CITY OF KNOXVILLE
BEER PERMIT APPLICATION CHECKLIST

Business Name: Kancer Hospitality
Account #: 56532

Business Address: 3500 Knoxville Zoo Dr 37914

Agenda Date: 11-19-19
CLT #: 082CA006

☐ New application: Received 10/18/19
☐ Permit fee Paid: New Application - $250

☐ Publication fee paid - $25.00
☐ Records checks completed
☐ Current City Business License: Expiration Date 5/15/20

☐ Copy of Certificate of Registration for Tennessee Sales Tax
☐ Copy of Corporate Charter, LLC, etc.
☐ Copy of Certificate of Zoning from MPC: Zone

☐ Notice of application sent to Knox County Health Department (215-5200)
Sent 10/25/19 Received ____/____/______/____/_____
☐ Approved
☐ Pending

☐ Notice of application sent to Building Inspections (215-2999) Inspector:
Sent 10/25/19 Received ____/____/______/____/_____
☐ Approved
☐ Pending

☐ Notice of application sent to Fire Prevention Bureau (215-2283)
Sent 10/25/19 Received 10/29/19
☐ Approved
☐ Pending

☐ Request distances measured by Engineering Department (215-6132)
Requested 10/25/19 Received 10/31/19
Location needs additional research: ☐ Yes ☐ No

☐ Plan for Server Compliance
☐ TASK Program completed

Previous business at this location: Knoxville Zoo (#18194)

BOARD ACTION

☐ Approved; permit issued to applicant/owner @ meeting Date ____/____/____
☐ Approved; subject to final documentation Date ____/____/____
☐ Permit released to: ________________________ Date ____/____/____
☐ Denied; notification given to applicant/owner Date ____/____/____
☐ Deferred to: ____________________ Date ____/____/____
☐ Other: __________________________ Date ____/____/____

Notes:
________________________________________________________
________________________________________________________
CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT

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

I / we hereby make application for a permit to sell, store, or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Knoxville alcoholic beverages ordinance Chapter 4 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): Lancer Hospitality LLC

3. Is Owner a: ☐ Corporation ☐ General Partnership ☐ Limited Partnership ☑ LLC ☐ Sole Proprietorship

4. Under what name will the business operate: Knoxville Zoo

5. Business Address: 3500 Knoxville Zoo Drive Zip 37914 Phone (484) 547-5397

6. Property Owner's Name: Knoxville Zoological Phone 484-547-5397

7. Type of business you will operate: food service

8. 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 application (attached) and submit to a city of Knoxville Police Department background check. If ownership is a corporation, please indicate whether the corporation is privately held or publicly traded. If privately held, each person owning 5% or more of the corporation must complete an owner/manager application and submit to a city of Knoxville Police Department background check.

Lancer Hospitality is 100% wholly owned by Elior, Inc.

SEE ATTACHED ORGANIZATION CHART

9. List the name(s) of managers or others on-site responsible for operations. Any change in management must be reported to the Business Tax Office. A new manager is subject to a background check and applicable fees. Each individual listed must complete an owner/manager application and submit to a City of Knoxville Police Department background check.

Norman Block
Dawn Meyer

10. List machines currently in use or planned for use on premises and owner of machines (cigarette, pinball, jukebox, etc.)

None

11. Type of permit requested:

☐ Off Premise ☑ On/Off Premise ☐ Manufacturer/Distributor ☐ Self-Serve
CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
AFFIDAVIT

1. I/we, NAME OF APPLICANT, 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(c).

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 ONE THOUSAND FIVE HUNDRED 00/100 DOLLARS ($1,500.00) 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 a requirement of beer permit issuance is the permittee(s) and ON-SITE manager(s) who will supervise and/or sell and serve the beer at the establishment must complete alcohol education and training programs in accordance with City of Knoxville Code Section 4-60(c).

5. I/we understand that by submitting this application, a background investigation shall be conducted on the applicant(s) and on 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.

