

## ON-PREMISE PREQUALIFICATION PACKET

-ON (9/2019)

Submit this packet to the pro which you are applying as requ Contact your local TABC office post a sign at your proposed lo All statutory and rule references Code or Rules located on our we	uired by Sections 11.37, 11.3 e to verify requirements of ocation 60-days prior to the mentioned in this application absite. www.tabc.texas.gov/law	39, 11.46(b), 6 Sections 11.3 issuance of y refer to and co vs/code_and_re	1.37, 61.38, 61.42 a 391 and 61.381 as your license/permit an be found in the T ules.asp	and Rule you may	§33.13 be required to
19:34 23:34 23:35 23:35 23:35 23:35 23:35 23:35 23:35 23:35 23:35 23:35 23:35 23:35 23:35 23:35 23:35 23:35 2	LOCATION INF	FORMATIO	N		Caramita (1974)
1. Application for:	Original	rs Only	License/Permit Nu	mber	
Reinstatement 1	Reinstatement and Change of	Trade Name	License/Permit Nu	mber —	
☐ Change of Location ☐	Change of Location and Trade	Name	License/Permit Nu	mber _	
	Permit Premise License se Late Hours License ermit for Excursion Boats Brewpubs (BP) with a BG only	☐ MI ☐ CB ■ FB ■ PE ■ RM	Mixed Beverage Late Ho Minibar Permit Caterer's Permit Food and Beverage Cert Beverage Cartage Permi Mixed Beverage Restaur Local Cartage Permit - W	tificate it rant Permit	with FB
Indicate Primary Business at     Restaurant     Grocery/Market	Sporting Arena, Clvic Center, 1 Sexually Oriented	Hotel [	Bar Miscellaneous		
<ol> <li>Trade Name of Location (Nar Chiloso Mexican Bistro</li> </ol>	ne of restaurant, bar, store, et	c.)			
5. Location Address 2455 Ridge Rd Ste 135			7.55		
City Rockwall		County		State	Zip Code 75087
<ol> <li>Mailing Address</li> <li>2455 Ridge Rd Ste 135</li> </ol>		City Rocks	wall	State	Zip Code 75087
7. Business Phone No. (972) 722-8226	Alternate Phone No. (972) 207-6222	E-ma	ail Address id@chilosome:		
	OWNER INFO	ORMATION		No.	10.10.00111
8. Type of Owner	t (Name of Corporation, LLC,	Company 🔲 O	City/County/Universit	y	
The primary contact person should be and email are mandatory and must this contact person. Delays in respo	be active and updated requiar	tions TABC may	have about the applic	It will how	aguarted from
10. Contact Person: Carolyn A	Imstedt Re		ess: license ser		ottent very period of the
Phone (mandatory): 214-389-			/): carolyn@labar	2202230	nitservice.com
	TABC DAT	ESTAMP			

11. Are you	u, the applicant a veteran-owne	d business?			☐ Yes ■ No
12. Are you	u, the applicant a Historically Ur	nderutilized Busi	ness (HUB)?		☐ Yes ■ No
	dicated on the chart, enter the		at pertain to your business ty	/pe:	
	dual/Individual Owner		Limited Liability Company/All Offi	icers or	Managers
Partn	Partnership/All Partners Joint Venture/Venturers				
		Trust/Trustee(s)		-	
	oration/All Officers		City, County, University/Official		
Last Name	Jacob Alicora	First Name	AND DESCRIPTION OF THE PROPERTY AND ADDRESS OF THE PARTY	MI	Title
AZ8 LLC					General Partner
Last Name		First Name		MI	Title
Last Name		First Name		MI	Title
	our business be located within 300	Section feet of a church o			☐ Yes ■No
NOTE: For a	churches or public hospitals measu across intersections.	re from front door	to front door, along the property lin	es of th	e street fronts and in a
	ur business be located within 300 f s," are the facilities located on differ			e facilit	y? ☐ Yes ■ No ☐ Yes ☐ No
NOTE: For an arm	e school, day care center or child cross intersections. or multistory building: businesses n e located on different floors of the b located on or above the fifth story of shool to property line of your place the to the base of the floor on which	nay be within 300 building. of a multistory build of business in a d	feet of a day care center or child ding: measure in a direct line from t direct line across intersections verti	care fa	cility as long as the facilities
	r business be located within 1,000				□Yes ■ No
17. Will you	r business be located within 1,000	feet of a public so	hool?	lescone.	☐Yes ■ No
		60-D	AY SIGN	The state of	
18. If require at your	ed under Section 11.391 and 61.38 location.	31, enter the exact	date the 60-Day sign was posted	was posted Exact Date (MM/DD/YYYY) 05/28/2020	
I, the a require	JR LOCATION IS NOT WITHIN pplicant, have confirmed I am not do not be the policy of th	THE CITY LIM ot located in the	city limits of any city, therefore,	, city c	ertifications are not
Per Sec. 10 industry at d hold, directly	2.01, a tied house is defined as lifferent levels of the three-tier s y or indirectly, an ownership inter	any overlapping system. No perso erest in a busine	g ownership between those eng on having an interest in a permit	aged i	n the alcoholic beverage
	uired forms have been complete				■ Yes □ No
			■ Yes □ No		
	obtained all required local and s		ns (pages 3-5).		Yes  No
	lication packets have been nota				Yes No
	numbers and email address for				■ Yes  ■ No
	itional documentation as require				Yes No
	ired, out of state criminal history				Yes No I N/A
	ation of publication in local new				Yes No No N/A
A copy					■ Yes □ No □ N/A

