambling on the premises that the beer permit will be subject to revocation.
4. I/we understand that by submitting this application, a background investigation shall be conducted on the Event Manager. It is further understood that any and all documents related to that investigation shall become public record open for public inspection and reproduction pursuant to Tennessee Code Annotated § 10-7-503.
5. I/we hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives from any and all liability of whatever type for any damages, causes of actions, personal property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to my application. I/we hereby waive all possible liability of the City of Morristown, Morristown Beer Board, Morristown Police Department, its employees, agents and representatives as stated above.
6. I/we agree that the special occasion permit holder shall use servers possessing server's permits issued by the State of Tennessee Alcoholic Beverage Commission and have said permits available for inspection upon request.
7. I/we agree that the use of any server who has been convicted within the past ten (10) years of any law relating to the sale, possession, manufacture or transportation of intoxicating beverages, including beer, as defined by the City of Morristown Municipal Code Section 8-213 or the use of any server who has been convicted of any felony or crime involving moral turpitude within the past ten (10) years will be cause for possible revocation of the beer permit.
8. I/we understand if any information given in the application subsequently changes, I/we will immediately notify the Morristown Beer Board c/o Business Tax Office.
9. I/we assume full responsibility for the permit and will be accountable for full compliance with the laws of Morristown and the State of Tennessee in the sale of beer.
10. I/we have read the foregoing release. I/we fully understand its provisions, and voluntarily consent to abide by its requirements.
11. I/we acknowledge and understand that the fees paid for the beer permit application process are non-refundable.
12. The undersigned is the applicant or the bona fide and qualified agent/representative of the corporate applicant.


Applicant Signature or Agent/Representative

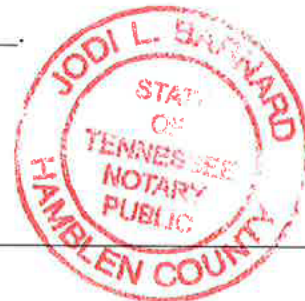
3/1/21

Date

Sworn to and subscribed by me this 16 day of March, 20 21.

Notary Public: 

My Commission Expires: 8-31-21



CITY OF MORRISTOWN
Application for SPECIAL OCCASSION BEER PERMIT
Event Manager Application

Special Events Permit for Downtown Skymart Arts & Crafts Festival

Reason for Application:

1. Name Debra F. Williams
2. Home Address _____ City _____ State _____ Zip _____
3. Home Phone (none) Cellular Phone _____ Date of Birth _____
4. Driver's License # _____ State _____ Social Security # _____
5. Local Business Name Morristown Area Chamber of Commerce, Inc.
6. Local Business Address/Zip P. O. Box 9 Morristown, TN 37815 Business Phone 423 586-6382
7. Have you ever been convicted of any violation of liquor and/or beer laws, controlled substance laws, felonies, or any crime involving moral turpitude, within the last ten years, or do you have any charges currently pending?
☐ Yes* ☒ No
- *If yes, give particulars of each charge, including city, county, state: court and date: _____
8. Have you ever been convicted of any misdemeanors (including Speeding, DUI, Simple Assault, etc.) within the last ten (10) years or have any charges currently pending?
☐ Yes* ☒ No
- *If yes, give of each charge, including city, county, state, court and date: _____
9. Do you understand both the state laws and local laws regulating the sale and distribution of beer in the City of Morristown?
☒ Yes ☐ No
10. Do you understand that allowing illegal gambling on the premises will subject the permit to revocation?
☒ Yes ☐ No

AFFIDAVIT

I hereby solemnly swear or affirm that each statement on this questionnaire is true and correct and agree that if my statement is false, the permit issued may be revoked by the Beer Board, upon notice and hearing, and that the burden is on the permittee to prove the correctness of all the statements in this application.

I understand that this application is subject to the Tennessee Public Records Act and shall be open for inspection and reproduction by any citizen. Tennessee Code Annotated §10-7-503.

I understand that by submitting this application a background investigation shall be conducted and any and all documents related to my investigation shall become public records.

I hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employees, agents and representatives as stated above.

I have read and understand the foregoing release and understand its provisions and voluntarily consent to abide by its requirements.

Debra Williams
Signature of Applicant

3/1/21

Date

Sworn to and subscribed by me this 16 day of March, 20 21.

Notary Public: Jodi L. Barnard

My Commission Expires: 8-31-21



Return to Agenda



CITY OF MORRISTOWN BEER BOARD
AUTHORIZATION FOR CRIMINAL HISTORY



3-01-21

Date

I, the undersigned applicant, or duly authorized signatory for applicant, for a permit authorizing the sale of beer within the City of Morristown, Tennessee, do hereby authorize the City of Morristown, by and through its agents and representatives and employees, to make inquiry, whether verbal, written, or electronic, of any and all law enforcement agencies or clerks of courts, whether, state, federal or local, concerning my criminal history of any convictions that I have had for any misdemeanor or felony, involving other than minor traffic violations, within the last ten (10) years from the date above.

I, the undersigned, further authorize any and all law enforcement agencies or clerks of courts, whether state, federal or local, or any state, federal, local or national entity storing and providing criminal history data, to release the afore stated information to the City of Morristown.

Residences for Past 10 Years

None other than current address

Street Address

City, State and Zip Code

Signature

Debra Foster Williams

Name – Printed (include Maiden Name if Applicable)

Date of Birth

Social Security Number

Current Home Street Address

City, State and Zip Code

Signature

Anne R Babber

Name of Witness – Printed



City of Morristown
Office of the Police Department



LOCAL ARREST HISTORY
MORRISTOWN, TN (CITY LIMITS ONLY)

Subject of Inquiry: WILLIAMS, DEBRA FOSTER
Last First Middle
DEBRA FOSTER
Full Maiden Name if Applicable

Date of Birth: _____

Address: Street: _____
City: _____ State: _____ Zip Code: _____

ID Presented: ☐ DL (State TN) ☐ SSN ☒ Military ☐ Other ID Number: _____

☐ Check if information is same as above

Person Requesting: Hinkle, Kenneth
Last First Middle

Date of Birth: _____

Address: Street: MPD
City: _____ State: _____ Zip Code: _____

ID Presented: ☐ DL (State _____) ☐ SSN ☐ Military ☐ Other ID Number: _____

PAST 10 YEARS

"I understand this information is regulated by law."

[Signature]
Signature

☐ No Record was found with the name and DOB provided.

☐ The following record was found with the name and DOB provided.

Date:	Charges:

☐ Continued on Reverse Side

Melinda Andrews
Employee Processing History

Records
Title

Date: 3/24/2021



City of Morristown
Office of the Police Department
Support Services



FAX TRANSMITTAL
COVER SHEET

FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 24, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

COMMENTS:

Background check request is for the LAST 10 YEARS

THANK YOU

NOTICE

THIS MATERIAL IS INTENDED ONLY FOR THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED. IT MAY CONTAIN PRIVILEGED, CONFIDENTIAL INFORMATION THAT IS EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAWS. IF YOU ARE NOT THE INTENDED RECIPIENT, PLEASE NOTE THAT YOU ARE STRICTLY PROHIBITED FROM DISSEMINATING OR DISTRIBUTING THIS MATERIAL (other than to the intended recipient) OR COPYING THIS MATERIAL. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THIS MATERIAL (and all copies) TO US BY MAIL TO THE *Morristown Police Department, P. O. Box 1283, Morristown, TN 37816-1283*.

IF THERE WAS A PROBLEM RECEIVING THIS FAX, PLEASE CONTACT THIS OFFICE AT (423) 585-4681.

THANK YOU.

(700.03 REV) MPD 2019

[Return to Agenda](#)



Morristown Police Department

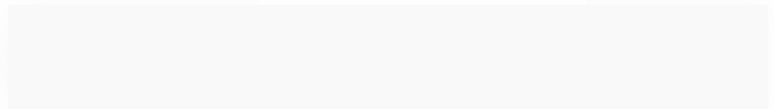
ROGER OVERHOLT
Chief of Police

Hamblen County Sheriff's Dept.
Records Division

March 24, 2021

I am requesting a records check for the purpose of a Special Occasion Beer Permit on the following individual:

Debra Foster Williams



If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department



City of Morristown
Office of the Police Department
Support Services

FAX TRANSMITTAL
COVER SHEET



FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

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(700.03 REV) MPD 2019



Morristown Police Department

ROGER OVERHOLT
Chief of Police

Hamblen County Sheriff's Dept.
Records Division

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Debra Foster Williams

If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance.

Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department

Esco R. Jarnagin
Sheriff

Wayne Mi.
Chief Deputy



Sheriff of Hamblen County

510 Allison Street
Morristown, Tennessee 37814

HAMBLLEN CO. ARREST RECORD SEARCH

DATE: 3/24/21

AN ARREST RECORD SEARCH WAS PROVIDED FOR THE FOLLOWING
INDIVIDUAL:

NAME: Debra Foster Williams

DATE OF BIRTH:

INDIVIDUAL HAS NO RECORD AT THE HAMBLLEN CO. SHERIFF'S DEPT. ✓

Has Arrest with Morristown Police Department, Please Contact MPD-423-585-2710

INDIVIDUAL HAS THE FOLLOWING RECORD AT THE HAMBLLEN CO. SHERIFF'S DEPT:

NO RECORD

MAR 24 2021

HCSD

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT THE HAMBLLEN CO.
SHERIFF'S DEPT. RECORDS OFFICE AT (423) 585-2769. THIS
RECORD CHECK IS A COUNTY RECORD CHECK ONLY.

Jim Spivey

PHONE: (423) 586-3781 - Administrative
(423) 585-2720 - Jail
FAX: (423) 587-1658 - Administrative
(423) 587-1329 - Jail

Page : 1 of 2 03/24/2021 13:33:05
Order Number : 22182093
PO Number :
Customer : 21876374 City Of Morristown
Contact :
Address1 : Ashley Ahl
Address2 : PO Box 1499
City St Zip : Morristown TN 378161499
Phone : (423) 581-0100
Fax : (423) 585-4679
Printed By : ctadtaker4
Entered By : ctadtaker4
Keywords : Beer Board - April 6th
Notes :
Zones :

Ad Number : 22272857
Ad Key :
Salesperson : 04 - Anne Marie House
Publication : Citizen Tribune
Section : Classified Section
Sub Section : Classified Section
Category : Public Notices-130
Dates Run : 03/25/2021-03/25/2021
Days : 1
Size : 1 x 7.68, 79 lines
Words : 144
Ad Rate : Open
Ad Price : 66.53
Amount Paid : 0.00
Amount Due : 66.53

PUBLIC NOTICE

The Beer Board of the City of Morristown, Tennessee, will meet on Tuesday, April 6, 2021 at 5:00 p.m. at the Morristown City Center, 100 West First North Street, to consider the following Beer Permit:

Special Occasion Permit for the Chamber of Commerce, Skymart Arts & Crafts Festival on May 1, 2021 located at downtown Main St. from Mill St. to Cumberland Ave., Morristown, TN.

Special Occasion Permit for each of the four Chamber of Commerce, "Concerts on the Downtown Green" to be held on May 7, 2021, June 4, 2021, July 2, 2021 and August 6, 2021 located at the Downtown Farmers Market, Morristown, TN.

Off-premise Permit for Traders Corner Inc. DBA as Trad-

EP/EO Division: CSB
P. O. Box 1055
Atlanta, Georgia 30370

EO105

VG APR 01'88

Morristown Chamber of Commerce
P. O. Box 9
825 West First North Street
Morristown, TN 37814

Person to Contact:
Jerry L. Higgins/lrk
Contact Telephone Number:
(615) 736-7171
Reply to:
EO: 7206: JLH
Employer Identification
Number:
62-0418880

Dear Sir or Madam:

Our examination of your Form 990 for the year ended December 31, 1983, disclosed that you continue to qualify for exemption from Federal income tax. We will continue to recognize your exemption under Internal Revenue Code section 501(a) as an organization described in section 501(c)(6). There is no change in your liability for the unrelated business income tax imposed by Code section 511.

During the examination we noted certain aspects of your operation and/or reporting inadequacies which, if expanded or not corrected in subsequent years, may jeopardize your exempt status or subject you to applicable penalties.

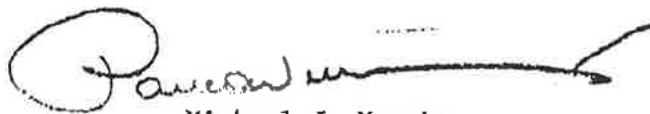
More Specifically:

Our examination disclosed that you did not attach a copy of your depreciation schedule pursuant to Part V, item 57 of the Form 990. Please be advised that in future years this schedule must be attached. See provisions of section 6033 of the Internal Revenue Code.

If you have any questions regarding this letter, please contact the person whose name and telephone number are shown above.

Thank you for your cooperation.

Sincerely yours,



Michael J. Murphy
District Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/28/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Strate Insurance Group, Inc. 1750 West Andrew Johnson Hwy Morristown TN 37814	CONTACT NAME: Jean Willson, CIC, CISR PHONE (A/C, No, Ext): (423) 318-5800 FAX (A/C, No): (423) 581-4504 E-MAIL ADDRESS: jwillson@strateinsurance.com
INSURED Morristown Area Chamber of Commerce PO Box 9 Morristown TN 37815	INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Ins. Co. NAIC #: 23850 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 21-22 GL & UMB

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y		PHPK2254208	04/01/2021	04/01/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			PHUB761466	04/01/2021	04/01/2022	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Holder is Additional Insured per form PI-GLD-HS (10/11) attached

CERTIFICATE HOLDER

CANCELLATION

City of Morristown

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

CITY OF MORRISTOWN BEER PERMIT
CITY OFFICIALS CHECKLIST

DOWNTOWN COCKTAIL
ON THE GREEN
5-7-21

TAX OFFICE CHECKLIST

Current Taxes Verified

_____ City Taxes

_____ County Taxes

POLICE DEPARTMENT CHECKLIST

Public Notices



Notice of Beer Board Meeting



Signs Posted at Location of Business – Date Posted: NA



Newspaper Notice of Application – Date Ran in Newspaper: 3.25.2021



Background Investigation



Date of Beer Board Approval: _____



Copy of Permit (Number _____) Issued



Prorated Privilege Tax Paid

[Signature]

Signature of person verifying completion of checklist

PLANNING CHECKLIST

Requested location is in a (check one)
ordinances of the City of Morristown.

☐ Non-conforming

☐ Conforming location under the zoning laws and

[Signature]

Signature of City Planner _____

INSPECTIONS CHECKLIST

Have occupancy issues been addressed by City Inspections? ☐ Non-Conforming ☐ Conforming

Signature of City Inspector _____

FIRE DEPARTMENT CHECKLIST

Have the fire code inspections been completed? ☐ Non-conforming ☐ Conforming

Signature of Fire Marshall _____

Date of event:
5-7-21

Name of event:
**Concert on
The Green**

Special Event & Special Occasion

Beer Permit Departmental Reviews For City of Morristown Staff Use ONLY

*Downtown Concert on the Green
May 7, 21*



Timeline	Function	Date	Signature
At least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee	3/23/21	<i>MalPani</i>
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee	3/23/21	<i>MalPani</i>
Deadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement	3/24/21	<i>LT PASH</i>
	Police Department: Beer Permit review- if applicable	3/24/21	<i>LT PASH</i>
	Fire Department: Beer Permit review- if applicable	NA	
	Finance Department: Beer Permit review- if applicable	NA	
	Finance Department: Review Certificate of Insurance	3-23-2021	<i>[Signature]</i>
60- 20 days prior to event:	Finance Department: Provide Risk Management Assessment	3-24-21	<i>[Signature]</i>
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement	3/24/21	<i>LT PASH</i>
	Fire Department: Review and approve	3/24/21	<i>Bell/Hy</i>
	Public Works Department: Review and approve	3/24/21	<i>[Signature]</i>
	Parks and Rec Department: Review and approve	NA	
At least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement		
Deadline date:	Tax Office: Receive \$250 damage/ cleanup deposit		
	Police Department: Receive safety/emergency/traffic control plan.		
	Tax Office: Receive \$1,000,000 certificate of insurance		
	Tax Office: Receive 50% Police Assistance Agreement fees		
At least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees		
Deadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
After the event:	Police Department: Determine whether Public Works needs to be called in for clean up		
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.		
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		Return to Agenda

CITY OF MORRISTOWN
100 W 1ST NORTH ST
MORRISTOWN TN 37814-1499

RECPT#: 642101

03/23/21 14:43 2842tbain

CUSTOMER#:0

NAME:

CONCERT ON GREEN 5/7

CHG: 204

PARADE PERMIT

10.00

PAID AMT

1 PAID BY NAME

MORRISTOWN CHPAY METHOD

CASH

AMT TENDERED:

AMT APPLIED: 10.00

CHANGE: 10.00

Date of event:

5/1/21

Name of event:

Concert on
The Green

Special Event & Special Occasion

Beer Permit Departmental Reviews

For City of Morristown Staff Use ONLY



Timeline	Function	Date	Signature
At least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee		
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee	3/23/21	Chia Uhm
Deadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement		
	Police Department: Beer Permit review- if applicable		
	Fire Department: Beer Permit review- if applicable		
	Finance Department: Beer Permit review- if applicable	3-24-21	Ray Clon
	Finance Department: Review Certificate of Insurance		
60- 20 days prior to event:	Finance Department: Provide Risk Management Assessment		
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement		
	Fire Department: Review and approve	3/24/21	Baldy H
	Public Works Department: Review and approve	3/24/21	Samson
	Parks and Rec Department: Review and approve		
At least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement		
Deadline date:	Tax Office: Receive \$250 damage/ cleanup deposit		
	Police Department: Receive safety/emergency/traffic control plan.		
	Tax Office: Receive \$1,000,000 certificate of insurance		
	Tax Office: Receive 50% Police Assistance Agreement fees		
At least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees		
Deadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
After the event:	Police Department: Determine whether Public Works needs to be called in for clean up		
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.		
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		Return to Agenda

PAYMENT SUMMARY RECEIPT

CITY OF MORRISTOWN
100 W 1ST NORTH ST
MORRISTOWN TN 37814-1499

DATE: 03/23/21 CUSTOMER#: 000000000
TIME: 15:03
CLERK: 2842tba1

RECPT#: 642106 PREV BAL:
TP/YR: MS/2021 AMT PAID: 80.00
BILL: ADJSTMNT:
EFF DT: 03/23/21 BAL DUE:
MISCELLANEOUS PAYMENT

RECPT#: 642107 PREV BAL:
TP/YR: MS/2021 AMT PAID: 80.00
BILL: ADJSTMNT:
EFF DT: 03/23/21 BAL DUE:
MISCELLANEOUS PAYMENT

RECPT#: 642108 PREV BAL:
TP/YR: MS/2021 AMT PAID: 80.00
BILL: ADJSTMNT:
EFF DT: 03/23/21 BAL DUE:
MISCELLANEOUS PAYMENT

-----TOTALS-----

PRINCIPAL PAID: 240.00
INTEREST PAID: .00
ADJUSTMENTS: .00
DISC TAKEN: .00

AMT TENDERED: 240.00
AMT APPLIED: 240.00
CHANGE: .00

PAID BY: MORRISTOWN CHAMBER O
PAYMENT METH: CHECK
PAYMENT REF: 018484

CITY OF MORRISTOWN
APPLICATION FOR SPECIAL OCCASION BEER PERMIT
Information & Applicant Checklist



By making this application, the applicant assumes personal responsibility for all information provided. It is the applicant's responsibility to see that the application is complete and correct. The Beer Board could delay action on the application if any information is not accurate. The City Beer Board meets as needed on the first and third Tuesday of each month. To ensure consideration of an application, the applicant must submit the completed application to the City of Morristown Tax Office **at least 60 days prior to the Beer Board meeting.**

To be issued a beer permit for a special occasion, the following conditions must be met:

- *The special occasion permit shall not be issued for longer than one (1) twenty-four-hour period, subject to the limitations on the hours of sale imposed by law. The application for the special occasion permit shall include documents showing evidence of the type of organization, copy of IRS determination letter, and state the location of the premises upon which alcoholic beverages shall be served and the purpose for the request of the license.*
- *The fee for each special occasion license shall be fifty dollars (\$50.00).*
- *For the purpose of this section:*
Bona fide charitable or nonprofit organization means any corporation or legal entity which has been recognized as exempt from federal taxes under section 501c of the Internal Revenue Code for two consecutive calendar years.
- *No charitable or nonprofit organization possessing a special occasion permit shall purchase, for sale or distribution, beer from any source other than a licensee as provided pursuant of state law.*

The following items must be completed and copies provided (if applicable). Remember, the completed application **MUST BE SUBMITTED** to the City of Morristown Business Tax Office.

