

PERMIT NUMBER

DATE ISSUED

STATE OF TENNESSEE ALCOHOLIC BEVERAGE COMMISSION

Davy Crockett Tower 500 James Robertson Parkway, 3rd Floor Nashville, TN 37243 615-741-1602

www.tn.gov/abc

4420 Whittle Springs Road Knoxville, TN 37917 865-594-6342 One Commerce Square 40 South Main Street 4th Floor, Suite 415 Memphis, TN 38103 901-543-7284



540 McCallie Avenue, Suite 341 Chattanooga, TN 37402-2055 423-634-6434

APPLICATION FOR MANAGER'S PERMIT

CASHIER'S CHECK OR MONEY ORDER ONLY

\$200 FEE NON-REFUNDABLE

Date, 20				
Name of Applicant				
Home Street Address				
City	State	Zip	County	
Telephone No. ()	Email:			
S. S. #	D. L. #			State Issued
Age Date of Birth	Place of Birth			
SexRace		City		State
Have you been convicted of any Have you been convicted of any Are you currently in, or have you Please furnish court disposa. Have you served alcohol at a lice.	crime involving the sale and dis u completed Judicial Diversion f osition papers if you answ	or any of the cover "Yes" to	onvictions above? any of the question	ons above.
3. Do you have any direct or indire	ect interest in any Tennessee lice			·
4. Do you have any relatives emplo	oyed by the Tennessee Alcoholic	Beverage Con	nmission?	
5. Have you successfully complete If so, please provide the name of				
6. Have you successfully complete If so, please provide the name of				

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7. Have you ever had any permit or	license denied or revoked?	If so, provide details, include	ding the date, state, and	reasons.
8. Do you acknowledge that the sa administrative or criminal sanctions				
9. Give name of employer, address of ALL present employment. (Write			nt for past 5 years, inclu	ding
Employer	City/State	Type of Business	Month / Month/ From: Year To: Year	
			From:	To:
			From:	To:
			From:	To:
10. List all names you have used incknown.				
11. Do you acknowledge that the sa disciplinary actions being taken	le or service of alcohol to a	minor or intoxicated person	n can result in	
12. U.S. Citizen: Yes*No*				
* "THE ACCEPTANCE OF FEES DOES	NOT GUARANTEE THE ISSU			ANTO
PRINT NAME, APPLICANT			TURE OF APPLIC	
Subscribed and sworn to before me this	day of		20	
My Commission Expires				
			Notary Public	Notary Sea
BC Validation				
		Equal Opportunity Emplo based on age, race, sex, c other nonmerit factor is	and the Tennessee Alcoholic Be byers. Discrimination, in any ol color, religion, national origin, dis prohibited. Thus, the Tenness pportunity, equal access, affirmati	f its practices, which is sabling condition or any see Alcoholic Beverage
		Equal Opportunity Emplo based on age, race, sex, c other nonmerit factor is Commission is an equal op	oyers. Discrimination, in any of color, religion, national origin, dis- prohibited. Thus, the Tenness	f its practices, which is sabling condition or any see Alcoholic Beverage we action public entity.

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Department of Personnel. Alternate formats of this notice are available on request.