



BIRMINGHAM
CITY COUNCIL

PUBLIC SAFETY COMMITTEE MEETING
TUESDAY, JANUARY 11, 2022
3:30 P.M.
COUNCIL CHAMBERS
COUNCILOR LATONYA A. TATE CHAIRMAN

AGENDA

- A. CALL TO ORDER
- B. APPROVAL OF MINUTES
- C. LIQUOR LICENSES
 - 1. Alpha Charlie Grill
 - 2. Club 84
 - 3. Encore Rouge
 - 4. Gable Square Saloon and Games
 - 5. Kuntry Klubb
 - 6. MCE Event Center
 - 7. Mahogany
 - 8. Neighborhood Market
 - 9. P4L Foodmart
 - 10. Two Amigos Mexican Cantina
- D. ADJOURNMENT

Liquor Licenses

<p>1. Alpha Charlie Grill 4900 East Lake Blvd Brian Kemp</p>	<p>Restaurant Retail Liquor</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DENIED <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>2. Club 84 416 4th Avenue North Cervonta Barnfield Alexandra Williams</p>	<p>Lounge Retail Liquor Class I</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DENIED <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>3. Encore Rouge 707 Richard Arrington Jr Blvd South, Suite 102 Shantale Lanese Wheeler Davis Antoinne Davis</p>	<p>Restaurant Retail Liquor</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DENIED <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>4. Gable Square Saloon and Games 803 9th Court South Bryce Collins</p>	<p>Lounge Retail Liquor Class I Pool Table Permit</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DENIED <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>5. Kuntry Klubb 1157 Bankhead Highway West Maurice King</p>	<p>Lounge Retail Liquor Class I Division I Dance Permit (customer) Pool Table Permit</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DENIED <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>6. MCE Event Center 2019 Avenue C Ensley Fred Kennedy</p>	<p>Division I Dance Permit (customer) Special Retail License (over 30 days)</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DENIED <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>

<p>7. Mahogany 1709 3rd Avenue West Montego Temple</p>	<p>Lounge Retail Liquor Class I Division I Dance Permit (customer) Pool Table Permit</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DENIED <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>8. Neighborhood Market 1313 1313 14th Avenue North Brian Sanders Gregory Ramsey</p>	<p>Beer Off Premise Wine Off Premise</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DENIED <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>9. P4L Foodmart 3016 Winewood Road Joshuah Thuku</p>	<p>Beer Off Premise Wine Off Premise</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DENIED <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>
<p>10.Two Amigos Mexican Cantina 328 Palisades Blvd, Suite 10 Damian Rodriguez Tellez</p>	<p>Restaurant Retail Liquor</p>	<p><input type="checkbox"/> Approved Consent Agenda <input type="checkbox"/> Approved pending NA _____ ZONING _____ <input type="checkbox"/> No Recommendation <input type="checkbox"/> DENIED <input type="checkbox"/> Date: _____ <input type="checkbox"/> Delayed: _____</p>



COMMITTEE REPORT



JOINT PUBLIC SAFETY AND SPECIAL CALLED COMMITTEE OF THE WHOLE MEETING
TUESDAY, DECEMBER 14, 2021 | 3:30 P.M.
COUNCIL CHAMBERS

MINUTES

COUNCILOR LATONYA A. TATE COMMITTEE CHAIR
COUNCILORS CRYSTAL N. SMITHERMAN & HUNTER WILLIAMS, COMMITTEE MEMBERS

Councilor(s) Present: Tate, Smitherman, Williams

A. CALL TO ORDER

The Meeting was called to order by the Committee Chair, Councilor Tate.

B. APPROVAL OF MINUTES – November 16, 2021

Action Taken:

Councilor Williams Motioned to Approve the Minutes.

Councilor Smitherman Seconded the Motion.

The November 16, 2021 Minutes were Approved as Recorded.

C. LIQUOR LICENSES

Alpha Charlie Grill

4900 East Lake Blvd

Contact: Brian Kemp

Restaurant Retail Liquor

Action Taken:

Councilor Smitherman: Motioned to Delay the Item.

Councilor Williams: Seconded the Motion.

The Item was Delayed until the January 11, 2022 Public Safety Committee Meeting.

Club 84

416 4th Avenue North

Contact: Cervonta Barnfield/Alexander Williams

Lounge Retail Liquor Class I

Action Taken:

Councilor Smitherman: Motioned to Delay the Item.

Councilor Williams: Seconded the Motion.

The Item was Delayed until the January 11, 2022 Public Safety Committee Meeting.

Gable Square Saloon and Games

803 9th Court South

Contact: Bryce Collins

Lounge Retail Liquor Class I Pool Table Permit

Kuntry Klubb

1157 Bankhead Hwy West

Contact: Maurice King

Lounge Retail Liquor Class I /Division I Dance Permit (customer)/Pool Table Permit

Action Taken:

Councilor Smitherman: Motioned to Delay the Item.

Councilor Williams: Seconded the Motion.

The Item was Delayed until the January 11, 2022 Public Safety Committee Meeting.

MINUTES

MCE Event Center 2019 Avenue C Ensley

Contact: Fred Kennedy

Division I Dance Permit (customer)/Special Retail License (over 30 days)

Action Taken:

Councilor Williams: Motioned to Delay the Item.

Councilor Smitherman: Seconded the Motion.

The Item was Delayed until the January 11, 2022 Public Safety Committee Meeting.

Neighborhood Market 1313 14th Avenue North

Contact: Brian Sanders/Gregory Ramsey

Beer Off Premise Wine Off Premise

Action Taken:

Councilor Williams: Motioned to Delay the Item.

Councilor Smitherman: Seconded the Motion.

The Item was Delayed until the January 11, 2022 Public Safety Committee Meeting.

P4L Foodmart

3016 Winewood Road

Contact: Joshua Thuku

Beer Off Premise Wine Off Premise

Action Taken:

Councilor Williams: Motioned to Delay the Item.

Councilor Smitherman: Seconded the Motion.

The Item was Delayed until the January 11, 2022 Public Safety Committee Meeting.

Purple Event Center

7001 Crestwood Blvd, Ste. 414

Contact: Deangel Enge/William Enge

Division I Dance Permit (customer)/Special Retail License (over 30 days)

Action Taken:

Councilor Williams: Motioned to Approve the Item.

Councilor Smitherman: Seconded the Motion.

The Item was Approved and Recommended to the City Council Consent Agenda.

Tinos Bar

700 Valley Avenue Ste. C

Contact: Amber Brunson

Lounge Retail Liquor Class I Division I Dance Permit (customer)

Action Taken:

Councilor Williams: Motioned to Approve the Item.

Councilor Smitherman: Seconded the Motion.

The Item was Approved and Recommended to the City Council Consent Agenda.

The Avondale Gallery & Loft

4322 3rd Avenue South

Contact: Abra Barnes

Special Retail License (over 30 days)

Action Taken:

Councilor Williams: Motioned to Approve the Item.

Councilor Smitherman: Seconded the Motion.

The Item was Approved and Recommended to the City Council Consent Agenda.

MINUTES

D. AGREEMENT

Birmingham Fire & Rescue and The University of Alabama

Memorandum of Understanding and Intergovernmental Agreement with The Board of Trustees of The University of Alabama for The University of Alabama Hospital, under which the City of Birmingham Fire and Rescue Service will provide certain in-home follow-up care and treatment to patients it transports to University Hospital after hospital discharge, to include certain medical interventions, preventive care, and the identification of new medical conditions, and University Hospital will pay the City \$195.00 per patient per month for each patient participating in this Paramedicine/EMT Program.

Chief Cory D. Moon

Action Taken:

Councilor Williams: _____ Motioned to Approve the Item.

Councilor Tate: _____ Seconded the Motion.

The Item was Approved and Recommended to the City Council Consent Agenda.

E. ADJOURNMENT

Councilor Smitherman Motioned to Adjourn the Meeting.

Councilor Tate Seconded the Motion.

The Meeting Adjourned.

LICENSE STATUS REPORT FORM

Date: **3/25/21**

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name Alpha Charlie Grill LLC
Business Name Alpha Charlie Grill
Business Address 4900 East Lake Blvd

Type of License & Description

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Inglersock Neighborhood Association met on 8/14/05/2021 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

8 Attendance 0 Oppose 8 Support ___ No Recommendation

Reason for Opposition No Opposition

Applicant: Yes attended NA meeting ___ did not attend NA meeting


President

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

New Application: Retail Beer/Wine (On/Off Premise)

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Alpha Charlie Grill LLC
Mailing Address: 4900 East Lake Blvd
Birmingham, AL 35217
Trade Name: Alpha Charlie Grill
Location Address: 4900 East Lake Blvd
Contact Number: (205) 508-5998 Contact Person: Brian Kemp

New Application Transfer

Type of License

- Lounge Retail Liquor Class I
- Club Liquor Class I (Fraternal)
- Beer Off Premise
- Wine Off Premise
- Restaurant Retail Liquor
- Special Retail Liquor (over 30 days)
- Lounge Retail Liquor Class II (Package Store)
- Club Liquor Class II (Private)
- Beer On & Off Premise
- Wine On & Off Premise
- Special Retail Liquor (7 days or less)
- Special Retail Liquor (under 30 days)
- Division I Dance Permit (customer)
- Division II Dance Permit (entertainers)
- Pool Table Permit (send copy of application)

Kitchen equipped: yes no

Number of table and chairs 12TBS/81CHS

Date Applied: 3/25/21

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

RETAIL BEER-TYPE 040/WINE-TYPE 060 (ON OFF PRE)
(Enter Type of License Applied For)

By: **GS**
(Revenue Official)

1. Name of Applicant (s) Alpha Charlie Grill LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
██████████ ALDL# ██████████ Brian Alan Kemp	Member	██████████ Birmingham AL	1662 Big Mountain Dr Birmingham, AL 35235	6 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 840-323 Page: 1 of 3 Date: 3/14/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Alpha Charlie Grill
- 4(a) Location 4900 East Lake Blvd
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35217 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: 4900 East Lake Blvd Birmingham, AL 35217
- (d) Business Phone _____ Fax: _____ Other Contact: (205)508-5998

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

- 6 (a) Owner of real estate for which license is desired Romeo Whiskey Holdings LLC
1012 Irving Rd Homewood, AL 35209 Address _____
- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? 12TBS/81CHS

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other? _____
- 9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II
(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: 81
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
(Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required Yes No
- (4) Park Board Permission Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 25th day of March, 2021

Brian A. Berger
Signature of Affiant

Wesley Stanley
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

PARCEL ID: 012300084002048000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2019

DATE: Thursday, March 25, 2021 9:37:51 AM

OWNER: ROMEO WHISKEY HOLDINGS LLC

ADDRESS: 1012 IRVING RD

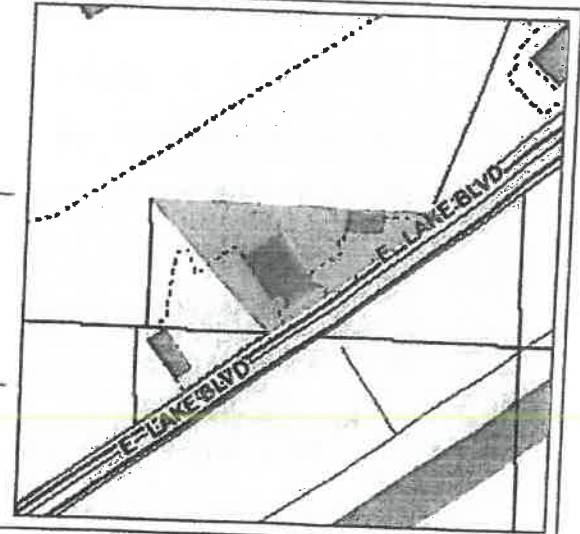
CITY/STATE: HOMEWOOD AL

ZIP+4: 35209

SITE ADDR:

CITY/STATE: , AL

ZIP:



LAND: \$342,800.00

BLDG: \$290,700.00

OTHER: \$0.00

AREA: 49,331.07

ACRES: 1.13

SUBDIVISION INFORMATION:

NAME DOCKERYS AD-BHAM 23-17-1

BLOCK:

LOT: 1

Section: 8-17-2W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Inglenook (502)

Communities: East Birmingham (5)

Council Districts: District - 4 (Councilor: William Parker)

Zoning Outline: QM1

Demolition Quadrants: DEM Quadrant - 3

Impaired Watersheds: Impaired Watershed - Upper Village Creek

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

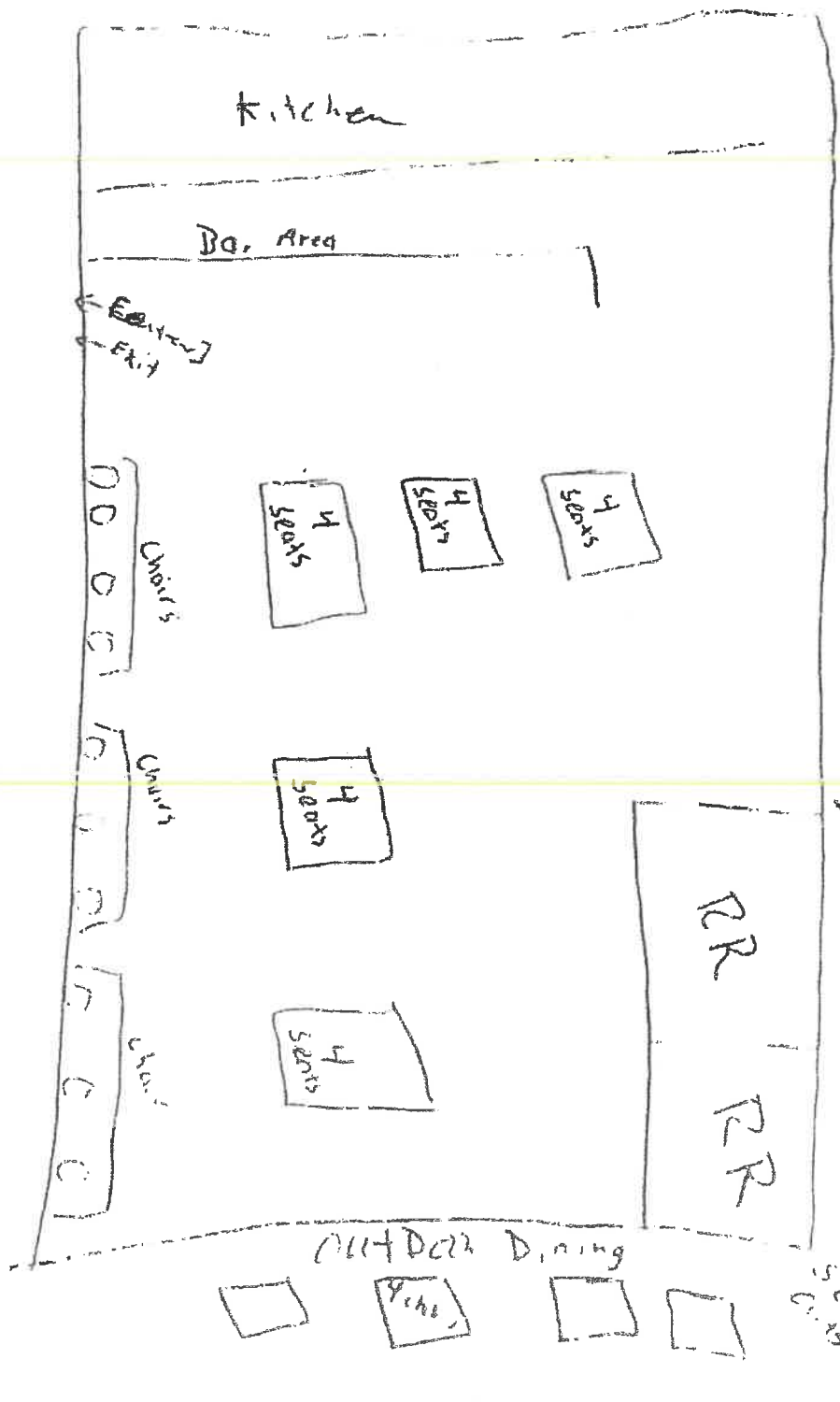
Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.



