

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

Receipt for Services

Cashier	CHARTLEY	Batch #	317038
Customer Name	TIGER MART 42	Date:	04/21/2023
	117 W IH 30	Time:	02:11:25PM
	ROYSE CITY, TX 75189		

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
CHECK	4264342362			5.00
			Payment Total:	\$5.00



TEXAS ALCOHOLIC BEVERAGE COMMISSION

Texas Helping Businesses & Protecting Communities

ON-PREMISE PREQUALIFICATION PACKET

L-ON (8/2019)

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	☒ Miscellaneous C-STORE W/ GAS
☐ Grocery/Market	☐ Sexually Oriented		
4. Trade Name of Location (Name of restaurant, bar, store, etc.)			
TIGER MART 42			
5. Location Address			
117 W. INTERSTATE 30			
City	County	State	Zip Code
ROYSE CITY	ROCKWALL	TX	75189
6. Mailing Address	City	State	Zip Code
149 BRENTWOOD DR.	HEATH	TX	75032
7. Business Phone No.	Alternate Phone No.	E-mail Address	
972-352-3161		RABIH@JADOSINC.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.)		
RNB BROS INC.		

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 permit/license.

10. Contact Person: REBECCA JOYCE TOMPKINS	Relation to Business: PERMITTING AGENT
Phone (mandatory): 469-517-2021	Email (mandatory): RTOMPKINS@LSBAC.COM

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. Does any alcoholic beverage manufacturer, wholesaler or employee have an ownership interest in your business? ☐ Yes ☒ No
- If "Yes," attach explanation

14. 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 SAFIEDDINE	First Name RABIH	MI H	Title PRESIDENT/SECRETARY
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title

MEASUREMENT INFORMATION

Section 109.31 et seq.

15. 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.
16. Will your business be located within 300 feet of any private/public school, day care or child care facility? ☐ Yes ☒ No
- 16.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.
17. Will your business be located within 1,000 feet of a private school? ☐ Yes ☒ No
18. Will your business be located within 1,000 feet of a public school? ☐ Yes ☒ No

60-DAY SIGN

19. As 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)
3/20/23

ALL APPLICANTS

20. 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

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 3-4).	☒ Yes ☐ No
All application packets have been notarized.	☒ Yes ☐ No
Certification of publication in local newspaper has been completed (page 4).	☒ Yes ☐ No
A copy of the newspaper publication is attached (page 4).	☒ Yes ☐ No
Phone numbers and email address for Contact Person are up to date.	☒ Yes ☐ No
If required, out of state criminal history checks are attached (PHS #7).	☐ Yes ☒ No
All additional documentation as required by the application packets is attached	☒ Yes ☐ No

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
Owner/Manager

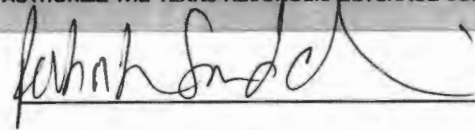
WARNING: Section 101.69 of the Texas Alcoholic Beverage Code states: "...a person who makes a false statement or false representation in an application for a permit or license or in a statement, report, or other instrument to be filed with the Commission and required to be sworn commits an offense punishable 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

RABIH SAFIEDDINE

SIGN
HERE

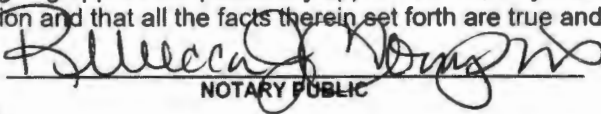


TITLE

PRESIDENT/SECRETARY

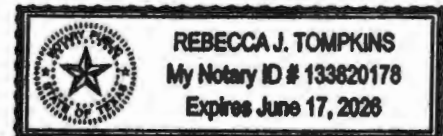
Before me, the undersigned authority, on this 17th day of March 2023, the person whose name is signed to the foregoing application personally appeared and, duly sworn by me, states under oath that he or she has read the said application and that all the facts therein set forth are true and correct.

SIGN
HERE



NOTARY PUBLIC

SEAL



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

Section 11.37

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.

SIGN
HERE

City Secretary/Clerk

City

TEXAS

SEAL

CERTIFICATE OF CITY SECRETARY (FOR BG & BE)

Section 11.37 & 61.37

I hereby certify on this 17 day of April, 2023, 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

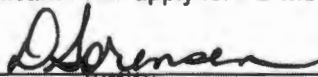
AND EITHER:

- ☐ 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

Royse City

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 _____ day of _____, 20____, 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

_____, COUNTY

SEAL

CERTIFICATE OF COUNTY CLERK (FOR BG & BE)

Section 11.37 & 61.37

I hereby certify on this 21 day of April, 2023, 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:

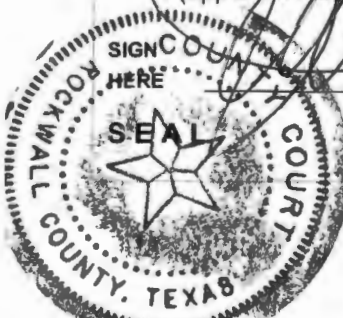
- ☐ legal sale of mixed beverages

OR

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

County Clerk

Rockwall COUNTY



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 11.48 (b) & 61.42 (b)

This is to certify on this 31st day of March, 2023, 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 32087865971 Outlet Number 00001Print Name of Comptroller Employee Jamie MoxleyPrint Title of Comptroller Employee Enforcement officer

SIGN

HERE _____

FIELD OFFICE

2453 Dallas SW**SEAL****PUBLISHER'S AFFIDAVIT (FOR LB, RM, BP, BG, BE, BL & V)**

Section 11.39 and 61.38

Name of newspaper _____

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

ATTACH PRINTED

COPY OF THE

NOTICE HERE

Hover over to see example