

# CITY OF KNOXVILLE BEER PERMIT

APPLICATION CHECKLIST | DISTRICT: 6

Business Name: Da Vinci's Account Number: 57475  
 Business Address: 113 S Central St 37902  
 Agenda Date: 4, 29, 25 CLT Number: 094EG015

TASK	COMMENTS
New Application:	<u>Received 4-1-25</u>
Permit Fee Paid	<input checked="" type="checkbox"/> (New Application \$250.00)
Publication Fee Paid:	<input checked="" type="checkbox"/> (\$50.00)
Records Check Completed	
Current City Business License:	Expiration Date: <u>5 / 15 / 25</u>
Copy of Certificate of Registration for Tennessee Sales Tax	
Copy of Corporate Charter; LLC; ETC.	
Notice of Application to Knox County Health Dept. (215-5200)	Sent: <u>   </u> / <u>   </u> / <u>   </u> Received: <u>4 / 23 / 25</u> Approved: <input checked="" type="checkbox"/> Pending:
Notice of Application to Building Inspections (215-3669)	Sent: <u>   </u> / <u>   </u> / <u>   </u> Received: <u>4 / 17 / 25</u> Approved: <input checked="" type="checkbox"/> Pending:
Notice of Application to Fire Prevention Bureau (633-0400)	Sent: <u>   </u> / <u>   </u> / <u>   </u> Received: <u>4 / 17 / 25</u> Approved: <input checked="" type="checkbox"/> Pending:
Request distances measured by Engineering Dept. (215-6132)	Sent: <u>4 / 3 / 25</u> Received: <u>4 / 11 / 25</u> Approved: <input checked="" type="checkbox"/> Pending Location needs add'l research?
Plan for Server Compliance	<input checked="" type="checkbox"/>
KAST Program completed	<input checked="" type="checkbox"/>
Previous Business at this location:	<u>Da Vinci's (#57475)</u>

**CITY OF KNOXVILLE**  
**APPLICATION FOR BEER PERMIT**

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**It is the applicant's responsibility to provide complete and accurate information. The Beer Board could deny or delay action on the application if any information is not accurate.**

I/we hereby make application for a permit to sell, store, or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Knoxville alcoholic beverages ordinance Chapter 4 and base my application upon the answers to the following questions:

Reason for Application:  New Business  New Ownership  Name Change  Other \_\_\_\_\_

Name of Business Owner(s): Hantals Corp

Is Owner a:  Corporation  General Partnership  Limited Partnership  LLC  Sole Proprietorship  
 Other \_\_\_\_\_

Under what name will the business operate: DaVinci's

Business Address: 113 S Central St Knoxville Zip 37902 Phone (865) 637-5040

Property Owner's Name: Hanna Takano Family Revocable Living Trust Phone 865-643-0787

Type of business you will operate: Restaurant

List names of **all** general partners and owners and **designate PERCENTAGE of ownership**. (Use additional paper if necessary) Each person owning 5% or more of the business must complete an owner/manager application (attached) and submit to a city of Knoxville Police Department background check. If ownership is a corporation, please indicate whether the corporation is privately held or publicly traded. If privately held, each person owning 5% or more of the corporation must complete an owner/manager application and submit to a city of Knoxville Police Department background check.

Mimako Takano 100% owner  
Corporation is privately held

List the name(s) of managers or others on-site responsible for operations. Any change in management **must** be reported to the Business Tax Office. A new manager is subject to a background check and applicable fees. Each individual listed must complete an owner/manager application and submit to a City of Knoxville Police Department background check.