- ☐ Application completed & submitted to city business tax office.
- ☐ Agenda Date (Beer Board Meeting) _____ City Center, Council Chambers
Representative or Manager **MUST** be present at meeting for consideration of permit.
- ☐ Permit application fee (all fees non-refundable) \$50.00
- ☐ Publication fee paid \$30.00
- ☐ Copy of IRS Designation Letter showing 501c for two consecutive calendar years.

I/we hereby make application for a permit to sell or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Morristown alcoholic beverage ordinance Title 8 and base my application upon the answers to the following questions:

1. Name of Applicant(s): Morristown Area Chamber of Commerce, Inc.
2. Applicant(s) address: 825 W. First North St. P. O. Box 9 Morristown TN 37 (Phone) 423-586-6382
3. Name of Special Occasion Event: Downtown Concert on the Green (1st in series)
4. Date(s) of Event: Friday May 7, 2021 Purpose of Event Provide entertainment & promote busi
5. There are approved locations set aside for special occasion events to occur. (These are shown in attached exhibits.)
Please check the location you are requesting: ☐ Downtown ☐ Farmers Market ☐ Rose Center.
If requesting approval for a different location please provide address: Downtown Green next to Farmers Market Pavilion
6. Event Manager Name and contact information: Debra Williams, General Manager, Morristown Area Chamber of Commerce, P. O. Box 9, Morristown, TN 37815, 423-586-6382 or cell--423-258-8176

CITY OF MORRISTOWN
SPECIAL OCCASION PERMIT APPLICATION AFFIDAVIT



Morristown Area Chamber of Commerce

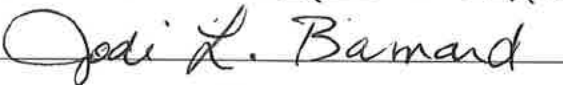
1. I/we _____ hereby solemnly swear or affirm that each statement in this application is true and correct and understand that if any statement contained herein is false, the permit issued is automatically forfeited and voided. Furthermore, that in the event of forfeiture I/we shall not be eligible to receive another permit for a period of ten (10) years pursuant to Tennessee Code Annotated § 57-5-105(d).
2. I/we understand that all applicants are charged with the responsibility of knowing the local and state beer laws. I/we are aware that the penalty for violating state or local beer laws can include revocation or suspension of the permit and/or the imposition of civil penalties up to two thousand five dollars (\$2,500) per offense.
3. I/we understand that if the business allows illegal gambling on the premises that the beer permit will be subject to revocation.
4. I/we understand that by submitting this application, a background investigation shall be conducted on the Event Manager. It is further understood that any and all documents related to that investigation shall become public record open for public inspection and reproduction pursuant to Tennessee Code Annotated § 10-7-503.
5. I/we hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives from any and all liability of whatever type for any damages, causes of actions, personal property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to my application. I/we hereby waive all possible liability of the City of Morristown, Morristown Beer Board, Morristown Police Department, its employees, agents and representatives as stated above.
6. I/we agree that the special occasion permit holder shall use servers possessing server's permits issued by the State of Tennessee Alcoholic Beverage Commission and have said permits available for inspection upon request.
7. I/we agree that the use of any server who has been convicted within the past ten (10) years of any law relating to the sale, possession, manufacture or transportation of intoxicating beverages, including beer, as defined by the City of Morristown Municipal Code Section 8-213 or the use of any server who has been convicted of any felony or crime involving moral turpitude within the past ten (10) years will be cause for possible revocation of the beer permit.
8. I/we understand if any information given in the application subsequently changes, I/we will immediately notify the Morristown Beer Board c/o Business Tax Office.
9. I/we assume full responsibility for the permit and will be accountable for full compliance with the laws of Morristown and the State of Tennessee in the sale of beer.
10. I/we have read the foregoing release. I/we fully understand its provisions, and voluntarily consent to abide by its requirements.
11. I/we acknowledge and understand that the fees paid for the beer permit application process are non-refundable.
12. The undersigned is the applicant or the bona fide and qualified agent/representative of the corporate applicant.


Applicant Signature or Agent/Representative

3/1/21

Date

Sworn to and subscribed by me this 16 day of March, 20 21

Notary Public: 

My Commission Expires: 8-31-21





CITY OF MORRISTOWN
Application for SPECIAL OCCASSION BEER PERMIT
Event Manager Application



Special Event Beer Permit for Downtown Concert on the Green Series

Reason for Application:

1. Name Debra F. Williams
2. Home Address _____ City _____ State _____ Zip _____
3. Home Phone (none) _____ Cellular Phone _____ Date of Birth _____
4. Driver's License # _____ State _____ Social Security # _____
5. Local Business Name Morristown Area Chamber of Commerce, Inc.
6. Local Business Address/Zip P. O. Box 9 Morristown, TN 37815 Business Phone (423) 586-6382
7. Have you ever been convicted of any violation of liquor and/or beer laws, controlled substance laws, felonies, or any crime involving moral turpitude, within the last ten years, or do you have any charges currently pending?
☐ Yes* ☒ No
 *If yes, give particulars of each charge, including city, county, state: court and date: _____
8. Have you ever been convicted of any misdemeanors (including Speeding, DUI, Simple Assault, etc.) within the last ten (10) years or have any charges currently pending?
☐ Yes* ☒ No
 *If yes, give of each charge, including city, county, state, court and date: _____
9. Do you understand both the state laws and local laws regulating the sale and distribution of beer in the City of Morristown?
☒ Yes ☐ No
10. Do you understand that allowing illegal gambling on the premises will subject the permit to revocation?
☒ Yes ☐ No

AFFIDAVIT

I hereby solemnly swear or affirm that each statement on this questionnaire is true and correct and agree that if my statement is false, the permit issued may be revoked by the Beer Board, upon notice and hearing, and that the burden is on the permittee to prove the correctness of all the statements in this application.

I understand that this application is subject to the Tennessee Public Records Act and shall be open for inspection and reproduction by any citizen. Tennessee Code Annotated §10-7-503.

I understand that by submitting this application a background investigation shall be conducted and any and all documents related to my investigation shall become public records.

I hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employees, agents and representatives as stated above.

I have read and understand the foregoing release and understand its provisions and voluntarily consent to abide by its requirements.

Debra Williams
Signature of Applicant

3/1/21

Date

Sworn to and subscribed by me this 16 day of March, 20 21.

Notary Public: Jodi L. Bamard

My Commission Expires: 8-31-21



CITY OF MORRISTOWN BEER BOARD
AUTHORIZATION FOR CRIMINAL HISTORY



3-01-21

Date

I, the undersigned applicant, or duly authorized signatory for applicant, for a permit authorizing the sale of beer within the City of Morristown, Tennessee, do hereby authorize the City of Morristown, by and through its agents and representatives and employees, to make inquiry, whether verbal, written, or electronic, of any and all law enforcement agencies or clerks of courts, whether, state, federal or local, concerning my criminal history of any convictions that I have had for any misdemeanor or felony, involving other than minor traffic violations, within the last ten (10) years from the date above.

I, the undersigned, further authorize any and all law enforcement agencies or clerks of courts, whether state, federal or local, or any state, federal, local or national entity storing and providing criminal history data, to release the afore stated information to the City of Morristown.

Residences for Past 10 Years

None other than current address

Street Address

City, State and Zip Code

Anne R. Babber
Signature

Debra Foster Williams

Name – Printed (include Maiden Name if Applicable)

Date of Birth

Social Security Number

Current Home Street Address

City, State and Zip Code

Debra Foster Williams
Signature

Anne R. Babber
Name of Witness – Printed



City of Morristown
Office of the Police Department
LOCAL ARREST HISTORY
MORRISTOWN, TN (CITY LIMITS ONLY)



Subject of Inquiry: WILLIAMS, DEBRA FOSTER
Last First Middle
DEBRA FOSTER
Full Maiden Name if Applicable

Date of Birth: _____

Address: Street: _____
City: _____

ID Presented: ☐ DL (State TN) ☐ SSN ☒ Military ☐ Other ID Number: _____

☐ Check if information is same as above

Person Requesting: Hinkle, Kenneth
Last First Middle

Date of Birth: _____

Address: Street: MPD
City: _____ State: _____ Zip Code: _____

ID Presented: ☐ DL (State _____) ☐ SSN ☐ Military ☐ Other ID Number: _____

PAST 10 YEARS

"I understand this information is regulated by law."

[Signature]
Signature

☐ No Record was found with the name and DOB provided.

☐ The following record was found with the name and DOB provided.

Date:	Charges:

☐ Continued on Reverse Side

[Signature] Records
Employee Processing History Title

Date: 3/24/2021



City of Morristown
Office of the Police Department
Support Services



FAX TRANSMITTAL
COVER SHEET

FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 24, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

COMMENTS:

Background check request is for the LAST 10 YEARS

THANK YOU

NOTICE

THIS MATERIAL IS INTENDED ONLY FOR THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED. IT MAY CONTAIN PRIVILEGED, CONFIDENTIAL INFORMATION THAT IS EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAWS. IF YOU ARE NOT THE INTENDED RECIPIENT, PLEASE NOTE THAT YOU ARE STRICTLY PROHIBITED FROM DISSEMINATING OR DISTRIBUTING THIS MATERIAL (other than to the intended recipient) OR COPYING THIS MATERIAL. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THIS MATERIAL (and all copies) TO US BY MAIL TO THE *Morristown Police Department, P. O. Box 1283, Morristown, TN 37816-1283*.

IF THERE WAS A PROBLEM RECEIVING THIS FAX, PLEASE CONTACT THIS OFFICE AT (423) 585-4681.

THANK YOU.

(700.03 REV) MPD 2019

[Return to Agenda](#)



Morristown Police Department

ROGER OVERHOLT
Chief of Police

**Hamblen County Sheriff's Dept.
Records Division**

March 24, 2021

I am requesting a records check for the purpose of a Special Occasion Beer Permit on the following individual:

Debra Foster Williams

If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

**Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department**



City of Morristown
Office of the Police Department
Support Services

FAX TRANSMITTAL
COVER SHEET



FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 24, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

COMMENTS:

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THANK YOU

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THANK YOU.

(700.03 REV) MPD 2019



Morristown Police Department

ROGER OVERHOLT
Chief of Police

Hamblen County Sheriff's Dept.
Records Division

March 24, 2021

I am requesting a records check for the purpose of a Special Occasion Beer Permit on the following individual:

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If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department

Esco R. Jarnagin
Sheriff



Wayne M.
Chief Deputy

Sheriff of Hamblen County

510 Allison Street
Morristown, Tennessee 37814

HAMBLLEN CO. ARREST RECORD SEARCH

DATE: 3/24/21

AN ARREST RECORD SEARCH WAS PROVIDED FOR THE FOLLOWING
INDIVIDUAL:

NAME: Debra Foster Williams

DATE OF BIRTH: _____

INDIVIDUAL HAS NO RECORD AT THE HAMBLLEN CO. SHERIFF'S DEPT. ☒

Has Arrest with Morristown Police Department, Please Contact MPD-423-585-2710

INDIVIDUAL HAS THE FOLLOWING RECORD AT THE HAMBLLEN CO. SHERIFF'S DEPT:

NO RECORD

MAR 24 2021

HCSO

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT THE HAMBLLEN CO.
SHERIFF'S DEPT. RECORDS OFFICE AT (423) 585-2769. THIS
RECORD CHECK IS A COUNTY RECORD CHECK ONLY.

Kim Spivey

PHONE: (423) 586-3781 - Administrative
(423) 585-2720 - Jail
FAX: (423) 587-1658 - Administrative
(423) 587-1329 - Jail

Page : 1 of 2 03/24/2021 13:33:05

Order Number : 22182093
PO Number :
Customer : 21876374 City Of Morristown
Contact :
Address1 : Ashley Ahl
Address2 : PO Box 1499
City St Zip : Morristown TN 378161499
Phone : (423) 581-0100
Fax : (423) 585-4679
Printed By : ctadtaker4
Entered By : ctadtaker4
Keywords : Beer Board - April 6th
Notes :
Zones :

Ad Number : 22272857
Ad Key :
Salesperson : 04 - Anne Marie House
Publication : Citizen Tribune
Section : Classified Section
Sub Section : Classified Section
Category : Public Notices-130
Dates Run : 03/25/2021-03/25/2021
Days : 1
Size : 1 x 7.68, 79 lines
Words : 144
Ad Rate : Open
Ad Price : 66.53
Amount Paid : 0.00
Amount Due : 66.53

PUBLIC NOTICE

The Beer Board of the City of Morristown, Tennessee, will meet on Tuesday, April 6, 2021 at 5:00 p.m. at the Morristown City Center, 100 West First North Street, to consider the following Beer Permit:

Special Occasion Permit for the Chamber of Commerce, Skymart Arts & Crafts Festival on May 1, 2021 located at downtown Main St. from Mill St. to Cumberland Ave., Morristown, TN.

Special Occasion Permit for each of the four Chamber of Commerce, "Concerts on the Downtown Green" to be held on May 7, 2021, June 4, 2021, July 2, 2021 and August 6, 2021 located at the Downtown Farmers Market, Morristown, TN.

Off-premise Permit for Traders Corner Inc. DBA as Trad-

[Return to Agenda](#)

Order Number	:	22182093	Ad Number	:	22272857
PO Number	:		Ad Key	:	
Customer	:	21876374 City Of Morristown	Salesperson	:	04 - Anne Marie House
Contact	:		Publication	:	Citizen Tribune
Address1	:	Ashley Ahl	Section	:	Classified Section
Address2	:	PO Box 1499	Sub Section	:	Classified Section
City St Zip	:	Morristown TN 378161499	Category	:	Public Notices-130
Phone	:	(423) 581-0100	Dates Run	:	03/25/2021-03/25/2021
Fax	:	(423) 585-4679	Days	:	1
	:		Size	:	1 x 7.68, 79 lines
	:		Words	:	144
Printed By	:	ctadtaker4	Ad Rate	:	Open
Entered By	:	ctadtaker4	Ad Price	:	66.53
	:		Amount Paid	:	0.00
Keywords	:	Beer Board - April 6th	Amount Due	:	66.53
Notes	:				
Zones	:				

ers Corner located
at 922 S. Cumber-
land St. (old Rite
Aid), Morristown,
TN. Owner and
General Manager
Jatin Patel.

**BEER BOARD
CITY OF
MORRISTOWN,
TENNESSEE**

**Run Date:
03-25-2021**

EP/EO Division: CSB
P. O. Box 1055
Atlanta, Georgia 30370

EO105

VG APR 01'88

Morristown Chamber of Commerce
P. O. Box 9
825 West First North Street
Morristown, TN 37814

Person to Contact:
Jerry L. Higgins/lrk
Contact Telephone Number:
(615) 736-7171
Reply to:
EO: 7206: JLH
Employer Identification
Number:
62-0418880

Dear Sir or Madam:

Our examination of your Form 990 for the year ended December 31, 1983, disclosed that you continue to qualify for exemption from Federal income tax. We will continue to recognize your exemption under Internal Revenue Code section 501(a) as an organization described in section 501(c)(6). There is no change in your liability for the unrelated business income tax imposed by Code section 511.

During the examination we noted certain aspects of your operation and/or reporting inadequacies which, if expanded or not corrected in subsequent years, may jeopardize your exempt status or subject you to applicable penalties.

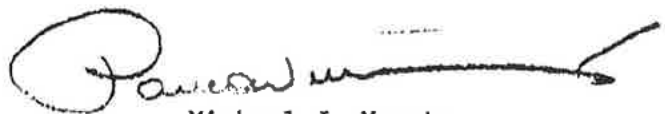
More Specifically:

Our examination disclosed that you did not attach a copy of your depreciation schedule pursuant to Part V, item 57 of the Form 990. Please be advised that in future years this schedule must be attached. See provisions of section 6033 of the Internal Revenue Code.

If you have any questions regarding this letter, please contact the person whose name and telephone number are shown above.

Thank you for your cooperation.