## IF APPLICANT IS SHOWN AS WHO MUST SIGN Proprietorship WARNING AND Partnership Partner Corporation Officer SIGNATURE Limited Partnership General Partner Limited Liability Partnership General Partner Limited Liability Company Officer/Manager WARNING: Section 101.69 of the Texas Alcoholic Beverage Code states: "...a person who 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." I, UNDER PENALTY OF LAW, HEREBY SWEAR THAT I HAVE READ ALL THE INFORMATION PROVIDED IN THE APPLICATION AND ANY ATTACHMENTS AND THE INFORMATION IS TRUE AND CORRECT. I ALSO UNDERSTAND ANY FALSE STATEMENT OR REPRESENTATION IN THIS APPLICATION CAN RESULT IN MY APPLICATION BEING DENIED AND/OR CRIMINAL CHARGES FILED AGAINST ME. I ALSO AUTHORIZE THE TEXAS ALCOHOLIC BEVERAGE COMMISSION TO USE ALL LEGAL MEANS TO VERIFY THE INFORMATION PROVIDED. PRINT SIGN NAME HERE day of May, 2020, the person whose name is signed to Before me, the undersigned authority, on this 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 NANCY HERNANDEZ My Notary ID # 130679381 SEAL Expires May 26, 2024 CERTIFICATE OF CITY SECRETARY (FOR MB, RM & V) Section 11,37 446 I hereby certify on this day of , 20 20 , 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 altoholic beverages. SIGN SEAL CERTIFICATE OF CITY SECRETARY (FOR BG & BE) Section 1443 8 01.37 I hereby certify on this day of , 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. Election for given location was held for: 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 beer/wine (17%) on-premise AFTER Sept. 1, 1999 legal sale of beer/wine (14%) on-premise BEFORE Sept. 1, 1999 OR IF ABOVE DOES NOT APPLY: Be advised the location must have had two election passages per Section 25.14 or Section 69.17 of the TABC Code. One for beer and wine off-premise and one for mixed beverage. legal sale of beer and wine for off-premise consumption only AND EITHER: legal sale of mixed beverages OR

City

legal sale of mixed beverages in restaurants by food and beverage certificate holders

(applicant must apply for FB with BG or BE)

City Secretary/Clerk

SIGN HERE

SEAL

TEXAS

I hereby certify on this	red beverages between midnight and 2:00
A.M.; or The governing body of this city has by ordinance authorized the sale of bee	
The governing body of this city has by ordinance authorized the sale of beeA.M.; or The population of the city or county where premises are located was 500,00 Census of the United States as released by the Bureau of the Census on M The population of the city or county where premises are located was 800,00 Census (2010).  SIGN HERE City Secretary/Clerk City S E A L  CERTIFICATE OF COUNTY CLERK (FO	r between midnight and
□ The population of the city or county where premises are located was 500,00 Census of the United States as released by the Bureau of the Census on M □ The population of the city or county where premises are located was 800,00 Census (2010).  SIGN HERE □ City Secretary/Clerk City SEAL  CERTIFICATE OF COUNTY CLERK (FO	3.11 2.11
HERE  City Secretary/Clerk  City  S E A L  CERTIFICATE OF COUNTY CLERK (FO Section 11.37	March 12, 2001; or
SEAL  CERTIFICATE OF COUNTY CLERK (FO Section 11.37	
SEAL  CERTIFICATE OF COUNTY CLERK (FO	. TEXAS
CERTIFICATE OF COUNTY CLERK (FO	
Section 11 37	
I hereby certify on this 5 day of Ture, 2020	
Gonthissoner's Court.	2, that the location for which the ohibited by any valid order of the
County Clerk  CERTIFICATE OF COUNTY CLERK (F. Section 11:37 & 61:37	2007、1000年1000年100日 2008年1日 - 1000年11日 - 100
hereby certify on this day of, 20	_, that the location for which the der of the Commissioner's
Election for given location was held for:	
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 beer/wine (17%) on-premise <b>AFTER</b> Sept. 1, 1999	
legal sale of beer/wine (17%) on-premise AFTER Sept. 1, 1999  OR IF ABOVE DOES NOT APPLY:	
Be advised the location must have had two election passages per 25.14 or 69.17 of the	TAB Code. One for beer and wine off-premise
legal sale of beer and wine for off-premise consumption only	The second of th
AND EITHER:  legal sale of mixed beverages	
OR legal sale of mixed beverages in restaurants by food and beverage certifical (applicant must apply for FB with BG or BE)	ate holders
SIGN	
HERE County Clerk	
SEAL	COUNTY