LICENSE STATUS REPORT FORM

Date: 8/26/21

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name B&W Entertainment, LLC
Business Name Club 84
Business Address 416 4th Ave N

Type of License & Description

- | | |
|--|--|
| <input checked="" type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Smithfield Neighborhood Association met on 11-10-2021 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

26 Attendance 0 Oppose Support No Recommendation

Reason for Opposition _____

Applicant: attended NA meeting did not attend NA meeting

Patricia Davis
President

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

New Application: Lounge Retail Liq – Class I On/Off Prem Type 010

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: B&W Entertainment, LLC
Mailing Address: 2705 Avenue G Ens
Birmingham, AL 35218
Trade Name: Club 84
Location Address: 416 4th Ave N
Contact Number: (205)425-7001 Contact Person:
Vincent Brown Jr

New Application Transfer

Type of License

- | | |
|--|--|
| <input checked="" type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |

Division I Dance Permit (customer) Division II Dance Permit (entertainers)

Pool Table Permit (send copy of application)

Kitchen equipped: yes no

Number of table and chairs 15TBS/60CHS

Date Applied: 8/26/21

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

LOUNGE RETAIL LIQ-CLASS I ON/OFF PREM TYPE 010

By: **GS**

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) B&W Entertainment, LLC

(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)

2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
ALDL# [REDACTED] Cervonta Lazon Barnfield	Member	[REDACTED] Birmingham, AL	2705 Avenue G Ens Birmingham, AL 35218	3 years
ALDL# [REDACTED] Alexander James Williams	Member	[REDACTED] Birmingham, AL	1440 32 nd St Ens Birmingham, AL 35218	10 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 2020131 Page: 1 of 6 Date: 11/16/2020 County: Jefferson
377

Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Club 84

4(a) Location 416 4th Ave N

Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35204 County Jefferson Shelby

(b) Length of time at this location

(c) Mailing Address: **2705 Avenue G Ens Birmingham, AL 35218**

(d) Business Phone _____ Fax: _____ Other Contact: **(205)425-7001**

5. Name, trade name and License number of last or previous licensee:

Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired W&B Ventures, LLC
2705 Avenue G Ens Birmingham, AL 35218

Address

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **15TBS/60CHS**

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:

(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No

(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
(Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

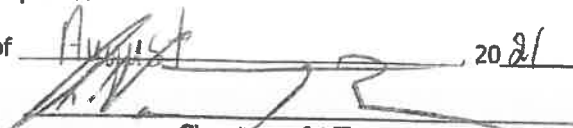
- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

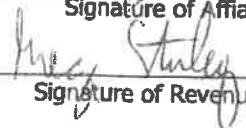
Name	Violation Charged	Name of Court	Date	Disposition of Case
NO-Applicants				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 26th day of August, 2021



 Signature of Affiant



 Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

Company Name B&W Entertainment LLC / Club 84

Address 416 4th Ave N
Birmingham AL 35204

Telephone 205-643-4310 or 205-425-7001

Contact Name Alexander Williams - Manager

Last Revision Date _____

Policy and Organizational Statements

Identify the goals and objectives for the emergency response plan.

Define what your emergency response team is expected to do during an emergency (e.g., evacuate employees and visitors, provide first aid, etc.)

Identify any regulations covered by your plan (e.g., OSHA, fire code, etc.)

Evacuation Plan

Evacuation may be required if there is a fire in the building or other hazard. The evacuation team will direct the evacuation of the building and account for all employees outside at a safe location.

Employees will be warned to evacuate the building using the following system:	alarm system & siren
Employees should assemble at the following location for accounting by the evacuation team:	

(Post a map showing the location(s) in a conspicuous location for all employees to see.)

Person who will bring the employee roster and visitor log to the evacuation assembly area to account for all evacuees. The evacuation team leader will be informed if anyone is missing or injured.	Manager - Alexander Williams
---	------------------------------

Evacuation Team	Name / Location
Evacuation Team Leader	Manager - Alexander Williams
Floor Wardens (one for each floor)	Manager - Alexander Williams
Searchers (one per floor)	Manager - Alexander Williams
Stairwell and Elevator Monitors	Manager - Alexander Williams
Aides for Persons with Disabilities	Hostess - Cervonta Barnfield
Assembly Area Monitors (account for evacuees at the assembly area and inform incident commander if anyone is missing or injured)	Hostess / Manager Cervonta Barnfield Alexander Williams

Severe Weather/Tornado Sheltering Plan

If a tornado warning is issued, broadcast a warning throughout all buildings instructing everyone to move to shelter.

Shelter-In-Place Team Assignments	Name / Location
Team Leader	Alexander Williams
Person to monitor weather sources for updated emergency instructions and broadcast warning if issued by weather services	Cervonta Barnfield
Persons to direct personnel outside to enter the building	Cervonta Barnfield
Persons to direct employees to designated tornado shelter(s)	Cervonta Barnfield

Tornado Warning System & Tornado Shelter Locations

Location of tornado warning system controls	behind bar behind bar
Location of tornado shelters	Bathrooms

Shelter-In-Place Plan

If warned to "shelter-in-place" from an outside airborne hazard, a warning should be broadcast and all employees should move to shelter.

Shelter-In-Place Team Assignments	Name / Location
Team Leader	Cervonta Barnfield
Direct personnel outside to enter the building; then close exterior doors	Alexander Williams
Shutdown ventilation system and close air intakes	Alexander Williams
Move employees to interior spaces above the first floor (if possible)	Cervonta Barnfield
Person to monitor news sources for updated emergency instructions	Cervonta Barnfield
Assembly Area Monitors (to account for evacuees at the assembly area)	Barnfield & Williams

Shelter-In-Place Shutdown of Ventilation System

Location of controls to shutdown ventilation system:	behind bar
Location of air handling units, fan rooms, or air intakes:	behind bar

Lockdown Plan

Persons trained to use the warning system to warn persons to "lockdown"

Name	Location
Alexander Williams	
Cervonta Barnfield	

Instructions for Broadcasting Warnings

Where to Access the Warning System
(e.g., telephone, public address system, etc.)

Instructions for using the system

Medical Emergency Plan

If a medical emergency is reported, dial 9-1-1 and request an ambulance. Provide the following information:

- Number and location of victim(s)
- Nature of injury or illness
- Hazards involved
- Nearest entrance (emergency access point)

Alert trained employees (members of the medical response team) to respond to the victim's location and bring a first aid kit or AED.

Personnel Trained to Administer First Aid, CPR, or use Automated External Defibrillator (AED)

Name	Location / Telephone

Locations of First Aid Kits and Automated External Defibrillator(s)

Locations of First Aid Kits and "Universal Precautions" kit (used to prevent exposure to body fluids)	
Locations of Automated External Defibrillator(s) (AEDs)	

Procedures

- Only trained responders should provide first aid assistance.
- Do not move the victim unless the victim's location is unsafe.
- Control access to the scene.
- Take "universal precautions" to prevent contact with body fluids and exposure to bloodborne pathogens.
- Meet the ambulance at the nearest entrance or emergency access point; direct them to victim(s).

Fire Emergency Plan

If a fire is reported, pull the fire alarm, (if available and not already activated) to warn occupants to evacuate. Then Dial 911 to alert Fire Department. Provide the following information:

- Business name and street address
- Nature of fire
- Fire location (building and floor or)
- Type of fire alarm (detector, pull station, sprinkler waterflow)
- Location of fire alarm (building and floor)
- Name of person reporting fire
- Telephone number for return call

Evacuation team to direct evacuation of employees and visitors.

Procedures

- Evacuate building occupants along evacuation routes to primary assembly areas outside.
- Redirect building occupants to stairs and exits away from the fire.
- Prohibit use of elevators.
- Evacuation team to account for all employees and visitors at the assembly area.
- Meet Fire Department Incident Commander (IC). Inform the IC if everyone has been accounted for and if there are any injuries. Provide an update on the nature of the emergency and actions taken. Provide building floor plans, keys and other assistance as requested.
- Assign personnel to verify that fire protection systems are operating normally and to operate building utility and protection systems as directed by the fire department.

Property Conservation

Identify preparations before a forecast event such as severe weather.

Identify how you will assess damage; salvage undamaged goods; and cleanup the building following an incident.

Identify the contractors, equipment, and materials that would be needed. Update the resource table at the end of this plan.

Annexes

Hazard or Threat-specific

Instructions: Review the following list of hazards and identify those hazards that are foreseeable. Review the links to information provided within the Ready Business website to develop specific emergency procedures.

Natural hazards (geological, meteorological, and biological)

Geological hazards

- Earthquake
- Tsunami
- Volcano
- Landslide, mudslide, subsidence

Meteorological Hazards

- Flood, flash flood, tidal surge
- Water control structure/dam/levee failure
- Drought
- Snow, ice, hail, sleet, arctic freeze
- Windstorm, tropical cyclone, hurricane, tornado, dust storm
- Extreme temperatures (heat, cold)
- Lightning strikes (Wildland fire following)

Biological hazards

- Foodborne illnesses
- Pandemic/Infectious/communicable disease (Avian flu, H1N1, etc.)

Technology caused event

- Utility interruption or failure (telecommunications, electrical power, water, gas, steam, HVAC, pollution control system, sewerage system, other critical infrastructure)

Human-caused events (accidental and intentional)

Accidental

- Hazardous material spill or release
- Nuclear Power Plant Incident (if located in proximity to a Nuclear power plant)
- Explosion/Fire
- Transportation accident
- Building/structure collapse
- Entrapment and or rescue (machinery, confined space, high angle, water)
- Transportation Incidents (Motor Vehicle, Railroad, Watercraft, Aircraft, Pipeline)

Intentional

- Robbery
- Lost Person, Child Abduction, Kidnap, Extortion, Hostage Incident, Workplace violence
- Demonstrations, Civil disturbance
- Bomb threat, Suspicious package
- Terrorism

Appendices

Emergency Response Teams

Identify the members of emergency response teams not identified elsewhere.

- Facilities or building management staff familiar with building utility and protection systems and those who may assist with property conservation activities.
- Security
- Others trained to use fire extinguishers, clean up small spills of hazardous materials.

Team	Member Name	Location	Work Telephone	Home/Cell Telephone
	Alexander Williams		205-643-4310	
	Cervonta Barnfield		205-216-6971	

Public Emergency Services & Contractors

Emergency Service	Name	Emergency Telephone	Business Telephone
Fire Department	Fire Station 21	911	
Emergency Medical Services	W	911	
Police Department	West Precinct	911	205-254-2682
Emergency Management Agency	Jefferson Co	911	205-254-2039
Hospital	VAB	911	205-934-3411
Public Health Department	Jefferson Co	911	205-933-9110
State Environmental Authority	SWS Env. Serv.		205-833-3407
National Response Center (EPA)			
Electrician	Dr. Electric		205-208-7479
Plumber	Standard Plumb		205-386-4001
Fire Protection Contractor	Central Fire Prot		205-315-9767
Elevator Service	NA		
Hazardous Materials Cleanup	Crystal Clean		877-938-7948
Cleanup / Disaster Restoration	Prime		205-422-2916

Warning, Notification & Communications Systems

The following systems are used to warn employees to take protective action (e.g., evacuate, move to tornado shelter, shelter-in-place, or lockdown) and provide them with information. The Communications capabilities enable members of our emergency team to communicate with each other and others.

	System	Location/Control Panel or Access Point
Warning System	Fire Alarm	fire alarm / behind bar
	Public Address	
	Other (describe)	
Notification System	Electronic	loud speaker / behind bar
	Telephone call tree	telephone / behind bar
Communications Capabilities	Telephone	telephone / behind bar
	Two-way radio	

Fire Protection Systems

Document the fire protection systems including the types of systems, location, area, or hazard protected, and instructions.

System Type	Location	Access Point / Instructions
Sprinkler System	Control Valve	Kitchen / behind bar
	Control Valve	
	Control Valve	
Fire Pump		
Special Extinguishing Systems	Computer Room	behind bar
	Kitchen	Kitchen
	Manufacturing Area	

Revision History

Revision No.	Date	Description of Changes	Authorization

Plan Distribution & Access

The Plan will be distributed to members of the emergency response team and department heads. A master copy of the document should be maintained by the emergency response team leader. The plan will be available for review by all employees.

Provide print copies of this plan within the room designated as the emergency operations center (EOC). Multiple copies should be stored within the facility EOC to ensure that team members can quickly review roles, responsibilities, tasks, and reference information when the team is activated.

An electronic copy of this Plan should be stored on a secure and accessible website that would allow team member access if company servers are down.

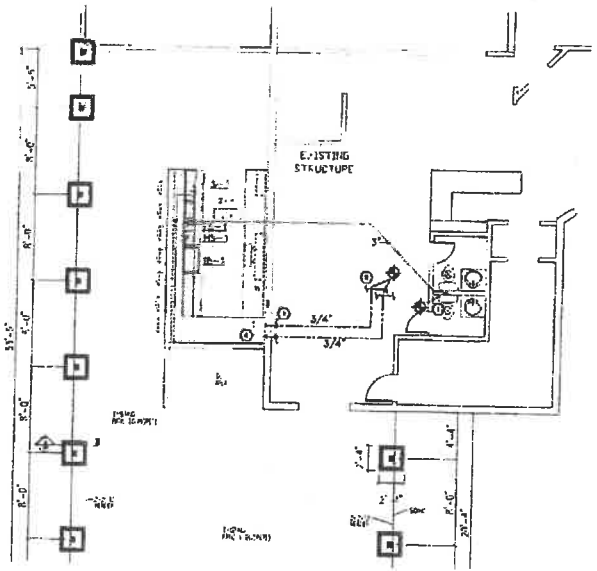
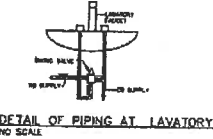
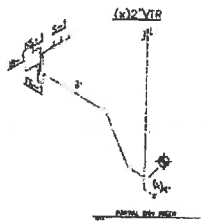
Electronic copies should also be stored on a secured USB flash drive for printing on demand.

SYMBOL	TYPE	DESCRIPTION	RELATIVE HEIGHT	PIPE	SIZE	VAL.	CL.	REMARKS
W-1	WC	W.C.	---	1-1/2"	BRASS	1/2"	1/2"	CONNECTIONS ARE NOT SHOWN SEE S-1
S-1	SP	S.P.	---	1-1/2"	BRASS	1/2"	1/2"	SHOWN SEE S-1

SYMBOL	DESCRIPTION	SPECIFICATION	REMARKS
S-1	W.C. VALVE	BRASS	SEE S-1
S-2	W.C. VALVE	BRASS	SEE S-1
S-3	W.C. VALVE	BRASS	SEE S-1

SYMBOL	DESCRIPTION
(Symbol)	WATER SERVICE TO ALL
(Symbol)	W.C. VALVE
(Symbol)	W.C. VALVE
(Symbol)	W.C. VALVE
(Symbol)	W.C. VALVE
(Symbol)	W.C. VALVE
(Symbol)	W.C. VALVE
(Symbol)	W.C. VALVE
(Symbol)	W.C. VALVE
(Symbol)	W.C. VALVE

- PLUMBING NOTES**
- CONTRACTOR TO VERIFY LOCATION, SIZE AND ELEVATION OF ALL EXISTING SERVICES PRIOR TO INSTALLING ANY NEW PIPE.
 - ALL INTERIOR WALL CLEANOUTS INSTALLED IN WALL SHALL HAVE CHRONIC PLATED COVERS FLUSH WITH WALL.
 - WHEREVER DISJUNCTURE PIPES CONNECT, A DIELECTRIC UNION SHALL BE INSTALLED.
 - ALL HORIZONTAL WATER AND WASTE PIPING IS RUN ABOVE CEILING ON PLUMB SHOWN UNLESS NOTED OTHERWISE.
 - ALL HORIZONTAL WASTE PIPING IS RUN BELOW FLOOR ON PLUMB SHOWN UNLESS NOTED OTHERWISE.
 - COORDINATE PIPE ROUTING TO AVOID CONTACTS WITH ALL STRUCTURAL, MECHANICAL, AND ELECTRICAL FEATURES OF BUILDING.
 - WHERE PIPING PASSES THROUGH OR IS REMOVED FROM A FIRE/SMOKE BARRIER THE BARRIER SHALL BE SEALED/PATCHED TO MAINTAIN ITS INTEGRITY.
 - DRAWINGS ARE DIAGNOSTIC AND DO NOT SHOW ALL DETAILS OF THE WORK. OBTAIN DETAILS AND PERTINENT INFORMATION FROM FIELD MEASUREMENTS.



