

ON-PREMISE PREQUALIFICATION PACKET

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 Contact your local TABC office to verify requirements of Sections 11.391 and 61.381 as you may be required to post a sign at your proposed location 60-days prior to the issuance of your license/permit. 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 Add Late Hours Only License/Permit Number ☐ 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 On-Premise License/Permit BG Wine and Beer Retailer's Permit LB Mixed Beverage Late Hours Permit BE Beer Retail Dealer's On-Premise License MI Minibar Permit BL Retail Dealer's On-Premise Late Hours License CB Caterer's Permit Brewpub License FB Food and Beverage Certificate Wine & Beer Retailer's Permit for Excursion Boats PE Beverage Cartage Permit MB Mixed Beverage Permit RM Mixed Beverage Restaurant Permit with FB Private Carrier's Permit -Brewpubs (BP) with a BG only Local Cartage Permit - Wine/Beer retailers (BG) Only 3. Indicate Primary Business at this Location Sporting Arena, Civic Center, Hotel
Sexually Oriented Restaurant ☐ Bar ■ Miscellaneous Hotel Grocery/Market Sexually Oriented 4. Trade Name of Location (Name of restaurant, bar, store, etc.) Hyatt Place Rockwall 5. Location Address 1600 La Jolla Pointe Drive City County State Zip Code Rockwall Rockwall TX 75087 6. Mailing Address City State Zip Code 1600 La Jolla Pointe Drive Rockwall TX 75087 7. Business Phone No. Alternate Phone No. E-mail Address 903-235-9954 kevinh@lodginghost.com OWNER INFORMATION 8. Type of Owner ☐ Individual Corporation ☐ City/County/University Partnership Limited Liability Company Other Limited Partnership Joint Venture ☐ Limited Liability Partnership □ Trust 9. Owner of Business/Applicant (Name of Corporation, LLC, etc.) Hotel LL Holding Company 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 license/permit. Contact Person: Kevin Patrick Hilchey Relation to Business: Manager Phone (mandatory): 903-235-9954 Email (mandatory): kevinh@lodginghost.com TABC DATESTAMP and the same of the same same All March Att Dr. Hart Services

	11. Are you, the applicant a veteran-owned business?						
-	12. Are you, the applicant a Historically Underutilized Business (HUB)?						
13. A	s indicated on the chart, enter the or additional space, use Form L-OIC)	individuals tl	nat pertain to your business	type:			
In	dividual/Individual Owner		Limited Liability Company/All O	fficers or	Managers		
P	artnership/All Partners		Joint Venture/Venturers				
Li	mited Partnership/All General Partners	1 1 1 10	Trust/Trustee(s)				
C	orporation/All Officers		City, County, University/Official				
Last Na	me	First Name		MI	Title		
Hilchey	1	Kevin		Р	Manager		
Last Na	me	First Name		МІ	Title		
Last Na	me	First Name		MI Title			
	ME,		NT INFORMATION				
14. W	ill your business be located within 300 fee	AND DESCRIPTION OF THE PERSON	109.31 et seq.		☐ Yes ■No		
NOTE: F	or churches or public hospitals measure t ine across intersections.			nes of th			
15. Will 15.a If "Y	your business be located within 300 feet 'ES," are the facilities located on different	of any private/	public school, day care or child ca	re facility	? ☐ Yes ■ No ☐ Yes ☐ No		
NOTE:	For private/public schools, day care cert the school, day care center or child ca across intersections.	are facility to th	e nearest property line of the pla	ace of bu	usiness, and in a direct line		
NOTE:	For multistory building: businesses may are located on different floors of the build	be within 300 ding.	feet of a day care center or child	care fac	cility as long as the facilities		
NOTE:	If located on or above the fifth story of a school to property line of your place of I line to the base of the floor on which you	business in a d	irect line across intersections ven	the prop tically up	erty line of the private/public the building at the property		
16. Will y	our business be located within 1,000 feet	t of a private so	hool?		□Yes ■ No		
17. Will y	our business be located within 1,000 feet	t of a public sch	iool?		☐Yes ■ No		
		60-D	AY SIGN				
18. If req	uired under Section 11.391 and 61.381, aur location.	The state of the s		Exact	Date (MM/DD/YYYY)		
	BARRIER BARRETTER	ALL AP	PLICANTS	obdaker	n er range (s. C. all Looks To. 4)		
19. IF You I, the requ	OUR LOCATION IS NOT WITHIN THE applicant, have confirmed I am not le ired.	E CITY LIMIT	TS, CHECK HERE	, city ce	rtifications are not		
CO Per Sec. ndustry a nold, direc	MPLETE THE FOLLOWING C 102.01, a tied house is defined as an t different levels of the three-tier syste ctly or indirectly, an ownership interes	y overlapping em. No persor	ownership between those eng	aged in	the alcoholic beverage		
	equired forms have been completed.	- A			☐ Yes ☐ No		
	e reviewed all forms to ensure they a		¥		Yes No		
	re obtained all required local and state		(pages 3-5).		☐ Yes ☐ No		
	pplication packets have been notarize		2000 COM COLOR COLOR COL		Yes No		
	ne numbers and email address for Co				☐ Yes ☐ No		
All a	dditional documentation as required b	y the applicat	ion packets is attached		Yes No		
	quired, out of state criminal history che				Yes No No N/A		
Certi	fication of publication in local newspa	per has been	completed (page 5).		Yes No No N/A		
A CO	py of the newspaper publication is att	ached (page 8	5).		Yes No No N/A		