Sincerely yours,



Michael J. Murphy
District Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/28/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER

Strate Insurance Group, Inc

1750 West Andrew Johnson Hwy

Morristown

TN 37814

CONTACT NAME: Jean Willson, CIC, CISR

PHONE (A/C, No, Ext): (423) 318-5800

FAX (A/C, No): (423) 581-4504

E-MAIL ADDRESS: jwillson@strateinsurance.com

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Philadelphia Ins. Co

23850

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

INSURED

Morristown Area Chamber of Commerce

PO Box 9

Morristown

TN 37815

COVERAGES**CERTIFICATE NUMBER:** 21-22 GI & UMB**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	Y		PHPK2254208	04/01/2021	04/01/2022	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PRODUCTS - COM/OP/AGG \$ 2,000,000
	OTHER:						\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB			PHUB761466	04/01/2021	04/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$
	<input checked="" type="checkbox"/> EXCESS LIAB						BODILY INJURY (Per person) \$
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000						BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						\$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N	N/A				PER STATUTE
	If yes, describe under DESCRIPTION OF OPERATIONS below						OTHER
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Holder is Additional Insured per form PI-GLD-HS (10/11) attached

CERTIFICATE HOLDER

City of Morristown

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**GENERAL LIABILITY DELUXE ENDORSEMENT:
HUMAN SERVICES**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE

It is understood and agreed that the following extensions only apply in the event that no other specific coverage for the indicated loss exposure is provided under this policy. If such specific coverage applies, the terms, conditions and limits of that coverage are the sole and exclusive coverage applicable under this policy, unless otherwise noted on this endorsement. The following is a summary of the Limits of Insurance and additional coverages provided by this endorsement. For complete details on specific coverages, consult the policy contract wording.

Coverage Applicable	Limit of Insurance	Page #
Extended Property Damage	Included	2
Limited Rental Lease Agreement Contractual Liability	\$50,000 limit	2
Non-Owned Watercraft	Less than 58 feet	2
Damage to Property You Own, Rent, or Occupy	\$30,000 limit	2
Damage to Premises Rented to You	\$1,000,000	3
HIPAA	Clarification	4
Medical Payments	\$20,000	5
Medical Payments – Extended Reporting Period	3 years	5
Athletic Activities	Amended	5
Supplementary Payments – Bail Bonds	\$5,000	5
Supplementary Payment – Loss of Earnings	\$1,000 per day	5
Employee Indemnification Defense Coverage	\$25,000	5
Key and Lock Replacement – Janitorial Services Client Coverage	\$10,000 limit	6
Additional Insured – Newly Acquired Time Period	Amended	6
Additional Insured – Medical Directors and Administrators	Included	7
Additional Insured – Managers and Supervisors (with Fellow Employee Coverage)	Included	7
Additional Insured – Broadened Named Insured	Included	7
Additional Insured – Funding Source	Included	7
Additional Insured – Home Care Providers	Included	7
Additional Insured – Managers, Landlords, or Lessors of Premises	Included	7
Additional Insured – Lessor of Leased Equipment	Included	7
Additional Insured – Grantor of Permits	Included	8
Additional Insured – Vendor	Included	8
Additional Insured – Franchisor	Included	9
Additional Insured – When Required by Contract	Included	9
Additional Insured – Owners, Lessees, or Contractors	Included	9
Additional Insured – State or Political Subdivisions	Included	10

CITY OF MORRISTOWN BEER PERMIT
CITY OFFICIALS CHECKLIST

Downtown concert
on the green
6-4-21

TAX OFFICE CHECKLIST

Current Taxes Verified

_____ City Taxes

_____ County Taxes

POLICE DEPARTMENT CHECKLIST

Public Notices



Notice of Beer Board Meeting



Signs Posted at Location of Business – Date Posted: NA



Newspaper Notice of Application – Date Ran in Newspaper: _____



Background Investigation



Date of Beer Board Approval: _____



Copy of Permit (Number _____) Issued



Prorated Privilege Tax Paid

G. [Signature]

Signature of person verifying completion of checklist

PLANNING CHECKLIST

Requested location is in a (check one)
ordinances of the City of Morristown.



Non-conforming



Conforming location under the zoning laws and

Signature of City Planner _____

INSPECTIONS CHECKLIST

Have occupancy issues been addressed by City Inspections? ☐ Non-Conforming ☐ Conforming

Signature of City Inspector _____

FIRE DEPARTMENT CHECKLIST

Have the fire code inspections been completed? ☐ Non-conforming ☐ Conforming

Signature of Fire Marshall _____

Date of event:

6-4-21

Name of event:

Concert On

The Areen

Special Event & Special Occasion

Beer Permit Departmental Reviews

For City of Morristown Staff Use ONLY

Downtown Concert on the Green
June 4, 21

Timeline	Function	Date	Signature
At least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee	3/23/21	Maureen
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee	3/23/21	Maureen
Deadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement	3/24/21	CRPAH
	Police Department: Beer Permit review- if applicable	3/24/21	CRPAH
	Fire Department: Beer Permit review- if applicable	NA	
	Finance Department: Beer Permit review- if applicable	NA	
	Finance Department: Review Certificate of Insurance	3/28/21	Loy Chen
60- 20 days prior to event:	Finance Department: Provide Risk Management Assessment	3-24-21	Loy Chen
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement	3/24/21	CRPAH
	Fire Department: Review and approve	3/24/21	Billy H
	Public Works Department: Review and approve	3/24/21	Paula
	Parks and Rec Department: Review and approve		
At least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement		
Deadline date:	Tax Office: Receive \$250 damage/ cleanup deposit		
	Police Department: Receive safety/emergency/traffic control plan.		
	Tax Office: Receive \$1,000,000 certificate of insurance	3/24/21	Maureen
	Tax Office: Receive 50% Police Assistance Agreement fees		
At least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees		
Deadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
After the event:	Police Department: Determine whether Public Works needs to be called in for clean up		
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.		
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		

Return to Agenda

CITY OF MORRISTOWN
100 W 1ST NORTH ST
MORRISTOWN TN 37814-1499

RECPT#: 642103

03/23/21 14:44 2842tbain

CUSTOMER#:0

NAME:

CONCERT ON GREEN 6/4

CHG: 204

PARADE PERMIT

10.00

PAID AMT

1 PAID BY NAME

MORRISTOWN CHPAY METHOD

CASH

AMT TENDERED:

AMT APPLIED: 10.00

CHANGE: 10.00

Date of event:
6/4/21

Name of event:
Concert on
The Green

Special Event & Special Occasion

Beer Permit Departmental Reviews

For City of Morristown Staff Use ONLY



Timeline	Function	Date	Signature
At least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee		
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee	3/23/21	David Baur
Deadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement		
	Police Department: Beer Permit review- if applicable		
	Fire Department: Beer Permit review- if applicable		
	Finance Department: Beer Permit review- if applicable	3-24-21	Rory Clark
	Finance Department: Review Certificate of Insurance		
60- 20 days prior to event:	Finance Department: Provide Risk Management Assessment		
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement		
	Fire Department: Review and approve	3/24/21	Billy Ak
	Public Works Department: Review and approve	3/24/21	Paul Ben
	Parks and Rec Department: Review and approve		
At least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement		
Deadline date:	Tax Office: Receive \$250 damage/ cleanup deposit		
	Police Department: Receive safety/emergency/traffic control plan.		
	Tax Office: Receive \$1,000,000 certificate of insurance		
	Tax Office: Receive 50% Police Assistance Agreement fees		
At least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees		
Deadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
After the event:	Police Department: Determine whether Public Works needs to be called in for clean up		
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.		
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		Return to Agenda

PAYMENT SUMMARY RECEIPT

CITY OF MORRISTOWN
100 W 1ST NORTH ST
MORRISTOWN TN 37814-1499

DATE: 03/23/21 CUSTOMER#: 000000000
TIME: 15:03
CLERK: 2842tbat

RECPT#: 642106 PREV BAL:
TP/YR: MS/2021 AMT PAID: 80.00
BILL: ADJSTMNT:
EFF DT: 03/23/21 BAL DUE:
MISCELLANEOUS PAYMENT

RECPT#: 642107 PREV BAL:
TP/YR: MS/2021 AMT PAID: 80.00
BILL: ADJSTMNT:
EFF DT: 03/23/21 BAL DUE:
MISCELLANEOUS PAYMENT

RECPT#: 642108 PREV BAL:
TP/YR: MS/2021 AMT PAID: 80.00
BILL: ADJSTMNT:
EFF DT: 03/23/21 BAL DUE:
MISCELLANEOUS PAYMENT

-----TOTALS-----

PRINCIPAL PAID: 240.00
INTEREST PAID: .00
ADJUSTMENTS: .00
DISC TAKEN: .00

AMT TENDERED: 240.00
AMT APPLIED: 240.00
CHANGE: .00

PAID BY: MORRISTOWN CHAMBER O
PAYMENT METH: CHECK
PAYMENT REF: 018484

CITY OF MORRISTOWN
APPLICATION FOR SPECIAL OCCASION BEER PERMIT
Information & Applicant Checklist



By making this application, the applicant assumes personal responsibility for all information provided. It is the applicant's responsibility to see that the application is complete and correct. The Beer Board could delay action on the application if any information is not accurate. The City Beer Board meets as needed on the first and third Tuesday of each month. To ensure consideration of an application, the applicant must submit the completed application to the City of Morristown Tax Office **at least 60 days prior to the Beer Board meeting.**

To be issued a beer permit for a special occasion, the following conditions must be met:

- *The special occasion permit shall not be issued for longer than one (1) twenty-four-hour period, subject to the limitations on the hours of sale imposed by law. The application for the special occasion permit shall include documents showing evidence of the type of organization, copy of IRS determination letter, and state the location of the premises upon which alcoholic beverages shall be served and the purpose for the request of the license.*
- *The fee for each special occasion license shall be fifty dollars (\$50.00).*
- *For the purpose of this section:*
Bona fide charitable or nonprofit organization means any corporation or legal entity which has been recognized as exempt from federal taxes under section 501c of the Internal Revenue Code for two consecutive calendar years.
- *No charitable or nonprofit organization possessing a special occasion permit shall purchase, for sale or distribution, beer from any source other than a licensee as provided pursuant of state law.*

The following items must be completed and copies provided (if applicable). Remember, the completed application **MUST BE SUBMITTED** to the City of Morristown Business Tax Office.

- ☐ Application completed & submitted to city business tax office.
- ☐ Agenda Date (Beer Board Meeting) _____ City Center, Council Chambers
Representative or Manager **MUST** be present at meeting for consideration of permit.
- ☐ Permit application fee (all fees non-refundable) \$50.00
- ☐ Publication fee paid \$30.00
- ☐ Copy of IRS Designation Letter showing 501c for two consecutive calendar years.

I/we hereby make application for a permit to sell or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Morristown alcoholic beverage ordinance Title 8 and base my application upon the answers to the following questions:

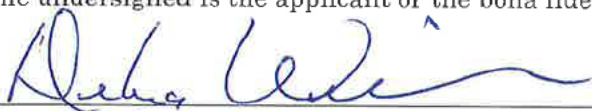
1. Name of Applicant(s): Morristown Area Chamber of Commerce, Inc.
2. Applicant(s) address: 825 W. First North St. P. O. Box 9 Morristown TN 37 (Phone) 423-586-6382
3. Name of Special Occasion Event: Downtown Concert on the Green (2nd in series)
4. Date(s) of Event: Friday June 4, 2021 Purpose of Event Provide entertainment & promote bus
5. There are approved locations set aside for special occasion events to occur. (These are shown in attached exhibits.)
Please check the location you are requesting: ☐ Downtown ☐ Farmers Market ☐ Rose Center.
If requesting approval for a different location please provide address: Downtown Green next to Farmers Market Pavilion
6. Event Manager Name and contact information: Debra Williams, General Manager, Morristown Area Chamber of Commerce, P. O. Box 9, Morristown, TN 37815, 423-586-6382 or cell--423-258-8176

CITY OF MORRISTOWN
SPECIAL OCCASION PERMIT APPLICATION AFFIDAVIT



Morristown Area Chamber of Commerce

1. I/we _____ hereby solemnly swear or affirm that each statement in this application is true and correct and understand that if any statement contained herein is false, the permit issued is automatically forfeited and voided. Furthermore, that in the event of forfeiture I/we shall not be eligible to receive another permit for a period of ten (10) years pursuant to Tennessee Code Annotated § 57-5-105(d).
2. I/we understand that all applicants are charged with the responsibility of knowing the local and state beer laws. I/we are aware that the penalty for violating state or local beer laws can include revocation or suspension of the permit and/or the imposition of civil penalties up to two thousand five dollars (\$2,500) per offense.
3. I/we understand that if the business allows illegal gambling on the premises that the beer permit will be subject to revocation.
4. I/we understand that by submitting this application, a background investigation shall be conducted on the Event Manager. It is further understood that any and all documents related to that investigation shall become public record open for public inspection and reproduction pursuant to Tennessee Code Annotated § 10-7-503.
5. I/we hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives from any and all liability of whatever type for any damages, causes of actions, personal property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to my application. I/we hereby waive all possible liability of the City of Morristown, Morristown Beer Board, Morristown Police Department, its employees, agents and representatives as stated above.
6. I/we agree that the special occasion permit holder shall use servers possessing server's permits issued by the State of Tennessee Alcoholic Beverage Commission and have said permits available for inspection upon request.
7. I/we agree that the use of any server who has been convicted within the past ten (10) years of any law relating to the sale, possession, manufacture or transportation of intoxicating beverages, including beer, as defined by the City of Morristown Municipal Code Section 8-213 or the use of any server who has been convicted of any felony or crime involving moral turpitude within the past ten (10) years will be cause for possible revocation of the beer permit.
8. I/we understand if any information given in the application subsequently changes, I/we will immediately notify the Morristown Beer Board c/o Business Tax Office.
9. I/we assume full responsibility for the permit and will be accountable for full compliance with the laws of Morristown and the State of Tennessee in the sale of beer.
10. I/we have read the foregoing release. I/we fully understand its provisions, and voluntarily consent to abide by its requirements.
11. I/we acknowledge and understand that the fees paid for the beer permit application process are non-refundable.
12. The undersigned is the applicant or the bona fide and qualified agent/representative of the corporate applicant.


Applicant Signature or Agent/Representative

3/1/21

Date

Sworn to and subscribed by me this 16 day of March, 20 21.

Notary Public: Jodi L. Barnard

My Commission Expires: 8-31-21





CITY OF MORRISTOWN
Application for SPECIAL OCCASSION BEER PERMIT
Event Manager Application



Special Event Beer Permit for Downtown Concert on the Green Series

Reason for Application:

1. Name Debra F. Williams
2. Home Address _____ City _____ State _____ Zip _____
3. Home Phone (none) _____ Cellular Phone _____ Date of Birth _____
4. Driver's License _____ State _____ Social Security # _____
5. Local Business Name Morristown Area Chamber of Commerce, Inc.
6. Local Business Address/Zip P. O. Box 9 Morristown, TN 37815 Business Phone (423) 586-6382
7. Have you ever been convicted of any violation of liquor and/or beer laws, controlled substance laws, felonies, or any crime involving moral turpitude, within the last ten years, or do you have any charges currently pending?
☐ Yes* ☒ No
 *If yes, give particulars of each charge, including city, county, state: court and date: _____
8. Have you ever been convicted of any misdemeanors (including Speeding, DUI, Simple Assault, etc.) within the last ten (10) years or have any charges currently pending?
☐ Yes* ☒ No
 *If yes, give of each charge, including city, county, state, court and date: _____
9. Do you understand both the state laws and local laws regulating the sale and distribution of beer in the City of Morristown?
☒ Yes ☐ No
10. Do you understand that allowing illegal gambling on the premises will subject the permit to revocation?
☒ Yes ☐ No

AFFIDAVIT

I hereby solemnly swear or affirm that each statement on this questionnaire is true and correct and agree that if my statement is false, the permit issued may be revoked by the Beer Board, upon notice and hearing, and that the burden is on the permittee to prove the correctness of all the statements in this application.

I understand that this application is subject to the Tennessee Public Records Act and shall be open for inspection and reproduction by any citizen. Tennessee Code Annotated §10-7-503.

I understand that by submitting this application a background investigation shall be conducted and any and all documents related to my investigation shall become public records.

I hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employees, agents and representatives as stated above.

I have read and understand the foregoing release and understand its provisions and voluntarily consent to abide by its requirements.

Signature of Applicant

3/1/21

Date

Sworn to and subscribed by me this 16 day of March, 20 21

Notary Public:

My Commission Expires:

8-31-21





CITY OF MORRISTOWN BEER BOARD
AUTHORIZATION FOR CRIMINAL HISTORY



3-01-21

Date

I, the undersigned applicant, or duly authorized signatory for applicant, for a permit authorizing the sale of beer within the City of Morristown, Tennessee, do hereby authorize the City of Morristown, by and through its agents and representatives and employees, to make inquiry, whether verbal, written, or electronic, of any and all law enforcement agencies or clerks of courts, whether, state, federal or local, concerning my criminal history of any convictions that I have had for any misdemeanor or felony, involving other than minor traffic violations, within the last ten (10) years from the date above.

I, the undersigned, further authorize any and all law enforcement agencies or clerks of courts, whether state, federal or local, or any state, federal, local or national entity storing and providing criminal history data, to release the afore stated information to the City of Morristown.

Residences for Past 10 Years

None other than current address

Street Address

City, State and Zip Code

Signature

Debra Foster Williams

Name – Printed (include Maiden Name if Applicable)

Date of Birth

Social Security Number

Current Home Street Address

City, State and Zip Code

Signature

Anne R Babber
Name of Witness – Printed



City of Morristown
Office of the Police Department
LOCAL ARREST HISTORY
MORRISTOWN, TN (CITY LIMITS ONLY)



Subject of Inquiry: WILLIAMS, DEBRA FOSTER
Last First Middle

DEBRA FOSTER

Full Maiden Name if Applicable

Date of Birth: _____

Address: Street: _____

City: _____

ID Presented: ☐ DL (State TN) ☐ SSN ☒ Military ☐ Other ID Number: _____

☐ Check if information is same as above

Person Requesting: Hinkle, Kenneth
Last First Middle

Date of Birth: _____

Address: Street: MPD

City: _____ State: _____ Zip Code: _____

ID Presented: ☐ DL (State _____) ☐ SSN ☐ Military ☐ Other ID Number: _____

PAST 10 YEARS

"I understand this information is regulated by law."

LT [Signature]
Signature

☐ No Record was found with the name and DOB provided.

☐ The following record was found with the name and DOB provided.

Date:	Charges:

☐ Continued on Reverse Side

Melinda Andrews Records
Employee Processing History Title

Date: 3/24/2021



City of Morristown
Office of the Police Department
Support Services



FAX TRANSMITTAL
COVER SHEET

FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 24, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

COMMENTS:

Background check request is for the LAST 10 YEARS

THANK YOU

NOTICE

THIS MATERIAL IS INTENDED ONLY FOR THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED. IT MAY CONTAIN PRIVILEGED, CONFIDENTIAL INFORMATION THAT IS EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAWS. IF YOU ARE NOT THE INTENDED RECIPIENT, PLEASE NOTE THAT YOU ARE STRICTLY PROHIBITED FROM DISSEMINATING OR DISTRIBUTING THIS MATERIAL (other than to the intended recipient) OR COPYING THIS MATERIAL. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THIS MATERIAL (and all copies) TO US BY MAIL TO THE *Morristown Police Department, P. O. Box 1283, Morristown, TN 37816-1283*.