CERTIFICATE OF COUNTY CLERK FOR LATE HOUR Chapters 29 & 70 et seq	S LICENSE/PERMIT (LB & BL)
I hereby certify on this	le of <i>beer</i> between midnight and 0,000 or more according to the 22 <sup>nd</sup> Decennial in March 12, 2001; or
SIGN	
HERECounty Clerk	COUNTY
SEAL	
COMPTROLLER OF PUBLIC ACCOUNTS Section 11.46 (b) & 61.42 (b)	图1566年1966年1月1日日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本日本
This is to certify on this day of, 20_ and satisfies all legal requirements for the issuance of a Sales Tax Permit und or the applicant as of this date is not required to hold a Sales Tax Permit.	
Sales Tax Permit Number 1-56-2492591-1 Outlet Nu	mber 0000
Print Name of Comptroller Employee	
Print Title of Comptroller Employee	
SIGN HERE FIELD OFFI	CE
SEAL	
PUBLISHER'S AFFIDAVIT (FOR MB, LB, R Section 11.39 and 61.38	M, BP, BG, BE, BL & V)
Name of newspaper	
City, County	
Dates notice published in daily/weekly	ATTACH PRINTED
newspaper (MM/DD/YYYY)	
Publisher or designee certifies attached notice was published in newspaper stated on da	tes shown. COPY OF THE
Signature of publisher or designee	NOTICE HERE
Sworn to and subscribed before me on this date (MM/DD/YYYY)	Hover over to see example
Signature of Notary Public	
SEAL	



## CITY OF ROCKWALL LOCAL ALCOHOL BEVERAGE PERMIT APPLICATION & CERTIFICATION

Revised 01/05/18

	01	10000			
Date	1	10212020	<i>t</i>	7)	
Applicant's Name	: CAROLYN F	temsters /	LABARBA	PERMIT.	SERVICE
Trade Name of Location	: CHILUSE	- MEXI	CAN BIST	RO,	
Location Address Street #, Name, City, State, Zi	2455 RI	PGE RO	STE 13	5 Rock	LWALL, TX
Mailing Address Street #, Name, City, State, Zi	2455 K	406ERD	Sire 135	Rock	uta To
Applicant's Phone TABC Permit Type(s Applying For	)	-2282 Rm/F	Email: CO(50/y: B/PE	nca laba	rbapemi
This is a(n)	: Original Ap	plication	Renewal		
ote: Local permits are reno opy of your TABC license w t the business location, alor	vith payment (if appli	cable). The loca			
*The Belov	w SECTION TO B	E FILLED OU	T BY City STAF	F ONLY*	
Was the property annexe  ✓ Yes □ No  Is the property located in	If no, city staff will an area zoned for th	need to consu	rmit?		
DaYes □ No	Zoning Designatio	n: Comme	cacine (	10157	MICT
APPLICATION IS FILED	FOR (check either	#1 or #2):			
1. The legal sale of	beer and wine for o	off-premise con	sumption only.		
300 feet of a public he	pears to be located was institution (measured front private school (measured front private school (measured front private school (measured front	front door to front door to front door	door)	☐ Yes ☐ Yes ☐ Yes	No No No
2. The following dis Restaurant (with	stance requirements h FB certificate), W	apply to holder	s of a Mixed Bevo e & Beer (BG) po	erage ermits:	
300 feet of a public he	pears to be located was institution (measured front chool (measured properties)	front door to front door to front door	door)	☐ Yes ☐ Yes ☐ Yes	No No No
Zoning and distance verific	cation / approval (P	lanning Dept.):			
Printed Name: Syan	MILLER	Date	06.03.20	20	
Signature: R/14					
City Secretary's Office:					
Approved Den	ied* □ Fee	es Paid	Check No.	Date	

<sup>\*</sup>If permit is denied due to non-compliance with distance requirements, applicant may seek approval of a variance from City Council

Rockwall County Clerk

6/2/2020

Amegy Bank

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

## Receipt for Services

Cashier

**LEDWARDS** 

Batch # 184382

Customer Name CHILOSO MEXICAN BISTRO 2455 RIDGE ROAD SUITE 135 ROCKWALL, TX 75087

Date: 06/05/2020 10:04:08AM Time:

Date	Instrument No	Document Type	Transaction Type	Pg/Am
		BEER WINE		
		PERMIT		
		HEARINGS		
			BEER WINE PERMIT HEARINGS	5.00
			Total:	\$5.00
		Fee Total:		\$5.00
CHECK 5180	5180	CHECK: COTHI	RUM COMPANIES, INC	5.00
		2201 MAIN ST, 5	STE 1280	
		DALLAS, TEXA	S 75201	
			Payment Total:	\$5.00