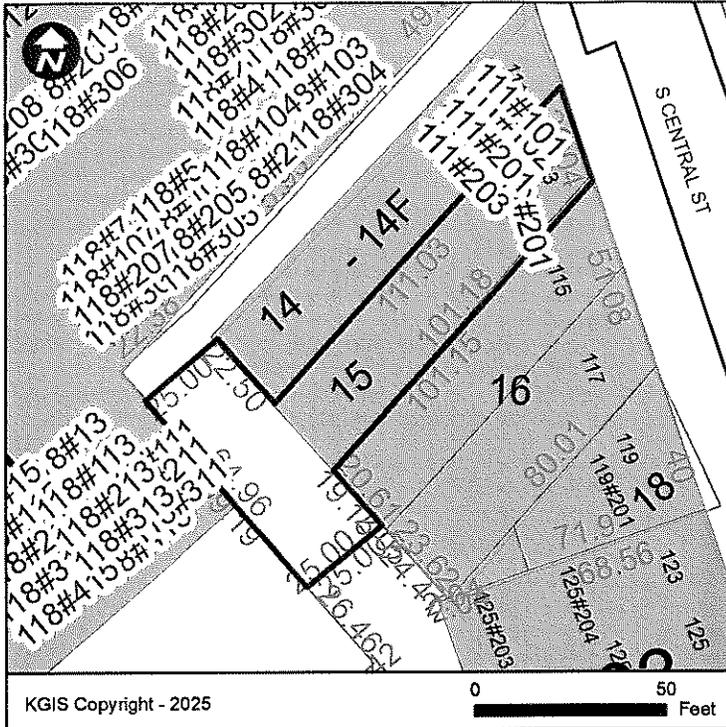
James Proffitt - manager

List machines currently in use or planned for use on premises and **owner** of machines (cigarette, pinball, jukebox, etc.)  
None

1. Type of permit requested:

Off Premise  On/Off Premise  Caterer  Manufacturer/Distributor  Self-Serve

**113 S CENTRAL ST APT 201 - Property Map and Details Report**



**Property Information**

Parcel ID: 094EG015  
 Location Address: 113 S CENTRAL ST  
 CLT Map: 94  
 Insert: E  
 Group: G  
 Condo Letter:  
 Parcel: 15  
 Parcel Type: NORMAL  
 District:  
 Ward: 6  
 City Block: 08202  
 Subdivision: BURR & TERRYS  
 RESUB OF 19 & 21  
 Rec. Acreage: 0  
 Calc. Acreage: 0  
 Recorded Plat: 20091119 - 0035149  
 Recorded Deed: -  
 Deed Type:  
 Deed Date:

**Address Information**

Site Address: 113 S CENTRAL ST #201  
 KNOXVILLE - 37902  
 Address Type: DWELLING, APT UNIT  
 Site Name:  
 Please contact Knoxville-Knox County Planning at (865) 215-2500 if you have questions.

**Owner Information**

HANNA TAKENO FAMILY REVOCABLE LIVING TRUST  
 7417 AMBERWOOD DR  
 KNOXVILLE, TN 37919  
 The owner information shown in this section does **not** necessarily reflect the person(s) responsible for Last Year's property taxes. Report any errors to the Knox County Property Assessor's office at (865) 215-2365.

**Jurisdiction Information**

County: KNOX COUNTY  
 City / Township: Knoxville  
 Fire Response: KNOXVILLE FIRE DEPARTMENT  
 Please contact the Knox County Fire Prevention Bureau at (865) 215-4660 if you have questions.

**Other Information**

Census Tract: 1  
 Planning Sector: Central City  
 Please contact Knoxville-Knox County Planning at (865) 215-2500 if you have questions.

**Political Districts**

Voting Precinct: 06  
 Voting Location: Green School  
 801 LULA POWELL DR  
 TN State House: 15  
 TN State Senate: 7  
 County Commission: 1 Damon Rawls  
 (at large seat 10) Larsen Jay  
 (at large seat 11) Kim Frazier  
 City Council: 6 Gwen McKenzie  
 (at large seat A) Lynne Fugate  
 (at large seat B) Debbie Helsley  
 (at large seat C) Amelia Parker  
 School Board: 1 John Butler  
 Please contact Knox County Election Commission at (865) 215-2480 if you have questions.