IF THERE WAS A PROBLEM RECEIVING THIS FAX, PLEASE CONTACT THIS OFFICE AT **(423) 585-4681**.

THANK YOU.

(700.03 REV) MPD 2019

[Return to Agenda](#)



Morristown Police Department

ROGER OVERHOLT
Chief of Police

Hamblen County Sheriff's Dept.
Records Division

March 24, 2021

I am requesting a records check for the purpose of a Special Occasion Beer Permit on the following individual:

Debra Foster Williams

If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department



City of Morristown
Office of the Police Department
Support Services

FAX TRANSMITTAL
COVER SHEET



FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 24, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

COMMENTS:

Background check request is for the LAST 10 YEARS

THANK YOU

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THANK YOU.

(700.03 REV) MPD 2019



Morristown Police Department

ROGER OVERHOLT
Chief of Police

Hamblen County Sheriff's Dept.
Records Division

March 24, 2021

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Debra Foster Williams

If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department

Esco R. Jarnagin
Sheriff

Wayne M.
Chief Deputy



Sheriff of Hamblen County

510 Allison Street
Morristown, Tennessee 37814

HAMBLEN CO. ARREST RECORD SEARCH

DATE: 3/24/21

AN ARREST RECORD SEARCH WAS PROVIDED FOR THE FOLLOWING
INDIVIDUAL:

NAME: Debra Foster Williams

DATE OF BIRTH:

INDIVIDUAL HAS NO RECORD AT THE HAMBLEN CO. SHERIFF'S DEPT. ☒

Has Arrest with Morristown Police Department, Please Contact MPD-423-585-2710

INDIVIDUAL HAS THE FOLLOWING RECORD AT THE HAMBLEN CO. SHERIFF'S DEPT:

NO RECORD

MAR 24 2021

HCCSD

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT THE HAMBLEN CO.
SHERIFF'S DEPT. RECORDS OFFICE AT (423) 585-2769. THIS
RECORD CHECK IS A COUNTY RECORD CHECK ONLY.

Kim Spe

PHONE: (423) 586-3781 - Administrative
(423) 585-2720 - Jail
FAX: (423) 587-1658 - Administrative
(423) 587-1329 - Jail

Page : 1 of 2 03/24/2021 13:33:05

Order Number : 22182093
PO Number :
Customer : 21876374 City Of Morristown
Contact :
Address1 : Ashley Ahl
Address2 : PO Box 1499
City St Zip : Morristown TN 378161499
Phone : (423) 581-0100
Fax : (423) 585-4679
Printed By : ctadtaker4
Entered By : ctadtaker4
Keywords : Beer Board - April 6th
Notes :
Zones :

Ad Number : 22272857
Ad Key :
Salesperson : 04 - Anne Marie House
Publication : Citizen Tribune
Section : Classified Section
Sub Section : Classified Section
Category : Public Notices-130
Dates Run : 03/25/2021-03/25/2021
Days : 1
Size : 1 x 7.68, 79 lines
Words : 144
Ad Rate : Open
Ad Price : 66.53
Amount Paid : 0.00
Amount Due : 66.53

PUBLIC NOTICE

The Beer Board of the City of Morristown, Tennessee, will meet on Tuesday, April 6, 2021 at 5:00 p.m. at the Morristown City Center, 100 West First North Street, to consider the following Beer Permit:

Special Occasion Permit for the Chamber of Commerce, Skymart Arts & Crafts Festival on May 1, 2021 located at downtown Main St. from Mill St. to Cumberland Ave., Morristown, TN.

Special Occasion Permit for each of the four Chamber of Commerce, "Concerts on the Downtown Green" to be held on May 7, 2021, June 4, 2021, July 2, 2021 and August 6, 2021 located at the Downtown Farmers Market, Morristown, TN.

Off-premise Permit for Traders Corner Inc. DBA as Trad-

[Return to Agenda](#)

Order Number	:	22182093	Ad Number	:	22272857
PO Number	:		Ad Key	:	
Customer	:	21876374 City Of Morristown	Salesperson	:	04 - Anne Marie House
Contact	:		Publication	:	Citizen Tribune
Address1	:	Ashley Ahl	Section	:	Classified Section
Address2	:	PO Box 1499	Sub Section	:	Classified Section
City St Zip	:	Morristown TN 378161499	Category	:	Public Notices-130
Phone	:	(423) 581-0100	Dates Run	:	03/25/2021-03/25/2021
Fax	:	(423) 585-4679	Days	:	1
	:		Size	:	1 x 7.68, 79 lines
	:		Words	:	144
Printed By	:	ctadtaker4	Ad Rate	:	Open
Entered By	:	ctadtaker4	Ad Price	:	66.53
	:		Amount Paid	:	0.00
Keywords	:	Beer Board - April 6th	Amount Due	:	66.53
Notes	:				
Zones	:				

ers Corner located
at 922 S. Cumber-
land St. (old Rite
Aid), Morristown,
TN. Owner and
General Manager
Jatin Patel.

BEER BOARD
CITY OF
MORRISTOWN,
TENNESSEE

Run Date:
03-25-2021

EP/EO Division: CSB
P. O. Box 1055
Atlanta, Georgia 30370

EO105

VG APR 01'88

Morristown Chamber of Commerce
P. O. Box 9
825 West First North Street
Morristown, TN 37814

Person to Contact:
Jerry L. Higgins/lrk
Contact Telephone Number:
(615) 736-7171
Reply to:
EO: 7206: JLH
Employer Identification
Number:
62-0418880

Dear Sir or Madam:

Our examination of your Form 990 for the year ended December 31, 1983, disclosed that you continue to qualify for exemption from Federal income tax. We will continue to recognize your exemption under Internal Revenue Code section 501(a) as an organization described in section 501(c)(6). There is no change in your liability for the unrelated business income tax imposed by Code section 511.

During the examination we noted certain aspects of your operation and/or reporting inadequacies which, if expanded or not corrected in subsequent years, may jeopardize your exempt status or subject you to applicable penalties.

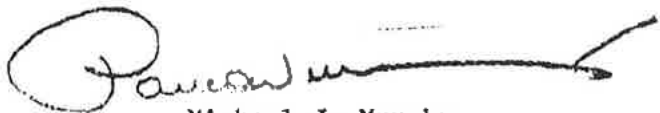
More Specifically:

Our examination disclosed that you did not attach a copy of your depreciation schedule pursuant to Part V, item 57 of the Form 990. Please be advised that in future years this schedule must be attached. See provisions of section 6033 of the Internal Revenue Code.

If you have any questions regarding this letter, please contact the person whose name and telephone number are shown above.

Thank you for your cooperation.

Sincerely yours,



Michael J. Murphy
District Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/28/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Jean Willson, CIC, CISR
Strate Insurance Group, Inc.	PHONE (A/C, No, Ext): (423) 318-5800 FAX (A/C, No): (423) 581-4504
1750 West Andrew Johnson Hwy	E-MAIL ADDRESS: jwillson@strateinsurance.com
Morristown TN 37814	INSURER(S) AFFORDING COVERAGE
	INSURER A: Philadelphia Ins. Co NAIC # 23850
INSURED	INSURER B:
Morristown Area Chamber of Commerce	INSURER C:
PO Box 9	INSURER D:
Morristown TN 37815	INSURER E:
	INSURER F:

COVERAGES

CERTIFICATE NUMBER: 21-22 GL & UMB

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	Y	PHPK2254208	04/01/2021	04/01/2022	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
						MED EXP (Any one person) \$ 5,000
						PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					PRODUCTS - COMP/OP AGG \$ 2,000,000
	OTHER:					\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY					PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR		PHUB761466	04/01/2021	04/01/2022	EACH OCCURRENCE \$ 2,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$ 2,000,000
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y / N				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> N / A				E L EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below					E L DISEASE - EA EMPLOYEE \$
						E L DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Holder is Additional Insured per form PI-GLD-HS (10/11) attached

CERTIFICATE HOLDER

CANCELLATION

City of Morristown

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**GENERAL LIABILITY DELUXE ENDORSEMENT:
HUMAN SERVICES**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE

It is understood and agreed that the following extensions only apply in the event that no other specific coverage for the indicated loss exposure is provided under this policy. If such specific coverage applies, the terms, conditions and limits of that coverage are the sole and exclusive coverage applicable under this policy, unless otherwise noted on this endorsement. The following is a summary of the Limits of Insurance and additional coverages provided by this endorsement. For complete details on specific coverages, consult the policy contract wording.

Coverage Applicable	Limit of Insurance	Page #
Extended Property Damage	Included	2
Limited Rental Lease Agreement Contractual Liability	\$50,000 limit	2
Non-Owned Watercraft	Less than 58 feet	2
Damage to Property You Own, Rent, or Occupy	\$30,000 limit	2
Damage to Premises Rented to You	\$1,000,000	3
HIPAA	Clarification	4
Medical Payments	\$20,000	5
Medical Payments – Extended Reporting Period	3 years	5
Athletic Activities	Amended	5
Supplementary Payments – Bail Bonds	\$5,000	5
Supplementary Payment – Loss of Earnings	\$1,000 per day	5
Employee Indemnification Defense Coverage	\$25,000	5
Key and Lock Replacement – Janitorial Services Client Coverage	\$10,000 limit	6
Additional Insured – Newly Acquired Time Period	Amended	6
Additional Insured – Medical Directors and Administrators	Included	7
Additional Insured – Managers and Supervisors (with Fellow Employee Coverage)	Included	7
Additional Insured – Broadened Named Insured	Included	7
Additional Insured – Funding Source	Included	7
Additional Insured – Home Care Providers	Included	7
Additional Insured – Managers, Landlords, or Lessors of Premises	Included	7
Additional Insured – Lessor of Leased Equipment	Included	7
Additional Insured – Grantor of Permits	Included	8
Additional Insured – Vendor	Included	8
Additional Insured – Franchisor	Included	9
Additional Insured – When Required by Contract	Included	9
Additional Insured – Owners, Lessees, or Contractors	Included	9
Additional Insured – State or Political Subdivisions	Included	10

CITY OF MORRISTOWN BEER PERMIT
CITY OFFICIALS CHECKLIST

cancel
#3 7/2/21

TAX OFFICE CHECKLIST

Current Taxes Verified

_____ City Taxes

_____ County Taxes

POLICE DEPARTMENT CHECKLIST

Public Notices

- ☒ Notice of Beer Board Meeting
- ☐ Signs Posted at Location of Business – Date Posted: NA
- ☒ Newspaper Notice of Application – Date Ran in Newspaper: 3-25-2021
- ☒ Background Investigation
- ☐ Date of Beer Board Approval: _____
- ☐ Copy of Permit (Number _____) Issued
- ☐ Prorated Privilege Tax Paid

_____ Signature of person verifying completion of checklist

PLANNING CHECKLIST

Requested location is in a (check one)
ordinances of the City of Morristown.

☐ Non-conforming ☐ Conforming location under the zoning laws and

Signature of City Planner _____

INSPECTIONS CHECKLIST

Have occupancy issues been addressed by City Inspections? ☐ Non-Conforming ☐ Conforming

Signature of City Inspector _____

FIRE DEPARTMENT CHECKLIST

Have the fire code inspections been completed? ☐ Non-conforming ☐ Conforming

Signature of Fire Marshall _____

Date of event:

7/2/21

Name of event:

Concert on
The Green

Special Event & Special Occasion

Beer Permit Departmental Reviews

For City of Morristown Staff Use ONLY

Concert on the Green
07/02/21

Timeline	Function	Date	Signature
At least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee		
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee	3/31/21	Kristin Mefford
Deadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement	3/31/21	LT CAPA
	Police Department: Beer Permit review- if applicable	3/31/21	LT CAPA
	Fire Department: Beer Permit review- if applicable	3/31/21	Bully
	Finance Department: Beer Permit review- if applicable		SEE NEXT DOC
	Finance Department: Review Certificate of Insurance		
60- 20 days prior to event:	Finance Department: Provide Risk Management Assessment		
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement		
	Fire Department: Review and approve		
	Public Works Department: Review and approve		
	Parks and Rec Department: Review and approve		
At least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement		
Deadline date:	Tax Office: Receive \$250 damage/ cleanup deposit		
	Police Department: Receive safety/emergency/traffic control plan.		
	Tax Office: Receive \$1,000,000 certificate of insurance		
	Tax Office: Receive 50% Police Assistance Agreement fees		
At least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees		
Deadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
After the event:	Police Department: Determine whether Public Works needs to be called in for clean up		
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.		
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		Return to Agenda

Date of event:

7.2.21

Name of event:

Concert on

The Green

Special Event & Special Occasion

Beer Permit Departmental Reviews

For City of Morristown Staff Use ONLY

Downtown Concert on the Green
JULY 2, 21

Timeline	Function	Date	Signature
At least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee	3/23/21	Jana Benin
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee		
Deadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement	3/24/21	W. C. B. B.
	Police Department: Beer Permit review- if applicable	3/24/21	W. C. B. B.
	Fire Department: Beer Permit review- if applicable		
	Finance Department: Beer Permit review- if applicable	4-1-21	Ray C. C.
	Finance Department: Review Certificate of Insurance	3/28/21	Ray C. C.
60-20 days prior to event:	Finance Department: Provide Risk Management Assessment	3-24-21	Ray C. C.
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement	3/24/21	W. C. B. B.
	Fire Department: Review and approve	3/24/21	Ray C. C.
	Public Works Department: Review and approve	3/24/21	Ray C. C.
	Parks and Rec Department: Review and approve		
At least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement		
Deadline date:	Tax Office: Receive \$250 damage/ cleanup deposit		
	Police Department: Receive safety/emergency/traffic control plan.		
	Tax Office: Receive \$1,000,000 certificate of insurance	3/29/21	Jana Benin
	Tax Office: Receive 50% Police Assistance Agreement fees	NA	
At least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees		
Deadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
After the event:	Police Department: Determine whether Public Works needs to be called in for clean up		
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.		
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		Return to Agenda



CITY OF MORRISTOWN
APPLICATION FOR SPECIAL OCCASION BEER PERMIT
Information & Applicant Checklist



By making this application, the applicant assumes personal responsibility for all information provided. It is the applicant's responsibility to see that the application is complete and correct. The Beer Board could delay action on the application if any information is not accurate. The City Beer Board meets as needed on the first and third Tuesday of each month. To ensure consideration of an application, the applicant must submit the completed application to the City of Morristown Tax Office **at least 60 days prior to the Beer Board meeting.**

To be issued a beer permit for a special occasion, the following conditions must be met:

- *The special occasion permit shall not be issued for longer than one (1) twenty-four-hour period, subject to the limitations on the hours of sale imposed by law. The application for the special occasion permit shall include documents showing evidence of the type of organization, copy of IRS determination letter, and state the location of the premises upon which alcoholic beverages shall be served and the purpose for the request of the license.*
- *The fee for each special occasion license shall be fifty dollars (\$50.00).*
- *For the purpose of this section:
Bona fide charitable or nonprofit organization means any corporation or legal entity which has been recognized as exempt from federal taxes under section 501c of the Internal Revenue Code for two consecutive calendar years.*
- *No charitable or nonprofit organization possessing a special occasion permit shall purchase, for sale or distribution, beer from any source other than a licensee as provided pursuant of state law.*

The following items must be completed and copies provided (if applicable). Remember, the completed application **MUST BE SUBMITTED** to the City of Morristown Business Tax Office.

- ☒ Application completed & submitted to city business tax office.
- ☒ Agenda Date (Beer Board Meeting) 4-6-2021 City Center, Council Chambers
Representative or Manager **MUST** be present at meeting for consideration of permit.
- ☒ Permit application fee (all fees non-refundable) \$50.00
- ☒ Publication fee paid \$30.00
- ☒ Copy of IRS Designation Letter showing 501c for two consecutive calendar years.

I/we hereby make application for a permit to sell or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Morristown alcoholic beverage ordinance Title 8 and base my application upon the answers to the following questions:

1. Name of Applicant(s): Morristown Area Chamber of Commerce, Inc.
2. Applicant(s) address: 825 W. First North St., P.O. Box 9 Morristown TN 37 (Phone) 423-586-6382
3. Name of Special Occasion Event: Downtown Concert on the Green (3rd in Series)
4. Date(s) of Event: Friday, July 2, 2021 Purpose of Event Provide Entertainment & Promote dower
5. There are approved locations set aside for special occasion events to occur. (These are shown in attached exhibits.)
Please check the location you are requesting: ☐ Downtown ☐ Farmers Market ☐ Rose Center.
If requesting approval for a different location please provide address: Downtown Green
6. Event Manager Name and contact information: Debra Williams, General Manager, Morristown Area Chamber of Commerce, Inc
P. O. Box 9 Morristown, TN 37815; 423-586-6382 or cell 423-258-8176



CITY OF MORRISTOWN
SPECIAL OCCASION PERMIT APPLICATION AFFIDAVIT



Morristown Area Chamber of Commerce

1. I/we _____ hereby solemnly swear or affirm that each statement in this application is true and correct and understand that if any statement contained herein is false, the permit issued is automatically forfeited and voided. Furthermore, that in the event of forfeiture I/we shall not be eligible to receive another permit for a period of ten (10) years pursuant to Tennessee Code Annotated § 57-5-105(d).
2. I/we understand that all applicants are charged with the responsibility of knowing the local and state beer laws. I/we are aware that the penalty for violating state or local beer laws can include revocation or suspension of the permit and/or the imposition of civil penalties up to two thousand five dollars (\$2,500) per offense.
3. I/we understand that if the business allows illegal gambling on the premises that the beer permit will be subject to revocation.
4. I/we understand that by submitting this application, a background investigation shall be conducted on the Event Manager. It is further understood that any and all documents related to that investigation shall become public record open for public inspection and reproduction pursuant to Tennessee Code Annotated § 10-7-503.
5. I/we hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives from any and all liability of whatever type for any damages, causes of actions, personal property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to my application. I/we hereby waive all possible liability of the City of Morristown, Morristown Beer Board, Morristown Police Department, its employees, agents and representatives as stated above.
6. I/we agree that the special occasion permit holder shall use servers possessing server's permits issued by the State of Tennessee Alcoholic Beverage Commission and have said permits available for inspection upon request.
7. I/we agree that the use of any server who has been convicted within the past ten (10) years of any law relating to the sale, possession, manufacture or transportation of intoxicating beverages, including beer, as defined by the City of Morristown Municipal Code Section 8-213 or the use of any server who has been convicted of any felony or crime involving moral turpitude within the past ten (10) years will be cause for possible revocation of the beer permit.
8. I/we understand if any information given in the application subsequently changes, I/we will immediately notify the Morristown Beer Board c/o Business Tax Office.
9. I/we assume full responsibility for the permit and will be accountable for full compliance with the laws of Morristown and the State of Tennessee in the sale of beer.
10. I/we have read the foregoing release. I/we fully understand its provisions, and voluntarily consent to abide by its requirements.
11. I/we acknowledge and understand that the fees paid for the beer permit application process are non-refundable.
12. The undersigned is the applicant or the bona fide and qualified agent/representative of the corporate applicant.

