

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

Receipt for Services

Cashier	MPETROSKY	Batch # 295723
Customer Name	SIREN ROCK BREWING COMPANY LLC	Date: 08/05/2022 Time: 02:20:15PM

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**
Texas Helping Businesses & Protecting Communities

Document reference ID : 115074

Licensing Application Summary

You must review your application and confirm that the information displayed here is correct. Select **Review and Confirm** to continue and make the payment. If the information is not correct, select **Next** to return to the application, edit the data as needed and finalize the submission. If you need to store the application packet for your records, select **Download**.

Application ID:	115074
Applicant Name:	SIREN ROCK BREWING COMPANY LLC
License Type applied for:	Winery Permit (G)

Entity Information

Business Structure:	Limited liability company
FEIN/SSN Number:	824341773
Historically Underutilized Business:	No
Veteran-owned business:	No
Fraternal Owned:	No

Initial Application Information

Authority Type:	I am a principal or authorized user with binding authority
Prefix:	Mr
Legal First Name:	Cory
Legal Last Name:	Cannon
Email Address:	cory@sirenrock.com
Phone Number:	972-522-8843

Principal Parties

Principal Parent Entity	Principal Party	Role	%Ownership
SIREN ROCK BREWING COMPANY LLC	CORY CANNON	President, Manager, Member	50
SIREN ROCK BREWING COMPANY LLC	EVA CANNON	Manager, Vice President, Member	50

Basic Business information

Business/Trade Name:

Siren Rock Brewing Company

Location's Phone Numbers

Business Phone Number

972-885-3444

Alternate Phone Number

972-522-8843

Location Address

Address:

310 South Goliad St, Rockwall, TX, United States, Rockwall 75087

Is your location within city limits?

Yes

Mailing Address Information

Address:

310 South Goliad St, Rockwall, TX, United States, Rockwall 75087

Measurement Information

Measuring from the public entrance of your location along street lines and directly across intersections, will your location be within 1,000 feet of the nearest property line of a public or private school?

No

Is a residential address or established neighborhood association located within 300 feet of any property line of your premises?

No

Location Additional Information

Do you, the applicant, intend to engage in any activity authorized by the winery permit on the permitted premise of another winery? No

Property Ownership

Do you, the applicant, own the land, building, and/or warehouse at this proposed licensed location? Yes

Are you operating under? None

Warehouse Information

Address 1: 310 South Goliad St, Rockwall, TX, United States 75087



**TEXAS ALCOHOLIC
BEVERAGE COMMISSION**
Texas Helping Businesses & Protecting Communities

**CERTIFICATE OF CITY SECRETARY FOR: (BN, J/JD, S, FC, W, X, G, J, BB,
BC & BI)**

I hereby certify on this 2nd day of August, 2022, 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 excluding wineries, and not prohibited by charter or ordinance in reference to the sale of such alcoholic beverages.

SIGN HERE

Kristy Seague
City Secretary

Rockwall, TEXAS
City

SEAL





**TEXAS ALCOHOLIC
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Texas Helping Businesses & Protecting Communities

CERTIFICATE OF COUNTY CLERK FOR: (W, X, G, J, BB, BC & BI)

I hereby certify on this 5th day of August, 2022, that the location for which the license/permit is sought is in a "wet" area for such license/permit excluding wineries, and is not prohibited by any valid order of the Commissioner's Court.

SIGN HERE

[Signature]
County Clerk
[Signature]
County





**TEXAS ALCOHOLIC
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COMPTROLLER OF PUBLIC ACCOUNTS CERTIFICATES

I hereby certify on this _____ day of _____, _____, 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

Outlet Number

Print Name of Comptroller Employee

Print Title of Comptroller Employee

SIGN HERE

Comptroller Representative

_____, TEXAS
City

SEAL



**TEXAS ALCOHOLIC
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Texas Helping Businesses & Protecting Communities

PUBLISHER'S AFFIDAVIT

Name of newspaper	
City, County	
Dates notice published in daily/weekly newspaper (MM/DD/YYYY)	
<i>Publisher or designee certifies attached notice was published in newspaper stated on dates shown</i>	
Signature of publisher or designee	
Sworn to and subscribed before me on this date	
Signature of Notary Public	
S E A L	
ATTACH PRINTED COPY OF THE NOTICE	