**School Zones**

Elementary: SEQUOYAH  
 ELEMENTARY  
 Intermediate:  
 Middle: VINE MIDDLE  
 MAGNET  
 High: AUSTIN-EAST  
 HIGH MAGNET

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**CITY OF KNOXVILLE**  
**APPLICATION FOR BEER PERMIT**  
**AFFIDAVIT**

- 1. I/we Miwako Takeno hereby solemnly swear or affirm that each statement in this application is true and correct and I understand that if any statement contained herein is false, the permit issued is automatically forfeited and voided. Furthermore, that in the event of forfeiture I/we shall not be eligible to receive another permit for a period of ten (10) years pursuant to Tennessee Code Annotated § 57-105(d).
- 2. I/we understand that all applicants are charged with the responsibility of knowing the local and state beer laws. I/we are aware that the penalty for violating state or local beer laws can include revocation or suspension of the permit and/or the imposition of civil penalties up to ONE THOUSAND FIVE HUNDRED (1500) DOLLARS (\$1,500.00) PER OFFENSE.
- 3. I/we understand that if the business allows illegal gambling on the premises that the beer permit will be subject to revocation.
- 4. I/we understand that a requirement of beer permit issuance is the permittee(s) and ON-SITE manager(s) who will supervise and/or sell and serve the beer at the establishment must complete alcohol education and training programs in accordance with City of Knoxville Code Section 4-60(c).
- 5. I/we understand that by submitting this application, a background investigation shall be conducted on the applicant(s) and on all ON-SITE managers who will be selling beer at the permitted establishment. It is further understood that any and all documents related to that investigation shall become public record open for public inspection and reproduction pursuant to Tennessee Code Annotated § 10-7-503.
- 6. I/we understand that a requirement of maintaining good status standing with the Knoxville Beer Board, is that I/we must notify the City of Knoxville Business Tax Office each time there is a change in the on-site manager responsible for selling the beer.
- 7. I/we hereby release, absolve and hold harmless, the City of Knoxville, the Knoxville Beer Board, the Knoxville Police Department, its employee agents and representatives from any and all liability of whatever type for any damages, causes of actions, personal property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to my application. I/we hereby waive all possible liability of the City of Knoxville, Knoxville Beer Board, Knoxville Police Department, its employee agents and representative as stated above.
- 8. I/we agree that the hiring of an employee who has been convicted within the past ten (10) years of any law relating to the sale, possession, manufacture or transportation of intoxicating beverages, including beer, as defined by City of Knoxville Code Section 4-37 or the hiring of an employee who has been convicted of any felony or crime involving moral turpitude within the past ten (10) years will be cause for possible revocation of the beer permit.
- 9. I/we understand if any information given in the application subsequently changes, I/we will immediately notify the Knoxville Beer Board c/o Business Tax Office.
- 10. I/we understand that if the business closes down, relocates, or there is ANY change in the ownership of the business, the permit will be surrendered to the Business Tax office within 15 days of said change for appropriate action.
- 11. I/we assume full responsibility for the permit and will be accountable for full compliance with the laws of Knoxville and the State of Tennessee for the sale of beer.
- 12. I/we have read the foregoing release. I/we fully understand its provisions, and voluntarily consent to abide by its requirements.
- 13. I/we acknowledge and understand that the fees paid for the beer permit application process are non-refundable.
- 14. The undersigned is the applicant or the bona fide and qualified agent/representative of the corporate applicant.

*Miwako Takeno* \_\_\_\_\_

Date: 3-31-2025

Applicant Signature or Agent/Representative

Co-Applicant Signature

Date: \_\_\_\_\_

Co-Applicant Signature

Date: \_\_\_\_\_

Witnessed to and subscribed before me this 31 day of March

Notary Public: Rebecca Ward



My Commission Expires: Oct. 3 2026

**CITY OF KNOXVILLE**  
**APPLICATION FOR BEER PERMIT**  
**OWNER/MANAGER APPLICATION**

Reason for Application:  New Application     Manager Change or Addition

Name Miwako Takeno     Owner--Percentage of Ownership 100 %     Manager

Home Address 7417 Amberwood drive    City Knoxville    State TN    Zip 37919

Home Phone ( ) \_\_\_\_\_ Cellular Phone (865) 755-5556    Date of Birth 10 / 31 / 1964