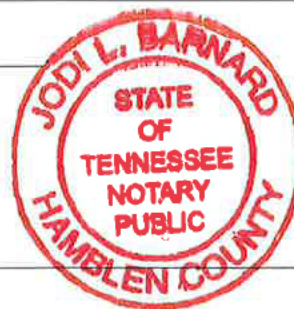
Robert Williams
Applicant Signature or Agent/Representative

3/31/21
Date

Sworn to and subscribed by me this 31 day of March, 20 21

Notary Public: *Jodi L. Barnard*

My Commission Expires: 8-31-21





CITY OF MORRISTOWN
Application for SPECIAL OCCASSION BEER PERMIT
Event Manager Application



Special Event Beer Permit for Downtown Concert on the Green Series

Reason for Application:

1. Name Debra F. Williams
2. Home Address _____
3. Home Phone (_____) _____
4. Driver's License _____
5. Local Business Name Morristown Area Chamber of Commerce
6. Local Business Address/Zip P.O. Box 9 Morristown, TN 37815 Business Phone (_____) 423 _____ 586-6382
7. Have you ever been convicted of any violation of liquor and/or beer laws, controlled substance laws, felonies, or any crime involving moral turpitude, within the last ten years, or do you have any charges currently pending?
☐ Yes* ☒ No
*If yes, give particulars of each charge, including city, county, state: court and date: _____
8. Have you ever been convicted of any misdemeanors (including Speeding, DUI, Simple Assault, etc.) within the last ten (10) years or have any charges currently pending?
☐ Yes* ☒ No
*If yes, give of each charge, including city, county, state, court and date: _____
9. Do you understand both the state laws and local laws regulating the sale and distribution of beer in the City of Morristown?
☒ Yes ☐ No
10. Do you understand that allowing illegal gambling on the premises will subject the permit to revocation?
☒ Yes ☐ No

AFFIDAVIT

I hereby solemnly swear or affirm that each statement on this questionnaire is true and correct and agree that if my statement is false, the permit issued may be revoked by the Beer Board, upon notice and hearing, and that the burden is on the permittee to prove the correctness of all the statements in this application.

I understand that this application is subject to the Tennessee Public Records Act and shall be open for inspection and reproduction by any citizen. Tennessee Code Annotated §10-7-503.

I understand that by submitting this application a background investigation shall be conducted and any and all documents related to my investigation shall become public records.

I hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employees, agents and representatives as stated above.

I have read and understand the foregoing release and understand its provisions and voluntarily consent to abide by its requirements.

Debra F. Williams
Signature of Applicant

3/31/2021

Date

Sworn to and subscribed by me this 31 day of March, 20 21

Notary Public Jodi L. Barnard

My Commission Expires: 8-31-21



[Return to Agenda](#)



CITY OF MORRISTOWN BEER BOARD
AUTHORIZATION FOR CRIMINAL HISTORY



3/31/21
Date

I, the undersigned applicant, or duly authorized signatory for applicant, for a permit authorizing the sale of beer within the City of Morristown, Tennessee, do hereby authorize the City of Morristown, by and through its agents and representatives and employees, to make inquiry, whether verbal, written, or electronic, of any and all law enforcement agencies or clerks of courts, whether, state, federal or local, concerning my criminal history of any convictions that I have had for any misdemeanor or felony, involving other than minor traffic violations, within the last ten (10) years from the date above.

I, the undersigned, further authorize any and all law enforcement agencies or clerks of courts, whether state, federal or local, or any state, federal, local or national entity storing and providing criminal history data, to release the afore stated information to the City of Morristown.

Residences for Past 10 Years

None other than current address

Street Address

City, State and Zip Code

Debra G. Ross
Signature

Debra Foster Williams

Name – Printed (include Maiden Name if Applicable)

Date of Birth

Social Security Number

Current Home Street Address

City, State and Zip Code

Debra Foster Williams
Signature

Anne G. Ross
Name of Witness – Printed



City of Morristown
Office of the Police Department
Support Services



FAX TRANSMITTAL
COVER SHEET

FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 24, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

COMMENTS:

Background check request is for the LAST 10 YEARS

THANK YOU

NOTICE

THIS MATERIAL IS INTENDED ONLY FOR THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED. IT MAY CONTAIN PRIVILEGED, CONFIDENTIAL INFORMATION THAT IS EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAWS. IF YOU ARE NOT THE INTENDED RECIPIENT, PLEASE NOTE THAT YOU ARE STRICTLY PROHIBITED FROM DISSEMINATING OR DISTRIBUTING THIS MATERIAL (other than to the intended recipient) OR COPYING THIS MATERIAL. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THIS MATERIAL (and all copies) TO US BY MAIL TO THE *Morristown Police Department, P. O. Box 1283, Morristown, TN 37816-1283*.

IF THERE WAS A PROBLEM RECEIVING THIS FAX, PLEASE CONTACT THIS OFFICE AT **(423) 585-4681**.

THANK YOU.

(700.03 REV) MPD 2019

[Return to Agenda](#)



Morristown Police Department

ROGER OVERHOLT
Chief of Police

Hamblen County Sheriff's Dept.
Records Division

March 24, 2021

I am requesting a records check for the purpose of a Special Occasion Beer Permit on the following individual:

Debra Foster Williams

If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department



City of Morristown
Office of the Police Department
Support Services

FAX TRANSMITTAL
COVER SHEET



FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 24, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

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THANK YOU

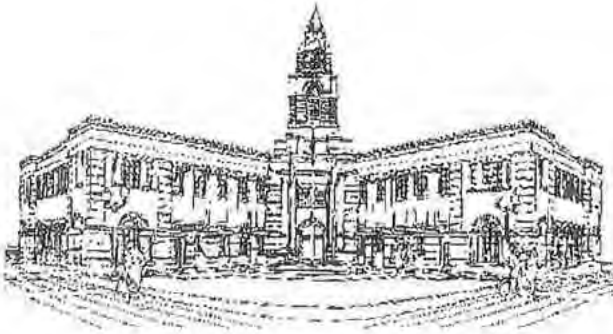
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(700.03 REV) MPD 2019



Morristown Police Department

ROGER OVERHOLT
Chief of Police

Hamblen County Sheriff's Dept.
Records Division

March 24, 2021

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Debra Foster Williams

If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department

Esco R. Jarnagin
Sheriff

Wayne Mc
Chief Deputy



Sheriff of Hamblen County

510 Allison Street
Morristown, Tennessee 37814

HAMBLEN CO. ARREST RECORD SEARCH

DATE: 3/24/21

AN ARREST RECORD SEARCH WAS PROVIDED FOR THE FOLLOWING
INDIVIDUAL:

NAME: Debra Foster Williams

DATE OF BIRTH

INDIVIDUAL HAS NO RECORD AT THE HAMBLEN CO. SHERIFF'S DEPT. ✓

Has Arrest with Morristown Police Department, Please Contact MPD-423-585-2710

INDIVIDUAL HAS THE FOLLOWING RECORD AT THE HAMBLEN CO. SHERIFF'S DEPT:

NO RECORD

MAR 24 2021

HCSO

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT THE HAMBLEN CO.
SHERIFF'S DEPT. RECORDS OFFICE AT (423) 585-2769. THIS
RECORD CHECK IS A COUNTY RECORD CHECK ONLY.

Jim Spe

PHONE: (423) 586-3781 - Administrative
(423) 585-2720 - Jail
FAX: (423) 587-1658 - Administrative
(423) 587-1329 - Jail

Page : 1 of 2 03/24/2021 13:33:05
Order Number : 22182093
PO Number :
Customer : 21876374 City Of Morristown
Contact :
Address1 : Ashley Ahl
Address2 : PO Box 1499
City St Zip : Morristown TN 378161499
Phone : (423) 581-0100
Fax : (423) 585-4679
Printed By : ctadtaker4
Entered By : ctadtaker4
Keywords : Beer Board - April 6th
Notes :
Zones :

Ad Number : 22272857
Ad Key :
Salesperson : 04 - Anne Marie House
Publication : Citizen Tribune
Section : Classified Section
Sub Section : Classified Section
Category : Public Notices-130
Dates Run : 03/25/2021-03/25/2021
Days : 1
Size : 1 x 7.68, 79 lines
Words : 144
Ad Rate : Open
Ad Price : 66.53
Amount Paid : 0.00
Amount Due : 66.53

PUBLIC NOTICE

The Beer Board of the City of Morristown, Tennessee, will meet on Tuesday, April 6, 2021 at 5:00 p.m. at the Morristown City Center, 100 West First North Street, to consider the following Beer Permit:

Special Occasion Permit for the Chamber of Commerce, Skymart Arts & Crafts Festival on May 1, 2021 located at downtown Main St. from Mill St. to Cumberland Ave., Morristown, TN.

Special Occasion Permit for each of the four Chamber of Commerce, "Concerts on the Downtown Green" to be held on May 7, 2021, June 4, 2021, July 2, 2021 and August 6, 2021 located at the Downtown Farmers Market, Morristown, TN.

Off-premise Permit for Traders Corner Inc. DBA as Trad-

[Return to Agenda](#)

EP/EO Division: CSB
P. O. Box 1055
Atlanta, Georgia 30370

EO105

VG APR 01'86

Morristown Chamber of Commerce
P. O. Box 9
825 West First North Street
Morristown, TN 37814

Person to Contact:
Jerry L. Higgins/lrk
Contact Telephone Number:
(615) 736-7171
Reply to:
EO: 7206: JLH
Employer Identification
Number:
62-0418880

Dear Sir or Madam:

Our examination of your Form 990 for the year ended December 31, 1983, disclosed that you continue to qualify for exemption from Federal income tax. We will continue to recognize your exemption under Internal Revenue Code section 501(a) as an organization described in section 501(c)(6). There is no change in your liability for the unrelated business income tax imposed by Code section 511.

During the examination we noted certain aspects of your operation and/or reporting inadequacies which, if expanded or not corrected in subsequent years, may jeopardize your exempt status or subject you to applicable penalties.

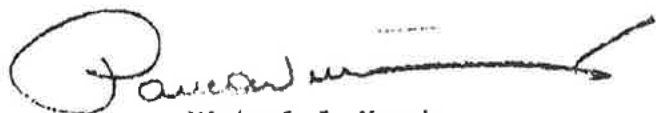
More Specifically:

Our examination disclosed that you did not attach a copy of your depreciation schedule pursuant to Part V, item 57 of the Form 990. Please be advised that in future years this schedule must be attached. See provisions of section 6033 of the Internal Revenue Code.

If you have any questions regarding this letter, please contact the person whose name and telephone number are shown above.

Thank you for your cooperation.

Sincerely yours,



Michael J. Murphy
District Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/28/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Jean Willson, CIC, CISR
Strate Insurance Group, Inc.	PHONE (A/C, No, Ext): (423) 318-5800 FAX (A/C, No): (423) 581-4504
1750 West Andrew Johnson Hwy	E-MAIL: jwillson@strateinsurance.com
Morristown TN 37814	INSURER(S) AFFORDING COVERAGE
	INSURER A: Philadelphia Ins. Co. NAIC #: 23850
INSURED	INSURER B:
Morristown Area Chamber of Commerce	INSURER C:
PO Box 9	INSURER D:
Morristown TN 37815	INSURER E:
	INSURER F:

COVERAGES

CERTIFICATE NUMBER: 21-22 GL & UMB

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDC INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	Y		PHPK2254208	04/01/2021	04/01/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			PHUB761466	04/01/2021	04/01/2022	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Holder is Additional Insured per form PI-GLD-HS (10/11) attached

CERTIFICATE HOLDER

CANCELLATION

City of Morristown

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



CITY OF MORRISTOWN BEER PERMIT
CITY OFFICIALS CHECKLIST



TAX OFFICE CHECKLIST

Current Taxes Verified

____ City Taxes
____ County Taxes

POLICE DEPARTMENT CHECKLIST

Public Notices

- ☒ Notice of Beer Board Meeting
- ☐ Signs Posted at Location of Business – Date Posted: NA
- ☒ Newspaper Notice of Application – Date Ran in Newspaper: 3-25-2021
- ☒ Background Investigation
- ☐ Date of Beer Board Approval: 4-6-2021
- ☐ Copy of Permit (Number _____) Issued
- ☐ Prorated Privilege Tax Paid

____ Signature of person verifying completion of checklist

PLANNING CHECKLIST

Requested location is in a (check one)
ordinances of the City of Morristown.

☐ Non-conforming ☐ Conforming location under the zoning laws and

Signature of City Planner _____

INSPECTIONS CHECKLIST

Have occupancy issues been addressed by City Inspections? ☐ Non-Conforming ☐ Conforming

Signature of City Inspector _____

FIRE DEPARTMENT CHECKLIST

Have the fire code inspections been completed? ☐ Non-conforming ☐ Conforming

Signature of Fire Marshall _____

Date of event:
8/16/21

Name of event:
Concert on The Green

Special Event & Special Occasion

Beer Permit Departmental Reviews For City of Morristown Staff Use ONLY

Concert on the Green 8/16/21



Timeline	Function	Date	Signature
At least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee		
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee	3/31/21	Kristen Mefford
Deadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement	3/30/21	LT C Fagan
	Police Department: Beer Permit review- if applicable	3/31/21	LT C Fagan
	Fire Department: Beer Permit review- if applicable	3/31/21	Billy H
	Finance Department: Beer Permit review- if applicable		
	Finance Department: Review Certificate of Insurance	See NEXT Doc	
60- 20 days prior to event:	Finance Department: Provide Risk Management Assessment		
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement		
	Fire Department: Review and approve		
	Public Works Department: Review and approve		
	Parks and Rec Department: Review and approve		
At least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement		
Deadline date:	Tax Office: Receive \$250 damage/ cleanup deposit		
	Police Department: Receive safety/emergency/traffic control plan.		
	Tax Office: Receive \$1,000,000 certificate of insurance		
	Tax Office: Receive 50% Police Assistance Agreement fees		
At least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees		
Deadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
After the event:	Police Department: Determine whether Public Works needs to be called in for clean up		
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.		
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		Return to Agenda

Date of event:

8-6-21

Name of event:

Concert On
The Areen

Special Event & Special Occasion

Beer Permit Departmental Reviews

For City of Morristown Staff Use ONLY

Downtown Concert On the Areen
Aug. 6, 21

Timeline	Function	Date	Signature
At least 60 days prior to event:	Tax Office: Receive Special Event application and \$10 fee	3/23/21	<i>[Signature]</i>
	Tax Office: Receive Special Occasion Beer Permit application and \$80 fee		
Deadline date:	Police Department: Ensure application is complete, to include the Hold Harmless and Indemnity Agreement	3/24/21	<i>[Signature]</i>
	Police Department: Beer Permit review- if applicable	3/24/21	<i>[Signature]</i>
	Fire Department: Beer Permit review- if applicable		
	Finance Department: Beer Permit review- if applicable	4-1-21	<i>[Signature]</i>
	Finance Department: Review Certificate of Insurance	3/24/21	<i>[Signature]</i>
60- 20 days prior to event:	Finance Department: Provide Risk Management Assessment	3-24-21	<i>[Signature]</i>
	Police Department: If applicant has requested such, estimate fees for Police Assistance Agreement	3/24/21	<i>[Signature]</i>
	Fire Department: Review and approve	3/24/21	<i>[Signature]</i>
	Public Works Department: Review and approve	3/24/21	<i>[Signature]</i>
	Parks and Rec Department: Review and approve		
At least 20 days prior to event:	Police Department: If applicable, receive executed Police Assistance Agreement		
Deadline date:	Tax Office: Receive \$250 damage/ cleanup deposit		
	Police Department: Receive safety/emergency/traffic control plan.		
	Tax Office: Receive \$1,000,000 certificate of insurance	3/24/21	<i>[Signature]</i>
	Tax Office: Receive 50% Police Assistance Agreement fees	MA	
At least 24 hours prior to event:	Tax Office: Receive remaining Police Assistance Agreement fees		
Deadline date:	Police Department: Update/confirm on-site emergency contact or manager information		
After the event:	Police Department: Determine whether Public Works needs to be called in for clean up		
	Police Department/ Public Works: Determine whether damage deposit needs to be returned or retained. Assess additional cost if applicable.		
	Tax Office: If applicable, return \$250 damage/ cleanup deposit		
	Tax Office: If applicable, invoice for remaining Police Assistance fees and Public Works cost		

Return to Agenda



CITY OF MORRISTOWN
APPLICATION FOR SPECIAL OCCASION BEER PERMIT
Information & Applicant Checklist



By making this application, the applicant assumes personal responsibility for all information provided. It is the applicant's responsibility to see that the application is complete and correct. The Beer Board could delay action on the application if any information is not accurate. The City Beer Board meets as needed on the first and third Tuesday of each month. To ensure consideration of an application, the applicant must submit the completed application to the City of Morristown Tax Office **at least 60 days prior to the Beer Board meeting.**

To be issued a beer permit for a special occasion, the following conditions must be met:

- *The special occasion permit shall not be issued for longer than one (1) twenty-four-hour period, subject to the limitations on the hours of sale imposed by law. The application for the special occasion permit shall include documents showing evidence of the type of organization, copy of IRS determination letter, and state the location of the premises upon which alcoholic beverages shall be served and the purpose for the request of the license.*
- *The fee for each special occasion license shall be fifty dollars (\$50.00).*
- *For the purpose of this section:*
Bona fide charitable or nonprofit organization means any corporation or legal entity which has been recognized as exempt from federal taxes under section 501c of the Internal Revenue Code for two consecutive calendar years.
- *No charitable or nonprofit organization possessing a special occasion permit shall purchase, for sale or distribution, beer from any source other than a licensee as provided pursuant of state law.*

The following items must be completed and copies provided (if applicable). Remember, the completed application **MUST BE SUBMITTED** to the City of Morristown Business Tax Office.

