

Request to the City Council for ALCOHOL DISTANCE APPEAL APPLICATION

(Please Print or Type)

Name	of Establishment LITTLE GER	RMANY RESTAURAN	IT Location 6737 CAMP BOV	WE BLVD FORT WORTH TX 7611
Legal	Description RIDGLEA HII	LLS ADDITION	Block/Ap_6	Lourr A-A
Owner	r of Establishment MANUEL E	BENJAMIN GONZALE	Z Owner Signature	1. Huy
Owner	r Address 3720 MARK PLAC	E	City FORT WO	RTH Zip 76116
Owner	Phone No 817-730-3883	2nd Ph No 817-90	9-9676 Email melissa.sol	is1212@gmail.com
			RICHARD MILBURN ACAD	
Has ti	he School, Church, etc. been c	ontacted or do you kno	w of any opposition to this request	7 Yesk Non
Туре о	FAMILY STYLE RES GERMAN FOOD	TAURANT Setback Mea	surement / Distance Requested	/ 300 FT Js building leased? Ves NoD
			RTIES LP Lessor Signature \	
Lessor	Address 450 S ORANGE	IVE SUITE 900	City ORLANDO, F	Zip 32801
Lessor	Phone No. 407-650-3685	2nd Ph No	Email ingrid.irvi	n@nnnreit.com
	auf Name (if other than Owner)	· ·		
Applie	ant Address N/A	- Park de Marganine, se anno a construir de la	City N/A	Zip
Applie	CLOVING COLOR AND	2 rd Ph No.	Email N/A	en der kantal alle mente der kantal der kant
	ant Pane No. 1974			
	HOL DISTANCE APPEAL PRO			
ALCO	HOL DISTANCE APPEAL PRO	CESS & REQUIREMEN		FRIOR TO SUBMITTING.
ALCO	HOL DISTANCE APPEAL PRO Roilding Inspector, Ken McGow	OCESS & REQUIREMEN on (817-392-7834), Rejecti y 8 weeks, and the request	TS: ion Letter and Measurements required will be heard at the appropriate City	
ALCO	HOL DISTANCE APPEAL PRO Building inspector, Ken McGow Processing time is approximately at City Hall on Tuesdays, and th	OCESS & REQUIREMEN on (817-392-7834), Rejecti y 8 weeks, and the request e applicant is required to t	TS: ion Letter and Measurements required will be heard at the appropriate City	
ALCO	HOL DISTANCE APPEAL PRO Building inspector, Ken McGow Processing time is approximately at City Hall on Tuesdays, and the Summery of hardship and/or re	OCESS & REQUIREMEN on (817-392-7834), Rejecti y 8 weeks, and the request e applicant is required to b ason for requesting a DIST	TS: ion Letter and Measurements required will be heard at the appropriate City be present.	Council Hearing. Hearings are held
ADCO	HOL DISTANCE APPEAL PRO Building Inspector, Ken McGow Processing time is approximately at City Hall on Tuesdays, and the Summery of hardship and/or re Staff to provide Early Notification Staff will notify all property own	OCESS & REQUIREMEN on (817-392-7834), Rejecti y 8 weeks, and the request e applicant is required to 1 ason for requesting a DIS ons to surrounding HOA's ters, neighbors, within a 36	TS: ion Letter and Measurements required will be heard at the appropriate City be present. FANCE APPEAL is recommended. Schools, etc., within a ½ mile buffer	Council Hearing. Hearings are held of subject property.
AECO	HOL DISTANCE APPEAL PRO Building Inspector, Ken McGow Processing time is approximately at City Hall on Tuesdays, and the Summery of hardship and/or re Staff to provide Early Notification Staff will notify all property own (You may contact Council Memi- http://fortworthtexax.gov.)	OCESS & REQUIREMEN on (817-392-7834), Rejecti y 8 weeks, and the request e applicant is required to b ason for requesting a DIST ons to surrounding HOA's ters, neighbors, within a 36 bers prior to the bearing to	TS: ion Letter and Measurements required will be heard at the appropriate City be present. FANCE APPEAL is recommended. Schools, etc., within a ¼ mile buffer 100 buffer of subject property	Council Hearing. Hearings are held of subject property. opposition for your case at
AECO	HOL DISTANCE APPEAL PRO Building Inspector, Ken McGow Processing time is approximately at City Hall on Tuesdays, and th Summery of hardship and/or re Staff to provide Early Notification Staff will notify all property own (You may contact Council Memil http://fortworthtexas.gov.) "Speaker Request" form must be the meeting, visit http://www.fort Application Fee	OCESS & REQUIREMEN on (817-392-7834), Rejecti y 8 weeks, and the request e applicant is required to b ason for requesting a DIST ons to surrounding HOA's ters, neighbors, within a 36 bers prior to the bearing to	TIS: ion Letter and Measurements requires will be heard at the appropriate City be present. FANCE APPEAL is recommended. Schools, etc., within a ¼ mile buffer buffer of subject property. o see if they approve or have received	Council Hearing. Hearings are held of subject property. opposition for your case at