Driver's License # \_\_\_\_\_ State TN    Social Security # \_\_\_\_\_

Local Business Name Pavincis

Local Business Address/ZIP 113 S Central St, Knoxville, TN 37902    Business Phone: (865) 637-5040

Have you ever been convicted of any violation of liquor and/or beer laws, felonies, or any crime involving moral turpitude, within the last ten years, or do you have any charges **currently pending**?     Yes     No  
 If yes, give particulars of each charge, including city, county, state: court and date: \_\_\_\_\_

Have you ever had a beer permit revoked, suspended, or denied?     Yes     No  
 If yes, explain: \_\_\_\_\_

Have you ever been convicted of any misdemeanors (Speeding, DUI, Simple Assault, etc.) within the last ten (10) years or have any charges currently pending?     Yes\*     No  
 \*If yes, give particulars of each charge, including city, county, state: court and date: \_\_\_\_\_

0. Do you understand both the state laws and the local laws regulating the sale and distribution of beer in the City of Knoxville?     Yes     No

1. Do you understand that **allowing illegal gambling** on the premises will subject the permit to revocation?     Yes     No

**AFFIDAVIT**

hereby solemnly swear or affirm that each statement in this application is true and correct and agree that if my statement is false, the permit issued may be revoked by the Beer Board, upon notice and hearing, and that the burden is on the permittee to prove the correctness of all the statements in this application.

Understand that this application is subject to the Tennessee Public Records Act and shall be open for inspection and reproduction by any citizen. Tennessee Code annotated §10-7-503.

Miwako Takeno, understand that by submitting this application, a background investigation shall be conducted and any and all documents related to my investigation shall become public records.

Miwako Takeno, hereby release, absolve and hold harmless, the City of Knoxville, the Knoxville Beer Board, the Knoxville Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employee agents and representatives as stated above.

I have read and understand the foregoing Release and understand its provisions and voluntarily consent to abide by its requirements.

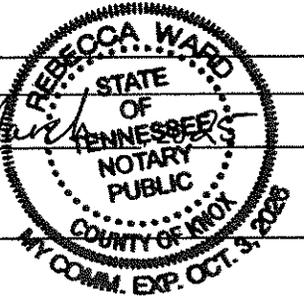
Signature of Applicant: Miwako Takeno

Date: 3-31-2025

Witnessed and subscribed before me this 31 day of March

Notary Public: Rebecca Ward

My Commission Expires: Oct. 3 2026



**CITY OF KNOXVILLE**  
**APPLICATION FOR BEER PERMIT**  
**OWNER/MANAGER APPLICATION**

Reason for Application:

New Application     Manager Change or Addition

1. Name James Proffitt     Owner--Percentage of Ownership \_\_\_\_\_ %     Manager

2. Home Address 2145 River Rd    City New Market    State TN    Zip 37820

3. Home Phone (865) 684 3441    Cellular Phone (865) 684 3441    Date of Birth 08 / 20 / 1981

4. Driver's License # \_\_\_\_\_    State TN    Social Security # \_\_\_\_\_

5. Local Business Name Danina's Pizza

6. Local Business Address/ZIP 113 S. Central St    Business Phone: (865) 637 5040

7. Have you ever been convicted of any violation of liquor and/or beer laws, felonies, or any crime involving moral turpitude, within the last ten years, or do you have any charges **currently pending**?     Yes     No  
If yes, give particulars of each charge, including city, county, state: court and date: \_\_\_\_\_

8. Have you ever had a beer permit revoked, suspended, or denied?     Yes     No  
If yes, explain: \_\_\_\_\_

9. Have you ever been convicted of any misdemeanors (Speeding, DU, Simple Assault, etc.) within the last ten (10) years or have any charges currently pending?     Yes\*     No  
\*If yes, give particulars of each charge, including city, county, state: court and date: \_\_\_\_\_

10. Do you understand both the state laws and the local laws regulating the sale and distribution of beer in the City of Knoxville?     Yes     No

11. Do you understand that **allowing illegal gambling** on the premises will subject the permit to revocation?     Yes     No

**AFFIDAVIT**

hereby solemnly swear or affirm that each statement in this application is true and correct and agree that if my statement is false, the permit issued may be revoked by the Beer Board, upon notice and hearing, and that the burden is on the permittee to prove the correctness of all the statements in this application.

understand that this application is subject to the Tennessee Public Records Act and shall be open for inspection and reproduction by any citizen. Tennessee Code annotated §10-7-503.