- ☒ Application completed & submitted to city business tax office.
- ☐ Agenda Date (Beer Board Meeting) 4-6-2021 City Center, Council Chambers
Representative or Manager **MUST** be present at meeting for consideration of permit.
- ☒ Permit application fee (all fees non-refundable) \$50.00
- ☒ Publication fee paid \$30.00
- ☒ Copy of IRS Designation Letter showing 501c for two consecutive calendar years.

I/we hereby make application for a permit to sell or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Morristown alcoholic beverage ordinance Title 8 and base my application upon the answers to the following questions:

1. Name of Applicant(s): Morristown Area Chamber of Commerce, Inc.
2. Applicant(s) address: 825 W. First North St., P.O. Box 9 Morristown TN 37 (Phone) 423-586-6382
3. Name of Special Occasion Event: Downtown Concert on the Green (3rd in Series)
4. Date(s) of Event: Friday, August 6, 2021 Purpose of Event Provide Entertainment & Promote d
5. There are approved locations set aside for special occasion events to occur. (These are shown in attached exhibits.)
Please check the location you are requesting: ☐ Downtown ☐ Farmers Market ☐ Rose Center.
If requesting approval for a different location please provide address: Downtown Green
6. Event Manager Name and contact information: Debra Williams, General Manager, Morristown Area Chamber of Commerce, Inc
P. O. Box 9 Morristown, TN 37815; 423-586-6382 or cell 423-258-8176



CITY OF MORRISTOWN
SPECIAL OCCASION PERMIT APPLICATION AFFIDAVIT



Morristown Area Chamber of Commerce

1. I/we _____ hereby solemnly swear or affirm that each statement in this application is true and correct and understand that if any statement contained herein is false, the permit issued is automatically forfeited and voided. Furthermore, that in the event of forfeiture I/we shall not be eligible to receive another permit for a period of ten (10) years pursuant to Tennessee Code Annotated § 57-5-105(d).
2. I/we understand that all applicants are charged with the responsibility of knowing the local and state beer laws. I/we are aware that the penalty for violating state or local beer laws can include revocation or suspension of the permit and/or the imposition of civil penalties up to two thousand five dollars (\$2,500) per offense.
3. I/we understand that if the business allows illegal gambling on the premises that the beer permit will be subject to revocation.
4. I/we understand that by submitting this application, a background investigation shall be conducted on the Event Manager. It is further understood that any and all documents related to that investigation shall become public record open for public inspection and reproduction pursuant to Tennessee Code Annotated § 10-7-503.
5. I/we hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives from any and all liability of whatever type for any damages, causes of actions, personal property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to my application. I/we hereby waive all possible liability of the City of Morristown, Morristown Beer Board, Morristown Police Department, its employees, agents and representatives as stated above.
6. I/we agree that the special occasion permit holder shall use servers possessing server's permits issued by the State of Tennessee Alcoholic Beverage Commission and have said permits available for inspection upon request.
7. I/we agree that the use of any server who has been convicted within the past ten (10) years of any law relating to the sale, possession, manufacture or transportation of intoxicating beverages, including beer, as defined by the City of Morristown Municipal Code Section 8-213 or the use of any server who has been convicted of any felony or crime involving moral turpitude within the past ten (10) years will be cause for possible revocation of the beer permit.
8. I/we understand if any information given in the application subsequently changes, I/we will immediately notify the Morristown Beer Board c/o Business Tax Office.
9. I/we assume full responsibility for the permit and will be accountable for full compliance with the laws of Morristown and the State of Tennessee in the sale of beer.
10. I/we have read the foregoing release. I/we fully understand its provisions, and voluntarily consent to abide by its requirements.
11. I/we acknowledge and understand that the fees paid for the beer permit application process are non-refundable.
12. The undersigned is the applicant or the bona fide and qualified agent/representative of the corporate applicant.

Nelma J. Walker
Applicant Signature or Agent/Representative

3/31/21

Date

Sworn to and subscribed by me this 31 day of March, 20 21.

Notary Public *Jodi L. Barnard*

My Commission Expires: 8-31-21





CITY OF MORRISTOWN
Application for SPECIAL OCCASSION BEER PERMIT
Event Manager Application



Special Event Beer Permit for Downtown Concert on the Green Series

Reason for Application:

1. Name Debra F. Williams
2. Home Address _____ City _____ State _____ Zip _____
3. Home Phone (____) _____ Cellular Phone _____ Date of Birth _____
4. Driver's License # _____ State _____ Social Security # _____
5. Local Business Name Morristown Area Chamber of Commerce
6. Local Business Address/Zip P.O. Box 9 Morristown, TN 37815 Business Phone (423) 586-6382
7. Have you ever been convicted of any violation of liquor and/or beer laws, controlled substance laws, felonies, or any crime involving moral turpitude, within the last ten years, or do you have any charges currently pending?
☐ Yes* ☒ No
 *If yes, give particulars of each charge, including city, county, state: court and date: _____
8. Have you ever been convicted of any misdemeanors (including Speeding, DUI, Simple Assault, etc.) within the last ten (10) years or have any charges currently pending?
☐ Yes* ☒ No
 *If yes, give of each charge, including city, county, state, court and date: _____
9. Do you understand both the state laws and local laws regulating the sale and distribution of beer in the City of Morristown?
☒ Yes ☐ No
10. Do you understand that allowing illegal gambling on the premises will subject the permit to revocation?
☒ Yes ☐ No

AFFIDAVIT

I hereby solemnly swear or affirm that each statement on this questionnaire is true and correct and agree that if my statement is false, the permit issued may be revoked by the Beer Board, upon notice and hearing, and that the burden is on the permittee to prove the correctness of all the statements in this application.

I understand that this application is subject to the Tennessee Public Records Act and shall be open for inspection and reproduction by any citizen. Tennessee Code Annotated §10-7-503.

I understand that by submitting this application a background investigation shall be conducted and any and all documents related to my investigation shall become public records.

I hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employees, agents and representatives as stated above.

I have read and understand the foregoing release and understand its provisions and voluntarily consent to abide by its requirements.

Debra F. Williams
Signature of Applicant

3/31/2021

Date

Sworn to and subscribed by me this 31 day of March, 20 21

Notary Public: Jodi L. Barnard

My Commission Expires: 8-31-21





CITY OF MORRISTOWN BEER BOARD
AUTHORIZATION FOR CRIMINAL HISTORY



3/31/21
Date

I, the undersigned applicant, or duly authorized signatory for applicant, for a permit authorizing the sale of beer within the City of Morristown, Tennessee, do hereby authorize the City of Morristown, by and through its agents and representatives and employees, to make inquiry, whether verbal, written, or electronic, of any and all law enforcement agencies or clerks of courts, whether, state, federal or local, concerning my criminal history of any convictions that I have had for any misdemeanor or felony, involving other than minor traffic violations, within the last ten (10) years from the date above.

I, the undersigned, further authorize any and all law enforcement agencies or clerks of courts, whether state, federal or local, or any state, federal, local or national entity storing and providing criminal history data, to release the afore stated information to the City of Morristown.

Residences for Past 10 Years

None other than current address

Street Address

City, State and Zip Code

Anne G. Ross
Signature

Debra Foster Williams

Name – Printed (include Maiden Name if Applicable)

Date of Birth

Social Security Number

Current Home Street Address

City, State and Zip Code

Debra Foster Williams
Signature

Anne G. Ross
Name of Witness – Printed



City of Morristown
Office of the Police Department



LOCAL ARREST HISTORY
MORRISTOWN, TN (CITY LIMITS ONLY)

Subject of Inquiry: WILLIAMS, DEBRA FOSTER
Last First Middle

DEBRA FOSTER

Full Maiden Name if Applicable

Date of Birth: _____

Address: Street: _____

City: _____

ID Presented: ☐ DL (State TN) ☐ SSN ☒ Military ☐ Other ID Number: _____

☐ Check if information is same as above

Person Requesting: Hinkle, Kenneth
Last First Middle

Date of Birth: _____

Address: Street: MPD

City: _____

State: _____

Zip Code: _____

ID Presented: ☐ DL (State _____) ☐ SSN ☐ Military ☐ Other ID Number: _____

PAST 10 YEARS

"I understand this information is regulated by law."

LT [Signature]
Signature

☐ No Record was found with the name and DOB provided.

☐ The following record was found with the name and DOB provided.

Date:	Charges:

☐ Continued on Reverse Side

Melinda Andrews
Employee Processing History

Records
Title

Date: 3/24/2021



City of Morristown
Office of the Police Department
Support Services



FAX TRANSMITTAL
COVER SHEET

FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 24, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

COMMENTS:

Background check request is for the LAST 10 YEARS

THANK YOU

NOTICE

THIS MATERIAL IS INTENDED ONLY FOR THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED. IT MAY CONTAIN PRIVILEGED, CONFIDENTIAL INFORMATION THAT IS EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAWS. IF YOU ARE NOT THE INTENDED RECIPIENT, PLEASE NOTE THAT YOU ARE STRICTLY PROHIBITED FROM DISSEMINATING OR DISTRIBUTING THIS MATERIAL (other than to the intended recipient) OR COPYING THIS MATERIAL. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THIS MATERIAL (and all copies) TO US BY MAIL TO THE *Morristown Police Department, P. O. Box 1283, Morristown, TN 37816-1283*.

IF THERE WAS A PROBLEM RECEIVING THIS FAX, PLEASE CONTACT THIS OFFICE AT **(423) 585-4681**.

THANK YOU.

(700.03 REV) MPD 2019

[Return to Agenda](#)



Morristown Police Department

ROGER OVERHOLT
Chief of Police

**Hamblen County Sheriff's Dept.
Records Division**

March 24, 2021

I am requesting a records check for the purpose of a Special Occasion Beer Permit on the following individual:

Debra Foster Williams

If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

**Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department**



City of Morristown
Office of the Police Department
Support Services

FAX TRANSMITTAL
COVER SHEET



FAX # (423) 585-4685

TO: Hamblen County Sheriff's Department
Attn: Records

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 24, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

COMMENTS:

Background check request is for the LAST 10 YEARS

THANK YOU

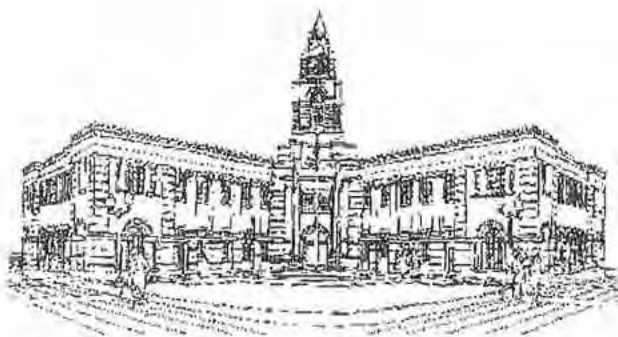
NOTICE

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THANK YOU.

(700.03 REV) MPD 2019



Morristown Police Department

ROGER OVERHOLT
Chief of Police

Hamblen County Sheriff's Dept.
Records Division

March 24, 2021

I am requesting a records check for the purpose of a Special Occasion Beer Permit on the following individual:

Debra Foster Williams

If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department

Esco R. Jarnagin
Sheriff



Wayne M.
Chief Deputy

Sheriff of Hamblen County

510 Allison Street
Morristown, Tennessee 37814

HAMBLEN CO. ARREST RECORD SEARCH

DATE: 3/24/21

AN ARREST RECORD SEARCH WAS PROVIDED FOR THE FOLLOWING
INDIVIDUAL:

NAME: Debra Foster Williams

DATE OF BIRTH:

INDIVIDUAL HAS NO RECORD AT THE HAMBLEN CO. SHERIFF'S DEPT. ✓

Has Arrest with Morristown Police Department, Please Contact MPD-423-585-2710

INDIVIDUAL HAS THE FOLLOWING RECORD AT THE HAMBLEN CO. SHERIFF'S DEPT:

NO RECORD

MAY 24 2021

HCSO

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE HAMBLEN CO.
SHERIFF'S DEPT. RECORDS OFFICE AT (423) 585-2769. THIS
RECORD CHECK IS A COUNTY RECORD CHECK ONLY.

Jim Spe

PHONE: (423) 586-3781 - Administrative
(423) 585-2720 - Jail
FAX: (423) 587-1658 - Administrative
(423) 587-1329 - Jail

Page : 1 of 2 03/24/2021 13:33:05
Order Number : 22182093
PO Number :
Customer : 21876374 City Of Morristown
Contact :
Address1 : Ashley Ahl
Address2 : PO Box 1499
City St Zip : Morristown TN 378161499
Phone : (423) 581-0100
Fax : (423) 585-4679
Printed By : ctadtaker4
Entered By : ctadtaker4
Keywords : Beer Board - April 6th
Notes :
Zones :

Ad Number : 22272857
Ad Key :
Salesperson : 04 - Anne Marie House
Publication : Citizen Tribune
Section : Classified Section
Sub Section : Classified Section
Category : Public Notices-130
Dates Run : 03/25/2021-03/25/2021
Days : 1
Size : 1 x 7.68, 79 lines
Words : 144
Ad Rate : Open
Ad Price : 66.53
Amount Paid : 0.00
Amount Due : 66.53

PUBLIC NOTICE

The Beer Board of the City of Morristown, Tennessee, will meet on Tuesday, April 6, 2021 at 5:00 p.m. at the Morristown City Center, 100 West First North Street, to consider the following Beer Permit:

Special Occasion Permit for the Chamber of Commerce, Skymart Arts & Crafts Festival on May 1, 2021 located at downtown Main St. from Mill St. to Cumberland Ave., Morristown, TN.

Special Occasion Permit for each of the four Chamber of Commerce, "Concerts on the Downtown Green" to be held on May 7, 2021, June 4, 2021, July 2, 2021 and August 6, 2021 located at the Downtown Farmers Market, Morristown, TN.

Off-premise Permit for Traders Corner Inc. DBA as Trad-

[Return to Agenda](#)

EP/EO Division: CSB
P. O. Box 1055
Atlanta, Georgia 30370

EO105

VG APR 01'88

Morristown Chamber of Commerce
P. O. Box 9
825 West First North Street
Morristown, TN 37814

Person to Contact:
Jerry L. Higgins/lrk
Contact Telephone Number:
(615) 736-7171
Reply to:
EO: 7206: JLH
Employer Identification
Number:
62-0418880

Dear Sir or Madam:

Our examination of your Form 990 for the year ended December 31, 1983, disclosed that you continue to qualify for exemption from Federal income tax. We will continue to recognize your exemption under Internal Revenue Code section 501(a) as an organization described in section 501(c)(6). There is no change in your liability for the unrelated business income tax imposed by Code section 511.

During the examination we noted certain aspects of your operation and/or reporting inadequacies which, if expanded or not corrected in subsequent years, may jeopardize your exempt status or subject you to applicable penalties.

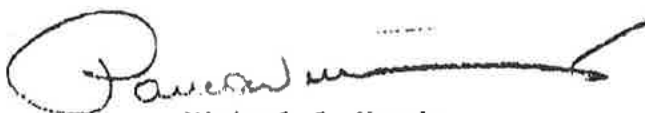
More Specifically:

Our examination disclosed that you did not attach a copy of your depreciation schedule pursuant to Part V, item 57 of the Form 990. Please be advised that in future years this schedule must be attached. See provisions of section 6033 of the Internal Revenue Code.

If you have any questions regarding this letter, please contact the person whose name and telephone number are shown above.

Thank you for your cooperation.

Sincerely yours,



Michael J. Murphy
District Director



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/26/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Jean Willson, CIC, CISR
Strate Insurance Group, Inc.	PHONE (A/C, No, Ext): (423) 318-5800 FAX (A/C, No): (423) 581-4504
1750 West Andrew Johnson Hwy.	E-MAIL ADDRESS: jwillson@strateinsurance.com
Morristown TN 37814	INSURER(S) AFFORDING COVERAGE
	INSURER A: Philadelphia Ins. Co. NAIC # 23850
INSURED	INSURER B:
Morristown Area Chamber of Commerce	INSURER C:
PO Box 9	INSURER D:
Morristown TN 37815	INSURER E:
	INSURER F:

COVERAGES

CERTIFICATE NUMBER: 21-22 GL & UMB

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	Y		PHPK2254208	04/01/2021	04/01/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			PHUB761466	04/01/2021	04/01/2022	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Holder is Additional Insured per form PI-GLD-HS (10/11) attached

CERTIFICATE HOLDER**CANCELLATION**

City of Morristown

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**GENERAL LIABILITY DELUXE ENDORSEMENT:
HUMAN SERVICES**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE

It is understood and agreed that the following extensions only apply in the event that no other specific coverage for the indicated loss exposure is provided under this policy. If such specific coverage applies, the terms, conditions and limits of that coverage are the sole and exclusive coverage applicable under this policy, unless otherwise noted on this endorsement. The following is a summary of the Limits of Insurance and additional coverages provided by this endorsement. For complete details on specific coverages, consult the policy contract wording.

Coverage Applicable	Limit of Insurance	Page #
Extended Property Damage	Included	2
Limited Rental Lease Agreement Contractual Liability	\$50,000 limit	2
Non-Owned Watercraft	Less than 58 feet	2
Damage to Property You Own, Rent, or Occupy	\$30,000 limit	2
Damage to Premises Rented to You	\$1,000,000	3
HIPAA	Clarification	4
Medical Payments	\$20,000	5
Medical Payments – Extended Reporting Period	3 years	5
Athletic Activities	Amended	5
Supplementary Payments – Bail Bonds	\$5,000	5
Supplementary Payment – Loss of Earnings	\$1,000 per day	5
Employee Indemnification Defense Coverage	\$25,000	5
Key and Lock Replacement – Janitorial Services Client Coverage	\$10,000 limit	6
Additional Insured – Newly Acquired Time Period	Amended	6
Additional Insured – Medical Directors and Administrators	Included	7
Additional Insured – Managers and Supervisors (with Fellow Employee Coverage)	Included	7
Additional Insured – Broadened Named Insured	Included	7
Additional Insured – Funding Source	Included	7
Additional Insured – Home Care Providers	Included	7
Additional Insured – Managers, Landlords, or Lessors of Premises	Included	7
Additional Insured – Lessor of Leased Equipment	Included	7
Additional Insured – Grantor of Permits	Included	8
Additional Insured – Vendor	Included	8
Additional Insured – Franchisor	Included	9
Additional Insured – When Required by Contract	Included	9
Additional Insured – Owners, Lessees, or Contractors	Included	9
Additional Insured – State or Political Subdivisions	Included	10



**CITY OF MORRISTOWN BEER BOARD
APPLICATION FOR BEER PERMIT
CHECKLIST & INFORMATION**



Please submit the forms listed below with your application

- ☒ 1. Completed permit application & owner/manager questionnaire submitted to City of Morristown Tax Office, 100 West 1st North St., Morristown, TN 37814.
- ☒ 2. Designation of Registered Office and Registered Agent
- ☒ 3. Completed authorization form for Criminal History Inquiry on all owners, registered agents and managers.
- ☒ 4. Permit application (\$250) & Publication fee paid (\$30) total of \$280
- ☒ 5. Copy of Current County Business License
- ☒ 6. Copy of Current City Business License
- ☒ 7. Copy of Lease Agreement or Certified Copy of Deed & Copy of Corporate Charter, LLC, etc. (if applicable)
- ☒ 8. Copy of Certificate of Registration for Tennessee Sales Tax
- ☒ 9. Restaurant seating area plan showing a minimum of 40 seats at tables.

