JENNIFER FOGG, COUNTY CLERK
ROCKWALL COUNTY, TEXAS
1111 EAST YELLOWJACKET LANE
SUITE 100
ROCKWALL, TEXAS 75087

NOTICE OF APPLICATION

THE STATE OF TEXAS

COUNTY OF ROCKWALL

Notice is hereby given that an application of the hereinafter named owner for license to sell beer at at a location not licensed has been submitted to the Texas Alcohol Beverage Commission.

Substance of Application:

Type of License/Permit WINE ONLY PACKAGE STORE PERMIT

Exact Location of Business 1251 SO. STATE HWY 205 MCLENDON CHISHOLM, TX 75032

Name of Owner(s) CHILDERS N CHILDERS, LLC

Assumed or Trade Name CHISHOLM COUNTRY STORE

Corporation Name CHILDERS N CHILDERS, LLC

Name and Title of all Officers of Corporation NORINE R. CHILDERS, MANAGING MEMBER

Any person shall be permitted to contest the facts stated in said application and the applicant's right to secure said license or permit upon giving security for costs as provided by law.

WITNESS MY HAND this 20TH day of MAY

Jennifer Fogg, Rockwall County Clerk, Rockwall County, Texas

Seal

By _____
County Clerk or Deputy Clerk

Rockwall County Clerk's Office
Jennifer Fogg, County Clerk
1111E. Yellowjacket Lane
Suite 100
Rockwall, TX 75087
(972) 204-6300

Receipt for Services

Cashier ATUCKER

Batch # 220661

Customer Name CHISHOLM COUNTRY STORE
1251 SO STATE HWY205
ROCKWALL, TX 75032

Date: 05/20/2021 Time: 02:52:20PM

Date	Instrument No	Document Type	Transaction Type	Pg/Amt
		BEER WINE PERMIT HEARINGS		
			BEER WINE PERMIT HEARINGS	5.00
			Total:	**$5.00**
		Fee Total:		**$5.00**
CASH				5.00
			Payment Total:	**$5.00**

TEXAS ALCOHOLIC BEVERAGE COMMISSION

Texans Helping Businesses & Protecting Communities

OFF-PREMISE PREQUALIFICATION PACKET

L-OFF (5/2021)

Submit this packet to the proper governmental entities to obtain certification for the type of license/permit for which you are applying as required by Sections 11.37, 11.39, 11.46(b), 61.37, 61.38, 61.42 and Rule §33.13
All statutory and rule references mentioned in this application refer to and can be found in the Texas Alcoholic Beverage Code or Rules located on our website. ***www.tabc.texas.gov/laws/code_and_rules.asp***

LOCATION INFORMATION

1. Application for:
- ☒ Original
- ☐ Reinstatement
- ☐ Reinstatement and Change of Trade Name — License/Permit Number _____
- ☐ Change of Location
- ☐ Change of Location and Trade Name — License/Permit Number _____

2. Type of Off-Premise License/Permit

- ☐ **BQ** Wine and Beer Retailer's Off-Premise Permit
- ☐ **BF** Beer Retail Dealer's Off-Premise License
- ☐ **P** Package Store Permit
- ■ **Q** Wine Only Package Store Permit
- ☐ **LP** Local Distributor's Permit
- ☐ **E** Local Cartage Permit
- ☐ **ET** Local Cartage Transfer Permit
- ☐ **PS** Package Store Tasting Permit

3. Indicate Primary Business at this Location

- ■ Grocery/Market
- ☐ Liquor Store
- ☐ Convenience Store with Gas
- ■ Convenience Store without Gas
- ☐ Miscellaneous _____