6. I/we understand that a requirement of maintaining good status standing with the Knoxville Beer Board, is that I/we must notify the City of Knoxville Business Tax Office each time there is a change in the on-site manager responsible for selling the beer.

7. I/we hereby release, absolve and hold harmless, the City of Knoxville, the Knoxville Beer Board, the Knoxville Police Department, and the employees, agents and representatives of all of the foregoing 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 Knoxville, Knoxville Beer Board, Knoxville Police Department, and the employees, agents and representatives of all the foregoing as stated above.

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 Knoxville Code Section 4-37 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 Knoxville Beer Board c/o Business Tax Office.

10. I/we understand that if the business closes down, relocates, or there is ANY change in the ownership of the business, the permit will be surrendered to the Business Tax office within 15 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 Knoxville 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.

Applicant Signature or Agent/Representative

Date: 10/8/19

Co-Applicant Signature

Date: __________

Co-Applicant Signature

Date: __________

Sworn to and subscribed before me this 8th day of October, 2019

Notary Public: "Matt Foster"

My Commission Expires: 8/31/2023
CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
OWNER/MANAGER APPLICATION

1. Name: Norman Black
   Manager

2. Home Address: 2932 Gistlan Ave, City Knoxville, State Tenn, zip 37917

3. Home Phone: ______ Cellular Phone: (423) 547-5397 Date of Birth: 01/01/1956

4. Driver's License #: __________________________ State: Tenn Social Security #: ________________

5. Local Business Name: Lancer Hospitality

6. Local Business Address/ZIP: 3500 Knoxville Ave Dr. Business Phone: (865) 637-5331 x 148

7. Have you ever been convicted of any violation of liquor and/or beer 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 had a beer permit revoked, suspended, or denied? Yes No

9. Have you ever been convicted of any misdemeanors (Speeding, DUI, Simple Assault, etc.) 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: __________________________

10. Do you understand both the state laws and the local laws regulating the sale and distribution of beer in the City of Knoxville? Yes No

11. 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 in this application 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, Norman Black, 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, Norman Black, hereby release, absolve and hold harmless, the City of Knoxville, the Knoxville Beer Board, the Knoxville 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 volunterily consent to abide by its requirements.

Signature of Applicant: ________________________________ Date: 01/07/19

Sworn to and subscribed before me this 8th day of October, 2019.

Notary Public: ________________________________

My Commission Expires: 03/29/23
CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
OWNER/MANAGER APPLICATION

Reason for Application: □ New Application  □ Manager Change or Addition

1. Name Dawn Meyer  □ Owner—Percentage of Ownership %  □ Manager

2. Home Address 3513 Valley Stream Way Knoxville TN Zip 37917

3. Home Phone (865) 545-6941 Cellular Phone (865) 264-5331 Date of Birth 05 04 1973

4. Driver’s License #  □ State  TN □ Social Security #.  

5. Local Business Name Lancer Hospitality

6. Local Business Address/ZIP 3500 Knoxville 200 Pk Business Phone: (865) 637-5331 Ext 1481

7. Have you ever been convicted of any violation of liquor and/or beer 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 had a beer permit revoked, suspended, or denied? □ Yes  □ No

If yes, explain:

9. Have you ever been convicted of any misdemeanors (Speeding, DUI, Simple Assault, etc.) 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:

10. Do you understand both the state laws and the local laws regulating the sale and distribution of beer in the City of Knoxville? □ Yes  □ No

11. 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 in this application 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.

Dawn Meyer, 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.

Dawn Meyer, hereby release, absolve and hold harmless, the City of Knoxville, the Knoxville Beer Board, the Knoxville 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.

Dawn Meyer  
Signature of Applicant  
Date: 10-18-19

Sworn to and subscribed before me this 14th day of October, 20...  
Notary Public:

My Commission Expires: 9/29/23
CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT

Property Details

Property Address: 3500 Knoxville Zoo Drive

Directions to business, including any landmarks:
I-40 east to Rutledge Pike exit.
Proceed on Knoxville Zoo Drive to enter the Zoo.