This application must be completely filled out and submitted with application fees (non-refundable) and the requirements listed above. By making this application, the applicant assumes personal responsibility for all information provided. The Beer Board may delay action or deny the permit if an application contains inaccurate information. Copies of licenses and documents must be submitted with the completed beer permit application to the City of Morristown Tax Office, 100 West 1st North Street. Each application must be signed and notarized. Applicants may call (423) 318-1552 with any questions regarding the application process.

A background check will be conducted from all counties an applicant has resided in within the last 10 years. The Beer Board requires records checks on all owners, registered agents and managers.

The owner shall list the local manager(s) responsible for operations. Any change in management must be reported and a new owner/manager questionnaire submitted to the city business tax office. A new manager is subject to a background check. Applicant may not have been convicted of any crime involving moral turpitude or violation of any alcoholic beverage law within the ten (10) years prior to applying for permit.

The City will place a public notice in the local newspaper one (1) time at least ten (10) days prior to the Beer Board meeting. A notice will also be posted at the establishment at least (15) days prior to the meeting.

State law requires a \$100.00 annual privilege tax which is due each January. New permittees will pay a prorated annual tax.

A permit holder must surrender the beer permit to the City Business Tax Office within five (5) days of termination of the business, change in ownership, relocation of the business or change in the business name. A change in ownership for a corporate owner occurs when at least fifty percent (50%) of the stock of the corporation is transferred to a new owner.

The City Beer Board meets as needed on the first and third Tuesday of each month. To ensure consideration of an application, the applicant must submit the completed application to the City of Morristown Tax Office 30 days prior to the next Beer Board meeting in order to appear on that agenda.

CITY OF MORRISTOWN
100 W 1ST NORTH ST
MORRISTOWN TN 37814-1499

RECPT#: 639932

03/05/21 14:44 2842spowe

CUSTOMER#:0

NAME:

BEER FEE & APPLICAT

CHG: 808

BEER BOND

280.00

PAID AMT

28 PAID BY NAME

TRADER CONER PAY METHOD

CHECK

116

AMT TENDERED:

AMT APPLIED: 280.00

CHANGE: 280.00



CITY OF MORRISTOWN BEER PERMIT
CITY OFFICIALS CHECKLIST



TAX OFFICE CHECKLIST

Current Taxes Verified

_____ City Taxes

_____ County Taxes

POLICE DEPARTMENT CHECKLIST

Public Notices

☒ Notice of Beer Board Meeting

☒ Signs Posted at Location of Business – Date Posted: 3-15-2021

☒ Newspaper Notice of Application – Date Ran in Newspaper: 3-25-2021

☒ Background Investigation

_____ Date of Beer Board Approval: _____

_____ Copy of Permit (Number _____) Issued

_____ Prorated Privilege Tax Paid

[Signature] MPD _____ Signature of person verifying completion of checklist

PLANNING CHECKLIST

Requested location is in a (check one)
ordinances of the City of Morristown.

☐ Non-conforming

☒ Conforming location under the zoning laws and

Signature of City Planner [Signature]

INSPECTIONS CHECKLIST

Have occupancy issues been addressed by City Inspections? ☐ Non-Conforming ☒ Conforming

Signature of City Inspector [Signature]

FIRE DEPARTMENT CHECKLIST

Have the fire code inspections been completed? ☐ Non-conforming ☒ Conforming

Signature of Fire Marshall [Signature]



CITY OF MORRISTOWN
APPLICATION FOR BEER PERMIT



(It is the applicant's responsibility to provide complete and accurate information. The Beer Board could delay action on the application if any information is not accurate.)

I/we hereby make application for a permit to sell, store, brew, or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Morristown's Municipal Code, Title 8, Chapter 2, and base my application upon the answers to the following questions:

1. Reason for application ☒ New Business ☐ New Ownership ☐ Name Change
☐ Other _____
2. Name of Business Owner(s): Jatin Patel
3. Is Owner a ☒ Corporation ☐ General Partnership ☐ Limited Partnership ☐ LLC
☐ Sole Proprietorship ☐ Other _____
4. Under what name will the business operate: Traders Corner
5. Business Address 922 S. Cumberland St. Phone 810-964-1977
6. Property Owners Name Gauri Patel / Jatin Patel Phone 810-964-3717
7. Type of permit requested: ☐ Restaurant ☐ Limited Service Restaurant ☐ Non-Profit Club
☐ On/Off Premise Microbrewery ☒ Off Premise (Convenience Store, Drug Store, Grocery Store)
☐ Caterer DOLLAR STORE / GROCERY
8. Will business be applying for a Liquor-By-the-Drink (LBD) License through the Alcohol Beverage Commission (ABC)? ☐ Yes ☒ No
9. List names of all general partners and owners and designate percentage of ownership. (Use additional paper if necessary.) Each person owning 5% or more of the business must complete an owner/manager questionnaire (attached) and submit to a criminal history/background checks conducted by the City of Morristown's Police Department from all counties of residence within the last 10 years. If ownership is a corporation, please indicate whether the corporation is privately held or publicly traded. Be sure to include all names ever used by the named individuals, (i.e. maiden and previous married names).
Jatin Patel 100%

10. List the name(s) of registered agents and managers or others on-site responsible for operations. Any change in management must be reported to the Business Tax Office. Any new manager must complete the owner/manager questionnaire and submit to a criminal history/background check as listed in No. 8 above.
Jatin Patel



CITY OF MORRISTOWN
BEER PERMIT APPLICATION AFFIDAVIT



1. I/we Jatin Patel hereby solemnly swear or affirm that each statement in this application is true and correct and understand that if any statement contained herein is false, the permit issued is automatically forfeited and voided. Furthermore, that in the event of forfeiture I/we shall not be eligible to receive another permit for a period of ten (10) years pursuant to Tennessee Code Annotated § 57-5-105(d).
2. I/we understand that all applicants are charged with the responsibility of knowing the local and state beer laws. I/we are aware that the penalty for violating state or local beer laws can include revocation or suspension of the permit and/or the imposition of civil penalties up to two thousand five dollars (\$2,500) per offense.
3. I/we understand that if the business allows illegal gambling on the premises that the beer permit will be subject to revocation.
4. I/we understand that by submitting this application, a background investigation shall be conducted on the applicant(s) and all on-site managers who will be selling beer at the permitted establishment. It is further understood that any and all documents related to that investigation shall become public record open for public inspection and reproduction pursuant to Tennessee Code Annotated § 10-7-503.
5. I/we understand that a requirement of maintaining good status standing with the Morristown Beer Board is that I/we must notify the City of Morristown Tax Office each time there is a change in the on-site manager responsible for selling beer.
6. I/we hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives from any and all liability of whatever type for any damages, causes of actions, personal property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to my application. I/we hereby waive all possible liability of the City of Morristown, Morristown Beer Board, Morristown Police Department, its employees, agents and representatives as stated above.
7. I/we agree that the beer permit holder shall use servers possessing server's permits issued by the State of Tennessee Alcoholic Beverage Commission and have said permits available for inspection upon request.
8. I/we agree that the hiring of an employee who has been convicted within the past ten (10) years of any law relating to the sale, possession, manufacture or transportation of intoxicating beverages, including beer, as defined by City of Morristown Municipal Code Section 8-213 or the hiring of an employee who has been convicted of any felony or crime involving moral turpitude within the past ten (10) years will be cause for possible revocation of the beer permit.
9. I/we understand if any information given in the application subsequently changes, I/we will immediately notify the Morristown Beer Board.
10. I/we understand that if the business closes, relocates, or there is any change in the ownership of the business, the permit will be surrendered to the Business Tax office within 5 days of said change for appropriate action.
11. I/we assume full responsibility for the permit and will be accountable for full compliance with the laws of Morristown and the State of Tennessee in the sale of beer.
12. I/we have read the foregoing release. I/we fully understand its provisions, and voluntarily consent to abide by its requirements.
13. I/we acknowledge and understand that the fees paid for the beer permit application process are non-refundable.
14. The undersigned is the applicant or the bona fide and qualified agent/representative of the corporate applicant.
15. I/we have been a citizen and/or lawful resident of the United States for not less than one (1) year immediately preceding the date of this document.

[Signature]
Applicant Signature or Agent/Representative

8-8-21
Date

Co-Applicant Signature

Date

Co-Applicant Signature

Date

Sworn to and subscribed by me this 8th day of March, 2021

Notary Public: [Signature]

My Commission Expires: Aug. 31, 2022



CITY OF MORRISTOWN BEER PERMIT OWNER/MANAGER QUESTIONNAIRE



Reason for Application: ☒ New Application

☐ Manager Change or Addition

1. Name Jatin Patel ☒ Owner - Percentage of Ownership 100 % ☐ Manager
2. Home Address _____ City _____ State _____ Zip _____
3. Home Phone _____ Cellular Phone _____ e of Birth _____
4. Are you a United States Citizen: ☒ Yes ☐ No
5. Driver's License _____ State _____ Social Security # _____
6. Local Business Name Traders Corner
7. Local Business Address/Zip 922 S. Cumberland St. Business Phone (810) 964-1977 /business phone same AS
8. Have you ever been convicted of any violation of liquor and/or beer laws, controlled substance laws, felonies, or any crime involving moral turpitude, within the last ten years, or do you have any charges currently pending?
☐ Yes* ☒ No
 *If yes, give particulars of each charge, including city, county, state: court and date: _____
9. Have you ever had a beer permit revoked, suspended, or denied? ☐ Yes* ☒ No
 *If yes, explain: _____
10. Have you ever been convicted of any misdemeanors, other than minor traffic violations, within the last ten (10) years or have any charges currently pending?
☐ Yes* ☒ No
 *If yes, give particulars of each charge, including city, county, state: court and date: _____
11. Do you understand both the state laws and local laws regulating the sale and distribution of beer in the City of Morristown?
☒ Yes ☐ No
12. Do you understand that allowing illegal gambling on the premises will be subject the permit to revocation?
☒ Yes ☐ No

AFFIDAVIT

I hereby solemnly swear or affirm that each statement on this questionnaire is true and correct and agree that if my statement is false, the permit issued may be revoked by the Beer Board, upon notice and hearing, and that the burden is on the permittee to prove the correctness of all the statements in this application.

I understand that this application is subject to the Tennessee Public Records Act and shall be open for inspection and reproduction by any citizen. Tennessee Code Annotated §10-7-503.

I understand that by submitting this application all documents provided referencing the submitted background checks related to my investigation and further investigation conducted as a result of those documents shall become public records.

I hereby release, absolve and hold harmless, the City of Morristown, the Morristown Beer Board, the Morristown Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employees, agents and representatives as stated above.

I have been a citizen and/or lawful resident of the United States for not less than one (1) year immediately preceding the date of this affidavit.

I have read and understand the foregoing release and understand its provisions and voluntarily consent to abide by its requirements.

Signature of Applicant

Date

Sworn to and subscribed by me this 8th day of March, 20 21

Notary Public:

My Commission Expires:

Aug. 31, 2022



CITY OF MORRISTOWN BEER BOARD
AUTHORIZATION FOR CRIMINAL HISTORY



3-10-21

Date

I, the undersigned applicant, or duly authorized signatory for applicant, for a permit authorizing the sale of beer within the City of Morristown, Tennessee, do hereby authorize the City of Morristown, by and through its agents and representatives and employees, to make inquiry, whether verbal, written, or electronic, of any and all law enforcement agencies or clerks of courts, whether, state, federal or local, concerning my criminal history of any convictions that I have had for any misdemeanor or felony, involving other than minor traffic violations, within the last ten (10) years from the date above.

I, the undersigned, further authorize any and all law enforcement agencies or clerks of courts, whether state, federal or local, or any state, federal, local or national entity storing and providing criminal history data, to release the afore stated information to the City of Morristown.

Residences for Past 10 Years

Street Address

City, State and Zip Code

Signature

Jatin Govind Patel

Name - Printed (include Maiden Name if Applicable)

Date of Birth

Social Security Number

Current Home Street Address

City, State and Zip Code

Signature

Name of Witness - Printed

**POST AT
LOCATION OF
BUSINESS**

**City of Morristown
Minimum Business License
and Gross Receipt Tax**

License Number

10832

THIS LICENSE EXPIRES 04/15/2022

Business Name TRADERS CORNER INC

DBA TRADERS CORNER

922 S CUMBERLAND ST

MORRISTOWN, TN 37813 USA

ID: 10832

Location: 922 S CUMBERLAND ST

MINIMUM BUSINESS TAX

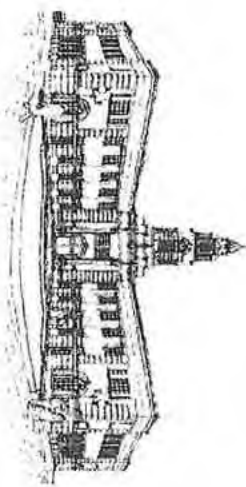
This is your official notice that if gross receipts tax is not paid within 60 days from above expiration date, a distress warrant may be issued to satisfy the tax dept. Further notification of expiration is not required by law. Please make note of these dates. If paid by check, this license valid only after check is paid. This license does not permit operation unless properly zoned, and/or in compliance with all other applicable laws/rules.

Classification: 2

Date issued 03/10/2021

By

A.W. [Signature]
Taxing Authority



City of Morristown

P.O. Box 1654

Morristown, Tennessee 37816-1654

Total Tax

PAID

This License is NOT Transferable

PENNY PETTY, HAMBLÉN COUNTY CLERK

LICENSE
0365876

STANDARD BUSINESS TAX LICENSE

Total Due: 15.00
Cash: 20.00 Check: Check No.: Change: 5.00
GAIL WK01 Drawer: 23 Site: 1
Work Date: 03/10/2021

DETACH THIS PORTION FOR CONFIDENTIAL FILE

**PENNY PETTY
HAMBLÉN COUNTY CLERK**
511 W. 2ND NORTH ST
MORRISTOWN, TN 37814

LICENSE
0365876

STANDARD BUSINESS TAX LICENSE

Mailing

Location

75883 TRADERS CORNER INC

TRADERS CORNER INC

922 SOUTH CUMBERLAND RD
MORRISTOWN, TN 37814

JATIN PATEL


LOCAL ACCOUNT NUMBER 75883
STATE ACCOUNT NUMBER NULL
TRANSACTION NUMBER _____
CLASS 02
SALES TAX NUMBER 0

ISSUE DATE 03/12/21
TAX PERIOD STARTED - 03/10/2021
PAYMENT DUE BY 4/15/2022
EXPIRATION DATE 5/15/2022

TO AVOID PENALTY, INTEREST, AND POTENTIAL ENFORCED COLLECTION ACTION, BUSINESS TAX RETURNS AND PAYMENTS MUST BE REMITTED TO THE TENNESSEE DEPARTMENT OF REVENUE AT LEAST 30 DAYS PRIOR TO THE EXPIRATION DATE OF THIS LICENSE.

IF PAID BY CHECK, THIS LICENSE VALID ONLY AFTER CHECK IS PAID.

THIS LICENSE DOES NOT PERMIT OPERATION UNLESS PROPERLY ZONED, AND/OR IN COMPLIANCE WITH ALL OTHER APPLICABLE LAWS/RULES.


DEPUTY CLERK SIGNATURE

GAIL WK01 Drawer:23 Site:1

-- POST AT LOCATION OF BUSINESS --
IF BUSINESS CLOSSES, MOVES, OR CHANGES OWNERS, NOTIFY THIS OFFICE

[Return to Agenda](#)

SCANNED
10-28-19

Date of this notice: 10-28-2019

Employer Identification Number:
84-3500365

Form: SS-4

Number of this notice: CP 575 A

TRADERS CORNER INC
5125 HANSFORD PL
MORRISTOWN, TN 37816

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 84-3500365. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 941	07/31/2020
Form 940	01/31/2021
Form 1120	04/15/2020

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

IMPORTANT INFORMATION FOR S CORPORATION ELECTION:

If you intend to elect to file your return as a small business corporation, an election to file a Form 1120-S must be made within certain timeframes and the corporation must meet certain tests. All of this information is included in the instructions for Form 2553, *Election by a Small Business Corporation*.



STATE OF TENNESSEE
DEPARTMENT OF REVENUE

Certificate of Registration

October 28, 2019



TRADERS CORNER INC
PO BOX 2025 PO BOX 2025
MORRISTOWN TN 37816-2025

Letter ID:
Account ID:
Account Type: Sales and Use Tax

The above named taxpayer has filed an application for sales and use tax registration for the place of business at the below referenced location address. The Tennessee Department of Revenue issued this Certificate of Registration in accordance with Tenn. Code Ann. §§ 67-6-601 and 67-6-602. The Certificate of Registration must be publicly displayed at the location address for which it is issued.

The tax account number and location number on this certificate are used by the Department to identify your account and must be shown on all correspondence and reports. The certificate is not assignable and is valid only for the above referenced taxpayer and for transactions of business for this registration. **In accordance with Tenn Code Ann. § 67-6-607, it is a Class C misdemeanor for any person to misuse a Certificate of Registration for the purpose of obtaining taxable property without the payment of sales or use tax when it is due. Such wrongful use is grounds for the Commissioner to revoke the taxpayer's Certificate of Registration.**

Tax Returns

All sales and use tax returns must be filed and associated tax payments made electronically to the Department. Taxpayers may do this at <https://tntap.tn.gov/eservices/>. Taxpayers should file the sales and use tax return according to their filing frequency on the 20th day of the month following the reporting period. If your business opens after the 20th of the month, you may report sales made during the remaining days of the month with the next reporting period. In order to avoid penalty and interest charges, all returns must be filed and all associated tax payments must be made on or before the due date for the reporting period. Taxpayers should always file a return for their business, even if they do not make any sales during a reporting period.