City of Fort Worth, Texas, Monicipal Building, 200 Texas Street, Fort Worth, TX, 76102 Planning & Development Department 817-392-2733 * 817-392-8190 * 817-392-8026 12-11-17

(817) 731-7627

8/19/19

To Whom It May Concern:

Richard Milburn Academy does not believe the business, Little Germany, at the old Dennys location, will have a negative effect to this campus by selling alcohol on their premises. We look forward to having another good restaurant on Camp Bowie Boulevard.

Regards,

Susan Richey M.Ed., LPC Principal

Richard Milburn Academy – Fort Worth 6785 Camp Bowie Blvd. Suite 200 Fort Worth, TX 76116 P: 817-731-7627



CITY OF FORT WORTH, TEXAS ALCOHOL PERMIT LOCATION VERIFICATION

INSTRUCTIONS: Applicant is to complete all requested information down to the double line and also attach a copy of the completed T.A.B.C. application form.
Name of Applicant: JAUNE VIEWA Phone: 817-208- 9147
Name of Business: LITTLE (NEXTMAN) RESTANDANT, Phone: 817-205-9147
Application Address: 6737 CAMP BOME BLO FONTWOTHED ZIP: 76/16
Legal Description of Property: Lot: All Block: Le Addition: Liggleatills Add
Is there or has been a T.A.B.C. license on the property before? Yes No
In addition to the sale of alcoholic beverages, please provide an accurate statement of all other business or entertainment activities to be conducted at the application address: [Antly Style 728] [Ant
NOTICE: Approval of the processing form does not imply that the location/building is in compliance with all applicable ordinances. This form is only for distance check and zoning use. Consult with the Department of Development, lower level of City Hall, regarding all other requirements before investing any time or money.
Date Received: 7/29/19 Mapso No.: 7/11 Council District: 2 Zoning on the property: CBC6 State Institute Council District Past aux aut Walco Aloue
Is the location within 300' of a Church? Yes No Public school? Public hospital? Private school? Yes No Within 300' of a If Yes, give address and date the use was established If Yes, give address and date the use was established If Yes, give address and date the use was established If Yes, give address and date the use was established If Yes, give address and date the use was established If Yes, give address and date the use was established If Yes, give address and date the use was established If Yes, give address and date the use was established If Yes, give address and date the use was established If Yes, give address and date the use was established
Is the location within 1000' feet of a private school protected by resolution? Yes No \(\simeg\)
BUILDING INSPECTORS CERTIFICATION
hereby certify that I have personally inspected the property described above and my comments are: 1. The use as described by the applicant Is allowed in this zoning? Yes (by right), by legal nonconforming No
 The locatio is within 300' of a church, public school or public hospital? This location is within 1,000' of a private school protected by resolution? Yes ✓ No ✓
 3. This location is within 1,000' of a private school protected by resolution? 4a. If the zoning allows this use and the distance check complies, check the Yes box to the right and continue processing.
 b. If zoning does not allow this use, check the No box, clear the paperwork and stop he processing.
c. If the zoning allows this use but the distance does not comply, check the No box, clear the paperwork, and forward to the Director for review. OK to issue Yes D No M
Verified by: Production February Perified by: Production Date: 8-5-19
Virector's Comments:OK to issue: Yes D No D
irector's Signature: Date: (This approval not needed if the above box is marked YES)
A.B.C. application processed by:

AD14-00155

Rev 8/02

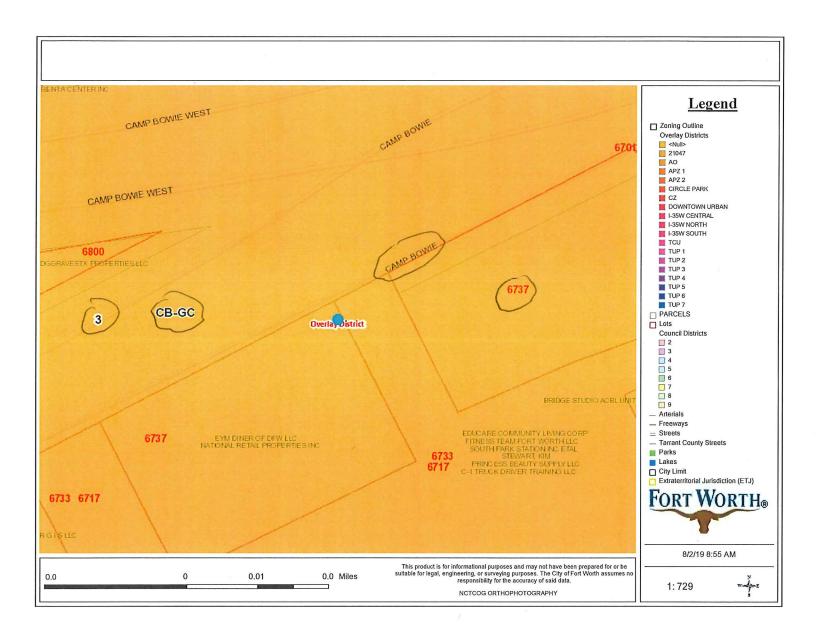
Restaurant Pennys perturent Comp Bowire Blud Comp Bowie W Blud 252 Prichord milburn be booked



Alcohol Distance Check Not a valid permit until status is ISSUED

Permit: AD19-00155		Application Date:	
Status: Pending		Daté Issued:	
Permit Technician:		,	
Address: 6737 CAMP BOWIE BLV			
Legal Description: RIDGLEA HILLS	ADDITION Block 6 LotAA	Λ.	
Mapsco: 74N	Insp District: 21	Council District: 3	Zoning: CB-GC
Description of Work: ADC			
Proj/Business Name: LITTLE GERM	MANY RESTAURANT		
Applicant: JAIME VIELMA,			
Property Owner: EYM DINER OF D	FW LLC 450 E JOHN CA	RPENTER FWY STE 1 1	RVING,, TX 75062
Alcohol Distance Check		1 \$50.00	
	Total Fee	\$50.00	
	Balance	\$0.00	÷
Non Conforming Use:		Approved By:	
I hereby affirm that the information co conform to all regulations of the City of failure to comply with these provisions	of Fort Worth as described	in the Fort Worth Municip	knowledge, and agree to oal Code. I understand that
Signed:		Date:	
Sexually Oriented Business (Initials)	Yes No		
Local permit or license fees may apply check with the Revenue and Collection	y to a business that sells a ns Division of Financial M	lcoholic beverages in the anagement Services to in	City of Fort Worth. Please quire about applicable fees.
Signed:		Date:	

TO SCHEDULE INSPECTIONS CALL (817) 392-6370





L-ON (12/2017)

