

CITY OF KNOXVILLE BEER PERMIT

APPLICATION CHECKLIST | DISTRICT: 1

Business Name: Afrovibe Lounge Account Number: 66682

Business Address: 1045 Maryville Pike 37920

Agenda Date: 2 / 18 / 25 CLT Number: 122DE01701

TASK	COMMENTS
New Application:	Received 1/29/25
Permit Fee Paid	(New Application \$250.00) ✓
Publication Fee Paid:	(50.00) ✓
Records Check Completed	
Current City Business License:	Expiration Date: <u>5 / 15 / 26</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: ___/___/___ Received: ___/___/___ Approved: Pending:
Notice of Application to Building Inspections (215-3669)	Sent: ___/___/___ Received: ___/___/___ Approved: Pending:
Notice of Application to Fire Prevention Bureau (633-0400)	Sent: ___/___/___ Received: ___/___/___ Approved: Pending:
Request distances measured by Engineering Dept. (215-6132)	Sent: <u>2 / 3 / 25</u> Received: ___/___/___ Approved Pending Location needs add'l research?
Plan for Server Compliance	✓
KAST Program completed	
Previous Business at this location:	<u>Sunright Lounge (#55243); Inactive</u>

CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT

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.

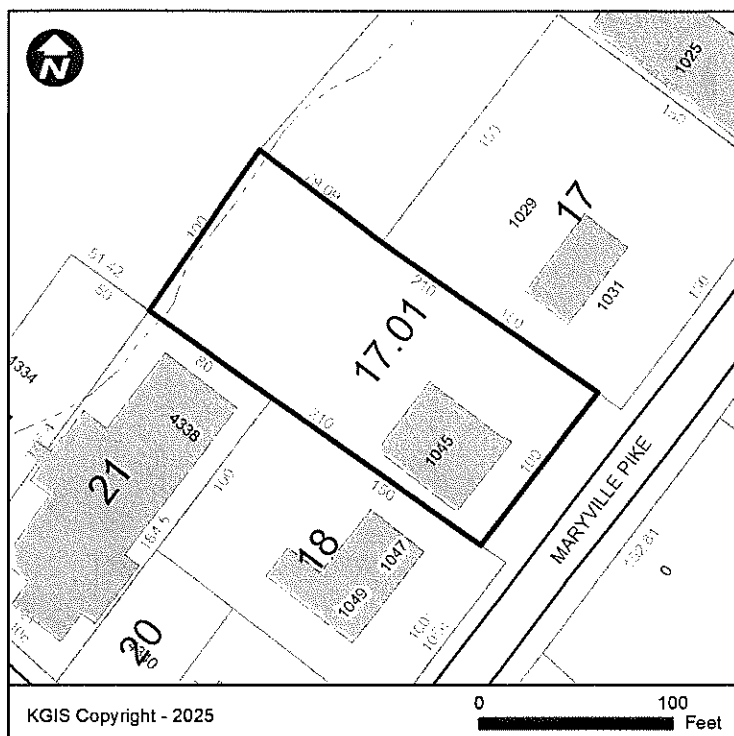
I / we hereby make application for a permit to sell, store, or distribute beer or other beverages authorized to be sold, stored or distributed under the provisions of the City of Knoxville alcoholic beverages ordinance Chapter 4 and base my application upon the answers to the following questions:

1. Reason for Application: ☒ New Business ☐ New Ownership ☐ Name Change ☐ Other _____
2. Name of Business Owner(s): Sunday TUT TEL AfroVibe Lounge LLC
3. Is Owner a: ☐ Corporation ☐ General Partnership ☐ Limited Partnership ☒ LLC ☐ Sole Proprietorship
☐ Other _____
4. Under what name will the business operate: AfroVibe Lounge LLC
5. Business Address: 1045 Maryville Pike Zip 37920 Phone (865) 268-9311
6. Property Owner's Name: QbqL Bhimani Phone 865-406-9898
7. Type of business you will operate: Limited Restaurant / Lounge
8. 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.
100 percent ~~100~~ Sunday TUT TEL

9. 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.
Niesha Turner

10. List machines currently in use or planned for use on premises and owner of machines (cigarette, pinball, jukebox, etc.)
N/A

