



# JEFFERSON CITY • TENNESSEE

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City of Jefferson City  
P.O. Box 530  
112 City Center Drive  
Jefferson City, TN 37760

## Application for Certificate of Compliance

**Application Fee: \$250.00**

This application shall be verified by the applicant. In the event the applicant is a partnership or corporation, each partner or stockholder shall file an accompanying application.

### **Personal Data (Please Print)**

*(In the event the applicant is a partnership or corporation, each partner or stockholder shall file an application.)*

(1) Full name of applicant: \_\_\_\_\_ Date of Birth/Age: \_\_\_\_\_

Home Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

(2) Number of years residency in the State of Tennessee: \_\_\_\_\_

(3) Occupation or business and length of time engaged in such occupation or business.  
\_\_\_\_\_

(4) Have you ever been convicted of any violation of a federal law, state law, or municipal ordinance? Yes \_\_\_\_\_ No \_\_\_\_\_

If "yes", specify offense, date, and place of occurrence:  
\_\_\_\_\_

(5) If employed, the name and address of employer: \_\_\_\_\_  
\_\_\_\_\_

(6) If in business, the kind of business and location thereof: \_\_\_\_\_  
\_\_\_\_\_

**Store Name and Location**

(7) The location of the proposed store for the sale of alcoholic beverages:

Proposed store name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Current business address (if relocation is requested): \_\_\_\_\_

Current Zoning of proposed location: \_\_\_\_\_

(8) The name and address of the owner of the store: \_\_\_\_\_  
\_\_\_\_\_

(9) If the applicant is a partnership, the name, age, and address of each partner, and his occupation, business, or employer. If the applicant is a corporation, the name, age, and address of the stockholders and their degrees of ownership in the corporation.

The information in the application shall be verified by the oath of the applicant. If the applicant is a partnership or a corporation, the application shall be verified by the oath of each partner, or by the president of the corporation.

I the undersigned applicant, do hereby authorize the City of Jefferson City, 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 of this application.

I the undersigned applicant realize that falsification of any portion of this application shall be grounds for rejection of the application. The applicant further agrees to comply with state, federal laws, city ordinances and the rules and regulations of the Alcoholic Beverage Commission and of the State Commissioner of Revenue with references to the sale of alcoholic beverages.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Sworn to and subscribed before me this \_\_\_\_\_ day \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_