

ON-PREMISE PREQUALIFICATION PACKET

L-ON (9/2019)

Submit this packet to the p which you are applying as a Contact your local TABC of post a sign at your propose All statutory and rule reference Code or Rules located on our	equired by Sections 11.37, ffice to verify requirements d location 60-days prior to ses mentioned in this applications website, www.tabc.texas.gov	11.39, 11.46(b) of Sections the issuance of the insurance), 61.37, 61.38, 61.42 11.391 and 61.381 a of your license/perm d can be found in the 1_rules.asp	and Rule s you ma nit.	§33.13 y be required to
Application for: [☐ Original ☐ Add Late I	Hours Only	License/Permit N	lumber _	
Reinstatement [Reinstatement and Chang	e of Trade Nam	ne License/Permit N	lumber –	
■ Change of Location [Change of Location and Tr	rade Name	License/Permit N	lumber _	
□ BP Brewpub License □ V Wine & Beer Retailer': □ MB Mixed Beverage Perm	or's Permit In-Premise License Imise Late Hours License Is Permit for Excursion Boats It It It It It It It It In It It In It I		B Mixed Beverage Late II Minibar Permit B Caterer's Permit B Food and Beverage C E Beverage Cartage Permit Mixed Beverage Rest: Local Cartage Permit	ertificate rmit aurant Permit	t with FB
Restaurant Grocery/Market	 Sporting Arena, Civic Cen Sexually Oriented 		☐ Bar ■ Miscellaneous Flo	rist	
 Trade Name of Location (N Lakeside Florist Location Address N. Goliad St. 	Name of restaurant, bar, store	e, etc.)			
City Rockwall		Cou Roc	nty kwall	State TX	Zip Code 75087
Mailing Address Soliad St.		City Roc	kwall	State TX	Zip Code 75087
7. Business Phone No. 972-771-4600	Alternate Phone No. 214-543-1908		mail Address esideflorist@yahoo.d	om	
8. Type of Owner Individual Partnership Limited Partnership Limited Liability Partner 9. Owner of Business/Applic	☐ Corporation ☐ Limited Liabi ☐ Joint Venture	lity Company [City/County/Univers	sity	
The primary contact person should and email are mandatory and muthis contact person. Delays in res	ist be active and updated regu	uestions TABC n	nay have about the app	l, it will be r	equested from
10. Contact Person: Tommie	Wells	Relation to Bus	siness:Owner		
Phone (mandatory): 214-54	43-1908	Email (mandat	ory):lakesideflor	ist@yal	noo.com
	TABCE	DATESTAMP			