4. Trade Name of Location (Name of store, business, etc.)
Chisholm Country Store

5. Location Address
1251 So. State Hwy 205

City	County	State	Zip Code
McLendon Chisholm	Rockwall	TX	75032

6. Mailing Address
1251 So. State Hwy 205

City	State	Zip Code
Rockwall	TX	75032

7. Business Phone No.	Alternate Phone No.	E-mail Address
469-614-2069	469-688-7884	chisholmcountrystore@gmail.com

OWNER INFORMATION

8. Type of Owner

- ☐ Individual
- ☐ Partnership
- ☐ Limited Partnership
- ☐ Limited Liability Partnership
- ☐ Corporation
- ■ Limited Liability Company
- ☐ Joint Venture
- ☐ Trust
- ☐ City/County/University
- ☐ Other _____

9. Owner of Business /Applicant (Name of Corporation, LLC, etc.)
Childers N Childers, LLC

PRIMARY CONTACT PERSON

The primary contact person should be a person who can answer questions TABC may have about the application. The contact **phone and email are mandatory and must be active and updated regularly**. If additional information is needed, it will be requested from this contact person. **Delays in responding to requests may delay the processing and approval of your permit/license.**

10. Contact Person: Norine Childers	Relation to Business: Managing Member
Phone (mandatory): 469-688-7884	Email (mandatory): norine.childers@gmail.com

TABC DATESTAMP

11. Is the applicant, a veteran-owned business?		☐ Yes ■ No
12. Is the applicant, a Historically Underutilized Business (HUB)?		☐ Yes ■ No

[redacted]

Last Name	First Name	MI	Title
Childers	Norine	R	Managing Member

[redacted]

14. Will your business be located within 300 feet of a church or public hospital? ☐ Yes ■ No

[redacted]

15. Will your business be located within 300 feet of any private/public school? ☐ Yes ■ No

[redacted]

16. Will your business be located within 1,000 feet of a private school? ■ Yes ☐ No

17. Will your business be located within 1,000 feet of a public school? ☐ Yes ■ No

[redacted]

18. Has the business being acquired been in operation in the same county for more than one year before the acquisition? ☐ Yes ■ No

If **Yes**, provide permit number for existing package store: ____________

If **No**, this does not qualify as an acquisition, and will be considered a new location.

[redacted]

19. CHECK HERE IF NOT IN CITY LIMITS ☐

I, the applicant, have confirmed the location is not located within city limits, therefore city certifications are not required.

[redacted]

All required forms have been completed.	■ Yes ☐ No
I have reviewed all forms to ensure they are complete.	■ Yes ☐ No
I have obtained all required local and state certifications (pages 3-4).	■ Yes ☐ No
All application packets have been notarized.	■ Yes ☐ No
Phone numbers and email address for Contact Person are up to date.	■ Yes ☐ No
All additional documentation as required by the application packets is attached	■ Yes ☐ No
If required, out of state criminal history checks are attached (PHS #7).	☐ Yes ☐ No ■ N/A
Certification of publication in local newspaper has been completed (page 5).	■ Yes ☐ No ☐ N/A
A copy of the newspaper publication is attached (page 5).	■ Yes ☐ No ☐ N/A

WARNING AND SIGNATURE

If Applicant Is/Must Sign
Individual/Individual Owner | Corporation/Officer
Partnership/Partner | Limited Liability Company/ Officer or Manager
Limited Partnership/General Partner

WARNING: Section 101.69 of the Texas Alcoholic Beverage Code states: "...a person who knowingly makes a false statement or false representation in an application for a permit or license or in a statement, report, or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the Texas Department of Criminal Justice for not less than 2 nor more than 10 years."

BY SIGNING YOU ARE SWEARING TO ALL INFORMATION AND ATTACHMENTS TO THIS PACKET.

PRINT NAME Norine Childers **SIGN HERE** Norine Childers

TITLE Owner / Mgr. Member

Before me, the undersigned authority, on this 20th day of May, 2021, the person whose name is signed to the foregoing application personally appeared and, duly sworn by me, states under oath that he or she has read the said application and that all the facts therein set forth are true and correct.