11. Type of permit requested:
☐ Off Premise ☒ On/Off Premise ☐ Caterer ☐ Manufacturer/Distributor ☐ Self-Serve

1045 MARYVILLE PIKE - Property Map and Details Report**Property Information**

Parcel ID: 122DE01701
 Location Address: 1045 MARYVILLE PIKE
 CLT Map: 122
 Insert: D
 Group: E
 Condo Letter:
 Parcel: 17.01
 Parcel Type: NORMAL
 District:
 Ward: 25
 City Block: 25760
 Subdivision:
 Rec. Acreage: 0
 Calc. Acreage: 0
 Recorded Plat: K206 - D
 Recorded Deed: -
 Deed Type:
 Deed Date:

Address Information

Site Address: 1045 MARYVILLE PIKE
 KNOXVILLE - 37920
 Address Type: BUSINESS
 Site Name: SUN NIGHT LOUNGE
 Please contact Knoxville-Knox County Planning at (865) 215-2500 if you have questions.

Owner Information

SAPPHIRE HOLDINGS LLC
 912 HARBOR POINTE WAY
 KNOXVILLE TN 37922
 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) 215-4640 if you have questions.

Other Information

Census Tract: 24
 Planning Sector: South City
 Please contact Knoxville-Knox County Planning at (865) 215-2500 if you have questions.

Political Districts

Voting Precinct: 25
 Voting Location: South Knoxville Community Center
 522 MARYVILLE PIKE
 TN State House: 15
 TN State Senate: 6
 County Commission: 9 Andy Fox
 (at large seat 10) Larsen Jay
 (at large seat 11) Kim Frazier
 City Council: 1 Tommy Smith
 (at large seat A) Lynne Fugate
 (at large seat B) Debbie Helsley
 (at large seat C) Amelia Parker
 School Board: 9 Kristi Kristy
 Please contact Knox County Election Commission at (865) 215-2480 if you have questions.

School Zones

Elementary: DOGWOOD
 ELEMENTARY
 Intermediate:
 Middle: SOUTH-DOYLE
 MIDDLE
 High: SOUTH-DOYLE
 HIGH

Disclaimer: KGIS makes no representation or warranty as to the accuracy of this map and its information nor to its fitness for use. Any user of this map product accepts the same AS IS, WITH ALL FAULTS, and assumes all responsibility for the use thereof, and further covenants and agrees to hold KGIS harmless from any damage, loss, or liability arising from any use of the map product. Independent verification of all information contained on this map should be obtained by any user.

CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
AFFIDAVIT

1. I/we Sunday TUTTEL hereby solemnly swear or affirm that each statement in this application is true and correct and 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 § 57-5-105(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 00/100 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 employees, 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 employees, 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 in 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.

Sunday
Applicant Signature or Agent/Representative

Date: 1-29-25

Co-Applicant Signature

Date: _____

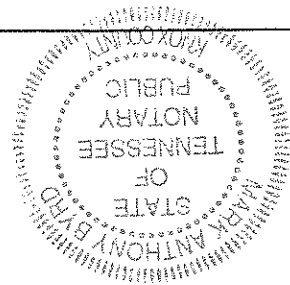
Co-Applicant Signature

Date: _____

Sworn to and subscribed before me this 29th day of January, 2025.

Notary Public: [Signature]

My Commission Expires: 4-2-28



CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
OWNER/MANAGER APPLICATION

Reason for Application:

☒ New Application

☐ Manager Change or Addition

1. Name Sunday TEL ☒ Owner--Percentage of Ownership 100 % ☐ Manager

2. Home Address 247 Andy Conn Ave City ALCOA State TN Zip 37701

3. Home Phone () Cellular Phone (865) 518-1223 Date of Birth 11 / 17 / 1987

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

5. Local Business Name Afrovibe Lounge LLC

6. Local Business Address/ZIP 1045 Maryville Pike 37720 Business Phone: (865) 268-9311

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, 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:

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

I 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.

I 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.

I, Sunday TUT TEL, 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.

I, Sunday TUT TEL, 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.