12. As a Indicated on the chart, enter the Individuals that partain to your business type: For additional space, use Form L-OIC) Individual/Individual Owner Pathenshipi/All General Pathenship	11. Are you, the applicant a vete				☐ Yes ■ No	
Individual Individual Owner			☐ Yes ■ No			
Partnership/All Partners Limited Partnership/All General Partners Copporation/All Officers Cotype County, University/Official Last Name First Name First Name First Name First Name First Name Mi Title Owner Last Name First Name First Name Mi Title MEASURIMENT INFORMATION Section 199, 31 et is eq. 14. Will your business be located within 300 feet of a church or public hospital? 15. Will your business be located within 300 feet of a church or public hospital? 16. Will your business be located within 300 feet of any private/public school, day care or child care facility? 17. Will your business be located within 300 feet of any private/public school, day care or child care facility? 18. Will your business be located within 300 feet of any private/public school, day care or child care facility? 19. Will your business be located within 300 feet of any private/public school, day care or child care facility as long as the facility school, day care center or child care facility to the nearest property lime of the place of business, and in a direct line school, day care center or child care facility as long as the facility as long as the facility are located on different floors of the building. NOTE: For private/public school, day care center or child care facility as long as the facility are located on or above the fifth story of a multistory building: measure in a direct line from the property line of the private/public school to property line of your place of business in a direct line across intersections vertically up the building at the property line to the buse of the floor on which your business is located. 18. Will your business be located within 1,000 feet of a private school? 19. If YOUR LOCATION IS NOT WITHIN THE CITY LIMITS, CHECK HERE 19. If YOUR LOCATION IS NOT WITHIN THE CITY LIMITS, CHECK HERE 20. 10.2.1, a lied house is defined as any overteping ownership between those engaged in the alcoholic beverage routs at different level. All required forms have been completed. 1 have re	the included on the oner	, enter the individuals tha orm L-OIC)	t pertain to your business ty	ype:		
Partnership/All Partners Limited Partnership/All General Partners Corporation/All Offices Last Name First Name Mil Title Owner Last Name First Name First Name First Name Mil Title Mil Title MEASUREMENT INFORMATION Second 19,31 et seq. 14. Will your business be located within 300 feet of a church or public hospital? 15. Will your business be located within 300 feet of a church or public hospital? 16. Will your business be located within 300 feet of any p-tvate/public school, day care or child care facility? Yes No NOTE: For chrurtelpublic schools, day care centers and find care facilities neasure in a direct line from the nearest property lime of the place of business, and in a direct in across intersections. NOTE: For militistory building: businesses may be with in 300 feet of a day care center or child care facility a long as the facility are located on or above the fifth story of a multistory building: measure in a direct line from the property line of the private/public school to property line of your place of business in a direct line across intersections. NOTE: For multistory building: businesses may be with in 300 feet of a day care center or child care facility a long as the facility are located on or above the fifth story of a multistory building: measure in a direct line from the property line of the private/public school to property line of your place of business in a direct line across intersections vertically up the building at the property line to the buse of the floor on which your business is located. NOTE: If located on or above the fifth story of a multistory building: measure in a direct line from the property line of the private/public school? Yes No NOTE: For multistory building: businesses are a direct line across intersections vertically up the building at the property line of the property line of the private line across intersections vertically up the building at the property line o	Individual/Individual Owner		Limited Liability Company/All Off	icers or	Managers	
Corporation/All Officers First Name Mil Title Owner Last Name First Name First Name Mil Title **MEASURE**MENT INFORMATION Section 109.31 et asia. 14. Will your business be located within 300 feet of a church or public hospital? **MOTE:* For churches or public hospitals measure from front door along the property lines of the street fronts and in a direct line across intersections. 15. Will your business be located within 300 feet of any private/public school, day care or child care facility? 16. Will your business be located within 300 feet of any private/public school, day care or child care facility? 17. Will your business be located within 300 feet of any private/public school, day care or child care facility? 18. Will your business be located within 300 feet of any private/public school, day care or child care facility? 19. For private/public schools, day care centers and child care facilities measure in a direct line from the nearest property line the school, day care center or child care facility for the nearest property line of the place of business, and in a direct line across intersections. NOTE: For multistory building: businesses may be within 300 feet of a day care center or child care facility as long as the facility are located on different floors of the building. NOTE: If located on or above the fifth story of a multistory building: measure in a direct line from the property line of the private/public school to property line of your place of business in a direct line across intersections vertically up the building at the property line to the base of the floor on which your business is located. 18. Will your business be located within 1,000 feet of a public school? 19. DAY SIGN 19. If YOUR LOCATION IS NOT WITHIN THE CITY LIMITS, CHECK HERE 1. It applies the property line	Partnership/All Partners	CONTROL OF THE PROPERTY OF THE PERSON NAMED IN				
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Certification of publication in local newspaper has been completed (page 5).						
					Yes No No N/A	

WARNING AND SIGNATURE

IF APPI	JCAN"	IS SHO	YC
Proprietor	NAMES OF TAXABLE PARTY.		
Partnershi	Andrews with		
Corporation Limited Pa	CONTRACTOR STATE OF		
Limited Lie	ORNO MENSOR HUMAN	bership	
Limited Lie	ibility Con	npany	

WHO MUST SIGN:

Form L-ON (09/2019)

WARNING: Section 101.69 of the Texas Alcoholic Be rerage 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 LINDER PENALTY OF LAW HERERY SWEAP THAT I HAVE BEAD ALL THE BEOD