SIGN HERE Shannon Burgess
NOTARY PUBLIC

SEAL

SHANNON BURGESS
Notary Public, State of Texas
Comm. Expires 08-05-2023
Notary ID 132114898

CERTIFICATE OF CITY SECRETARY FOR P, Q, BF & BQ

Section 11.37 & 61.37

Not later than the 30th day after the date a prospective applicant for a license or permit requests certification, the city secretary or clerk shall certify whether the location or address given in the request is in a wet area and whether the sale of alcoholic beverages for which the license or permit is sought is prohibited by ordinance.

I hereby certify on this 20th day of May, 2021, that the location for which the license/permit is sought is inside the boundaries of this city or town, in a **"wet"** area for such license/permit, and not prohibited by charter or ordinance in reference to the sale of such alcoholic beverages.

OR

☐ **I hereby refuse on this _____ day of _____, 20____ to certify this location.**

SIGN HERE Rochelle Green
City Secretary/Clerk

McLendon-Chisholm, **TEXAS**
City

MCLENDON-CHISHOLM CITY SECRETARY CORPORATE SEAL TEXAS

CERTIFICATE OF COUNTY CLERK FOR P, Q & BF

Section 11.37 & 61.37

Not later than the 30th day after the date a prospective applicant for a license or permit requests certification, the county clerk shall certify whether the location or address given in the request is in a wet area and whether the sale of alcoholic beverages for which the license or permit is sought is prohibited by order.

I hereby certify on this 20th day of May, 2021, that the location for which the license/permit is sought is in a **"wet"** area for such license/permit, and is not prohibited by any valid order of the Commissioner's Court.

OR

☐ **I hereby refuse on this _____ day of _____, 20____ to certify this location.**

SIGN HERE Adam Foff
County Clerk

Rockwall **COUNTY**

ROCKWALL COUNTY, TEXAS COUNTY COURT SEAL

CERTIFICATE OF COUNTY CLERK FOR BQ

Section 11.37 & 61.37

Not later than the 30th day after the date a prospective applicant for a license or permit requests certification, the county clerk shall certify whether the location or address given in the request is in a wet area and whether the sale of alcoholic beverages for which the license or permit is sought is prohibited by order.

I hereby certify on this _____ day of _____, 20_____, that the location for which the license/permit is sought as the place of business is in a **"wet"** area and is not prohibited by any valid order of the Commissioner's Court for a Wine and Beer Retailer's Off-Premise Permit.

Most current election for given location was held for:

- ☐ legal sale of all alcoholic beverages for off-premise consumption
- ☐ legal sale of all alcoholic beverages
- ☐ legal sale of all alcoholic beverages except mixed beverages
- ☐ legal sale of all alcoholic beverages including mixed beverages
- ☐ legal sale of mixed beverages
- ☐ legal sale of mixed beverages in restaurants by food and beverage certificate holders
- ☐ legal sale of wine on the premises of a holder of a winery permit
- ☐ legal sale of beer/wine (17%) on-premise or beer/wine off-premise ***AFTER*** Sept. 1,1999
- ☐ legal sale of beer/wine (14%) on-premise or beer/wine off-premise ***BEFORE*** Sept. 1,1999

OR

☐ **I hereby refuse on this _____ day of _____, 20____ to certify this location.**

SIGN HERE _____ _____ **COUNTY**

County Clerk

S E A L

COMPTROLLER OF PUBLIC ACCOUNTS CERTIFICATE

Sections 11.46(b) & 61.42(b)

This is to certify on this _____ day of _____, 20 ____, the applicant holds or has applied for and satisfies all legal requirements for the issuance of a Sales Tax Permit under the Limited Sales, Excise and Use Tax Act or the applicant as of this date is not required to hold a Sales Tax Permit and that none of the persons making this application are indebted to the State of Texas.

Sales Tax Permit Number _____ **Outlet Number** _____

Print Name of Comptroller Employee _____

Print Title of Comptroller Employee _____

SIGN HERE _____ **FIELD OFFICE** _____

S E A L