Property Owner Information:

Name: City of Knoxville

Phone: (865) 637-5331

Neighborhood Demographics

Provide the following locations nearest to the business. Provide ALL lines of information requested. You may want to drive or walk the area around the business location to determine which facilities are closest. You will be held accountable for the information provided.

**Must be filled in completely – No Exceptions**

School / Day Care:

Name: God’s Creative Enrichment Center

Address: 4004 Holston Drive 37914

Funeral Home:

Name: Jarnigan & Son Mortuary

Address: 2823 MLK Jr. Ave 37914

Hospital:

Name: Fort Sanders Regional

Address: 1901 Clinch Ave. 37914
Pursuant to City of Knoxville Code Section 4-67, the City requires the applicant to designate an individual residing within Knox County to receive notice of actions of the City or the Beer Board and to accept service of process. Please provide the name of the individual, their position with the applicant (owner, manager, etc.) and their address (may be business location). Note that the applicant is required to notify the City in accordance with Section 4-67 if there is any change in this information. In addition to a local address, please provide an address to which certified mail may be sent.

**BEER PERMIT APPLICATION:**

Business Name: Lancer Hospitality, LLC

Business Location: Knoxville Zoo

**PERSON RESPONSIBLE TO RECEIVE SERVICE OF PROCESS:**

Name: Norman Block

Position: General Manager Phone (484) 547-5397

Address: 3500 Knoxville Zoo Drive

City, State, Zip: Knoxville, TN 37914

**CERTIFIED MAILING ADDRESS:**

Name: Knoxville Zoo

Address: 3500 Knoxville Zoo Drive

City, State, Zip: Knoxville TN 37914
Business Name and Location:
LANCER HOSPITALITY
3500 KNOXVILLE ZOO DR

Mailing Address:
LANCER HOSPITALITY
c/o LANCER HOSPITALITY TENNESSEE LLC
1415 MENDOTA HEIGHTS RD
MENDOTA HEIGHTS, MN 55120

A Minimal Business Tax License does not permit the Licensee to operate a business of any type which is in conflict with any Federal, State, County or City ordinance, codes or laws.

Must be posted in a conspicuous place

DETACH LICENSE ABOVE AND POST IN A CONSPICUOUS PLACE
CERTIFICATE OF REGISTRATION

LANCER HOSPITALITY TENNESSEE LLC
1415 MENDOTA HEIGHTS RD
SAINT PAUL MN  55120-1017

May 17, 2013
Account Type:  SALES&USE
Account No.:  105604731
Filing Status:  MONTHLY

Your corrected Certificate of Registration attached below reflects a change in ONE or MORE of the following:

Location of Business
Name of Business
Effective date

PLEASE DESTROY YOUR OLD CERTIFICATE OF REGISTRATION.

For additional information regarding this account you may call Taxpayer Services between 8:00 a.m. and 4:30 p.m., Monday through Friday, holidays excepted. Please see the back of this notice for the locations and phone numbers of our local offices.

DETACH HERE AND DISPLAY IN PUBLIC AREA

TENNESSEE DEPARTMENT OF REVENUE
CERTIFICATE OF REGISTRATION
SALES&USE

This certificate must be publicly displayed

LANCER HOSPITALITY TENNESSEE LLC
1415 MENDOTA HEIGHTS RD
SAINT PAUL, MN  55120-1017

Account Type:  SALES&USE
Account No.:  105604731
Effective Date:  January 1, 2010

Richard H. Roberts
COMMISSIONER OF REVENUE
Lancer Hospitality
Zoo Knoxville
Server Compliance Plan

Lancer Hospitality Tennessee, LLC is the contract vendor for food and beverage operations at Zoo Knoxville. Lancer is applying for a permit to serve beer and wine at two locations at the zoo, Beastro Café and Aldo’s Grill. Lancer anticipates serving a limited selection, possibly four, of canned beer and wine at these locations. Alcoholic beverages will be kept in a secured refrigerated unit and will be served by a cashier who has completed a state certified compliance training course. The cashier will be the same person checking the ID and serving the beverage.