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

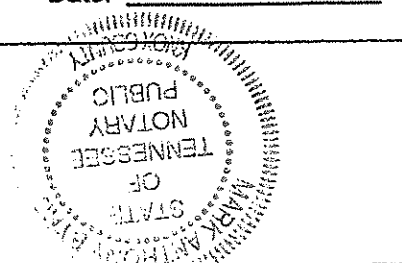
Sunday
Signature of Applicant

Date: 1-29-25

Sworn to and subscribed before me this 29th day of January, 2025

Notary Public: Mally

My Commission Expires: 4-2-28



CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
OWNER/MANAGER APPLICATION

- Reason for Application: ☒ New Application ☐ Manager Change or Addition
1. Name Niesha Turner ☐ Owner—Percentage of Ownership _____ % ☒ Manager
2. Home Address 1209 Cassell Valley Way City Knoxville State TN Zip 37912
3. Home Phone (865) 896-8040 Cellular Phone() _____ Date of Birth 10/29/1987
4. Driver's License # _____ State TN Social Security # _____
5. Local Business Name Afro vibe Lounge LLC
6. Local Business Address/ZIP 1045 Maryville pike 37920 Business Phone: (865) 268-9311
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, 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: _____
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

I 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.

I 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.

I, Niesha Turner, 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.

I, Niesha Turner, 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.

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

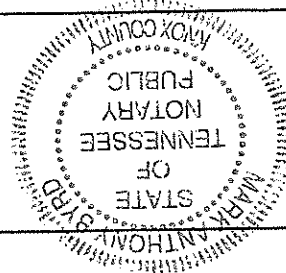
Niesha Turner
Signature of Applicant

Date: 1-29-25

Sworn to and subscribed before me this 29th day of January, 2025.

Notary Public: Man

My Commission Expires: 4-2-28



CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT

Property Details

Property Address: 1045 Maryville Pike, Knoxville, TN 37920

Directions to business, including any landmarks:

Property Owner Information:

Name Phal Bhimani
Phone 865-406-9898

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 Mt olive elementary school
Address 2507 Maryville, Pike, Knoxville, TN 37920

Funeral Home:

Name Berry Funeral Home
Address 3704 chapman hwy, Knoxville, TN 37920

Hospital:

Name UT Hospital
Address 1924 Alcoa hwy, Knoxville, TN 37920

CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT

Notice of Actions Contact

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: Afrovibe Lounge LLC

Business Location: 1045 Maryville Pike, Knoxville, TN 37920

PERSON RESPONSIBLE TO RECEIVE SERVICE OF PROCESS:

Name: Sunday TEL, Niesha Turner

Position: ~~owner~~ manager Phone (865) 268-9311

Address: 247 Andy Carr Ave

City, State, Zip: ALCOA, TN 37701

CERTIFIED MAILING ADDRESS:

Name: Afrovibe Lounge LLC

Address: 247 Andy Carr Ave

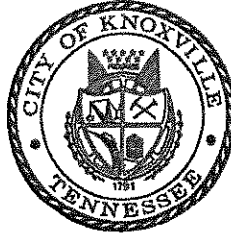
City, State, Zip: ALCOA, TN 37701

**Department
of
Finance**

CITY OF KNOXVILLE, TENNESSEE
Business License

**Business
Tax
Division**

Business Name and Location:
AFROVIBE LOUNGE LLC
1045 MARYVILLE PIKE



Mailing Address:

AFROVIBE LOUNGE LLC
247 ANDY CARR AVE
ALCOA, TN 37701

Account #	66682
Classification	2
License/Receipt #	278679
Issue Date	01/15/2025
Expiration Date	05/15/2026

Clifton B.

Collection Officer

- FOLD -

Must be posted in a conspicuous place

- FOLD -

Business Tax Receipt

*Final Returns MUST be filed within 15
days of close of Business.*

Retail	0.00
Wholesale	0.00
Business Tax	0.00
Less Credits	0.00
Sub Total	0.00
Penalty	0.00
Interest	0.00
Sub Total	0.00

Min. Bus. Tax	15.00
Penalty	0.00
Interest	0.00
Coll. & Rec. Fees	0.00
Sub Total	15.00
Total Amount	15.00
Total Payments	15.00
Balance Due	0.00

Lic_New_App

City Revenue Office - P.O. Box 1028 - Knoxville, Tennessee 37901 - (865)215-2083 - (865)215-2621 (fax)



STATE OF TENNESSEE
DEPARTMENT OF REVENUE

Certificate of Registration

January 14, 2025

AFROVIBE LOUNGE LLC
247 ANDY CARR AVE
ALCOA TN 37701-2625

Letter ID: L0896156864
Account ID: 1002588100-SLC
Account Type: Sales and Use Tax