- REFERENCE NOTES:**
- SEE S-1 TO EXISTING SERVICE
 - SEE S-2 TO EXISTING HOT AND COLD WATER
 - PROVIDE BRASS/STAINLESS VALVES
 - ROUTE HOT WATER AND COLD WATER ALONG BALL UNDER BAY

Zimmerman Engineering, LLC
 P.O. Box 3198
 Prichard, Alabama 36073
 (205) 843-7107

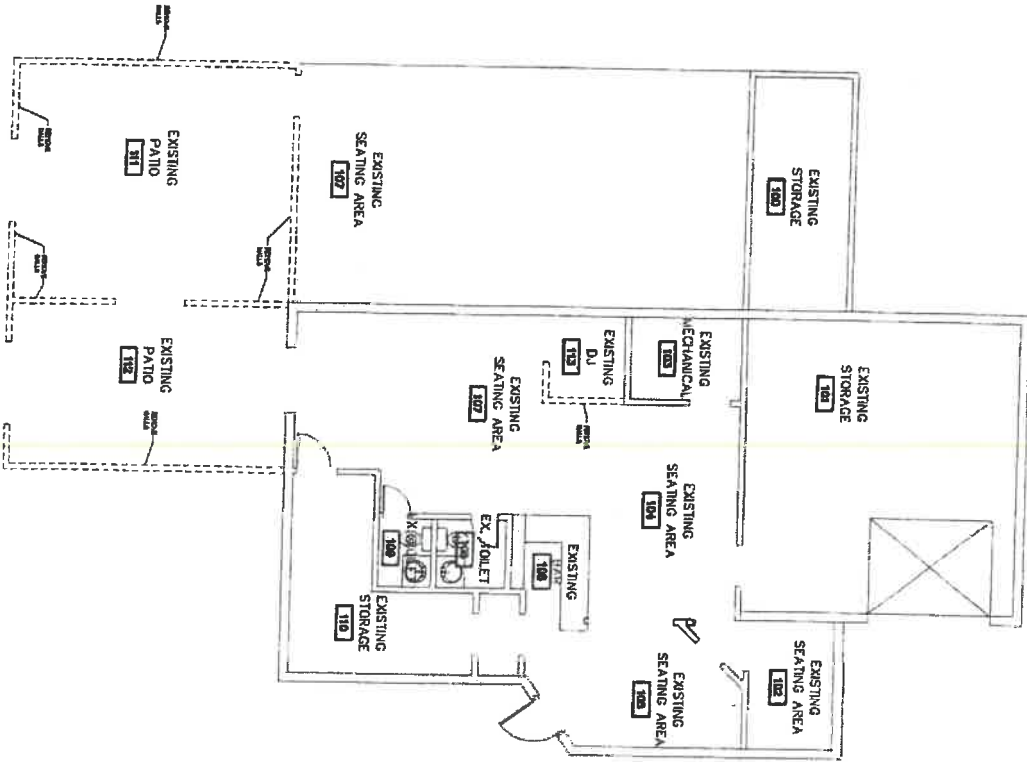
RENOVATIONS FOR
CLUB B4
 416 7TH AVENUE NORTH
 BIRMINGHAM, ALABAMA 35212

W. C. WATKINS, INC.
 PROFESSIONAL ENGINEERS

PROJECT NO. 2019-01
 SHEET NO. P-1

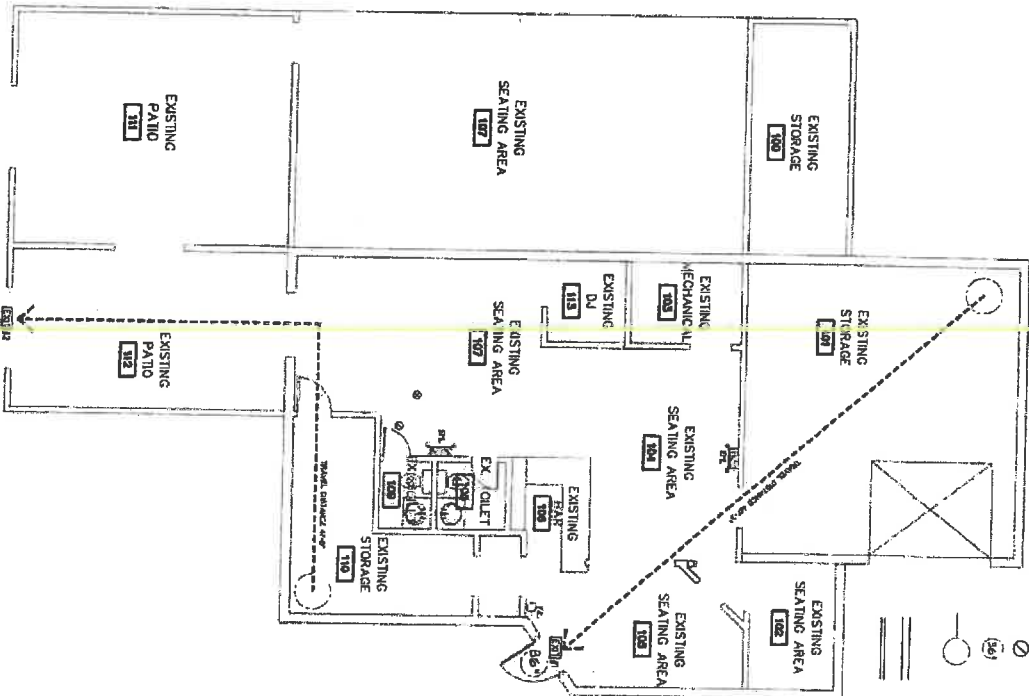
DEMO PLAN

SCALE: 1/4"=1'-0"



LIFE SAFETY PLAN

SCALE: 1/4"=1'-0"



LIFE SAFETY LEGEND:

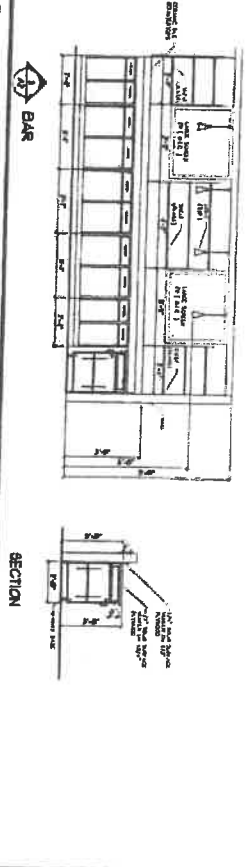
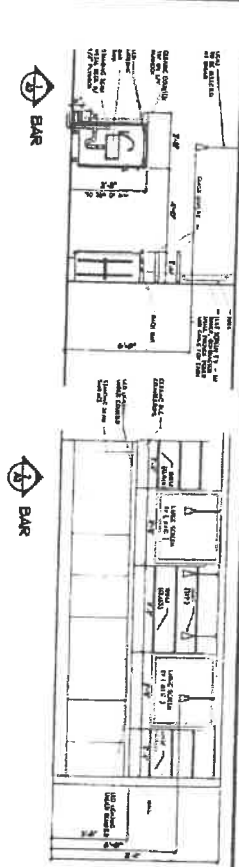
- FE FINE EXTINGUISHER
- EL EXIT LIGHT
- EML EMERGENCY LIGHT
- SA SMOKE ALARM
- CDM CARBON MONOXIDE DETECTOR
- EW EXIT WIDTH
- ATD ACTUAL TRAVEL DISTANCE
- FTD 50% FREE TRAVEL DISTANCE TO EXIT
- WALL BLOCK
- WALL BLOCK

DATE: 10/11/07
 DRAWN AND LIT: [Signature]
 CHECKED: [Signature]
 PROJECT: [Signature]
 SHEET: A1

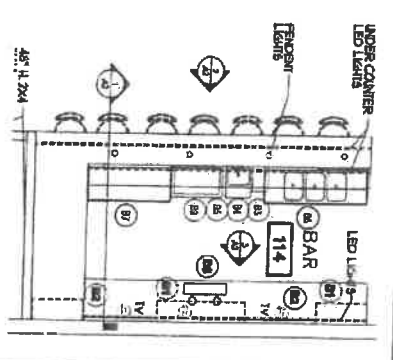
WILIE COLLIVER ARCHITECT, INC.
 ARCHITECTURE AND INTERIOR DESIGN
 BIRMINGHAM, ALABAMA



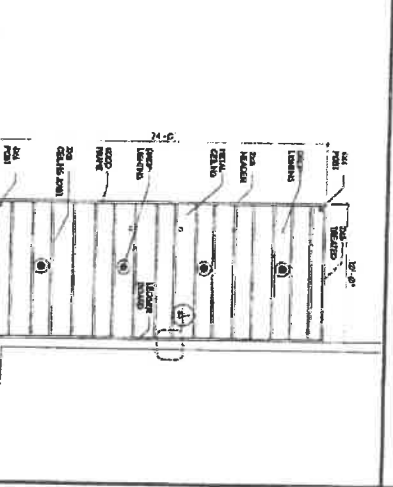
PROJECT: RENOVATIONS FOR **CLUB 84**
 416 4TH AVENUE NORTH
 BIRMINGHAM, ALABAMA 35212



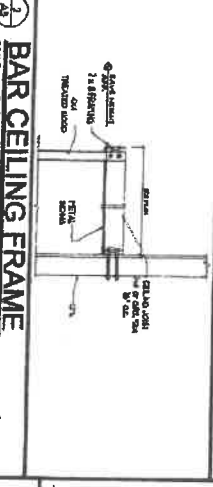
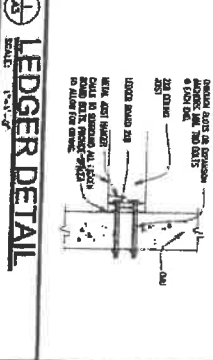
BAR SECTION & ELEVATIONS
SCALE: 1/8"=1'-0"



LARGE SCALE PLAN BAR
SCALE: 3/8"=1'-0"



BAR REFLECTED CEILING PLAN
SCALE: 1"=1'-0"



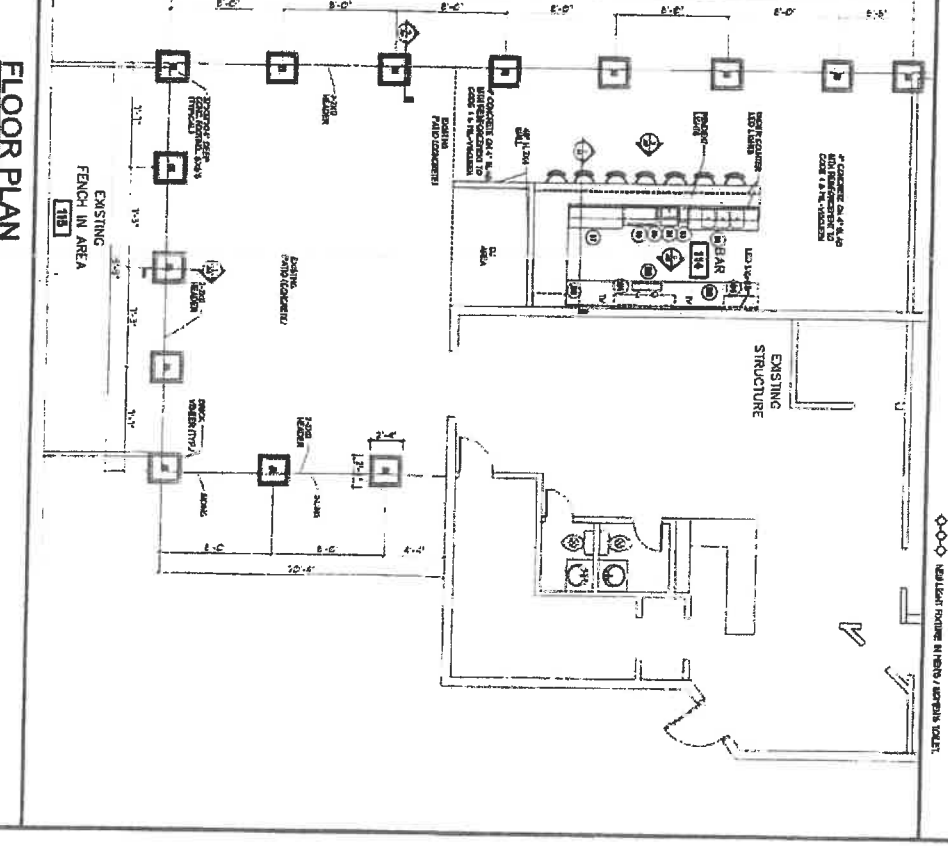
LEDGER DETAIL
SCALE: 1"=1'-0"

BAR CEILING FRAME
SCALE: 1"=1'-0"

EQUIPMENT SCHEDULE			
S/N	DESCRIPTION	W. D. H.	COMMENTS
B1	SHelf		
B2	TV		
B3	TOWER DISPENSER		
B4	HAND SINK		
B5	SOAP DISPENSER		
B6	UNDER COUNTER SINK		
B7	UNDER COUNTER COOLERS		
B8	CASH REGISTER		
B9	ICE BIN		

ELECTRICAL NOTES:

- ALL CONDUIT AND PIPING SHALL BE INSTALLED IN ACCORDANCE WITH THE NATIONAL ELECTRICAL CODE (NEC) AND THE NATIONAL FIRE PROTECTION ASSOCIATION (NFPA) CODES.
- ALL WIRING SHALL BE IN ACCORDANCE WITH THE NATIONAL ELECTRICAL CODE (NEC) AND THE NATIONAL FIRE PROTECTION ASSOCIATION (NFPA) CODES.
- ALL ELECTRICAL WORK SHALL BE DONE BY A LICENSED ELECTRICIAN.
- ALL ELECTRICAL WORK SHALL BE DONE IN ACCORDANCE WITH THE NATIONAL ELECTRICAL CODE (NEC) AND THE NATIONAL FIRE PROTECTION ASSOCIATION (NFPA) CODES.



FLOOR PLAN
SCALE: 1/8"=1'-0"

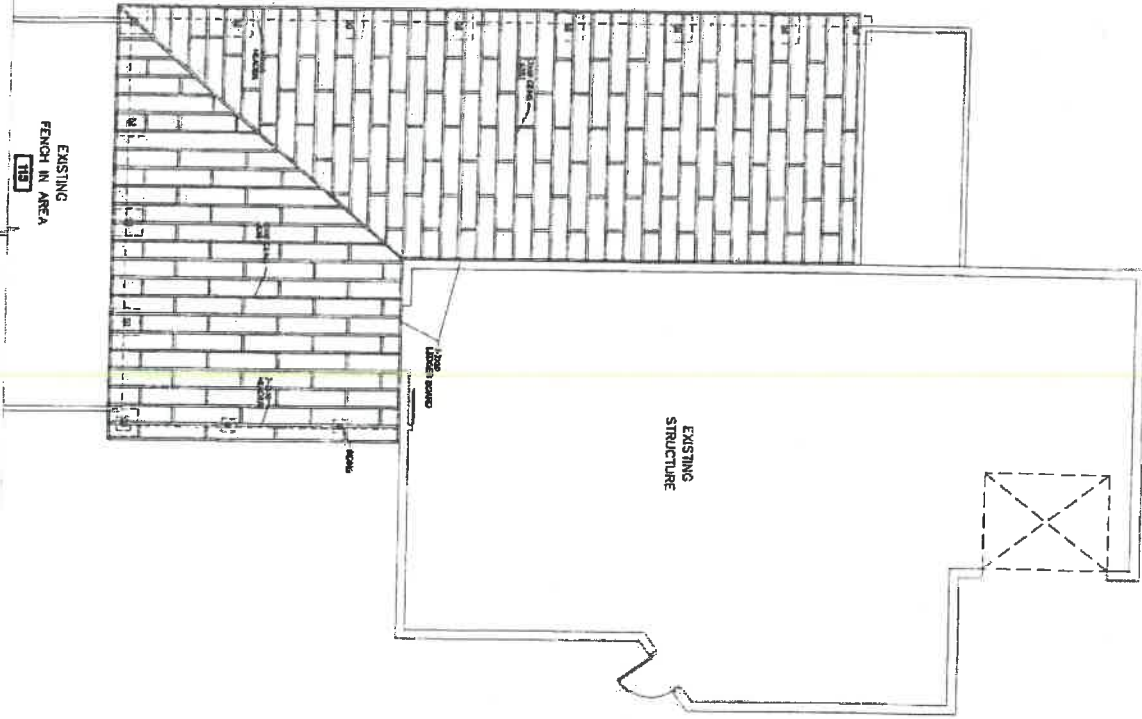
PROJECT:
RENOVATIONS FOR CLUB 84
 416 4TH AVENUE NORTH
 BIRMINGHAM, ALABAMA 35212



