

- e. KNOXVILLE SPORT BAR & LOUNGE (2ND DISTRICT)
PONCE ENTERPRICES LLC, APPLICANT
8705 UNICORN DR STE 110
PONCE ENTERPRICES LLC, OWNER
BAYRON T PONCE, OWNER

CITY OF KNOXVILLE BEER PERMIT

APPLICATION CHECKLIST | DISTRICT: 2

Business Name: Knoxville Sport Bar & Lounge Account Number: 66604

Business Address: 8705 Unicorn Dr ^{#110} 37923

Agenda Date: 6, 24, 25 CLT Number: 119 035

TASK	COMMENTS
New Application:	<u>Received 5-16-25</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 / 26</u>
Copy of Certificate of Registration for Tennessee Sales Tax	<input checked="" type="checkbox"/>
Copy of Corporate Charter; LLC; ETC.	<input checked="" type="checkbox"/>
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: ___/___/___ Received: ___/___/___ Approved <input checked="" type="checkbox"/> Pending Location needs add'l research?
Plan for Server Compliance	<input checked="" type="checkbox"/>
KAST Program completed	
Previous Business at this location:	<u>Big Orange Billiards & Brews (#63431) ; Inactive</u> <u>12/17/24</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): Knoxville Sport Bar & Lounge / Ponce Enterprises LLC
3. Is Owner a: Corporation General Partnership Limited Partnership LLC Sole Proprietorship
 Other _____
4. Under what name will the business operate: Knoxville Sport Bar & Lounge
5. Business Address: 8705 Unicorn Way Zip 37923 Phone (865) 765-9613
6. Property Owner's Name: Tammy Brunson Phone 865-689-8775
7. Type of business you will operate: Bar & Restaurant

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.

Bayron Ponce Tejada 100%

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.

Bayron Tejado Ponce (owner/manager)

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

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

CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
AFFIDAVIT

1. I/we BALYRON TETADA POUCE 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.

[Signature]
Applicant Signature or Agent/Representative

Date: 05-15-2025

Co-Applicant Signature

Date: _____

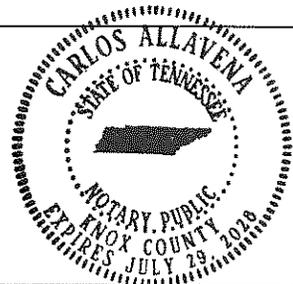
Co-Applicant Signature

Date: _____

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

Notary Public: *[Signature]*

My Commission Expires: 07-29-2028



CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT
OWNER/MANAGER APPLICATION

Reason for Application: New Application Manager Change or Addition

1. Name BAYRON TEJADA PONCE Owner--Percentage of Ownership 100% Manager
 2. Home Address 10654 Trulock Ln City Knoxville State TN Zip 37934
 3. Home Phone (865) 765-9613 Cellular Phone (865) 765-9613 Date of Birth 10 / 16 / 1982
 4. Driver's License # _____ State TN Social Security # _____
 5. Local Business Name Knoxville Sport Bar and Lounge
 6. Local Business Address/ZIP 3705 Unicorn Dr. TN 37923 Business Phone: (865) 765-9613
 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, Bayron Tejada Ponce, 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, Bayron Tejada Ponce, 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.

[Signature]
 Signature of Applicant

Date: 5/15/25

Sworn to and subscribed before me this 15th day of May, 2025.

Notary Public: [Signature]

My Commission Expires: 07-29-2028



CITY OF KNOXVILLE
APPLICATION FOR BEER PERMIT

Property Details

Property Address: 8705 Unicorn Dr, Knoxville TN 37923

Directions to business, including any landmarks:

<u>How to exit 180 to Kingston Pk</u>
<u>Kingston Pike west to Unicorn Drive, (Right)</u>

Property Owner Information:

Name Unicorn West Business Center LLP
Phone 865-765-9613

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 Mill Creek Elementary
Address 105 Leonard Mill Rd. Knoxville TN 37931

Funeral Home:

Name Rose Mortuary mort.
Address 6200 Kingston Pk, Knoxville TN 37923

Hospital:

Name TURKEY CREEK medical
Address 10820 PARKSIDE DR, Knoxville TN 37923

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: Knoxville Sport Bar & Lounge.

Business Location: 8705 Unicorn Dr. Knoxville TN 37923

PERSON RESPONSIBLE TO RECEIVE SERVICE OF PROCESS:

Name: Bayron Tejada Ponce

Position: owner/manager Phone (605) 765-9613

Address: 8705 Unicorn Dr

City, State, Zip: Knoxville TN 37923

CERTIFIED MAILING ADDRESS:

Name: Bayron Tejada Ponce

Address: 8705 Unicorn Dr

City, State, Zip: Knoxville TN 37923

**Department
of
Finance**

CITY OF KNOXVILLE, TENNESSEE
Business License

**Business
Tax
Division**

Business Name and Location:
KNOXVILLE SPORT BAR & LOUNGE
8705 UNICORN DR



Mailing Address:

KNOXVILLE SPORT BAR & LOUNGE
c/o PONCE ENTERPRICES LLC
9111 CROSS PARK DR
D-238
KNOXVILLE, TN 37923

Account #	66604
Classification	2
License/Receipt #	277847
Issue Date	12/16/2024
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
SubTotal	0.00

Min. Bus. Tax	15.00
Penalty	0.00
Interest	0.00
Coll. & Rec. Fees	0.00
SubTotal	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