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

All statutory and rule references mentioned in this application refer to and can be found in the Texas Alcoholic Beverage								
Co	Code or Rules located on our website: www.tabc.texas.gov/laws/code_and_rules.asp LOCATION INFORMATION							
1.	Applica	ation for: ☐ Original	☐ Add Late Ho			License/Permit Number	er	
		☐ Reinstate				se/Permit Number		, and the second desired the second desired the second desired to
			of Licensed Location			nse/Permit Number		
2	Type c	of On-Premise License/			LICCI	136/1 GITTIL TAUTIDGE		
۲.		Wine and Beer Retailer's		П	IR A	Mixed Beverage Late Hours P	Permit	
	☐ BE	Beer Retail Dealer's On-P		_		Minibar Permit	Citie	
	☐ BL	Retail Dealer's On-Premis		_		Caterer's Permit		
	□ BP	Brewpub License				Food and Beverage Certificate	9	
	_ v	Wine & Beer Retailer's Pe	ermit for Excursion Boats			Beverage Cartage Permit		
	□ Y	Wine & Beer Retailer's Pe	ermit for Railway Dining Car		RM N	/lixed Beverage Restaurant P	ermit with	n FB
	□ мв	Mixed Beverage Permit						
	□ o	Private Carrier's Permit –	For Brewpubs (BP) with a	BG o	nly			
3.	Indicat	e Primary Business at	this Location	·				
		staurant	Sporting Arena, Civic (Cente	r Ho	tel □Bar		
		ocery/Market	Sexually Oriented	50,,,0	.,	☐ Miscellaneous		
4.		Name of Location						
		GERMANY RESTA	URANT					
5.	Location	on Address						
		AMP BOWIE BLVD	-					,
	City	WORTH			Cou	inty RRANT	State TX	Zip Code 76116
		WORTH Address			City		State	Zip Code
1	_	CAMP BOWIE BLVD		. }	-	RT WORTH	TX	76116
7.	Busine	ss Phone No.	Alternate Phone No.			E-mail Address		
	682-2	24-2601	817-909-9676			melissa.solis1212@gr	nail.co	m .
			* * TOWNER IN	$\langle 0 \rangle_{\tilde{t}}$	MA.			
8.		f Owner lividual	Corneration			City/County/University		
		rtnership	☐ Corporation☐ Limited Liability Com	pany	日	City/County/University Other	·	
		nited Partnership nited Liability Partnership	☐ Joint Venture☐ Trust			".		
9.		ess Owner/Applicant						
	MAN	UEL BENJAMIN GO	NZALEZ / LITTLE GE	ERM	<u>AN</u> Y	RESTAURANT		
10.	Are yo	ou, the applicant a vete	eran-owned business?	O.	Yes	● No		
11.	Are yo	ou, the applicant a Histo	orically Underutilized B	usine	ess (HUB)? Yes No		· · · · · · · · · · · · · · · · · · ·

	e individuals that pertain to your bu	siness	týpe:		
Individual/Individual Owner	Limited Liability Company/Al	l Officer	s or Managers		
Partnership/All Partners	Joint Venture/Venturers				
Limited Partnership/All General Partners					
Corporation/All Officers	City, County, University/Offic	A 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
Last Name GONZALEZ	First Name MANUEL	B B	Title OWNER		
Last Name	First Name	MI	Title		
Last Name	First Name	MI	Title		
MEAS	UREMENT INFORMATION Section 109/31 et Section				
13. Will your business be located within 30	00 feet of a church or public hospital?	Yes	●No		
NOTE: For churches or public hospitals measurand in a direct line across intersections.	ure from front door to front door, along the p	oroperty	lines of the street fronts		
Will your business be located within 30 14. facility? Yes No	00 feet of any private/public school, day	care co	enter or child care		
If "YES," are the facilities located on different floors or stories of the building? Yes No					
	centers and child care facilities measure e center or child care facility to the near ntersections	DECEMBER OF THE PARTY OF			
NOTE: For multistory building, businesses n the facilities are located on different fi	nay be within 300 feet of a day care cente cors of the building.	r or chil	ld care facility as long as		
private/public school to property line	of a multistory building: measure in a direct of your place of business in a direct line base of the floor on which your business is	across i	ntersections vertically up		
15. Will your business be located within 1,0	000 feet of a private school? Yes)No			
16. Will your business be located within 1,0	000 feet of a public school? OYes) No			
17. As required under Section 11.391 and Day sign was posted at your location.	61.381, enter the exact date the 60-	Exac	t Date (MM/DD/YYYY)		
The Control of the Co	ALL APPLICANTS.	51/11/2			
 IF YOUR LOCATION IS NOT WITHIN the applicant, have confirmed I am not certificates are not required. 		nd there	efore all city		