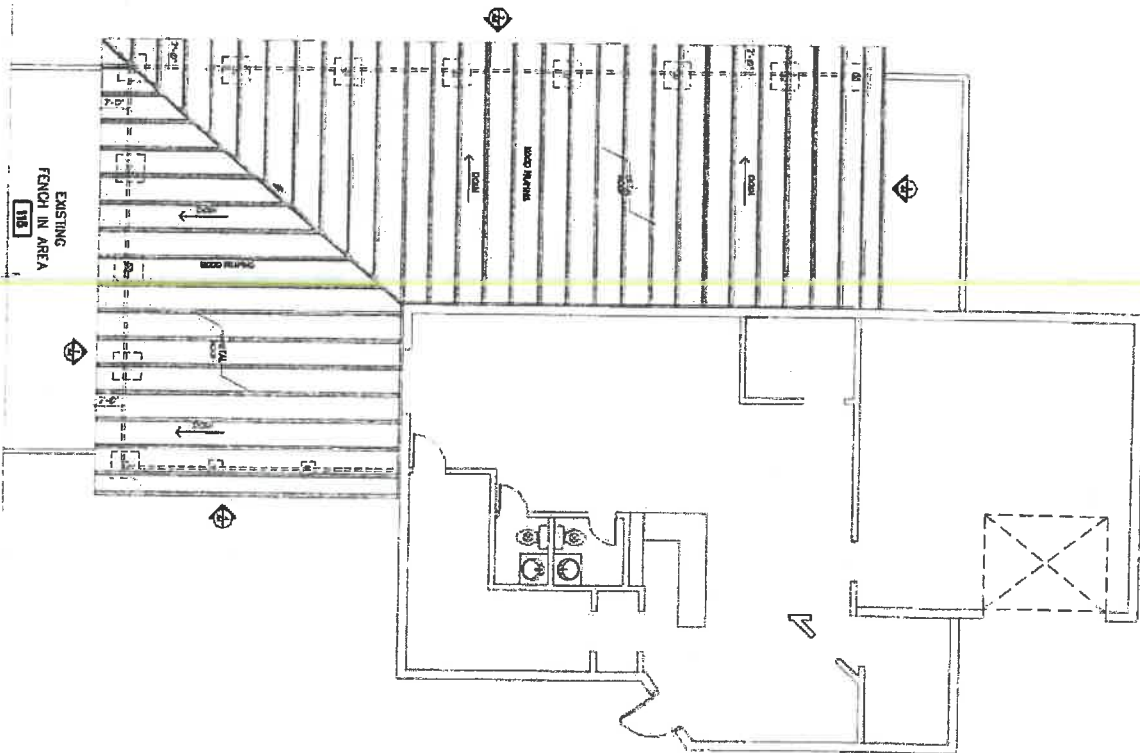
WILLIE C. HOLLIVER ARCHITECT, INC.
 ARCHITECTURE AND INTERIOR DESIGN

PROJECT: RENOVATIONS FOR CLUB 84
 SHEET: 4 OF 4
 DATE: 12-23-2011
 DRAWN BY: J. H. HOLLIVER
 CHECKED BY: W. C. HOLLIVER
A2

EXISTING
FENCE IN AREA
[119]
FRAMING PLAN
SCALE 1/8"=1'-0"



EXISTING
FENCE IN AREA
[118]
ROOF PLAN
SCALE 1/8"=1'-0"



PRODUCED BY AN AUTODESK EDUCATIONAL PRODUCT

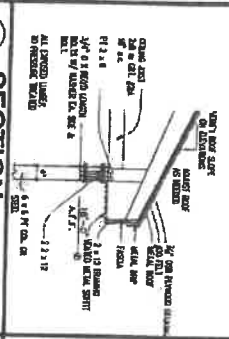
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	PROJECT: CLUB 84	NO. 4017

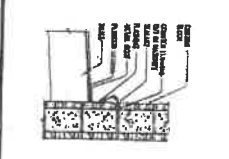
WILHELM C. OLIVER ARCHITECTS INC.
ARCHITECTURE AND INTERIOR DESIGN
BIRMINGHAM, ALABAMA



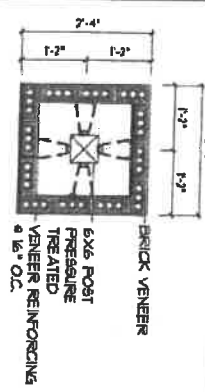
RENOVATIONS FOR **CLUB 84**
416 4TH AVENUE NORTH
BIRMINGHAM, ALABAMA 35212



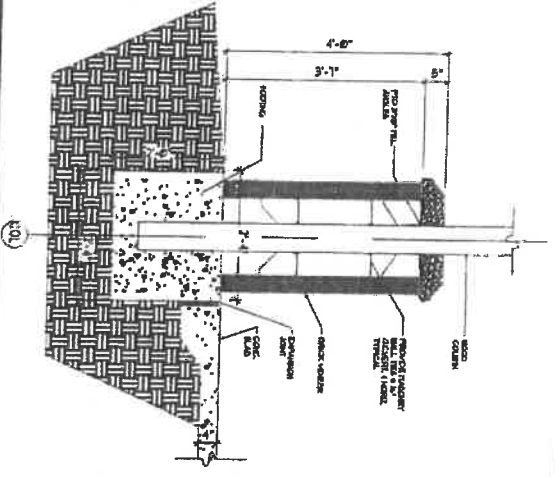
SECTION 5A
1/2" = 1'-0"



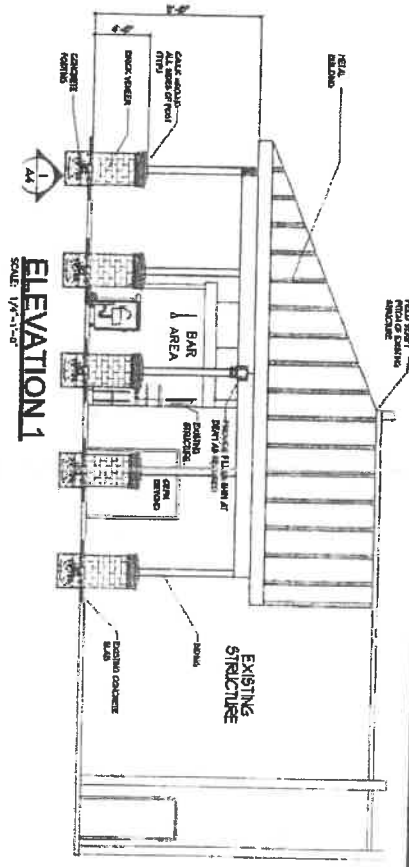
SECTION 6A
1/2" = 1'-0"



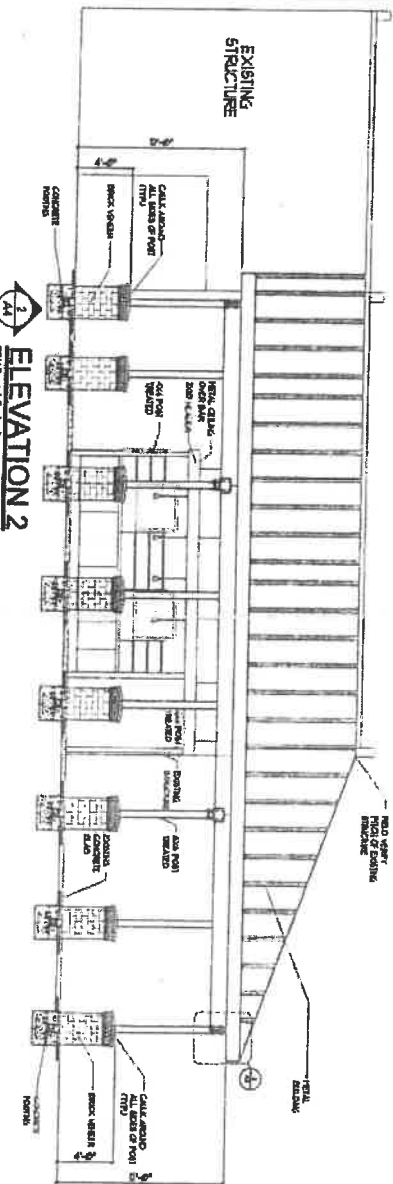
SECTION 7A
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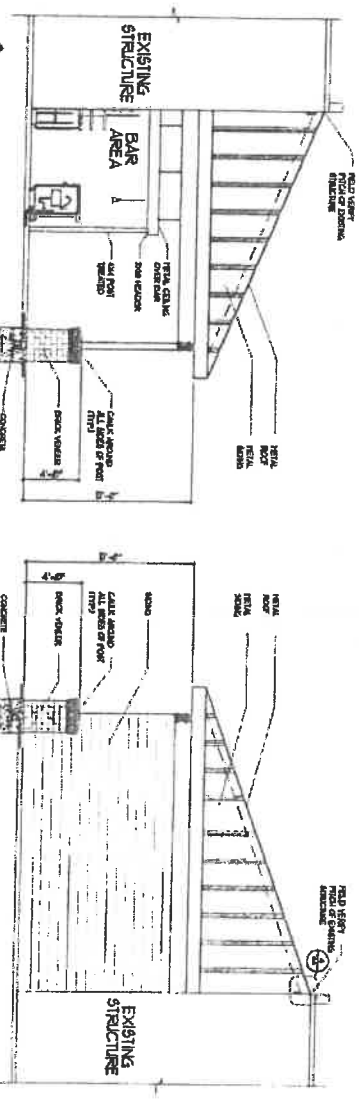
SECTION 8A
1/2" = 1'-0"



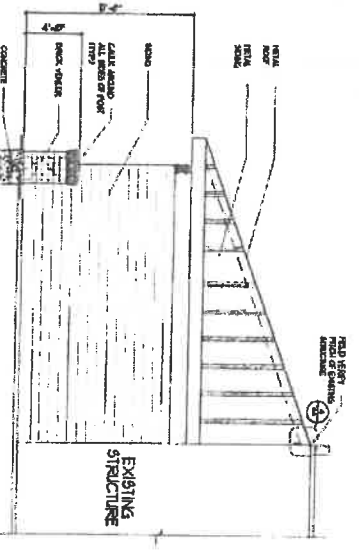
ELEVATION 1
SCALE: 1/8" = 1'-0"



ELEVATION 2
SCALE: 1/8" = 1'-0"



ELEVATION 3
SCALE: 1/8" = 1'-0"



ELEVATION 4
SCALE: 1/8" = 1'-0"

PROJECT:

RENOVATIONS FOR **CLUB 84**
416 4TH AVENUE NORTH
BIRMINGHAM, ALABAMA 35212



VALERIE C. OLIVER ARCHITECT, INC.
ARCHITECTURE AND INTERIOR DESIGN
BIRMINGHAM, ALABAMA

A4

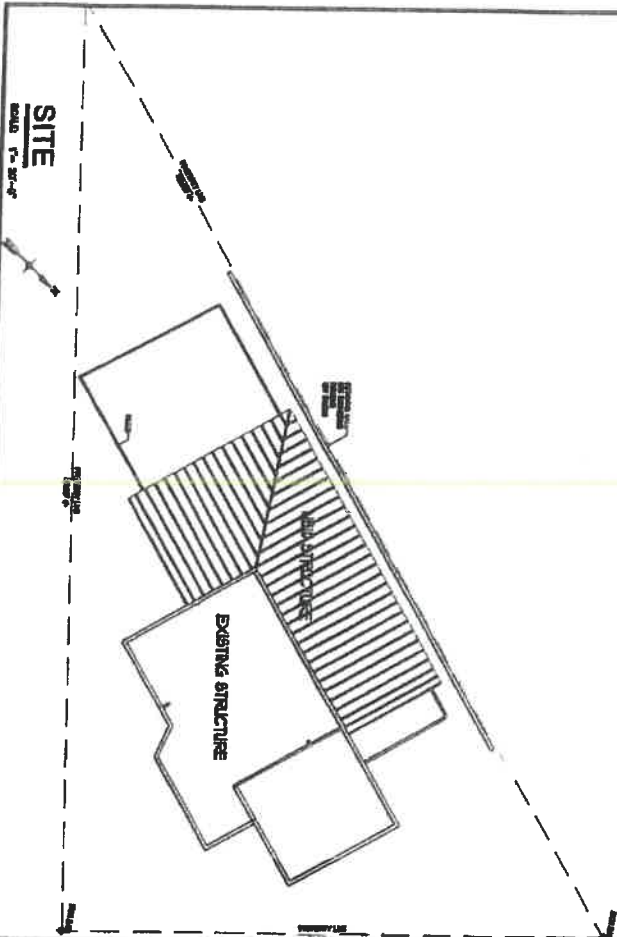
DATE: 08-21-00
PROJECT: CLUB 84 RENOVATIONS & DETAILS

RENOVATIONS
CLUB 84
 416 4TH AVENUE NORTH
 BIRMINGHAM, ALABAMA 35204

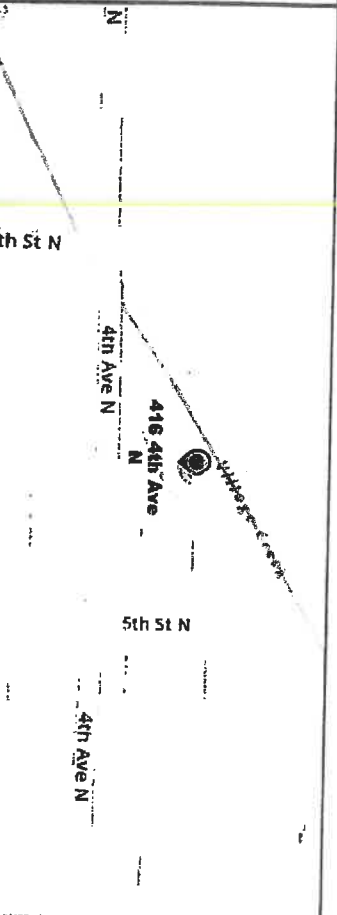
DRAWING INDEX

ARCHITECTURAL

- C COVER SHEET
 - A1 REAR & LIFE SAFETY PLAN
 - A2 FLOOR PLAN & ELEVATIONS
 - A3 FINISHING AND ROOF PLAN
 - A4 ELEVATIONS & SECTIONS
 - A5 DETAILS
 - P1 PLUMBING
- DATE: JUNE 21, 2021



LOCATION MAP



1. PARCEL ID #

2010-00-00-000-000-0000

REQUIRED FIRE RATINGS FOR WALLS AND OPENINGS

WALL TYPE	MIN. RATING	MAX. RATING
WALL	1 1/2 HRS	2 HRS
WALL	1 1/2 HRS	2 HRS
WALL	1 1/2 HRS	2 HRS

2. CODE REVIEW DATA

2010-00-00-000-000-0000

3. OCCUPANCY TYPE:

Assembly - 1000

4. CONSTRUCTION TYPE:

III - Type III Construction

5. MIN. MINIMUM OCCUPANT LOAD:

1000

7. MAXIMUM TRAVEL TO EXIT:

150 FT

8. ADJ. USE:

None

10. ADJ. USES:

None

11. ADJ. USES:

None

BUILDING CONSTRUCTION

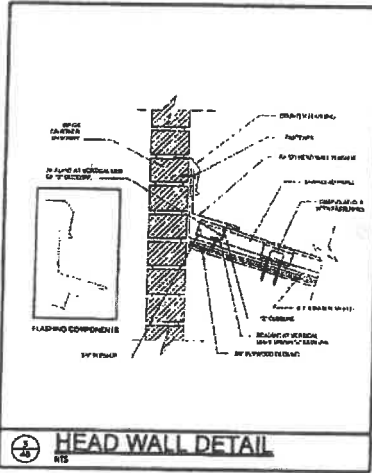
WALL TYPE	MIN. RATING	MAX. RATING
WALL	1 1/2 HRS	2 HRS
WALL	1 1/2 HRS	2 HRS
WALL	1 1/2 HRS	2 HRS

EGRESS CAPACITY TABULATION

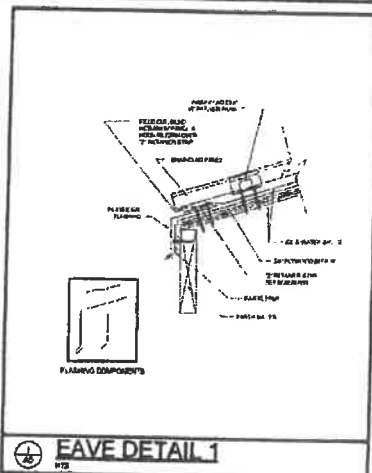
COMPONENT	SIZE	CAPACITY	ADJ. USES	ADJ. USES	ADJ. USES
ADJ. USES	11th St N	50	ADJ. USES	ADJ. USES	ADJ. USES
ADJ. USES	12th St N	50	ADJ. USES	ADJ. USES	ADJ. USES



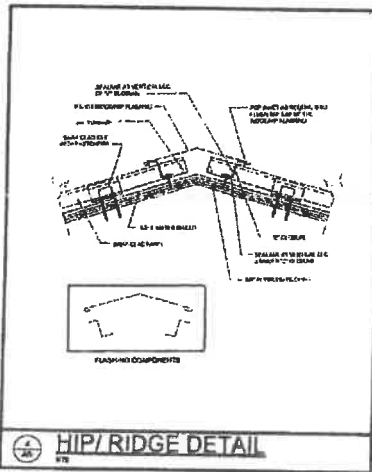
PRODUCED BY AN AIR FORCE EDUCATIONAL PRODUCT



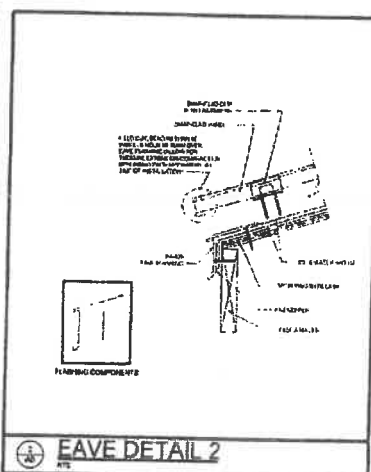
HEAD WALL DETAIL



EAVE DETAIL 1



HIP/RIDGE DETAIL



EAVE DETAIL 2

RENOVATIONS
FOR
CLUB 84
416 4TH AVENUE NORTH
BIRMINGHAM, ALABAMA 35212



Sheet Title:
Details:
Date: 11-11-77
Of pages: 1

A5

1370000c: FROM YOUR HEADQUARTERS BY AIR DELIVERY

PARCEL ID: 012200353036001000

SOURCE: TAX ASSESOR RECORDS **TAX YEAR:** 2019

DATE: Wednesday, August 25, 2021 10:37:34 AM

OWNER: ROSE RUBEN C & GLORIA

ADDRESS: 409 5TH ST N

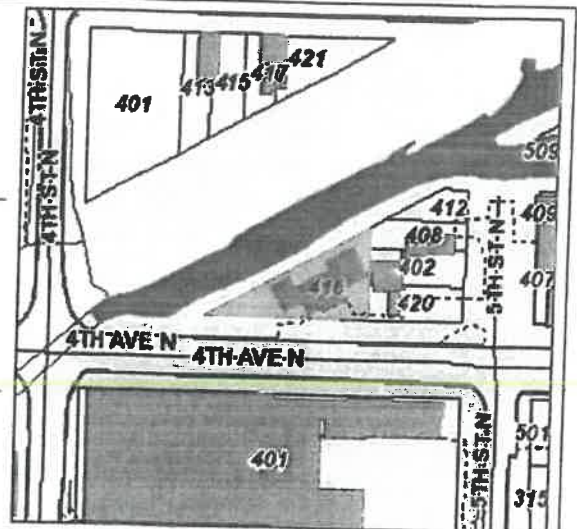
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35204--4420