MY APPLICAT	ATION IS TRUE AND CORRECT. I ALSO UNDERST TON BEING DENIED AND/OR CRIMINAL CHARGES EGAL MEANS TO VERIFY THE INFORMATION PROV	FILED AGAINST ME. I ALSO AUTHORI	RESENTATION IN THIS APPLICATION CAN RESULT I ZE THE TEXAS ALCOHOLIC BEVERAGE COMMISSION
PRINT NAME	Tommie Wells	SIGN HERE	
		TITLE	
the foregoi	ng application personally appeared and and that all the facts therein set forth a	l, duly sworn by me, states und	_, the person whose name is signed to der oath that he or she has read the said
SEAL	NOTARY PUBLIC		
	CERTIFICATE OF C	Section 11.37	MB, RM & V)
license/per	oy certify on this day of mit is sought is inside the boundaries o by charter or ordinance in reference to t	f this city or town, in a "wet" a	
SIGN HERE			, TEXAS
SEAL	City Secretary/Clerk	City	
		CITY SECRETARY (FOI Section 11.37 & 61.37	R BG & BE)
license/per	by certify on this 20th day of mit is sought is inside the boundaries or by charter or ordinance in reference to the sought is the sought in the sought is inside the boundaries or ordinance in reference to the sought is sought in the sought in the sought is sought in the sought in	Gruly , 20 20 f this city or town, in a "wet" a	
legal s	for given location was held for: ale of all alcoholic beverages ale of all alcoholic beverages except mi	verl heverages	
legal s	ale of all alcoholic beverages including ale of beer/wine (17%) on-premise AFT ale of beer/wine (14%) on-premise BEFOR IF ABOVE DOES NOT APPLY:	mixed beverages FER Sept. 1, 1999	
Be advised and wine o	the location must have had two election pa ff-premise and one for mixed beverage. ale of beer and wine for off-premise cor ID EITHER:		on 69.17 of the TABC Code. One for beer
	ale of mixed beverages		
	ale of mixed beverages in restaurants b licant must apply for FB with BG or BE)		e holders
SIGN HERE	Knisty Cole	SEAL S City	ROCKUSUL, TEXAS
SEAL	(Only Secretary/Clerk	1 City	

CERTIFICATE OF C	(LB & Chapters 29 &	BL) 70 et seq.	
I hereby certify on this	day of	, 20, that o	one of the below is correct:
A.M.; or	has by ordinance authorized	the sale of mixed bevera	ages between midnight and 2:00
The governing body of this city A.M.; or	has by ordinance authorized	the sale of beer between	midnight and
	released by the Bureau of t	he Census on March 12. 2	according to the 22 nd Decennial 2001; or according to the last Federal
SIGN			
HERE			, TEXAS
City Secre	etary/Clerk	City	
SEAL			
	ATE OF COUNTY O		RIM & V)
I hereby certify on this license/permit is sought is in a "wet Commissioner's Court.	day of " area for such license/perm	, 20, that the nit, and is not prohibited by	location for which the any valid order of the
SIGN HERE			COUNTY
S E A L	ark		
在一个人的工程,不是一个人的工程,不是一个人的工程	CATE OF COUNTY Section 11.37	& 61.37	
I hereby certify on this 20TH	_ day of _ July	, 20 <u>20</u> , that the	location for which the
license/permit is sought is in a "wet" Court.	" area and is not prohibited I	by any valid order of the C	ommissioner's
Election for given location was	held for:		
legal sale of all alcoholic bevera			
legal sale of all alcoholic bevera	iges except mixed beverage:	s	
legal sale of all alcoholic bevera	ges including mixed beverag	ges	
legal sale of beer/wine (17%) or legal sale of beer/wine (14%) or	1-premise AFTER Sept. 1, 1	999	
OR IF ABOVE DOES NO	T APPLY:		
Be advised the location must have had to and one for mixed beverage. I legal sale of beer and wine for o			One for beer and wine off-premise
AND EITHER: legal sale of mixed beverages	2.500644021	•	
OR	INTY CO		
legal sale of mixed beverages in (applicant must apply for FB w	restaurants by food and be	verage certificate holders	
SIGN SIGN			wall county
HERE County Cle	10.	- Rock	walk county
SEAL	12	7	
	6 1/ 44.754		
	COUNTY COUNTY		

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	# 188777
Customer Name	LAKESIDE FLORIST 506 N GOLIAD STREET ROCKWALL, TX 75087	Date:	07/20/2020	Time:	11:42:59AM

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