SIGNATURE Comparation Comparat	
Umjted Liability Partnership General Partnership Umited Liability Company Officer/Managers	11-71-2
WARNING: Section 101.69 of the Texas Alcoholic Beverage Code states: ", a person who makes a false statement of representation in an application for a permit or license or in a statement, report, or other instrument to be filed with the Commiss required to be sworn commits an offense punishable by imprisonment in the Texas Department of Criminal Justice for not less nor more than 10 years."	on and
I, UNDER PENALTY OF LAW, HEREBY SWEAR THAT I HAVE READ ALL THE INFORMATION PROVIDED IN THE APPLICATION AND ANY ATTACHMEN THE INFORMATION IS TRUE AND CORRECT. I ALSO UNDERSTAND ANY FALSE STATEMENT OR REPRESENTATION IN THIS APPLICATION CAN REMY APPLICATION BEING DENIED AND/OR CRIMINAL CHARGES FILED AGAINST ME. I ALSO AUTHORIZE THE TEXAS ALCOHOLIC BEVERAGE COMITO USE ALL LEGAL MEANS TO VERIFY THE INFORMATION PROVIDED.	SULT IN
PRINT NAME MANUEL BENJAMIN GONZALEZ SIGN HERE	
TITLE OWNER	
Before me, the undersigned authority, on this 25 day of 10, the person whose name is signed the foregoing application personally appeared and, duly sworn by me, states under oath that he or she has read the application and that all the facts therein set forth are true and correct.	to said
HERE NOTARY PUBLIC SEAL JAIME VIELMA Notary Public, State of Texas Notary ID # 13051648-6 My Commission Expires January 29, 2020	
GERMACATIE OF CHIY SECRETARY (FOR ME IRM. V.E.Y)	
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 , TE	(AS
City Secretary/Clerk City SEAL	
CERTIFICATE OF CITY SECRETARY (FOR BG & BE) Section (1:37 & 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 <i>AFTER</i> Sept. 1, 1999 ☐ legal sale of beer/wine (14%) on-premise <i>BEFORE</i> Sept. 1, 1999 ☐ OR IF ABOVE DOES NOT APPLY:	0.00
Be advised the location must have had two election passages per Section 25.14 or Section 69.17 of the TABC Code. One for be and wine off-premise and one for mixed beverage. I legal sale of beer and wine for off-premise consumption only	er
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)	3.2
SIGN	
HERE, TEX City Secretary/Clerk City SEAL	AS

	Chapter	E'(8,15) 1) 229 <i>(8,17</i> ,016) spe@	olursyelgense/Ae	RMIT
☐ The governing body (A.M.; or	is day of of this city has by ordinance auth	norized the sale of mixe	•	
A.M. The population of the Census of the United	of this city has by ordinance auth A.; or city or county where premises a I States as released by the Bure- city or county where premises a	are located was 500,000 au of the Census on Ma	or more according to the 22 rch 12, 2001; or	
SIGN HERE	City Secretary/Clerk	City		, TEXAS
SEAL		·		
I hereby certify on the license/permit is sought in		dion 11:37 , 20,	that the location for which t	he the
Commissioner's Court.				
SEAL	County Clerk		,	COUNTY
		nakazakatikaz		
Court.	s in a "wet" area and is not proh	, 20, ibited by any valid order	that the location for which to of the Commissioner's	ne
☐ legal sale of beer/wir☐ legal sale of beer/wir☐ OR IF ABOVE	ne (17%) on-premise AFTER Sep ne (14%) on-premise BEFORE S DOES NOT APPLY :	ot. 1, 1999 ept. 1, 1999		
and one for mixed beve	at have had two election passages perage. If wine for off-premise consumpti		AB Code. One for beer and wir	ie oπ-premise
	everages in restaurants by food	and beverage certificate	holders	
SIGN	oly for FB with BG or BE)			
SEAL	County Clerk		,	COUNTY

HENGERMIFICATE OF COUNTY CLERK FOR FATE FOURS EGE Chapter 29.6.70 dises	
I hereby certify on this day of, 20, that of The Commissioner's Court of the county has by order authorized the sale of <i>mixed</i> 2:00 A.M.; or	ne of the below are correct: beverages between midnight and
The Commissioner's Court of the county has by order authorized the sale of beer b A.M.; or	etween midnight and
The population of the city or county where premises are located was 500,000 or mo Census of the United States as released by the Bureau of the Census on March 12 The population of the city or county where premises are located was 800,000 or mo Census (2010).	, 2001; or
SIGN	
HERE County Clerk	COUNTY
SEAL	
MANUAL COMENSIONE SERVICE CONTRACTOR CONTRAC	
Spelion 14 46 (b) 8 66 42 (b)	
This is to certify on this day of, 20, the a and satisfies all legal requirements for the issuance of a Sales Tax Permit under the Limit or the applicant as of this date is not required to hold a Sales Tax Permit.	oplicant holds or has applied for ed Sales, Excise and Use Tax Act
Sales Tax Permit Number Outlet Number	· ·
Print Name of Comptroller Employee	
Print Title of Comptroller Employee	
SIGN HERE FIELD OFFICE	
SEAL	
PUDESHERS/ASEDAVI (EORINGEES RM. BILLE)	FRIE BEVONER DE
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.	ATTACH PRINTED
Publisher of designee certifies attached house was published in newspaper stated on dates shown.	COPY OF THE
Signature of publisher or designee	NOTICE LIEDE
Sworn to and subscribed before me on this date (MM/DD/YYYY)	NOTICE HERE
Signature of Notary Public	
SEAL	