WARNING AND **SIGNATURE**

IF APPLICANT IS SHOWN AS:	WHO MUST SIGN:
Proprietorship	Individual Owner
Partnership	Partiner
Corporation	Officer
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 required to be sworn commits an offense punishable by in nor more than 10 years."	n a statement, report, or other instrument to be filed with the Commission and mprisonment in the Texas Department of Criminal Justice for not less than 2
THE INFORMATION IS TRUE AND CORRECT. I ALSO UNDERSTAN	ALL THE INFORMATION PROVIDED IN THE APPLICATION AND ANY ATTACHMENTS AND D ANY FALSE STATEMENT OR REPRESENTATION IN THIS APPLICATION CAN RESULT IN ED AGAINST ME. I ALSO AUTHORIZE THE TEXAS ALCOHOLIC BEVERAGE COMMISSION ED.
PRINT U	SIGN V
NAME KEVIN PATRICK HILCHEY	HERE Burn Vatrick tolkey
	MA
00010	TITLE Wanager
application and that all the facts therein set forth are sign HERE Kay Mauldun	KAY MAULDIN
S E A L NOTARY PUBLIC	My Notary ID # 11766948
SEAL	Expires February 2, 2022
MARKATAN MA	
CERTIFICATE OF CIT	Y SECRETARY (FOR MB, RM & V)
	Section 11.37
l hereby certify on this day of license/permit is sought is inside the boundaries of the	move 1, 20 20, that the location for which the his city of town, in a "wet" area for such license/permit, and not say of the holic beverages.
, A	sade of swarparcouldic beverages.
SIGN N. / / OP	
HERE Thaty (Kockwall TEXAS
SEAL City Secretary/Clerk	SEAL City City
CERTIFICATE OF C	Ction 1737 8 61.37
I hereby certify on this day of	, 20, that the location for which the
	is 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:	TO THE STATE OF TH
legal sale of all alcoholic beverages	
legal sale of all alcoholic beverages except mixed	d beverages
legal sale of all alcoholic beverages including mix	ced beverages
legal sale of beer/wine (17%) on-premise AFTER	₹ Sept. 1, 1999
OR IF ABOVE DOES NOT APPLY:	₹E Sept. 1, 1999
	iges per Section 25.14 or Section 69.17 of the TABC Code. One for beer
and wine off-premise and one for mixed beverage.	ges per decitor 25.14 or Section 65.17 or the TABC Code. One for beer
 legal sale of beer and wine for off-premise consu 	mption only
AND EITHER: legal sale of mixed beverages	
OR	
legal sale of mixed beverages in restaurants by fe	ood and beverage certificate holders
(applicant must apply for FB with BG or BE)	
SIGN HERE	All productions and the second
City Secretary/Clerk	City TEXAS
SEAL	

(LB & BL) Chapters 29 & 70 et seq. I hereby certify on this _ day of , that one of the below is correct: 20 ☐ The governing body of this city has by ordinance authorized the sale of mixed beverages between midnight and 2:00 The governing body of this city has by ordinance authorized the sale of beer between midnight and A.M.; or ☐ The population of the city or county where premises are located was 500,000 or more according to the 22rd Decennial. Census of the United States as released by the Bureau of the Census on March 12, 2001; or ☐ The population of the city or county where premises are located was 800,000 or more according to the last Federal. Census (2010). SIGN HERE **TEXAS** City Secretary/Clerk City SEAL CERTIFICATE OF COUNTY CLERK (FOR MB, RM & V) Section 11.37 2020, that the location for which the hereby certify on this day of 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 ŚIGN COUNTY County Clerk CERTIFICATE OF COUNTY CLERK (FOR BG & BE) Section 11.37 & 61.37 nereby certify on this day of , 20 , that the location for which the license/permit is sought is in a "wet" area and is not prohibited by any valid order of the Commissioner's Court. 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 25.14 or 69.17 of the TAB 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 legal sale of mixed beverages in restaurants by food and beverage certificate holders (applicant must apply for FB with BG or BE) SIGN HERE COUNTY County Clerk SEAL

