



TEXAS ALCOHOLIC BEVERAGE COMMISSION

Texans Helping Businesses & Protecting Communities

ON-PREMISE PREQUALIFICATION PACKET

L-ON (9/2019)

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 |
| ☐ BP Brewpub License | ☐ FB Food and Beverage Certificate |
| ☐ V Wine & Beer Retailer's Permit for Excursion Boats | ☐ PE Beverage Cartage Permit |
| ☒ MB Mixed Beverage Permit | ☐ RM Mixed Beverage Restaurant Permit with FB |
| ☐ O Private Carrier's Permit -Brewpubs (BP) with a BG only | ☐ E Local Cartage Permit - Wine/Beer retailers (BG) Only |

3. Indicate Primary Business at this Location

- | | | |
|---|--|--|
| ☐ Restaurant | ☐ Sporting Arena, Civic Center, Hotel | ☐ Bar |
| ☐ Grocery/Market | ☐ Sexually Oriented | ☐ Miscellaneous _____ |

4. Trade Name of Location (Name of restaurant, bar, store, etc.)

SMOKE SESSIONS BARBECUE

5. Location Address

307 W Hwy 66

City	County	State	Zip Code
Royse City	Rockwall	TX	75189

6. Mailing Address	City	State	Zip Code
307 W Hwy 66	Royse City	TX	75189

7. Business Phone No.	Alternate Phone No.	E-mail Address
903-441-3816	214-240-7655	smokesessionsbarbecue@gmail.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.)

SMOKE SESSIONS UNIT 1, 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.

10. Contact Person: Chelsea Masters	Relation to Business: General Counsel
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Phone (mandatory): 214-739-2900 x107	Email (mandatory): chelsea@foodbevlaw.com
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TABC DATESTAMP

11. Are you, the applicant a veteran-owned business?		☐ Yes ☒ No	
12. Are you, the applicant a Historically Underutilized Business (HUB)?		☐ Yes ☒ No	
13. As indicated on the chart, enter the individuals that pertain to your business type: (For additional space, use Form L-OIC)			
Individual/Individual Owner		Limited Liability Company/All Officers or Managers	
Partnership/All Partners		Joint Venture/Venturers	
Limited Partnership/All General Partners		Trust/Trustee(s)	
Corporation/All Officers		City, County, University/Official	
Last Name SMOKE SESSIONS HOLDINGS, LLC	First Name	MI	Title Manager
Last Name SESSIONS	First Name CHAD	MI	Title PRESIDENT OF MANAGER
Last Name ALBERS	First Name STEPHEN	MI	Title VICE PRESIDENT OF MANAGER
MEASUREMENT INFORMATION Section 109.31 et seq.			
14. Will your business be located within 300 feet of a church or public hospital?		☐ Yes ☒ No	
NOTE: For churches or public hospitals measure from front door to 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?		☐ Yes ☒ No	
15.a If "YES," are the facilities located on different floors or stories of the building?		☐ Yes ☒ No	
NOTE: For private/public schools, day care centers and child care facilities measure in a direct line from the nearest property line of the school, day care center or child care facility to 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 facilities 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.			
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	
60-DAY SIGN			
18. If required under Section 11.391 and 61.381, enter the exact date the 60-Day sign was posted at your location.		Exact Date (MM/DD/YYYY) 07/03/2020	
ALL APPLICANTS			
19. IF YOUR LOCATION IS NOT WITHIN THE CITY LIMITS, CHECK HERE ☐ I, the applicant, have confirmed I am not located in the city limits of any city, therefore, city certifications are not required.			
COMPLETE THE FOLLOWING CHECKLIST BEFORE SUBMITTING YOUR APPLICATION			
Per Sec. 102.01 , a tied house is defined as any overlapping ownership between those engaged in the alcoholic beverage industry at different levels of the three-tier system. No person having an interest in a permit issued by TABC may secure or hold, directly or indirectly, an ownership interest in a business on a different level.			
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 3-5).		☐ 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 SHOWN AS:

Proprietorship
Partnership
Corporation
Limited Partnership
Limited Liability Partnership
Limited Liability Company

WHO MUST SIGN:

Individual Owner
Partner
Officer
General Partner
General Partner
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
NAME

CHAD SESSIONS

SIGN
HERE

TITLE

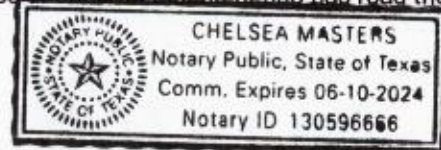
President of Smoke Sessions Holdings LLC
its Manager

Before me, the undersigned authority, on this 2nd day of July, 2020, 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

Chelsea Masters
NOTARY PUBLIC

SEAL



CERTIFICATE OF CITY SECRETARY (FOR MB, RM & V)

Section 11.37

I hereby certify on this 5 day of August, 2020, 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.