SITE ADDR: 416 4TH AVE N

CITY/STATE: BHAM, AL

ZIP: 35204



LAND: \$20,900.00

BLDG: \$30,700.00

OTHER: \$0.00

AREA: 8,327.39

ACRES: 0.19

SUBDIVISION INFORMATION:

NAME SMITHFIELD (SOUTH)

BLOCK: 36

LOT: 11&

:

Section: 35-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: In Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Smithfield (1605)

Communities: Smithfield (16)

Council Districts: District - 6 (Councilor: Crystal Smitherman)

Zoning Outline: M1

Demolition Quadrants: DEM Quadrant - 3

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: Not in RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

PLEASE CORRECT ADDRESS FOR THIS CASE.
THANKS.
Sheila

LICENSE STATUS REPORT FORM

Date: 10/18/21

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name Encore Rouge, LLC
Business Name Encore Rouge
Business Address 707 Richard Arrington Jr Blvd S, Ste 102

- Type of License & Description
- Lounge Retail Liquor Class I
 - Club Liquor Class I
 - Beer Off Premise
 - Wine Off Premise
 - Restaurant Retail Liquor
 - Special Retail License (under 30 days)
 - Division I Dance Permit (customers)

- WRONG ADDRESS IS 7TH AVE SOUTH ACROSS FROM ARBY'S PER APPLICANT
- Lounge Retail Liquor Class II (Package Store)
 - Club Liquor Class II (Private)
 - Beer On & Off Premise
 - Wine On & Off Premise
 - Special Retail License (over 30 days)
 - Pool Table Permit
 - Division II Dance Permit

The FIVE POINTS SOUTH Neighborhood Association met on DEC 19, 2021 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

_____ Attendance _____ Oppose Support _____ No Recommendation
VOTED YES

Reason for Opposition NONE

NEIGHBORHOOD THINKS THIS BUILDING IS GOOD LOCATION FOR RESTAURANTS & LIQUOR ASSOCIATED WITH EATING/DINING.

Applicant: attended NA meeting
AND HIS ATTORNEY

_____ did not attend NA meeting

Sheila McChaffin
SHEILA M CHAFFIN
President

CEU 205-914-3286

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

SCANNED IN AND E-MAILED 12/20/21 TO:

INDIA BAILEY INDIA.BAILEY@BIRMINGHAMAL.GOV
GREGORY STANLEY GREGORY.STANLEY@BIRMINGHAMAL.GOV
BRAD Mc GIBONEY BRAD@ALALC.COM (APPLICANT'S ATTORNEY)

New Application: Restaurant Retail Liquor – Type 020

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: **Encore Rouge, LLC**
Mailing Address: **916 23rd St S
Birmingham, AL 35233**
Trade Name: **Encore Rouge**
Location Address: **707 Richard Arrington Jr Blvd S, Ste 102**
Contact Number: **(205)601-9935** Contact Person: **Brad McGiboney**

New Application Transfer

Type of License

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 22TBS/50CHS

Date Applied: 10/18/21

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

RESTAURANT RETAIL LIQUOR-TYPE 020

(Enter Type of License Applied For)

By: **GS**

(Revenue Official)

1. Name of Applicant (s) Encore Rouge, LLC

(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)

2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
ALDL# [REDACTED] Shantale Lanese Wheeler Davis	Member	[REDACTED] Birmingham, AL	104 Overview Dr Sterrett, AL 35147	11 years
ALDL# [REDACTED] Antoinne Davis	Member	[REDACTED] Birmingham, AL	104 Overview Dr Sterrett, AL 35147	11 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 367-690 Page: 1 of 4 Date: 02/09/2017 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Encore Rouge

4(a) Location 707 Richard Arrington Jr Blvd S, Ste 102
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35233 County Jefferson Shelby

(b) Length of time at this location

(c) Mailing Address: 916 23rd St S Birmingham, AL 35205

(d) Business Phone _____ Fax: _____ Other Contact: (205)601-9935

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired Central City Developers LLC
120 18th St S Ste 201 Birmingham, AL 35233 Address

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Multi-Story Bldg

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? 22TBS/50CHS

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:

(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No

(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II
(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
(Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<i>NO - Applicants</i>				

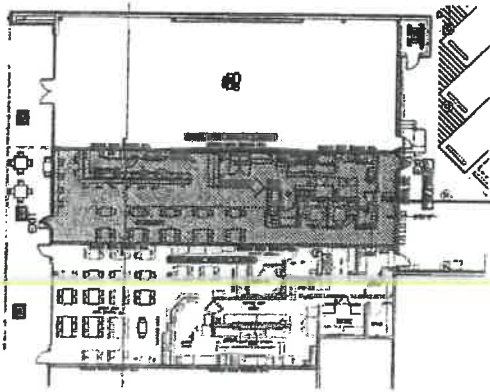
Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 18th day of October, 2021

Belle G. M. S. E.
 Signature of Affiant

[Signature]
 Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.





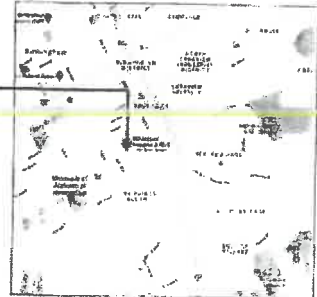

PROJECT LOCATION PLAN
 A1.0 1" = 100'






SITE KEY PLAN
 A1.0 1" = 500'

PROJECT SITE:
ENCORE ROUGE RESTAURANT
AT THE WAITES BUILDING
707 RICHARD ARRINGTON BLVD.
SUITE 102
BIRMINGHAM, AL 35233






NEIGHBORHOOD PLAN
 A1.0 1" = 1 MILE



TENANTS IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
 AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD, SUITE 102
 BIRMINGHAM, AL 35233

CKH
Architects, P.C.
 3333 14th Ave
 Birmingham, Alabama 35202
 205.988.8888
 www.ckharchitects.com

ORIGINAL SCALE DATE
08/13/2021
 CONSTRUCTION SET
 REVISIONS

SHEET NUMBER
A1.0

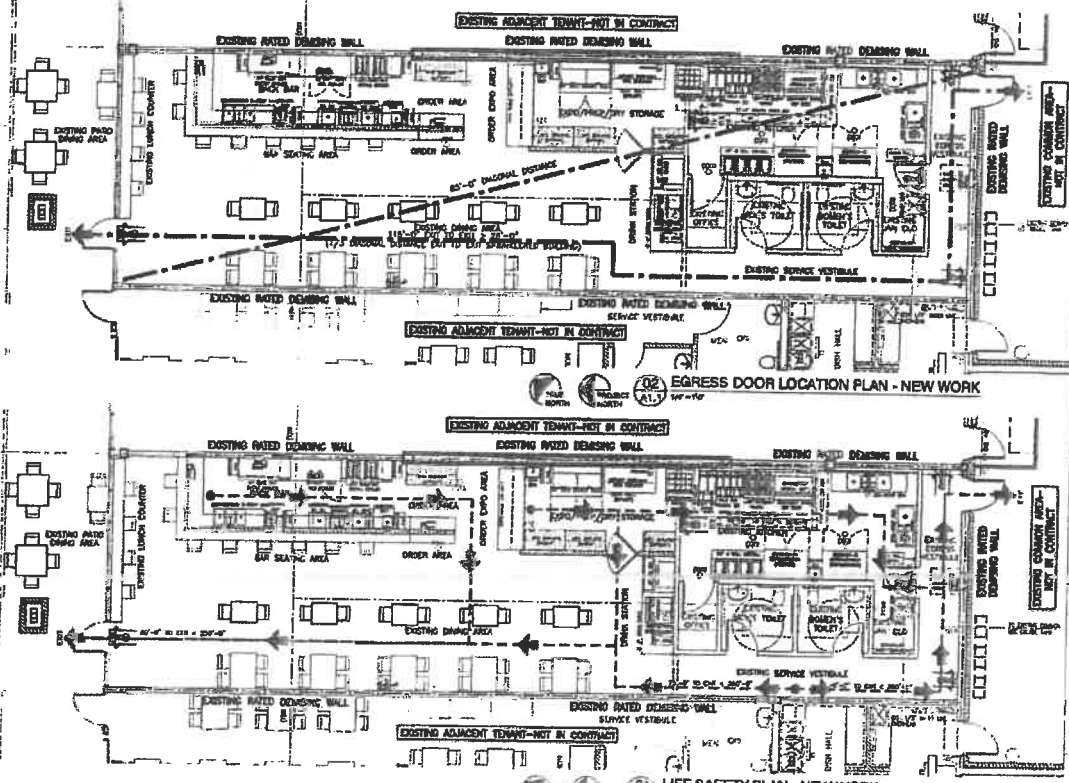


08/13/2021

TELEPHONE IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
 AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD, SUITE 102
 BIRMINGHAM, AL 35233

ENCORE ROUGE RESTAURANT
 AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD
 SUITE 102
 BIRMINGHAM, AL 35233
 (±1,800 RSP)
 (TOTAL RENTABLE AREA)

ENCORE ROUGE RESTAURANT
 AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD
 SUITE 102
 BIRMINGHAM, AL 35233
 (±1,800 RSP)
 (TOTAL RENTABLE AREA)



CKH
 Architects, P.C.
 3300 Highway 204
 Birmingham, Alabama 35242
 (205) 991-1111

ORIGINAL ISSUE DATE
 08/13/2021
 CONSTRUCTION SET
 REVISIONS

SHEET NUMBER
A1.1



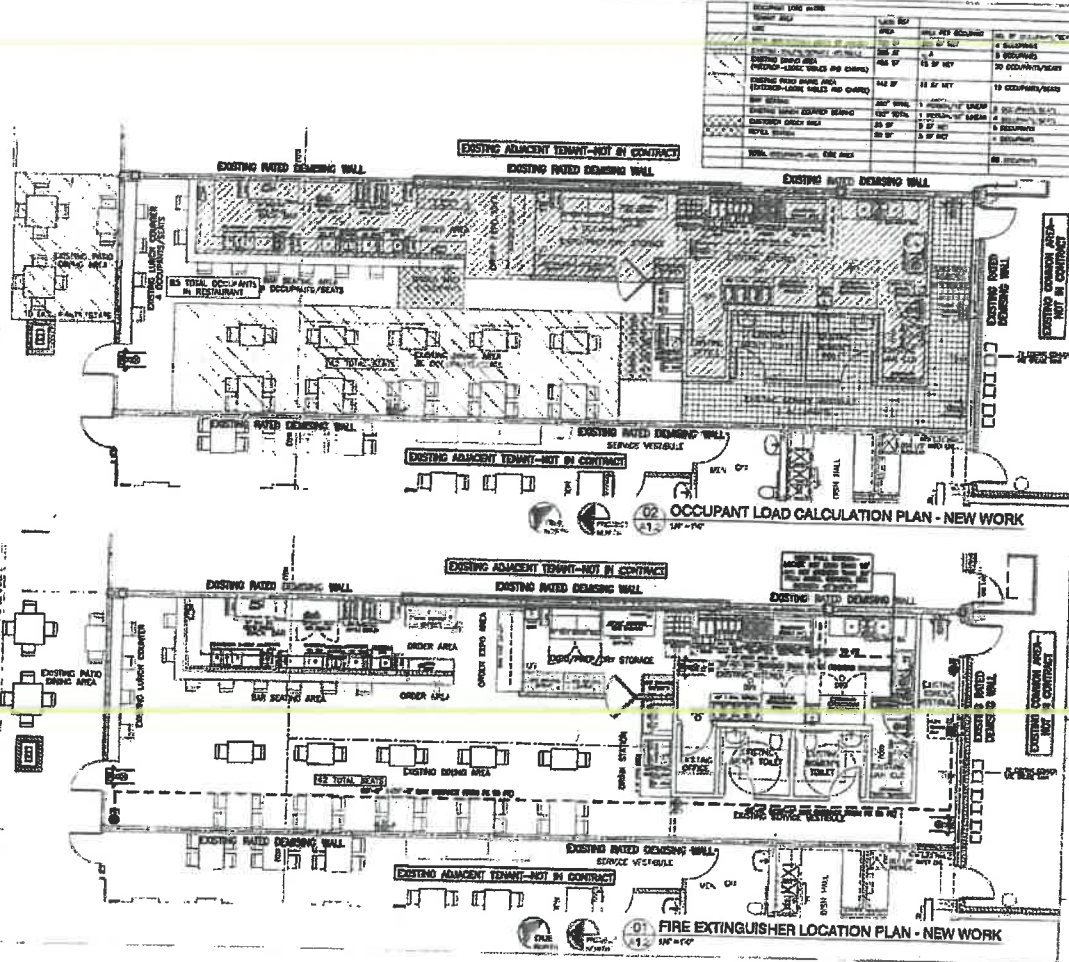
TENANTS IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
 AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD, SUITE 102
 BIRMINGHAM, AL 35233

CKH
 Architects, P.C.
 2000 15th Avenue
 Birmingham, AL 35202
 (205) 988-1100
 www.ckharchitects.com

ORIGINAL ISSUE DATE
 08/13/2021
 CONSTRUCTION ACT
 REVISION

SHEET NUMBER
A1.2

DESCRIPTION	AREA (SQ FT)	NO. OF OCCUPANTS	NO. OF OCCUPANTS/AREA
EXISTING RESTAURANT	148 SF	4	0.027
EXISTING ADJACENT TENANT (NOT IN CONTRACT)	148 SF	30	0.203
EXISTING RESTAURANT	148 SF	19	0.128
NEW RESTAURANT	148 SF	4	0.027
EXISTING ADJACENT TENANT (NOT IN CONTRACT)	148 SF	30	0.203
NEW RESTAURANT	148 SF	19	0.128
TOTAL RESTAURANT AREA	148 SF	4	0.027



ENCORE ROUGE RESTAURANT
 AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD
 SUITE 102
 BIRMINGHAM, AL 35233
 (A1,800 RSF)
 (TOTAL RENTABLE AREA)

ENCORE ROUGE RESTAURANT
 AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD
 SUITE 102
 BIRMINGHAM, AL 35233
 (A1,800 RSF)
 (TOTAL RENTABLE AREA)

02 OCCUPANT LOAD CALCULATION PLAN - NEW WORK
 1/1" = 1/8"

01 FIRE EXTINGUISHER LOCATION PLAN - NEW WORK
 1/1" = 1/8"



CKH
Architects, P.C.
1000 15th Ave
Birmingham, Alabama 35204
205.988.1111
www.ckharchitects.com

TERMINAL IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
AT THE WATERS BUILDING
707 RICHARD ARRINGTON BLVD, SUITE 102
BIRMINGHAM, AL 35203

DEMOLITION GENERAL NOTES

1. DEMOLITION: THE OWNER REPRESENTS AND WARRANTS TO VERIFY IN WRITING ALL EXISTING CONDITIONS PRIOR TO DEMOLITION OF THIS PROJECT. GENERAL DEMOLITION SERVICES ARE DEFINED AS THE REMOVAL OF THE EXISTING STRUCTURE AND ALL CONTENTS THEREOF. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS.