Detach here and display in public area



Tennessee Department of Revenue
Certificate of Registration
Sales and Use Tax

TRADERS CORNER INC
PO BOX 2025
MORRISTOWN TN 37816-2025

Effective Date: November 1, 2019
Account No.:
Location No.:
Filing Status: Monthly

David Gerregano
Commissioner of Revenue
[Return to Agenda](#)

COMMERCIAL LEASE AGREEMENT

THIS LEASE (this "Lease") dated this 1st day of February, 2021

BETWEEN:

J.g.patel llc of 5125 hansford pl morristown tn 37814
Telephone: (810) 964-1977 Fax: N/A.
(the "Landlord")

OF THE FIRST PART

- AND -

Traders corner inc of 922 s cumberland st
Telephone: (810) 964-1977
(the "Tenant")

OF THE SECOND PART

IN CONSIDERATION OF the Landlord leasing certain premises to the Tenant, the Tenant leasing those premises from the Landlord and the mutual benefits and obligations set forth in this Lease, the receipt and sufficiency of which consideration is hereby acknowledged, the Parties to this Lease (the "Parties") agree as follows:

Definitions

1. When used in this Lease, the following expressions will have the meanings indicated:
 - a. "Additional Rent" means all amounts payable by the Tenant under this Lease except Base Rent, whether or not specifically designated as Additional Rent elsewhere in this Lease;
 - b. "Building" means all buildings, improvements, equipment, fixtures, property and facilities from time to time located at 922 s cumberland st morristown tn 37814, as from time to time altered, expanded or reduced by the Landlord in its sole discretion;
 - c. "Common Areas and Facilities" mean:
 - i. those portions of the Building areas, buildings, improvements, facilities, utilities, equipment and installations in or forming part of the Building which from time to time are

- not designated or intended by the Landlord to be leased to tenants of the Building including, without limitation, exterior weather walls, roofs, entrances and exits, parking areas, driveways, loading docks and area, storage, mechanical and electrical rooms, areas above and below leasable premises and not included within leasable premises, security and alarm equipment, grassed and landscaped areas, retaining walls and maintenance, cleaning and operating equipment serving the Building; and
- ii. those lands, areas, buildings, improvements, facilities, utilities, equipment and installations which serve or are for the useful benefit of the Building, the tenants of the Building or the Landlord and those having business with them, whether or not located within, adjacent to or near the Building and which are designated from time to time by the Landlord as part of the Common Areas and Facilities;
- d. "Leasable Area" means with respect to any rentable premises, the area expressed in square feet of all floor space including floor space of mezzanines, if any, determined, calculated and certified by the Landlord and measured from the exterior face of all exterior walls, doors and windows, including walls, doors and windows separating the rentable premises from enclosed Common Areas and Facilities, if any, and from the center line of all interior walls separating the rentable premises from adjoining rentable premises. There will be no deduction or exclusion for any space occupied by or used for columns, ducts or other structural elements;
- e. "Premises" means the retail store at 922 s cumberland st morristown tn 37814.
- f. "Rent" means the total of Base Rent and Additional Rent.

Intent of Lease

2. It is the intent of this Lease and agreed to by the Parties to this Lease that rent for this Lease will be on a gross rent basis meaning the Tenant will pay the Base Rent and any Additional Rent and the Landlord will be responsible for all other service charges related to the Premises and the operation of the Building save as specifically provided in this Lease to the contrary.

Leased Premises

3. The Landlord agrees to rent to the Tenant the retail store municipally described as 922 s cumberland st morristown tn 37814, (the "Premises").
The Premises will be used for only the following permitted use (the "Permitted Use"):
Retail.

Term

4. The term of the Lease is a periodic tenancy commencing at 12:00 noon on March 5, 2021 and continuing on a year-to-year basis until the Landlord or the Tenant terminates the tenancy (the "Term").

Rent

5. Subject to the provisions of this Lease, the Tenant will pay a base rent of \$3,800.00, payable per month, for the Premises (the "Base Rent"), without setoff, abatement or deduction. In addition to the Base Rent, the Tenant will pay for any fees or taxes arising from the Tenant's business.
6. The Tenant will pay the Base Rent on or before the 1st day of each and every month of the Term to the Landlord.
7. No acceptance by the Landlord of any amount less than the full amount owed will be taken to operate as a waiver by the Landlord for the full amount or in any way to defeat or affect the rights and remedies of the Landlord to pursue the full amount.

Use and Occupation

8. The Tenant will open the whole of the Premises for business to the public fully fixtured, stocked and staffed on the date of commencement of the Term and throughout the Term, and will continuously occupy and utilize the entire Premises in the active conduct of its business in a reputable manner on such days and during such hours of business as may be determined from time to time by the Landlord.
9. The Tenant covenants that the Tenant will carry on and conduct its business from time to time carried on upon the Premises in such manner as to comply with all statutes, bylaws, rules and regulations of any federal, state, municipal or other competent authority and will not do anything on or in the Premises in contravention of any of them.

Quiet Enjoyment

10. The Landlord covenants that on paying the Rent and performing the covenants contained in this Lease, the Tenant will peacefully and quietly have, hold, and enjoy the Premises for the agreed term.

Distress

11. If and whenever the Tenant is in default in payment of any money, whether hereby expressly reserved or deemed as rent, or any part of the rent, the Landlord may, without notice or any form of legal

process, enter upon the Premises and seize, remove and sell the Tenant's goods, chattels and equipment from the Premises or seize, remove and sell any goods, chattels and equipment at any place to which the Tenant or any other person may have removed them, in the same manner as if they had remained and been distrained upon the Premises, all notwithstanding any rule of law or equity to the contrary, and the Tenant hereby waives and renounces the benefit of any present or future statute or law limiting or eliminating the Landlord's right of distress.

12. If the Tenant continues to occupy the Premises without the written consent of the Landlord at the expiration or other termination of the Term, then the Tenant will be a tenant at will and will pay to the Landlord, as liquidated damages and not as rent, an amount equal to twice the Base Rent plus any Additional Rent during the period of such occupancy, accruing from day to day and adjusted pro rata accordingly, and subject always to all the other provisions of this Lease insofar as they are applicable to a tenancy at will and a tenancy from month to month or from year to year will not be created by implication of law; provided that nothing in this clause contained will preclude the Landlord from taking action for recovery of possession of the Premises.

Tenant Improvements

13. The Tenant will obtain written permission from the Landlord before doing any of the following:
 - a. painting, wallpapering, redecorating or in any way significantly altering the appearance of the Premises;
 - b. removing or adding walls, or performing any structural alterations;
 - c. changing the amount of heat or power normally used on the Premises as well as installing additional electrical wiring or heating units;
 - d. subject to this Lease, placing or exposing or allowing to be placed or exposed anywhere inside or outside the Premises any placard, notice or sign for advertising or any other purpose;
 - e. affixing to or erecting upon or near the Premises any radio or TV antenna or tower, or satellite dish; or
 - f. installing or affixing upon or near the Premises any plant, equipment, machinery or apparatus without the Landlord's prior consent.

Utilities and Other Costs

14. The Tenant is responsible for the direct payment of the following utilities and other charges in relation to the Premises: electricity, natural gas, water, sewer, telephone, internet and cable.

15. The Tenant will also directly pay for the following utilities and other charges in relation to the Premises: All Utilities, Phone, Waste.

Insurance

16. The Tenant is hereby advised and understands that the personal property of the Tenant is not insured by the Landlord for either damage or loss, and the Landlord assumes no liability for any such loss. The Tenant is advised that, if insurance coverage is desired by the Tenant, the Tenant should inquire of Tenant's insurance agent regarding a Tenant's policy of insurance.
17. The Tenant is responsible for insuring the Landlord's contents and furnishings in or about the Premises for either damage and loss for the benefit of the Landlord.
18. The Tenant is responsible for insuring the Premises for damage or loss to the structure, mechanical or improvements to the Building on the Premises for the benefit of the Tenant and the Landlord. Such insurance should include such risks as fire, theft, vandalism, flood and disaster.
19. The Tenant is responsible for insuring the Premises for liability insurance for the benefit of the Tenant and the Landlord.
20. The Tenant will provide proof of such insurance to the Landlord upon the issuance or renewal of such insurance.

Abandonment

21. If at any time during the Term, the Tenant abandons the Premises or any part of the Premises, the Landlord may, at its option, enter the Premises by any means without being liable for any prosecution for such entering, and without becoming liable to the Tenant for damages or for any payment of any kind whatever, and may, at the Landlord's discretion, as agent for the Tenant, relet the Premises, or any part of the Premises, for the whole or any part of the then unexpired Term, and may receive and

collect all rent payable by virtue of such reletting, and, at the Landlord's option, hold the Tenant liable for any difference between the Rent that would have been payable under this Lease during the balance of the unexpired Term, if this Lease had continued in force, and the net rent for such period realized by the Landlord by means of the reletting. If the Landlord's right of reentry is exercised following abandonment of the premises by the Tenant, then the Landlord may consider any personal property belonging to the Tenant and left on the Premises to also have been abandoned, in which case the Landlord may dispose of all such personal property in any manner the Landlord will deem proper and is relieved of all liability for doing so.

Governing Law

22. It is the intention of the Parties to this Lease that the tenancy created by this Lease and the performance under this Lease, and all suits and special proceedings under this Lease, be construed in accordance with and governed, to the exclusion of the law of any other forum, by the laws of the , without regard to the jurisdiction in which any action or special proceeding may be instituted.

Severability

23. If there is a conflict between any provision of this Lease and the applicable legislation of the State of Tennessee (the 'Act'), the Act will prevail and such provisions of the Lease will be amended or deleted as necessary in order to comply with the Act. Further, any provisions that are required by the Act are incorporated into this Lease.

Assignment and Subletting

24. The Tenant will not assign this Lease, or sublet or grant any concession or license to use the Premises or any part of the Premises. An assignment, subletting, concession, or license, whether by operation of law or otherwise, will be void and will, at Landlord's option, terminate this Lease.

Bulk Sale

25. No bulk sale of goods and assets of the Tenant may take place without first obtaining the written consent of the Landlord, which consent will not be unreasonably withheld so long as the Tenant and the Purchaser are able to provide the Landlord with assurances, in a form satisfactory to the Landlord, that the Tenant's obligations in this Lease will continue to be performed and respected, in the manner satisfactory to the Landlord, after completion of the said bulk sale.

Care and Use of Premises

26. The Tenant will promptly notify the Landlord of any damage, or of any situation that may significantly interfere with the normal use of the Premises.
27. The Tenant will not make (or allow to be made) any noise or nuisance which, in the reasonable opinion of the Landlord, disturbs the comfort or convenience of other tenants.
28. The Tenant will not engage in any illegal trade or activity on or about the Premises.
29. The Landlord and Tenant will comply with standards of health, sanitation, fire, housing and safety as required by law.

Surrender of Premises

30. At the expiration of the lease term, the Tenant will quit and surrender the Premises in as good a state and condition as they were at the commencement of this Lease, reasonable use and wear and damages by the elements excepted.

Hazardous Materials

31. The Tenant will not keep or have on the Premises any article or thing of a dangerous, flammable, or explosive character that might unreasonably increase the danger of fire on the Premises or that might be considered hazardous by any responsible insurance company.

Rules and Regulations

32. The Tenant will obey all rules and regulations posted by the Landlord regarding the use and care of the Building, parking lot and other common facilities that are provided for the use of the Tenant in and around the Building on the Premises.

General Provisions

33. Any waiver by the Landlord of any failure by the Tenant to perform or observe the provisions of this Lease will not operate as a waiver of the Landlord's rights under this Lease in respect of any subsequent defaults, breaches or nonperformance and will not defeat or affect in any way the Landlord's rights in respect of any subsequent default or breach.
34. This Lease will extend to and be binding upon and inure to the benefit of the respective heirs, executors, administrators, successors and assigns, as the case may be, of each party to this Lease. All covenants are to be construed as conditions of this Lease.

35. All sums payable by the Tenant to the Landlord pursuant to any provision of this Lease will be deemed to be Additional Rent and will be recoverable by the Landlord as rental arrears.
36. Where there is more than one Tenant executing this Lease, all Tenants are jointly and severally liable for each other's acts, omissions and liabilities pursuant to this Lease.
37. Time is of the essence in this Lease.
38. This Lease will constitute the entire agreement between the Landlord and the Tenant. Any prior understanding or representation of any kind preceding the date of this Lease will not be binding on either party to this Lease except to the extent incorporated in this Lease. In particular, no warranties of the Landlord not expressed in this Lease are to be implied.

IN WITNESS WHEREOF the Parties to this Lease have duly affixed their signatures under hand and seal, or by a duly authorized officer under seal, on this 1st day of February, 2021



(Witness)

J.g.patel llc (Landlord)

Per:  (SEAL)



(Witness)

Traders corner inc (Tenant)

Per:  (SEAL)

ARTICLES OF INCORPORATION OF Traders Corner Inc

ARTICLE I NAME

The name of this corporation is Traders Corner Inc hereafter "Corporation". The principal office or headquarters for the transaction of business shall be located at 5125 Hansford Pl, Morristown, located within the County of Hamblen and State of Tennessee. The Traders Corner Inc shall have and shall continuously maintain corporation status in the State of Tennessee as a registered office and agent.

ARTICLE II DURATION

The period of duration is perpetual.

ARTICLE III PURPOSE

The purpose for which this Corporation is organized is to engage in any such lawful act and/or activity under the General Law of Tennessee other than the banking business, trust company business or the practice of a profession not permitted to be incorporated by and pursuant to the Tennessee Corporations Statute.

ARTICLE IV REGISTERED OFFICE/AGENT

The street address of the initial registered office is 5125 Hansford Pl, Morristown, Tennessee 37814. The name of the initial registered agent at said address is Jatin.

ARTICLE V

ARTICLE VI INDEMNIFICATION

The Corporation does hereby indemnify any and all Directors, Officers, employees, Incorporators and/or Shareholders of the corporation from any and all liability with regards to the corporation and the business of the corporation, unless the person fraudulently and intentionally violated the law and/or maliciously conducted acts to damage and/or defraud the corporation, or as otherwise

provided under applicable Tennessee State Corporation Statute.

ARTICLE VIII
CORPORATE GOVERNANCE

All other matters regarding Corporation's rules of corporate governance are contained within Corporation's bylaws.

IN WITNESS WHEREOF, for the purpose of forming this Corporation under the laws of the State of Tennessee, we the undersigned, constituting the Incorporators of this Corporation, have executed these Articles of Incorporation on October 25, 2019.

STATE OF TENNESSEE

COUNTY OF HAMBLEN

On this date, 3/3/21, before me a notary public, the undersigned authority, the following personally appeared:

Incorporators:

known to me or have satisfactorily proven that they are the Incorporators of the Articles of Incorporation, that they signed the aforementioned document as such, and that the statements contained therein are true and correct.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year as written above.

James A. Long
(Signature Notary Public)

James A. Long
(Printed Name of Notary Public)

My Commission Expires: 6/29/21





City of Morristown
Office of the Police Department
Support Services

FAX TRANSMITTAL
COVER SHEET

FAX # (423) 585-4685



TO: Hamblen County Sheriff's Department
Attn: **Records**

FR: Sgt. Kenneth Hinkle, Support Services Sergeant

RE: Background Check for Beer Permit Application

DATE: March 15, 2021

TOTAL NUMBER OF PAGES INCLUDING COVER SHEET: 2

COMMENTS:

Background check request is for the LAST 10 YEARS

THANK YOU

NOTICE

THIS MATERIAL IS INTENDED ONLY FOR THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED. IT MAY CONTAIN PRIVILEGED, CONFIDENTIAL INFORMATION THAT IS EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAWS. IF YOU ARE NOT THE INTENDED RECIPIENT, PLEASE NOTE THAT YOU ARE STRICTLY PROHIBITED FROM DISSEMINATING OR DISTRIBUTING THIS MATERIAL (other than to the intended recipient) OR COPYING THIS MATERIAL. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THIS MATERIAL (and all copies) TO US BY MAIL TO THE *Morristown Police Department, P. O. Box 1283, Morristown, TN 37816-1283.*

IF THERE WAS A PROBLEM RECEIVING THIS FAX, PLEASE CONTACT THIS OFFICE AT (423) 585-4681.

THANK YOU.

(700.03 REV) MPD 2019



Morristown Police Department

ROGER OVERHOLT
Chief of Police

Hamblen County Sheriff's Dept.
Records Division

March 15, 2021

I am requesting a records check for the purpose of an Off Premise Beer Permit on the following individual:

Jatin Govind Patel

If you have any questions, please give me a call at 423-585-4681 or fax me the results at 423-585-4685.

Thanks in advance for your assistance,

Sgt. Kenneth Hinkle
Support Services Sergeant
Morristown Police Department

Esco R. Jarnagin
Sheriff

Wayne M.
Chief Depu



Sheriff of Hamblen County

510 Allison Street
Morristown, Tennessee 37814

HAMBLEN CO. ARREST RECORD SEARCH

DATE: 3/15/21

AN ARREST RECORD SEARCH WAS PROVIDED FOR THE FOLLOWING
INDIVIDUAL:

NAME: Jatin Govind Patel

DATE OF BIRTH: _____

INDIVIDUAL HAS NO RECORD AT THE HAMBLEN CO. SHERIFF'S DEPT. ✓

Has Arrest with Morristown Police Department, Please Contact MPD-423-585-2710

INDIVIDUAL HAS THE FOLLOWING RECORD AT THE HAMBLEN CO. SHERIFF'S DEPT:

NO RECORD

MAR 15 2021

THIS RECORDS CHECK COVERS
APPROXIMATELY THE LAST 15 YEARS

HCSO

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT THE HAMBLEN CO.
SHERIFF'S DEPT. RECORDS OFFICE AT (423) 585-2769. THIS
RECORD CHECK IS A COUNTY RECORD CHECK ONLY.

Kim Sipe

PHONE: (423) 586-3781 - Administrative
(423) 585-2720 - Jail
FAX: (423) 587-1658 - Administrative
(423) 587-1329 - Jail

Morristown Police Department

ROGER OVERHOLT
Chief of Police



BEER ORDINANCE ASSURANCE

I, the undersigned, acknowledge receipt of a copy of the City of Morristown Beer Ordinance Title 8 Chapter 2.

I understand it is my responsibility to adhere to the guidelines of this ordinance and the applicable laws of the State of Tennessee.

I understand it is my responsibility to ensure that my employees are aware of, and adhere to, all governing ordinances and laws concerning the sale of beer in my establishment.

Business Name & Address: TRADEERS CORNER
922 S. CUMBERLAND

Applicant Signature

Jatin Patel

Print Name

3-19-21

Date