LOCATION PACKET FOR RETAILERS

L-L (03/2018)

This Location packet (L-L) should be completed by all retail change of location application. This packet (L-L) along with submitted to your local TABC office. All statutory and rule references mentioned in this application. Code or Rules located on our website. www.tabc.texas.gov/laws	n the Prequalification Packet (L-ON) or (L-OFF) must be refer to and can be found in the Texas Alcoholic Beverage
1. Application for: Original	
Reinstatement	License/Permit Number
Change of Licensed Location	License/Permit Number BG776538
2. Trade Name of Location LITTLE GERMANY RESTAURANT	
3. Location Address	440
6737 CAMPBOWIE BLVD FORT WORTH TX 76	116
4. Business Entity Name/Applicant LITTLE GERMANY RESTAURANT / MANUEL BE	EN IAMIN GONZALEZ
5. Federal Employer Identification Number (FEIN)	
27-4174678	
INITIALINES	
6. Do you currently hold an active license/permit issued use if "YES," provide your most recently issued license/permit issued license/permit issued license/permit issued use if "NO," you must complete the Business Packet (License).	permit number. BG776538
7. If you hold a current and active license/permit under the ownership or business structure since the submission If "YES," you must complete the Business Packet for the submission of the s	of your last application? OYes ONo
A. B.	
8. Does the applicant own the land and building at this pr If "NO," please complete Owner of Property (L-OP NOTE: Be prepared to provide additional information	⁹).
9. If operating under a lease at this location, indicate:	(castras a cop) of your loads) in equations
Expiration date(s)/Options 07/16/2024	
Monthly rental amount \$6500	
Other fees and payments to landlord 0	
10. Are you operating under any concession, service or management beyond property rental? OY If "YES," complete Sublessor (L-SL), indicate the form	∕es ⊙ No
Expiration date(s)/Options	
Monthly fee \$ If you have a sublessor that differs from the mananand complete Form L-SL.	agement company enter sublessor name below
Sublessor Name	
11. Do you or anyone else at the location operate under a If "YES," as required under Section 109.53 do you manage purchase, sale, service and brands of alcoholic bevera	aintain exclusive control of ALL phases of the

12. Do you share the premises with another business entity? OYes ONo If "YES," indicate the tradename(s) of business(es) and sales and use tax number(s) for other business(es): Trade Name Sales & Use Tax Number				
13. Are there any agreements, excluding questions 9, 10 & 11, which involve alcohol in any way? Yes No If "YES," attach a copy of agreement.				
	ERECTOR ELEVATION ELEVATION	STANTED THE TOTAL STANTAGE	A Medical Control of East of the Control of the Con	
14. Provide first 12 mor	nths of projected sales data.			
Sales Year	(YYYY) <u>20¹⁹ </u>			
Alcoholic Beverage	e Sales \$25,000			
Foo	d Sales \$125,000			
Othe	r Sales \$	- Linguistic		
Tota	al Sales <u></u> \$150,000			
15. Is the proposed loca	tion in a hotel or motel? Yes) No		
If "NO," attach a	nit embrace the entire location add liagram of your premise as require approval of your application.		sed the location will be	
	FINANCEINE	DEMATION:		
	nt of investment from all sources fo to provide copies of all documents		s location.	
or encumbrances ag guaranteed or finance	, or corporation that has advanced ainst the assets of the proposed be cially assisted this business location ration, list entity along with partner	usiness location, or that has s n for which you are seeking a	signed or co-signed,	
SSN or FEIN	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Amount	
			\$	
Name, Corporation, Pa	rtner/Officer	Terms		
SSN or FEIN	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Amount	
	-	·	\$	
Name, Corporation, Pa	rtner/Officer	Terms		
SSN or FEIN	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Amount \$	
Name, Corporation, Pa	rtner/Officer	Terms	:	

(If more space is needed, attach additional page.)