The above named taxpayer has filed an application for sales and use tax registration for the place of business at the below referenced location address. The Tennessee Department of Revenue issued this Certificate of Registration in accordance with Tenn. Code Ann. §§ 67-6-601 and 67-6-602. The Certificate of Registration must be publicly displayed at the location address for which it is issued. The tax account number and location number on this certificate are used by the Department to identify your account and must be shown on all correspondence and reports. The certificate is not assignable and is valid only for the above referenced taxpayer and for transactions of business for this registration. **In accordance with Tenn Code Ann. § 67-6-607, it is a Class C misdemeanor for any person to misuse a Certificate of Registration for the purpose of obtaining taxable property without the payment of sales or use tax when it is due. Such wrongful use is grounds for the Commissioner to revoke the taxpayer's Certificate of Registration.**

Tax Returns

All sales and use tax returns must be filed and associated tax payments made electronically to the Department. Taxpayers may do this at <https://tntap.tn.gov/eservices/>. Taxpayers should file the sales and use tax return according to their filing frequency on the 20th day of the month following the reporting period. If your business opens after the 20th of the month, you may report sales made during the remaining days of the month with the next reporting period. In order to avoid penalty and interest charges, all returns must be filed and all associated tax payments must be made on or before the due date for the reporting period. Taxpayers should always file a return for their business, even if they do not make any sales during a reporting period.

Detach here and display in public area



Tennessee Department of Revenue
Certificate of Registration
Sales and Use Tax

AFROVIBE LOUNGE LLC
1045 MARYVILLE PIKE
KNOXVILLE TN 37920-3944

Effective Date: January 1, 2025
Account No.: 1002588100-SLC
Location No.: 1001804196
Filing Status: Monthly

David Gerregano
Commissioner of Revenue



Tre Hargett
Secretary of State

Division of Business Services
Department of State
State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

AFROVIBE LOUNGE LLC
1045 MARYVILLE PIKE
KNOXVILLE, TN 37920

January 7, 2025

Filing Acknowledgment

Please review the filing information below and notify our office immediately of any discrepancies.

SOS Control # :	001610620	Formation Locale:	TENNESSEE
Filing Type:	Limited Liability Company - Domestic	Date Formed:	01/07/2025
Filing Date:	01/07/2025 10:47 AM	Fiscal Year Close:	12
Status:	Active	Annual Report Due:	04/01/2026
Duration Term:	Perpetual	Image # :	B1663-8753
Managed By:	Member Managed		
Business County:	KNOX COUNTY		

Document Receipt

Receipt # : 009427546	Filing Fee:	\$300.00
Payment-Credit Card - State Payment Center - CC #: 3889475952		\$300.00

Registered Agent Address:
MITSHA MOSLEY
1045 MARYVILLE PIKE
KNOXVILLE, TN 37920

Principal Address:
1045 MARYVILLE PIKE
KNOXVILLE, TN 37920

Congratulations on the successful filing of your **Articles of Organization** for **AFROVIBE LOUNGE LLC** in the State of Tennessee which is effective on the date shown above. You must also file this document in the office of the Register of Deeds in the county where the entity has its principal office if such principal office is in Tennessee. Please visit the Tennessee Department of Revenue website (www.tn.gov/revenue) to determine your online tax registration requirements. If you need to obtain a Certificate of Existence for this entity, you can request, pay for, and receive it from our website.

You must file an Annual Report with this office on or before the Annual Report Due Date noted above and maintain a Registered Office and Registered Agent. Failure to do so will subject the business to Administrative Dissolution/Revocation.

Tre Hargett
Secretary of State

AFROVIBE LOUNGE BEER RULES

1. All bartenders are 18 or over and ABC license obtained.
2. Checking ID to verify customer is 21 or over as well as verify all ID'S are legitimate.
3. Refuse sale to anyone intoxicated or underage.
4. Observe customers speech, behavior, to ensure not intoxicated before serving.
5. Offer food or water to anyone drinking on premises.
6. Cutoff customer if we observe slurring of speech, stumbling, or sign of health concerns.
7. Monitor customers to ensure as long as a person consumes no more than 3 drinks in 1 hour there ok to drive.
8. Stop serving at 3 AM.