2. DEMOLITION: THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS.

3. DEMOLITION: THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS.

4. DEMOLITION: THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS.

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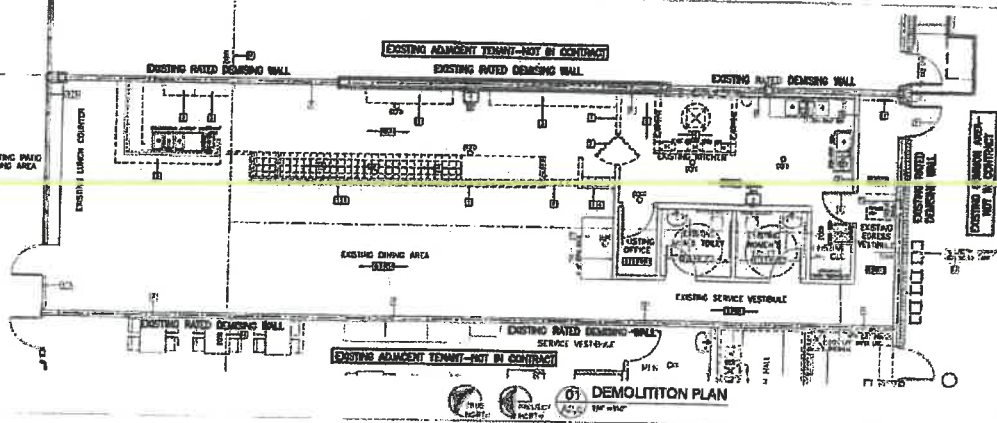
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18. DEMOLITION: THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS.

19. DEMOLITION: THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS.

20. DEMOLITION: THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DEMOLITION OF ALL EXISTING CONDITIONS AND THE DISPOSAL OF ALL DEMOLITION DEBRIS.

ENCORE ROUGE RESTAURANT
AT THE WATERS BUILDING
707 RICHARD ARRINGTON BLVD
SUITE 102
BIRMINGHAM, AL 35203
(41,880 SQ FT)
(TOTAL RENTABLE AREA)



ORIGINAL ISSUE DATE
08/18/2021
CONSTRUCTION SET
REVISIONS

OWNER: [Redacted]

DATE: 08/18/2021

SCALE: 1/8" = 1'-0"

01 DEMOLITION PLAN

02 [Redacted]

03 [Redacted]

04 [Redacted]

05 [Redacted]

06 [Redacted]

07 [Redacted]

08 [Redacted]

09 [Redacted]

10 [Redacted]

11 [Redacted]

12 [Redacted]

13 [Redacted]

14 [Redacted]

15 [Redacted]

16 [Redacted]

17 [Redacted]

18 [Redacted]

19 [Redacted]

20 [Redacted]

A2.0

NEW EQUIPMENT SCHEDULE

NO.	DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL	NOTES
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EXISTING EQUIPMENT SCHEDULE

NO.	DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL	NOTES
1
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TYPICAL WALL LEGEND:

1.0 EXISTING PARTED DEMISING WALL

1.1 EXISTING ADJACENT TENANT - NOT IN CONTRACT

1.2 EXISTING PARTED DEMISING WALL

1.3 EXISTING PARTED DEMISING WALL

1.4 EXISTING PARTED DEMISING WALL

1.5 EXISTING PARTED DEMISING WALL

1.6 EXISTING PARTED DEMISING WALL

1.7 EXISTING PARTED DEMISING WALL

1.8 EXISTING PARTED DEMISING WALL

1.9 EXISTING PARTED DEMISING WALL

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1.33 EXISTING PARTED DEMISING WALL

1.34 EXISTING PARTED DEMISING WALL

1.35 EXISTING PARTED DEMISING WALL

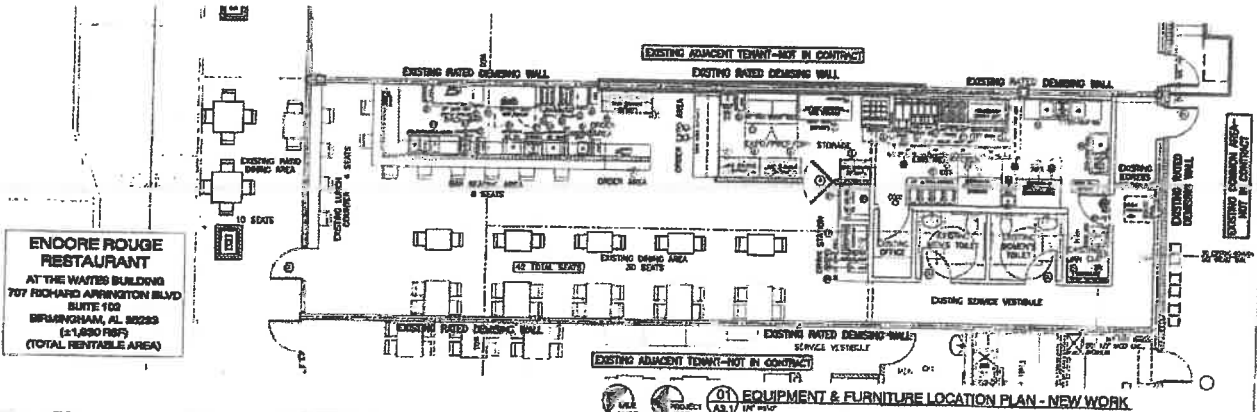
1.36 EXISTING PARTED DEMISING WALL

1.37 EXISTING PARTED DEMISING WALL

1.38 EXISTING PARTED DEMISING WALL

1.39 EXISTING PARTED DEMISING WALL

1.40 EXISTING PARTED DEMISING WALL



08/13/2021

**A NEW ENCORE ROUGE RESTAURANT
AT THE WAITES BUILDING
707 RICHARD ARRINGTON BLVD, SUITE 102
BRIMMINGHAM, AL 35233**

CKH Architects, P.C.
300 10th Ave
Birmingham, Alabama 35202

ORIGINAL ISSUE DATE:
08/13/2021
CONSTRUCTION SET
REVISORS

MEET NUMBER
A3.1



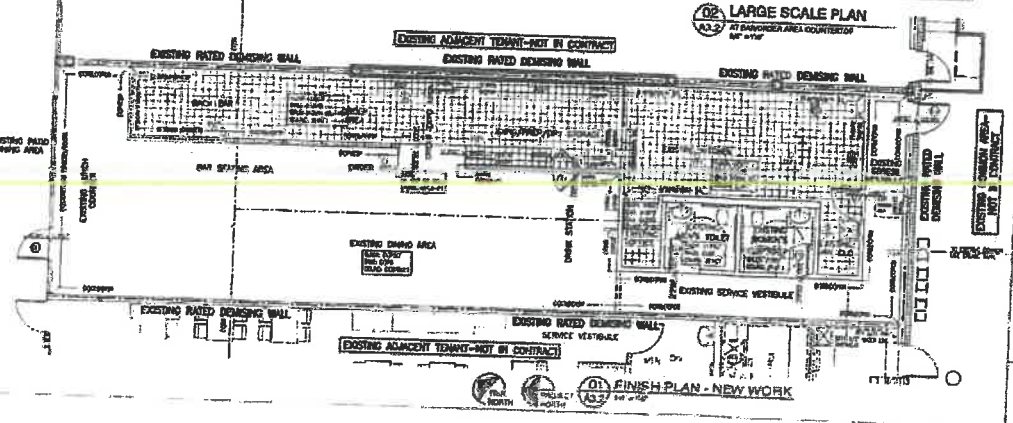
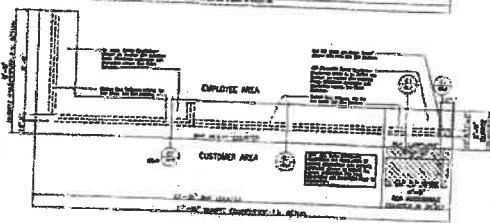
TENANTS IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
 AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD, SUITE 102
 BIRMINGHAM, AL 35233

CKH
 Architects, P.C.
 2000 40th Ave
 Birmingham, Alabama 35242
 Telephone: (205) 993-3333
 Fax: (205) 993-3334
 www.ckharchitects.com

ORIGINAL ISSUE DATE
08/13/2021
 CONSTRUCTION SET
 REVISIONS

SHEET NUMBER
A3.2

PROJECT INFORMATION			
PROJECT NAME	ENCORE ROUGE RESTAURANT	PROJECT NUMBER	ENCORE-2021-001
CLIENT	ENCORE RESTAURANTS	DATE	08/13/2021
LOCATION	707 RICHARD ARRINGTON BLVD, SUITE 102, BIRMINGHAM, AL	SCALE	AS SHOWN
DESIGNER	CKH ARCHITECTS, P.C.	DATE	08/13/2021
PROJECT PHASE	TENANTS IMPROVEMENTS PACKAGE	PROJECT STATUS	UNDER REVIEW
ARCHITECT	CKH ARCHITECTS, P.C.	PROJECT TYPE	RESTAURANT
DATE	08/13/2021	PROJECT VALUE	\$1,500,000 (EST.)
PROJECT DESCRIPTION	RENOVATION OF EXISTING RESTAURANT SPACE TO ACCOMMODATE A NEW ENCORE ROUGE RESTAURANT. WORK INCLUDES DEMOLITION, STRUCTURAL, MECHANICAL, ELECTRICAL, AND INTERIOR FINISHES.		



ENCORE ROUGE RESTAURANT
 AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD
 SUITE 102
 BIRMINGHAM, AL 35233
 (±1,500 RSF)
 (TOTAL RENTABLE AREA)

01 FINISH PLAN - NEW WORK
 A3.2



TECHNICAL IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD., SUITE 102
 BIRMINGHAM, AL 35233

CKH
Architects, P.C.
 3200 14th Ave
 Birmingham, Alabama 35243
 205.975.1100
 www.ckh.com

ORIGINAL DATE DATE
 08/13/2021
 CONSTRUCTION SET
 10/20/2021

SHEET NO. 4
A4.0

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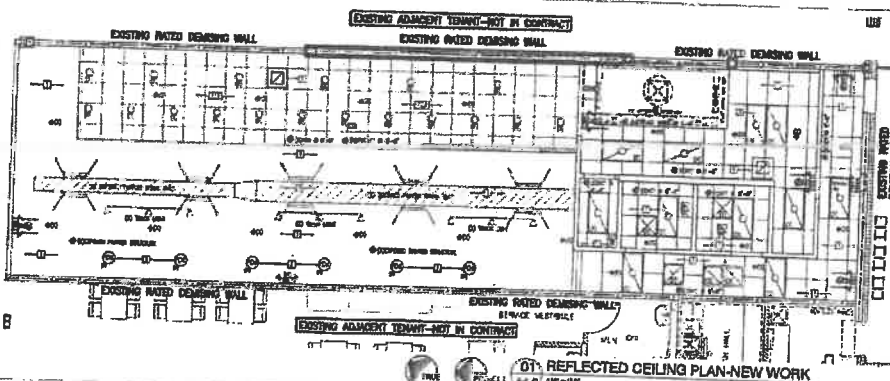
CEILING SYMBOL LEGEND	
	1.00 ACoustic Treatment - 100%
	1.01 Acoustic Treatment - 100% (Horizontal)
	1.02 Acoustic Treatment - 100% (Vertical)
	1.03 Acoustic Treatment - 100% (Diagonal)
	1.04 Acoustic Treatment - 100% (Diagonal)
	1.05 Acoustic Treatment - 100% (Stippled)
	1.06 Acoustic Treatment - 100% (Dotted)
	1.07 Acoustic Treatment - 100% (Cross-hatched)
	1.08 Acoustic Treatment - 100%
	1.09 Acoustic Treatment - 100% (Horizontal)
	1.10 Acoustic Treatment - 100% (Vertical)
	1.11 Acoustic Treatment - 100% (Diagonal)
	1.12 Acoustic Treatment - 100% (Diagonal)
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	1.14 Acoustic Treatment - 100% (Dotted)
	1.15 Acoustic Treatment - 100% (Cross-hatched)
	1.16 Acoustic Treatment - 100%
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	1.25 Acoustic Treatment - 100% (Horizontal)
	1.26 Acoustic Treatment - 100% (Vertical)
	1.27 Acoustic Treatment - 100% (Diagonal)
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	1.31 Acoustic Treatment - 100% (Cross-hatched)
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	1.38 Acoustic Treatment - 100% (Dotted)
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	1.40 Acoustic Treatment - 100%
	1.41 Acoustic Treatment - 100% (Horizontal)
	1.42 Acoustic Treatment - 100% (Vertical)
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	1.45 Acoustic Treatment - 100% (Stippled)
	1.46 Acoustic Treatment - 100% (Dotted)
	1.47 Acoustic Treatment - 100% (Cross-hatched)
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	1.49 Acoustic Treatment - 100% (Horizontal)
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	1.52 Acoustic Treatment - 100% (Diagonal)
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	1.54 Acoustic Treatment - 100% (Dotted)
	1.55 Acoustic Treatment - 100% (Cross-hatched)
	1.56 Acoustic Treatment - 100%
	1.57 Acoustic Treatment - 100% (Horizontal)
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	1.60 Acoustic Treatment - 100% (Diagonal)
	1.61 Acoustic Treatment - 100% (Stippled)
	1.62 Acoustic Treatment - 100% (Dotted)
	1.63 Acoustic Treatment - 100% (Cross-hatched)
	1.64 Acoustic Treatment - 100%
	1.65 Acoustic Treatment - 100% (Horizontal)
	1.66 Acoustic Treatment - 100% (Vertical)
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	1.68 Acoustic Treatment - 100% (Diagonal)
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	1.70 Acoustic Treatment - 100% (Dotted)
	1.71 Acoustic Treatment - 100% (Cross-hatched)
	1.72 Acoustic Treatment - 100%
	1.73 Acoustic Treatment - 100% (Horizontal)
	1.74 Acoustic Treatment - 100% (Vertical)
	1.75 Acoustic Treatment - 100% (Diagonal)
	1.76 Acoustic Treatment - 100% (Diagonal)
	1.77 Acoustic Treatment - 100% (Stippled)
	1.78 Acoustic Treatment - 100% (Dotted)
	1.79 Acoustic Treatment - 100% (Cross-hatched)
	1.80 Acoustic Treatment - 100%
	1.81 Acoustic Treatment - 100% (Horizontal)
	1.82 Acoustic Treatment - 100% (Vertical)
	1.83 Acoustic Treatment - 100% (Diagonal)
	1.84 Acoustic Treatment - 100% (Diagonal)
	1.85 Acoustic Treatment - 100% (Stippled)
	1.86 Acoustic Treatment - 100% (Dotted)
	1.87 Acoustic Treatment - 100% (Cross-hatched)
	1.88 Acoustic Treatment - 100%
	1.89 Acoustic Treatment - 100% (Horizontal)
	1.90 Acoustic Treatment - 100% (Vertical)
	1.91 Acoustic Treatment - 100% (Diagonal)
	1.92 Acoustic Treatment - 100% (Diagonal)
	1.93 Acoustic Treatment - 100% (Stippled)
	1.94 Acoustic Treatment - 100% (Dotted)
	1.95 Acoustic Treatment - 100% (Cross-hatched)
	1.96 Acoustic Treatment - 100%
	1.97 Acoustic Treatment - 100% (Horizontal)
	1.98 Acoustic Treatment - 100% (Vertical)
	1.99 Acoustic Treatment - 100% (Diagonal)
	2.00 Acoustic Treatment - 100% (Diagonal)

GENERAL NOTES
 1. ALL WORK SHALL BE IN ACCORDANCE WITH THE 2018 INTERNATIONAL BUILDING CODES, AS AMENDED BY THE STATE OF ALABAMA, AND ALL APPLICABLE LOCAL ORDINANCES.

POE WORKING NOTES
 1. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS FROM THE LOCAL JURISDICTION.

ROOFING VOLTAGE CONSTRUCTION NOTES
 1. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS FROM THE LOCAL JURISDICTION.

ENCORE ROUGE RESTAURANT
AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD.
 SUITE 102
 BIRMINGHAM, AL 35233
 (±1,680 RSF)
 (TOTAL RENTABLE AREA)



EXISTING ADJACENT TENANT - NOT IN CONTRACT
 EXISTING ADJACENT TENANT - NOT IN CONTRACT

01 REFLECTED CEILING PLAN-NEW WORK



08/13/2021

TEENANTS IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
AT THE WAITES BUILDING
707 RICHARD ARRINGTON BLVD, SUITE 102
BIRMINGHAM, AL 35203

CKH
Architects, P.C.
3000 20th Ave
Birmingham, Alabama 35202
Telephone: (205) 988-8888
www.ckharchitects.com

DATE: 08/13/2021
CONSTRUCTION SET
REVISED

PROJECT NUMBER
A4.1

THIS PLAN IS TO BE USED IN CONJUNCTION WITH THE PROJECT MANUAL. IT IS THE RESPONSIBILITY OF THE CONTRACTOR TO OBTAIN ALL NECESSARY PERMITS AND TO VERIFY THE ACCURACY OF ALL INFORMATION PROVIDED HEREON. THE ARCHITECT ASSUMES NO LIABILITY FOR ANY ERRORS OR OMISSIONS IN THIS PLAN.