James Proffitt understand that by submitting this application, a background investigation shall be conducted and any and all documents related to my investigation shall become public records.

James Proffitt hereby release, absolve and hold harmless, the City of Knoxville, the Knoxville Beer Board, the Knoxville Police Department, its employees, agents and representatives, from any and all liability of whatever type for any damages, causes of actions, personal or property injuries which may result as a consequence of my application for a beer permit, background investigation, release of documents or any other matters related to employees, agents and representatives as stated above.

have read and understand the foregoing Release and understand its provisions and voluntarily consent to abide by its requirements.

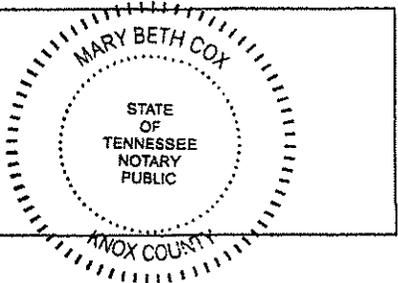
[Signature]  
Signature of Applicant

Date: 4/15/25

Sworn to and subscribed before me this 15th day of April, 20 25.

Notary Public: Mary Beth Cox

My Commission Expires: 4/30/25



CITY OF KNOXVILLE  
APPLICATION FOR BEER PERMIT

**Property Details**

Property Address: 113 S Central St, Knoxville, TN 37902

Directions to business, including any landmarks:


Property Owner Information:

Name Hanna Takeno Family Revocable Living Trust  
Phone 865-643-0787

**Neighborhood Demographics**

Provide the following locations nearest to the business. Provide ALL lines of information requested. You may want to drive or walk the area around the business location to determine which facilities are closest. You will be held accountable for the information provided.

**\*\*Must be filled in completely – No Exceptions\*\***

School / Day Care:

Name Green Magnet Academy  
Address 801 Lula Powell Dr, Knoxville TN 37915

Funeral Home:

Name Unity Mortuary  
Address 1425 McCulla Ave, Knoxville, TN 37915

Hospital:

Name Fort Sanders Regional Medical Center  
Address 1901 Clinch Ave, Knoxville, TN 37916

*CITY OF KNOXVILLE*  
APPLICATION FOR BEER PERMIT

**Notice of Actions Contact**

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Pursuant to City of Knoxville Code Section 4-67, the City requires the applicant to designate an individual **residing within Knox County** to receive notice of actions of the City or the Beer Board and to accept service of process. Please provide the name of the individual, their position with the applicant (owner, manager, etc.) and their address (may be business location). Note that the applicant is required to notify the City in accordance with Section 4-67 if there is any change in this information. In addition to a local address, please provide an address to which certified mail may be sent.

**BEER PERMIT APPLICATION:**

Business Name: DaVinci's  
Business Location: 113 S Central St, Knoxville, TN 37902

**PERSON RESPONSIBLE TO RECEIVE SERVICE OF PROCESS:**

Name: Miwako Takano  
Position: owner Phone (865) 643-0737  
Address: 7417 Amberwood Drive  
.  
City, State, Zip: Knoxville, TN 37919

**CERTIFIED MAILING ADDRESS:**

Name: Miwako Takano  
Address: 7417 Amberwood Drive  
City, State, Zip: Knoxville, TN 37919

# SERVER COMPLIANCE PLAN FOR IDENTIFICATION AND RESPONSIBLE ALCOHOL SERVICE

Establishment Name: Davinci's

## 1. Purpose

- To outline procedures and responsibilities for preventing the sale or service of alcohol to underage or impaired individuals, ensuring compliance with all applicable laws and promoting a safe environment for customers and staff.