D. Sorenson
City Secretary/Clerk

Royse City, TEXAS
City

CERTIFICATE OF CITY SECRETARY (FOR BG & BE)

Section 11.37 & 61.37

I hereby certify on this _____ day of _____, 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 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

- ☐ legal sale of mixed beverages in restaurants by food and beverage certificate holders (applicant must apply for FB with BG or BE)

SIGN
HERE

City Secretary/Clerk

City

TEXAS

SEAL

**CERTIFICATE OF CITY SECRETARY FOR LATE HOURS LICENSE/PERMIT
(LB & BL)**

Chapters 29 & 70 et seq.

I hereby certify on this _____ day of _____, 20____, that one of the below is correct:

- ☐ The governing body of this city has by ordinance authorized the sale of **mixed beverages** between midnight and 2:00 A.M.; or
- ☐ 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 22nd 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 _____

City Secretary/Clerk

City

_____, TEXAS

SEAL

CERTIFICATE OF COUNTY CLERK (FOR MB, RM & V)

Section 11.37

I hereby certify on this 5TH day of AUGUST, 2020, 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.

**SIGN
HERE**

County Clerk

Rockwall

_____, COUNTY

SEAL

CERTIFICATE OF COUNTY CLERK (FOR BG & BE)

Section 11.37 & 61.37

I hereby 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 Clerk

_____, COUNTY

SEAL

CERTIFICATE OF COUNTY CLERK FOR LATE HOURS LICENSE/PERMIT (LB & BL)

Chapters 29 & 70 et seq

I hereby certify on this _____ day of _____, 20____, that one of the below are correct:

- ☐ The Commissioner's Court of the county has by order authorized the sale of **mixed beverages** between midnight and 2:00 A.M.; or
- ☐ The Commissioner's Court of the county has by order 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 22nd 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 _____

County Clerk

COUNTY _____

SEAL

COMPTROLLER OF PUBLIC ACCOUNTS CERTIFICATE

Section 11.46 (b) & 61.42 (b)

This is to certify on this 17th day of July, 2020, 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.

Sales Tax Permit Number 32070778405Outlet Number 00001Print Name of Comptroller Employee Maria MartinezPrint Title of Comptroller Employee EOT

SIGN

HERE _____

FIELD OFFICE 2453

SEAL

**PUBLISHER'S AFFIDAVIT (FOR MB, LB, RM, BP, BG, BE, BL & V)**

Section 11.39 and 61.38

Name of newspaper		ATTACH PRINTED COPY OF THE NOTICE HERE Hover over to see example
City, County		
Dates notice published in daily/weekly newspaper (MM/DD/YYYY)		
Publisher or designee certifies attached notice was published in newspaper stated on dates shown.		
Signature of publisher or designee		
Sworn to and subscribed before me on this date (MM/DD/YYYY)		
Signature of Notary Public		
SEAL		

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

Receipt for Services

Cashier	DSPANN	Batch #	190754
Customer Name	SMOKE SESSIONS UNIT 1 LLC	Date:	08/05/2020
	307 W HWY 66	Time:	11:36:14AM
	ROYSE CITY,		

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
CREDIT CARD	100206253263	TBAC SMOKE SESSIONS		5.00
		Payment Total:		\$5.00



All Transactions Approved

Bureau: 3766474 - Rockwall County Clerk

Cause, Docket Number or Description	Amount	Quantity	Conv. Fee	Result
Payments made after 3:00 pm CNT will be processed the following business day (business days: Monday Through Friday): TBAC SMOKE SESSIONS Payment ID: 100206253263 Recording	\$5.00	1	\$1.00	Approved
Total Amounts + All Fees:	\$6.00			

BILLING INFORMATION

Response: Approved
Auth Code: 06351G

EMV Details:

CHELSEA MASTERS

Visa 424631*****6224

Card Entry Method: Chip Read

AID: A0000000031010

TVR: 0880008000

IAD: 06010A03602000

TSI: F800

ARC: 00

TC: CFE28CCA6E7031CB

Processed at 08/05/2020 11:35:50 AM 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 Certified 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.

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