CEILING SYMBOL LEGEND															
Symbol	Description	Symbol	Description	Symbol	Description	Symbol	Description	Symbol	Description	Symbol	Description	Symbol	Description	Symbol	Description
[Symbol]	Acoustic Ceiling	[Symbol]	Grid Ceiling	[Symbol]	Drop Ceiling	[Symbol]	Acoustic Panel	[Symbol]	Light Fixture	[Symbol]	Smoke Detector	[Symbol]	Fire Alarm	[Symbol]	Other

GENERAL NOTES

1. All work shall conform to the City of Birmingham Building Code and all applicable codes and regulations. All work shall be in accordance with the project manual and the approved construction documents.

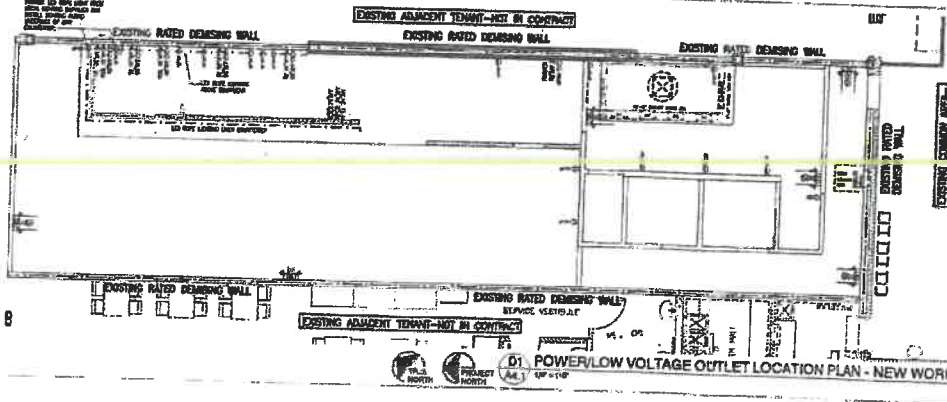
POE APPROVAL NOTES

1. All work shall conform to the City of Birmingham Building Code and all applicable codes and regulations. All work shall be in accordance with the project manual and the approved construction documents.

REPLACEMENT CONSTRUCTION NOTES

1. All work shall conform to the City of Birmingham Building Code and all applicable codes and regulations. All work shall be in accordance with the project manual and the approved construction documents.

ENCORE ROUGE RESTAURANT
AT THE WAITES BUILDING
707 RICHARD ARRINGTON BLVD
SUITE 102
BIRMINGHAM, AL 35203
(±1,800 RSF)
(TOTAL RENTABLE AREA)



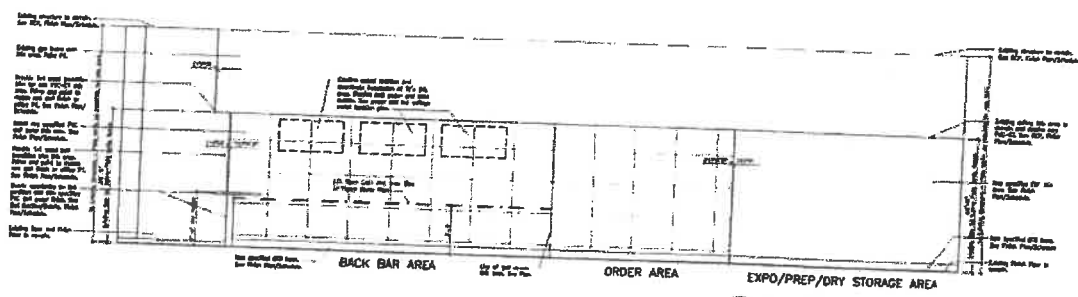
D1 POWER/LOW VOLTAGE OUTLET LOCATION PLAN - NEW WORK



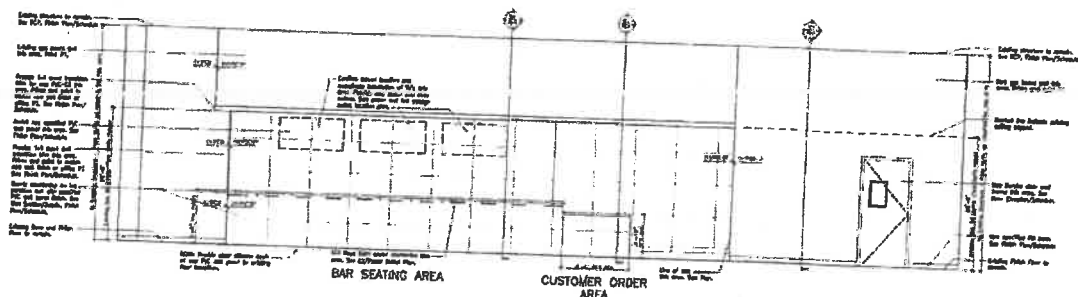
TENANTS IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
 AT THE WHITES BUILDING
 707 RICHARD ARRINGTON BLVD, SUITE 102
 BIRMINGHAM, AL 35203

CKH
 Architects, P.C.
 300 City Ave
 Birmingham, Alabama 35203
 205.988.1111
 www.ckharchitects.com

ORIGINAL DRAWN DATE
08/18/2021
 CONSTRUCTION SET
 REVISED



02 ELEVATION
 AT BACK BAR/ORDER AREA/EXPO/PREP/DRY STORAGE AREA



01 ELEVATION
 AT BAR SEATING/CUSTOMER ORDER AREA

SHEET NO. 011



CKH
Architects, P.C.
2000 18th Ave
Birmingham, Alabama 35203
205.988.1111

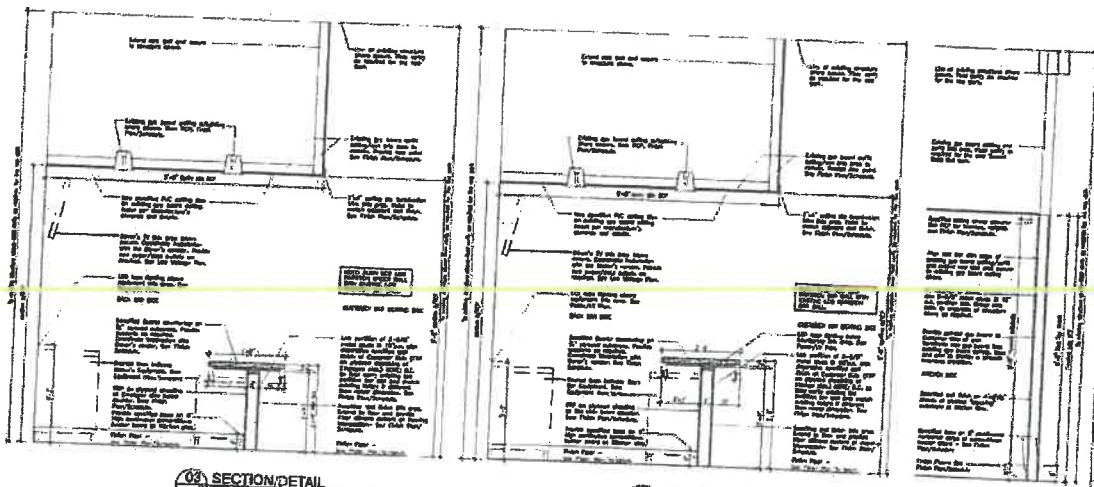
ORIGINAL ISSUE DATE
08/13/2021
CONSTRUCTION SET
REVISED

CKH
Architects, P.C.
2000 18th Ave
Birmingham, Alabama 35203
205.988.1111

ORIGINAL ISSUE DATE
08/13/2021
CONSTRUCTION SET
REVISED

SHEET NUMBER
A6.0

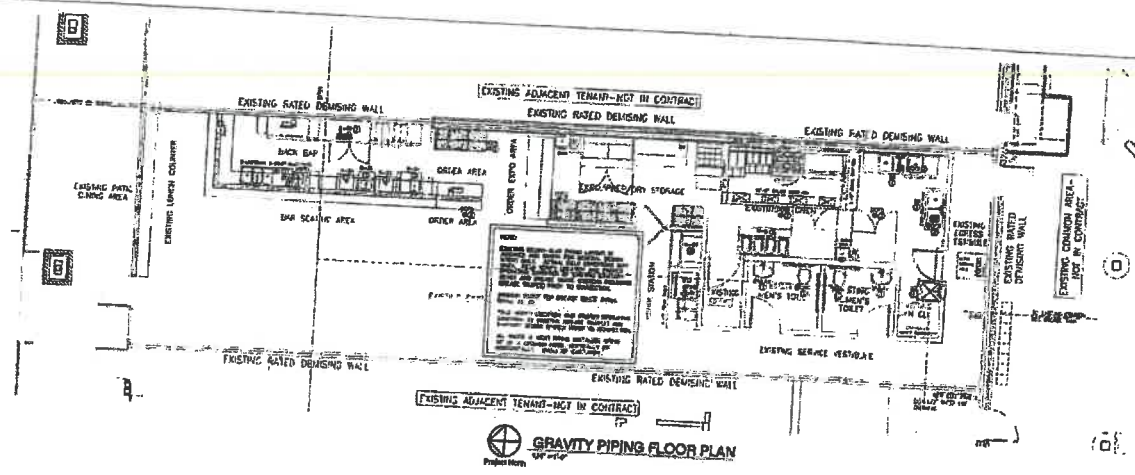
TENANT'S IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
AT THE WAITES BUILDING
707 RICHARD ARRINGTON BLVD., SUITE 102
BIRMINGHAM, AL 35233



03 SECTION/DETAIL
A6.0
A Typical Drain Area With Counter (ADA Assembly)

02 SECTION/DETAIL
A6.0
A Typical Gas Cooking Hood

01 SECTION/DETAIL
A6.0
A Typical Kitchen Hood
20180803-102



GRAVITY PIPING FLOOR PLAN
 PROJECT NO. 12345

FLOORING LEGEND

---	CONCRETE FLOOR (EXISTING)
---	GRAVEL FLOOR (EXISTING)
---	1/4" ASPHALT (EXISTING)
---	CONCRETE ON GRAVEL
---	2" POLYURETHANE OVER CONCRETE
---	2" POLYURETHANE OVER GRAVEL
---	2" POLYURETHANE OVER ASPHALT
---	2" POLYURETHANE OVER CONCRETE ON GRAVEL
---	2" POLYURETHANE OVER CONCRETE ON ASPHALT
---	2" POLYURETHANE OVER CONCRETE ON GRAVEL WITH REINFORCING
---	2" POLYURETHANE OVER CONCRETE ON ASPHALT WITH REINFORCING
---	2" POLYURETHANE OVER CONCRETE ON GRAVEL WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON ASPHALT WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON GRAVEL WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON ASPHALT WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON GRAVEL WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON ASPHALT WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON GRAVEL WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON ASPHALT WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON GRAVEL WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON ASPHALT WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON GRAVEL WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON ASPHALT WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON GRAVEL WITH REINFORCING AND STAIN
---	2" POLYURETHANE OVER CONCRETE ON ASPHALT WITH REINFORCING AND STAIN

- TYPICAL DRAINING NOTES - GRAVITY PIPING**
- 1. GRAVITY PIPING IS TO BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.
 - 2. GRAVITY PIPING SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.
 - 3. GRAVITY PIPING SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.
 - 4. GRAVITY PIPING SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.
 - 5. GRAVITY PIPING SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.
 - 6. GRAVITY PIPING SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.
 - 7. GRAVITY PIPING SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.
 - 8. GRAVITY PIPING SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.

- GENERAL NOTES**
1. REFER TO ALL OTHER DRAWINGS FOR ALL DIMENSIONS AND NOTES.
 2. ALL WORK SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.
 3. ALL WORK SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.
 4. ALL WORK SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.
 5. ALL WORK SHALL BE INSTALLED TO SERVE ALL EXISTING AND NEW DRAINAGE.

TELEPHONE IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
 AT THE WAITES BUILDING
 707 RICHARD ARRINGTON BLVD, SUITE 102
 BIRMINGHAM, AL 35233

CKH Architects, P.C.
 3000 Valley Lane
 Birmingham, Alabama 35290
 205-988-1234

ORIGINAL ISSUE DATE
08/13/2021
 CONSTRUCTION SET

SHEET NUMBER
P2.0

HVAC SPECIFICATIONS

- 1. Conditions shall be as shown on drawings... 2. Each package shall include... 3. All equipment shall be... 4. All equipment shall be... 5. All equipment shall be... 6. All equipment shall be... 7. All equipment shall be... 8. All equipment shall be... 9. All equipment shall be... 10. All equipment shall be... 11. All equipment shall be... 12. All equipment shall be... 13. All equipment shall be... 14. All equipment shall be... 15. All equipment shall be... 16. All equipment shall be... 17. All equipment shall be... 18. All equipment shall be... 19. All equipment shall be... 20. All equipment shall be... 21. All equipment shall be... 22. All equipment shall be... 23. All equipment shall be... 24. All equipment shall be... 25. All equipment shall be... 26. All equipment shall be... 27. All equipment shall be... 28. All equipment shall be... 29. All equipment shall be... 30. All equipment shall be... 31. All equipment shall be... 32. All equipment shall be... 33. All equipment shall be... 34. All equipment shall be... 35. All equipment shall be... 36. All equipment shall be... 37. All equipment shall be... 38. All equipment shall be... 39. All equipment shall be... 40. All equipment shall be... 41. All equipment shall be... 42. All equipment shall be... 43. All equipment shall be... 44. All equipment shall be... 45. All equipment shall be... 46. All equipment shall be... 47. All equipment shall be... 48. All equipment shall be... 49. All equipment shall be... 50. All equipment shall be... 51. All equipment shall be... 52. All equipment shall be... 53. All equipment shall be... 54. All equipment shall be... 55. All equipment shall be... 56. All equipment shall be... 57. All equipment shall be... 58. All equipment shall be... 59. All equipment shall be... 60. All equipment shall be... 61. All equipment shall be... 62. All equipment shall be... 63. All equipment shall be... 64. All equipment shall be... 65. All equipment shall be... 66. All equipment shall be... 67. All equipment shall be... 68. All equipment shall be... 69. All equipment shall be... 70. All equipment shall be... 71. All equipment shall be... 72. All equipment shall be... 73. All equipment shall be... 74. All equipment shall be... 75. All equipment shall be... 76. All equipment shall be... 77. All equipment shall be... 78. All equipment shall be... 79. All equipment shall be... 80. All equipment shall be... 81. All equipment shall be... 82. All equipment shall be... 83. All equipment shall be... 84. All equipment shall be... 85. All equipment shall be... 86. All equipment shall be... 87. All equipment shall be... 88. All equipment shall be... 89. All equipment shall be... 90. All equipment shall be... 91. All equipment shall be... 92. All equipment shall be... 93. All equipment shall be... 94. All equipment shall be... 95. All equipment shall be... 96. All equipment shall be... 97. All equipment shall be... 98. All equipment shall be... 99. All equipment shall be... 100. All equipment shall be...

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NOTES: THESE SPECIFICATIONS SHALL BE REVIEWED BY THE ARCHITECT... IT IS THE CONTRACTOR'S RESPONSIBILITY TO VERIFY THE ACCURACY OF ALL INFORMATION PROVIDED BY THE ARCHITECT... ANY EQUIPMENT... SHALL BE INSTALLED IN ACCORDANCE WITH THE DESIGN... CONTRACTOR SHALL PAY FOR ALL COSTS ASSOCIATED WITH CHANGES... APPROVED BY THE ARCHITECT.

NOTES: THESE SPECIFICATIONS SHALL BE REVIEWED BY THE ARCHITECT... IT IS THE CONTRACTOR'S RESPONSIBILITY TO VERIFY THE ACCURACY OF ALL INFORMATION PROVIDED BY THE ARCHITECT... ANY EQUIPMENT... SHALL BE INSTALLED IN ACCORDANCE WITH THE DESIGN... CONTRACTOR SHALL PAY FOR ALL COSTS ASSOCIATED WITH CHANGES... APPROVED BY THE ARCHITECT.