MEASUREMENT INFORMATION
19. Making measurements from the door where the public enters your establishment to the nearest property line of a private/public school, will this location be within 1,000 feet of a private/public school? Yes No
If "YES," written notice of this application must be given to the school officials and a copy of the notice must be provided with this application as required by Section 109.33(c).
20. Is any property line of your premises within 300 feet of a residential address or established neighborhood association? Yes No
If "YES," and if you are applying for an On-Premise License/Permit, and if a Food and Beverage Certificate is not applied for, notify each residential address and established neighborhood association. Submit a copy of the completed notice along with a list of all addresses notified; as required by Section
11.393 and 61.38 NOTE: A Sample of the notice can be found in Exhibit III of the Application Guide for Retailers.
ON-PREMISE LIGENSES AND BERMITS ONLY MEASUREMENT INFORMATION FOR APPLICANTS IN MUNICIPALITIES WITH A POPULATION OF 1.5. MILLION OR MORE ACCORDING TO THE LAST FEDERAL CENSUS
21. Will your business be located within 300 feet of residence, church, school, day care or social service facility when measuring in a straight line from the nearest point of the property line of the proposed location to the nearest point of the property line of any of these facilities? O Yes O No If "YES," will 75% or more of the applicant's actual or anticipated gross revenue from the sale of alcoholic
beverages? O Yes O No If "YES," to both of the questions; you must notify all tenants or property owners of your intent to apply for an alcohol beverage license/permit within five days of the filing of an original application. Has such notice been given as required by Section 11.52? O Yes O No
Prince and the second of the s
22. Do you, the applicant, intend to sell your alcoholic product directly to other retailers? OYes O No
23. Do you, the applicant, intend to sell your alcoholic product to wholesalers/distributors? OYes ONo
24. Will you, the applicant, be engaged in the business of brewing and packaging malt liquor, ale or beer in quantities sufficient to operate a brewpub not later than 6 months after the date of issuance of the original license? O Yes O No
WARNING: AND Individual Swater 19 12 12 12 12 12 12 12 12 12 12 12 12 12
EACH LICENSEE OR PERMITTEE SHALL HAVE EXCLUSIVE OCCUPANCY AND CONTROL OF THE ENTIRE LICENSED LOCATION WITH. RESPECT TO THE SALE OF ALCOHOLIC BEVERAGES. ANY ARRANGEMENT THAT SURRENDERS SUCH CONTROL OF THE EMPLOYEES, PREMISES OR BUSINESS, INCLUDING PROFITS AND LOSSES, TO PERSONS OTHER THAN THE LICENSEE OR PERMITTEE IS UNLAWFUL.
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 swom commits an offense punishable by imprisonment in the Texas Department of Criminal Justice for not less than 2 nor more than 10 years." BY SIGNING YOU ARE SWEARING TO ALL INFORMATION AND ATTACHMENTS PROVIDED ARE CORRECT.
PRINT MANUEL BENJAMIN GONZALEZ SIGN HERE
Before me, the undersigned authority, on this
SIGN HERE NOTARY PUBLIC S E A L JAIME VIELMA Notary Public, State of Texas Notary ID # 13051648-6 My Commission Expires



OWNERSHIP INFORMATIONContinued for Prequalification Packet

L-OIC (01/2018) >

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Trade Name of Location LITTLE GERMANY			
2. Location Address 6737 CAMPBOWIE BLVD			
City FORT WORTH	County TARRANT		State Zip Code TX 76116
	WNERNEGENERION - I		
3. Type of Owner			
■ Individual			University
☐ Limited Partnership ☐ J	mited Liability Company	<u> </u>	
	rust First Name	MI	Title
Last Name GONZALEZ	MANUEL	B	OWNER
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	МІ	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title
Last Name	First Name	MI	Title



OWNER OF PROPERTY

L-OP (05/2018)

		(03/2016)
1. Trade Name of Location		
LITTLE GERMANY R	ESTAURANT	
2. Indicate if owner of property is:		
Owner of Land and Building	Owner of Land Owner of Bu	uilding Owner of Boat
Note: If land and building are	owned by different entities, comp	ete Form L-OP for each entity.
3. Wholesaler's (W, X) and Manufacturer's (G, Z, B, D) – Is the owner of premise information used for a storage permit (L, K) or Manufacturer's Warehouse License (MW)? Yes No		
4. Owner of Property (Individual or	Business Entity)	
NATIONAL RETAIL F	PROPERTIES, LP	
5. Federal Employer Identification Number (FEIN) for Owner of Property		
59-365-1850		·
	Komure de la componi	NG:
SSN	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)
Full Legal Name of Individual, Partner, Officer (Last, First, Middle)		Title/Owner

SSN	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)
Full Legal Name of Individual, Partner, Officer (Last, First, Middle)		Title/Owner
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