CERTIFICATE OF CITY SECRETARY FOR LATE HOURS LICENSE/PERMIT

CERTIFICATE OF COUNTY CL	Chapters 29 & 70		NSE/PERMIT (LB & BL)
I hereby certify on this day of The Commissioner's Court of the county h		. 20 , that	one of the below are correct: d beverages between midnight and
2:00 A.M.; or The Commissioner's Court of the county I			
A.M.; or	2		
 The population of the city or county where Census of the United States as released The population of the city or county where Census (2010). 	by the Bureau of the	Census on March 1	2, 2001; or
SIGN HERE			COUNTY
S E A L			
	AE BUBUA **	COLUNITO OF	DTIFICATE
COMPTROLLER	Section 11.46 (b) &		
This is to certify on this day of		20 the	applicant holds or has applied for
and satisfies all legal requirements for the issu or the applicant as of this date is not required t	ance of a Sales Tax P	ermit under the Lim	ited Sales, Excise and Use Tax Act
Sales Tax Permit Number	C	utlet Number	
Print Name of Comptroller Employee			
Print Title of Comptroller Employee			
SIGN			
HERE	F	IELD OFFICE	
SEAL			
PUBLISHER'S AFFIDA	VIT (FOR MB, Section 11.39 and		BG, BE, BL & V)
Name of newspaper			
City, County			
Dates notice published in daily/weekly			ATTACH PRINTED
newspaper (MM/DD/YYYY)			4
Publisher or designee certifies attached notice was pu	ublished in newspaper sta	ited on dates shown.	COPY OF THE
Signature of publisher or designee			NOTICE HERE
Sworn to and subscribed			Hover over to see example
before me on this date (MM/DD/YYYY)			
Signature of Notary Public			
SEAL		211 MM - 11 - 12 - 1	



OWNERSHIP INFORMATION Continued for Prequalification Packet

L-OIC (09/2019)

	OCATION	INFORMATIC	N				
Trade Name of Location							
HYATT Place Rockwall 2. Location Address							
2. Location Address	, 0						
1600 La Jolla Pointe Dri	VC		C			Ctata	Zin Codo
City			Cour				Zip Code 75087
Rockwall				KWHCC		1/	13001
And the property of the second	OWNER IN	NFORMATION	1				
3. Type of Owner Individual	Corporat	tion		7 City/Cour	tu/I Ini	versity	
Partnership	Limited I			City/County/Universi Other			
☐ Limited Partnership	☐ Joint Ve	oint Venture					
☐ Limited Liability Partnership Last Name	Trust	First Name			MI	Title	
		Keun			P	1000000	
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Last Name		First Name			IVII	Title	
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Last Name		First Name			IVII	Tiue	
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Last Name		First Name			MI	Title	
Last Name		First Name			MI	Title	

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

Receipt for Services

Cashier

LEDWARDS

Batch # 177967

Customer Name HYATT PLACE ROCKWALL 1600 LA JOLLA POINTE DRIVE Date: 03/09/2020 02:37:51PM Time:

ROCKWALL, TX 75087

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
CREDIT CARD	100201000932			5.00
			Payment Total:	\$5.00



All Transactions Approved

Bureau: 3766474 - Rockwall County Clerk

Cause, Docket Number or Description Amount Quantity Conv. Result

Fee

Payments made after 3:00 pm CNT will be processed \$5.00 \$1.00 Approved

the following business day (business days: Monday Through Friday): AU'JANAE L MCCOY-BEER WINE

PERMIT

Payment ID: 100201000932

Recording

Total Amounts + All Fees: \$6.00

BILLING INFORMATION

Response: Approved Auth Code: 028081

EMV Details:

AU'JANAE MCCOY Visa 434258*****3123

Card Entry Method: Chip Read

AID: A0000000980840 TVR: 8080048000 IAD: 06061203602000

TSI: 6800

ARC: 00

TC: 655438FE2C471FE2

Pin Verified

Processed at 03/09/2020 2:37:40 PM CDT

LEGAL NOTICE

Certified Payments provides a service for consumers and businesses to make payments via their credit card for various types of services and taxes. By utilizing Certifled Payments, you, the cardholder, are subject to the following terms and conditions. By submitting your payment through Certified Payments, you are agreeing to the terms and conditions listed in the Legal Notices link below. Please read all terms and conditions carefully.

Privacy Statement - www.certifiedpayments.net/PrivacyStatement.aspx Legal Notice - www.certifiedpayments.net/LegalNotices.aspx