## 2. Scope

- This plan applies to all employees of Davinci's, including security, servers, bartenders, and management.

## 3. Training

- **New Hires:** All new employees must complete compliance training with a manager before working their first shift.
- All Servers and Bartenders must have a Server Permit through the State of Tennessee
- **Annual Training:** Required yearly for all staff to review alcohol laws, ID checks, and responsible service practices.
- **Fake ID Training:** Staff will be trained to recognize signs of fake, altered, or borrowed IDs.

## 4. Signage

- Clear signage posted at the entrance and bar area states:
- Drinking age is 21+
- Valid ID is required.
- No service will be provided to underage or intoxicated individuals.

## 5. ID Verification Procedures

- Every individual must present a valid, government-issued photo ID to consume beer or alcohol.
- Suspected fake IDs or altered documents result in refusal of service, denied entry, and the individual will be asked to leave.
- Entry will also be denied to anyone showing visible signs of intoxication.
- Servers and bartenders may recheck IDs if they suspect a patron is underage or using someone else's ID.
- Wristbands or stamps may be used to quickly identify those who have been verified as 21+

## 6. Preventing Service to Intoxicated Guests

- Recognition Training: Staff are trained to recognize signs of impairment such as slurred speech, staggering, confusion, or aggression.
- Service Limits:
  - Only one alcoholic beverage served per person at a time.
  - Non-alcoholic beverages or food will be offered in place of alcohol if impairment is suspected.
- Refusal of Service:
  - If a guest appears over-served, they will be refused additional alcohol.
  - The situation will be escalated to the manager on duty immediately.
  - Staff may offer assistance in arranging a ride for the guest if necessary.

## 7. Communication and Monitoring

- Daily Team Meetings: Held before every shift to reinforce compliance expectations, review any concerns, and highlight key reminders.
- Staff Collaboration: Bartenders, servers, and security are expected to communicate about potentially intoxicated patrons or suspicious behavior.

## 8. Incident Response

- Any suspicious activity, fake ID attempt, or alcohol-related concern must be reported to the manager on duty.
- The manager will assess the situation and determine next steps, which may include refusal of service, removal from the premises, or contacting authorities.
- All incidents will be documented.

## 9. Policy Enforcement

- Staff who fail to follow ID checking and responsible service procedures may face disciplinary action, up to and including termination.
- This compliance plan will be reviewed annually or as laws and best practices change.

**CITY OF KNOXVILLE**  
INTEROFFICE MEMORANDUM

4-2-25

DATE: \_\_\_\_\_

TO: Donald Jenkins, City Surveyor  
Engineering Department

FROM: Mark Byrd, Collections Officer  
Finance Department

RE: Request for distance measurements for beer permit application

Please measure the distances from the below indicated beer permit applicant's proposed location to the public facilities indicated and forward this information back to me. As required by law, this information is necessary to process the applicant's beer permit request. Thank you in advance for your assistance.

Business name: Da Vinci's  
Business location: 113 S Central St  
Property description:  New construction  Pre-existing structure  
Directions to and/or landmarks near location: \_\_\_\_\_  
\_\_\_\_\_

**SCHOOL/DAYCARE:**

Name: Green Magnet Academy  
Address: 801 Lula Powell Dr  
Distance/feet: MORE THAN 300'

**FUNERAL HOME:**

Name: Unity Mortuary  
Address: 1425 McCalla Ave  
Distance/feet: MORE THAN 300'

**HOSPITAL:**

Name: Fort Sanders Regional Medical Center  
Address: 1901 Clinch Ave  
Distance/feet: MORE THAN 300'

# Knoxville Alcohol Seller Training

## Certificate of Completion

THIS CERTIFIES THAT

**JAMES PROFFITT**

Has successfully completed the Knoxville Alcohol Seller Training course  
conducted by the Knoxville Police Department

Date 1/30/2025

Class Instructor: L. Pressley

  
Signature Required

**THIS IS NOT AN ALCOHOL SERVER PERMIT**