Compliance training
Each manager and supervisor level employees will complete a state certified training course and receiving a passing score on the certification testing. Each person will maintain their certification and apply for renewal as required by law.

Frequency of compliance training
Compliance training will follow state requirements for certification. In addition, there will be monthly staff meetings to review procedures for compliance.

Required signage
Signage that communicates law and policies on consumption of alcoholic beverages will be posted at or near the cashier stand at Beastro Café and Aldos Grill. The state TABC officer has already given the required signage during their inspection for the wine sales.
Policy for checking ID’s

There will be one cashier on duty at all times at both the Beastro Café and Aldos Grill that has completed a state certified compliance course who will inspect ID’s to insure the guest meets the requirements to purchase alcohol. The cashier checking the ID will be the same person who serves the guest.

POS age confirmation

Lancer will purchase and display signage displaying legal purchase age requirement to confirm that customer is of a legal drinking age

Daily sale procedure

Cashier will take the guest order, they will then check the ID for accuracy and legal age for purchase. Once this has been reviewed and compliance noted the cashier can then serve the beverage to the guest.

Frequency of ID check

It will be Lancer’s policy to have the state certified cashiers check the IDs for all guests, without exception, for each purchase.

Procedure for catching fake ID’s

The handbook of state ID will be located at each POS location serving alcohol for quick reference and confirmation of a valid ID. Any fake IDs will be confiscated and forwarded to the proper authorities.

Prevention of guest intoxication

Visual cues will be observed by the state certified cashier in order to make the decision about whether to serve a guest.
Procedure for service refusal
Cashier will make a visual assessment of the guest, if the guest shows visible indication of intoxication, the cashier will inform the manager at that location, and that person will politely inform the guest we cannot allow the purchase of alcohol at that time.

Use of indicators
Indicators will not be used, however each guest will be carded every time they purchase an alcoholic beverage.

Number of drinks allowed to be purchased at one time
Each guest may purchase up to two (2) drinks at a time but the state certified cashier will require seeing the other guest’s ID for verification.

Corrective action policy for violation of service procedures
Written documentation of infractions will be enforced and discipline for employee’s not abiding by the laws or this compliance plan will be carried out, up to and including termination depending on the severity of the infraction.

Plan for monitoring and preventing underage consumption
Visual monitoring will occur from staff and dining room attendant. In addition, the security officers that patrol the zoo will provide additional monitoring.
October 29, 2019

ZOO KNOXVILLE
3500 KNOXVILLE ZOO DR
KNOXVILLE, TN 37914

An inspection of your facility was conducted on Oct 29, 2019

Inspection Note  On site of inspection with General Manager Norman Block 272-0803

   Bistro OLC 90 entire/ 32 patio

   Aldo’s

   Beer Permit

   Approved

__________________________  _______________________
Kevin Bost               Norman Block
Inspector
DATE: 10-25-19

TO: Donald Jenkins, City Surveyor
    Engineering Department

FROM: Mark Byrd, Collections Officer
       Finance Department

RE: Request for distance measurements for beer permit application

Please measure the distances from the below indicated beer permit applicant’s proposed location to the public facilities indicated and forward this information back to me. As required by law, this information is necessary to process the applicant’s beer permit request. Thank you in advance for your assistance.

Business name: Lancer Hospitality

Business location: 3500 Knoxville Zoo Dr

Property description: ☑ Pre-existing structure

Directions to and/or landmarks near location:  I-40 E to Rutledge Pike exit. Proceed on Knoxville Zoo Dr to enter the zoo.

SCHOOL/DAYCARE:
Name: God’s Creative Enrichment Center
Address: 4004 Holston Dr
Distance/feet: MORE THAN 300’

FUNERAL HOME:
Name: Jarnigan & Son Mortuary
Address: 2823 MLK Jr Ave
Distance/feet: MORE THAN 300’

HOSPITAL:
Name: Fort Sanders Regional
Address: 1901 Clinch Ave
Distance/feet: MORE THAN 300’