December 30, 2024

KNOXVILLE SPORT BAR & LOUNGE
8705 UNICORN DR
KNOXVILLE TN 37923

Letter ID: L0596670656
Account ID: 1002579705-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

KNOXVILLE SPORT BAR & LOUNGE
8705 UNICORN DR
KNOXVILLE TN 37923

Effective Date: January 6, 2025
Account No.: 1002579705-SLC
Location No.: 1001803256
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

Filing Information

Name: **PONCE ENTERPRICES LLC**

General Information

SOS Control #	001575243	Formation Locale:	TENNESSEE
Filing Type:	Limited Liability Company - Domestic	Date Formed:	09/04/2024
	09/04/2024 5:48 PM	Fiscal Year Close	12
Status:	Active	Member Count:	1
Duration Term:	Perpetual		
Managed By:	Member Managed		

Registered Agent Address
BAYRON A TEJADA PONCE
8705 INICORN DR
KNOXVILLE, TN 37923

Principal Address
8705 INICORN DR
KNOXVILLE, TN 37923

The following document(s) was/were filed in this office on the date(s) indicated below:

<u>Date Filed</u>	<u>Filing Description</u>	<u>Image #</u>
09/05/2024	Assumed Name	B1622-7353
	New Assumed Name Changed From: No Value To: KNOXVILLE SPORT BAR & LOUNGE	
09/04/2024	Initial Filing	B1622-5740
<u>Active Assumed Names (if any)</u>		<u>Date</u>
KNOXVILLE SPORT BAR & LOUNGE		09/05/2024
		<u>Expires</u>
		09/05/2029

Serve Plan and Alcohol Policy for Knoxville Sport Bar And Lounge

Objective

To create a safe, enjoyable, and responsible drinking environment for patrons while complying with state and local laws regarding the service of alcoholic beverages.

Serve Plan

1. Staff Training and Certification

- **Required Certifications:**
 - All servers and bartenders must complete a state-approved responsible beverage service training program (e.g., TABC in Tennessee).
 - Certification must be renewed as required by state law.
- **Ongoing Training:**
 - Monthly in-house training on responsible serving practices, recognizing fake IDs, and dealing with intoxicated customers.
 - Emergency protocols training for handling incidents.

2. Age Verification

- **Policy:**
 - No alcohol will be served without verifying the age of the patron using a valid government-issued photo ID.
- **Procedure:**
 - Check all IDs to verify customers' age before alcohol is purchased.
 - Use an ID scanner to ensure authenticity when available.

3. Responsible Serving Practices

- **Drink Limits:**
 - Limit customers to one drink per ID at a time during busy hours or high-risk events.
- **Alcohol Awareness:**
 - Monitor customers for signs of intoxication and refuse service if necessary.
 - Offer water or non-alcoholic alternatives to individuals showing signs of impairment.
- **Promotion Rules:**
 - Prohibit extreme drink specials like unlimited drinks for a fixed price or shots contests.
 - Promote food and non-alcoholic drink pairings during alcohol promotions.

4. Incident Documentation

- **Procedure:**
 - Maintain an incident log to document refusals of service, altercations, or other alcohol-related issues.
 - Include the time, customer description, staff involved, and actions taken.
-

Alcohol Policy

1. Legal Compliance

- Adhere strictly to local, state, and federal laws regarding alcohol sales and service.
- Follow operating hours for alcohol service as defined by local ordinances.

2. Refusal of Service

- **Right to Refuse:**
 - Staff have the right to refuse service to any customer who appears intoxicated, behaves aggressively, or attempts to purchase alcohol for minors.
- **Procedure:**
 - Politely explain the reason for refusal and offer alternative beverages or assistance (e.g., calling a cab).

3. Safety Measures

- **Transportation Assistance:**
 - Partner with local ride-sharing services or taxi companies to provide safe transportation for customers.
- **Designated Driver Program:**
 - Offer free non-alcoholic beverages to designated drivers in a party.

4. Zero Tolerance for Underage Drinking

- Staff found serving alcohol to minors will face immediate disciplinary action, including potential termination.
- Customers using fake IDs will be reported to local authorities and denied entry.

5. Conflict Management

- **De-Escalation Training:**
 - Staff will be trained to handle disputes, aggressive behavior, or intoxicated patrons calmly and effectively.
- **Security Measures:**
 - Employ trained security personnel during high-traffic events, such as sports games or weekend evenings.

Implementation and Monitoring

- **Policy Distribution:**
 - Provide all employees with a copy of the Serve Plan and Alcohol Policy during onboarding.
- **Regular Audits:**
 - Conduct bi-monthly checks to ensure compliance with the policy.
- **Customer Feedback:**
 - Encourage patrons to provide feedback on their experience to identify areas for improvement.

Serve Plan and Alcohol Policy for Knoxville Sport Bar And Lounge

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CITY OF KNOXVILLE
INTEROFFICE MEMORANDUM

DATE: 1-6-25

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: Knoxville Sport Bar & Lounge

Business location: 8705 Unicorn Dr, Ste 110

Property description: New construction Pre-existing structure

Directions to and/or landmarks near location: _____

SCHOOL/DAYCARE:

Name: Mill Creek Elementary

Address: 10521 ~~105~~ Coward Mill Rd

Distance/feet: MORE THAN 300'

FUNERAL HOME:

Name: Rose Mortuary

Address: 6200 Kingston Pike

Distance/feet: MORE THAN 300'

HOSPITAL:

Name: Turkey Creek Medical Center

Address: 10820 Parkside Dr

Distance/feet: MORE THAN 300'