EXISTING AIR HANDLING UNIT SCHEDULE B

UNIT	ROOM	TYPE	STATUS	REMARKS
1	101	RTU	EXIST	
2	102	RTU	EXIST	
3	103	RTU	EXIST	
4	104	RTU	EXIST	
5	105	RTU	EXIST	
6	106	RTU	EXIST	
7	107	RTU	EXIST	
8	108	RTU	EXIST	
9	109	RTU	EXIST	
10	110	RTU	EXIST	

INDOOR CEILING CASSETTE SCHEDULE

ROOM	TYPE	STATUS	REMARKS
101	CA	EXIST	
102	CA	EXIST	
103	CA	EXIST	
104	CA	EXIST	
105	CA	EXIST	
106	CA	EXIST	
107	CA	EXIST	
108	CA	EXIST	
109	CA	EXIST	
110	CA	EXIST	

OUTDOOR HEAT PUMP SCHEDULE

ROOM	TYPE	STATUS	REMARKS
101	HP	EXIST	
102	HP	EXIST	
103	HP	EXIST	
104	HP	EXIST	
105	HP	EXIST	
106	HP	EXIST	
107	HP	EXIST	
108	HP	EXIST	
109	HP	EXIST	
110	HP	EXIST	

KITCHEN EXHAUST HOOD SCHEDULE

ROOM	TYPE	STATUS	REMARKS
101	EH	EXIST	
102	EH	EXIST	
103	EH	EXIST	
104	EH	EXIST	
105	EH	EXIST	
106	EH	EXIST	
107	EH	EXIST	
108	EH	EXIST	
109	EH	EXIST	
110	EH	EXIST	

EXHAUST FAN SCHEDULE

ROOM	TYPE	STATUS	REMARKS
101	EF	EXIST	
102	EF	EXIST	
103	EF	EXIST	
104	EF	EXIST	
105	EF	EXIST	
106	EF	EXIST	
107	EF	EXIST	
108	EF	EXIST	
109	EF	EXIST	
110	EF	EXIST	

HOOD SUPPLY FAN SCHEDULE

ROOM	TYPE	STATUS	REMARKS
101	HSF	EXIST	
102	HSF	EXIST	
103	HSF	EXIST	
104	HSF	EXIST	
105	HSF	EXIST	
106	HSF	EXIST	
107	HSF	EXIST	
108	HSF	EXIST	
109	HSF	EXIST	
110	HSF	EXIST	

FLY FAN SCHEDULE

ROOM	TYPE	STATUS	REMARKS
101	FF	EXIST	
102	FF	EXIST	
103	FF	EXIST	
104	FF	EXIST	
105	FF	EXIST	
106	FF	EXIST	
107	FF	EXIST	
108	FF	EXIST	
109	FF	EXIST	
110	FF	EXIST	

MECHANICAL EQUIPMENT SCHEDULE

ROOM	TYPE	STATUS	REMARKS
101	ME	EXIST	
102	ME	EXIST	
103	ME	EXIST	
104	ME	EXIST	
105	ME	EXIST	
106	ME	EXIST	
107	ME	EXIST	
108	ME	EXIST	
109	ME	EXIST	
110	ME	EXIST	

OUTDOOR AIR CALCULATION

ROOM	TYPE	STATUS	REMARKS
101	OA	EXIST	
102	OA	EXIST	
103	OA	EXIST	
104	OA	EXIST	
105	OA	EXIST	
106	OA	EXIST	
107	OA	EXIST	
108	OA	EXIST	
109	OA	EXIST	
110	OA	EXIST	



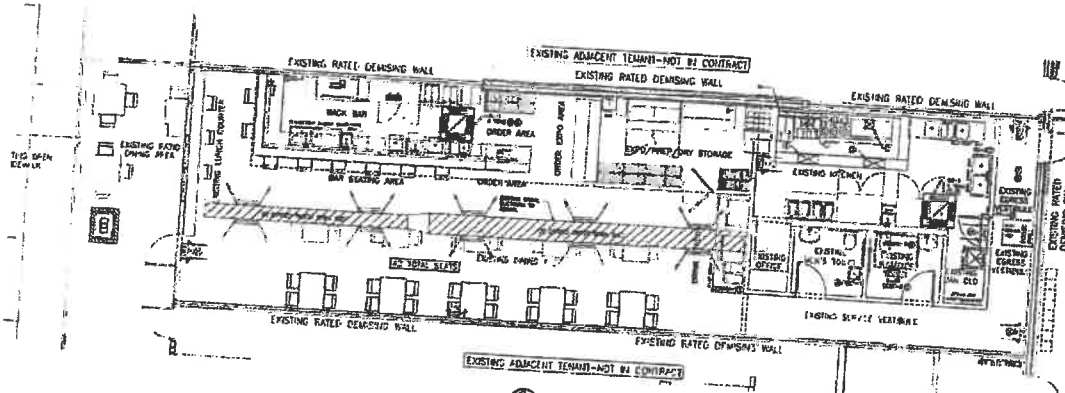
CKH Architects, P.C.
333 1/2 1st Ave N
Birmingham, AL 35203
707 RICHARD ARRINGTON BLVD, SUITE 102
BIRMINGHAM, AL 35233

CKH Architects, P.C.
333 1/2 1st Ave N
Birmingham, AL 35203
707 RICHARD ARRINGTON BLVD, SUITE 102
BIRMINGHAM, AL 35233

ORIGINAL DATE: 08/19/2021
CONSTRUCTION SET

SHEET NUMBER: M1.0

MICHAELS ENGINEERING



HVAC FLOOR PLAN
 Project No. _____

- SYMBOLS**
- [Symbol] AVAILABLE ROOMS BY THE OWNER
 - [Symbol] NEW ROOMS BY THE OWNER
 - [Symbol] ADJACENT ROOMS
 - [Symbol] EXISTING ROOMS
 - [Symbol] NEW ROOMS
 - [Symbol] EXISTING ROOMS
 - [Symbol] EXISTING ROOMS
 - [Symbol] EXISTING ROOMS
 - [Symbol] EXISTING ROOMS
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 - [Symbol] EXISTING ROOMS

GENERAL NOTES

1. ALL WORK SHALL BE DONE IN ACCORDANCE WITH THE 2015 INTERNATIONAL MECHANICAL AND ELECTRICAL CONTRACTING CODE AND THE 2015 INTERNATIONAL PLUMBING AND MECHANICAL CONTRACTING CODE.
2. ALL WORK SHALL BE DONE IN ACCORDANCE WITH THE 2015 INTERNATIONAL MECHANICAL AND ELECTRICAL CONTRACTING CODE AND THE 2015 INTERNATIONAL PLUMBING AND MECHANICAL CONTRACTING CODE.
3. ALL WORK SHALL BE DONE IN ACCORDANCE WITH THE 2015 INTERNATIONAL MECHANICAL AND ELECTRICAL CONTRACTING CODE AND THE 2015 INTERNATIONAL PLUMBING AND MECHANICAL CONTRACTING CODE.
4. ALL WORK SHALL BE DONE IN ACCORDANCE WITH THE 2015 INTERNATIONAL MECHANICAL AND ELECTRICAL CONTRACTING CODE AND THE 2015 INTERNATIONAL PLUMBING AND MECHANICAL CONTRACTING CODE.
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12. ALL WORK SHALL BE DONE IN ACCORDANCE WITH THE 2015 INTERNATIONAL MECHANICAL AND ELECTRICAL CONTRACTING CODE AND THE 2015 INTERNATIONAL PLUMBING AND MECHANICAL CONTRACTING CODE.

NOTES

1. THE OWNER SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE APPROPRIATE AGENCIES.
2. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE APPROPRIATE AGENCIES.
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12. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE APPROPRIATE AGENCIES.

MICHAEL ENGINEERING, LLC
 1000 W. BRIDGEMAN BLVD., SUITE 100
 HOUSTON, TEXAS 77057
 TEL: 281-585-5500
 WWW.MICHAEL-ENGINEERING.COM

A NEW ENCORE ROUGE RESTAURANT
 AT THE WATKINS BUILDING
 707 RICHARD ABBINGTON BLVD., SUITE 102
 IRVINGHAM, AL 36523

CKH
 Architects, P.C.
 3000 N. HIGHWAY 90
 HOUSTON, TEXAS 77060

ORIGINAL SHEET DATE
08/13/2021
 CONSTRUCTION SET

SHEET NUMBER
M2.0



TELEPHONE IMPROVEMENTS PACKAGE FOR
A NEW ENCORE ROUGE RESTAURANT
AT THE VIKINGS BUILDING
707 RICHARD ARRINGTON BLVD., SUITE 102
BIRMINGHAM, AL 35203

CKH
Architects, P.C.

1000 17th Ave. S.W.
Birmingham, Alabama 35202
205-944-2222
www.ckharchitects.com

ORIGINAL DRAWN DATE
08/13/2021
CONSTRUCTION SET

PROJECT NO.
19-00000000

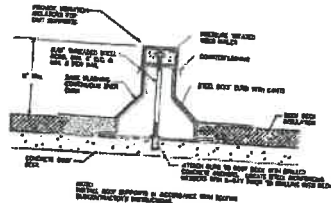
DATE PLOTTED
08/13/2021 10:00:00 AM

PROJECT NAME
ENCORE ROUGE RESTAURANT

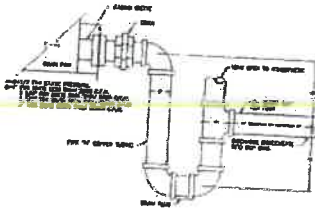
SHEET NUMBER
M3.0



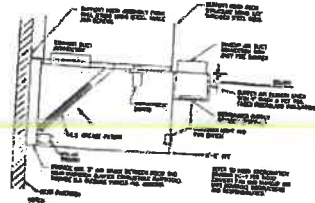
FIRE WALL PIPE PENETRATION DETAIL
NO SCALE



EQUIPMENT ROOF SUPPORT DETAIL
NO SCALE



AIR CONDITIONING UNIT DRAIN TRAP DETAIL
NO SCALE



KITCHEN EXHAUST HOOD DETAIL
COMPARING TYPE
NO SCALE

MICHAEL S. EDWARDS
Professional Engineer License No. 28122
State of Alabama

PARCEL ID: 012200364013003000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2019

DATE: Thursday, October 14, 2021 8:56:26 AM

OWNER: CENTRAL CITY DEVELOPERS LLC

ADDRESS: 120 18TH ST S STE 201

CITY/STATE: BIRMINGHAM AL

ZIP+4: 35233

SITE ADDR: 715 RICHARD ARRINGTON JR BLVD

CITY/STATE: BHAM, AL

ZIP: 35233

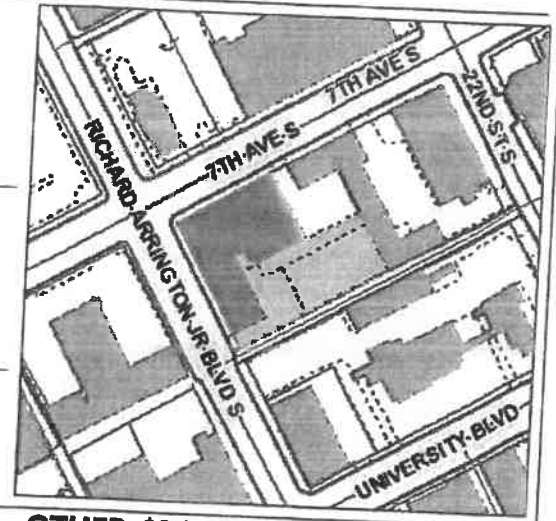
LAND: \$1,110,300.00

BLDG: \$12,178,000.00

OTHER: \$0.00

AREA: 34,379.69

ACRES: 0.79



SUBDIVISION INFORMATION:

NAME CENTRAL CITY SURVEY

BLOCK: 232

LOT: 6-C

Section: 36-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Midtown

Fire District: In Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: In Tax Increment Financing District

Neighborhoods: Five Pts So (1701)

Communities: Southside (17)

Council Districts: District - 6 (Councilor: Crystal Smitherman)

Zoning Outline: M1

Demolition Quadrants: DEM Quadrant - 1

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

LICENSE STATUS REPORT FORM

Date: **9/16/21**

To: **Hunter Williams, Chairman
Public Safety**

Subject: **Applicant's Name** Saint Monica LLC
Business Name Gable Square Saloon and Games
Business Address 803 9th Ct S

Type of License & Description

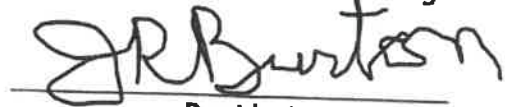
- | | |
|--|--|
| <input checked="" type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input checked="" type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Glen Iris Neighborhood Association met on 11/1/21 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

_____ Attendance _____ Oppose X Support _____ No Recommendation

Reason for Opposition N/A

Applicant: X attended NA meeting _____ did not attend NA meeting



President Neighborhood Secretary

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

Transfer Application: Lounge Retail Liq – Class I On/Off Prem Type 010

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Saint Monica LLC
Mailing Address: 803 9th Ct S
Birmingham, AL 35205
Trade Name: Gable Square Saloon and Games
Location Address: 803 9th Ct S
Contact Number: (205)401-6574 Contact Person: Vonne Osborn

New Application Transfer

Type of License

- | | |
|--|--|
| <input checked="" type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input checked="" type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 4TBS/20CHS

Date Applied: 9/16/21

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

LOUNGE RETAIL LIQ-CLASS I ON/OFF PREM TYPE 010

By: **GS**

(Enter Type of License Applied For)

(Revenue Official)

1. Name of Applicant (s) Saint Monica LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
██████████ FLDL# ████-███-██-███ Bryce Dean Collins	Member	09/24/59 LaGrange, GA	32 Greenwood LN Cocoa Beach, FL 32932	27 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 870-076 Page: 1 of 3 Date: 06/28/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Gable Square Saloon and Games
- 4(a) Location 803 9th Ct S
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35205 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: 803 9th Ct S Birmingham, AL 35205
- (d) Business Phone _____ Fax: _____ Other Contact: (205)401-6574

5. Name, trade name and License number of last or previous licensee: James Collins & Howard Williams
Trade name Gable Square Saloon & C Year 2001 Type 150H 150M Taxpayer ID 479645
150Y

6 (a) Owner of real estate for which license is desired Maka Investment Co Inc
PO Box 12004 Birmingham, AL 35202

- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? 4TBS/20CHS

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

- (b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No
- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, *less than thirty (30) days*: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, *more than thirty (30) days*: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, *not to exceed seven (7) days*: Starting _____ Ending _____
(Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<i>No Applicant</i>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 16th day of September, 2021

[Signature]
Signature of Affiant

[Signature]
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE
(CONTROLLED)

I, James Collins & Howard Williams, holding City of Birmingham
(current taxpayer)

License ID# [REDACTED], located at 803 9th Ct S
(six-digit City ID) (business address)

Birmingham, AL 35205, hereby agree that said License be

transferred to Saint Monica LLC
(applicant)

provided Saint Monica LLC
(applicant) obtains approval

from the local governing body and meets all the requirements of the

ABC Board. I understand that I am responsible for the operation of

this licensed establishment and for all taxes due until Saint Monica LLC
(applicant) obtains his/her license from the ABC Board.

I also understand that if for any reason this transfer is not approved by the local governing body or the ABC Board, I must take over complete control, operation, and responsibility of these licensed premises. If I do not continue operating this licensed establishment, then, I will turn in my ABC Board License to the local ABC Board Field Office and all my City of Birmingham licenses to the Revenue Division of the Finance Department of the City of Birmingham.

I further understand that this license will not be transferred until all taxes and licenses are paid and current.

LICENSEE [Signature] as Personal Representative DATE 9/16/21
Est. of James W. Collins, Jr.

APPLICANT [Signature] DATE 9/16/21

Witness [Signature] DATE 9/16/21
NOTARY

Bar Staff Safety Handbook

Gable Square Saloon

**A Guide to Safety Policies & Procedures
to Support a Safety-Conscious Work Environment**

Commitment to Safety

Gable Square Saloon (GSS) is firmly committed to the safety of anyone working at the bar. We will do everything possible to prevent accidents and we are committed to providing a safe environment.

Bar staff are encouraged to report any unsafe work practices or safety hazards encountered on the job. All accidents/incidents (no matter how slight) are to be immediately reported to the bar manager.

A key factor in implementing this policy will be the strict compliance to all applicable federal, state, local, and GSS policies and procedures. Failure to comply with these policies may result in termination.

Respecting this, GSS will make every reasonable effort to provide a safe and healthful environment that is free from any recognized or known potential hazards

Everyone at GSS must be involved and committed to safety. This must be a team effort. Together, we can prevent accidents and injuries. Together, we can keep each other safe and healthy in the work that provides our livelihood.

Bryce Collins

October 1, 2021

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Safety Responsibilities

The primary responsibility of the GSS bar staff is to perform his or her duties in a safe manner to prevent injury to themselves and others.

Bar staff **MUST** become familiar with, observe, and obey GSS's rules and established policies for health, safety, and preventing injuries while at work. Staff **MUST** learn the approved safe practices and procedures that apply to their work.

If bar staff has any questions about how a task should be done safely, he or she is under instruction **NOT** to begin the task until he or she discusses the situation with the bar manager. Together, they will determine the safe way to do the job.

NO ONE IS EVER REQUIRED to perform work that he or she believes is unsafe, or that he or she thinks is likely to cause injury or a health risk to themselves or others.

General Safety Rules

Conduct

Horseplay, 'practical jokes,' etc., are forbidden. Bar staff are required to work in an injury-free manner displaying accepted levels of behavior. Conduct that places the staff or others at risk, or which threatens or intimidates others, is forbidden.

Drugs and Alcohol

Use and/or possession of illegal drugs or alcohol on bar property are forbidden. Reporting for work while under the influence of illegal drugs or alcohol is forbidden.

Housekeeping

You are responsible to keep your work area clean and safe. Clean-up several times throughout the day, disposing of trash and waste in approved containers, wiping up any drips/spills immediately, and putting equipment and tools away as you are finished with them.

The following areas must remain clear of obstructions:

- Aisles/exits
- Fire extinguishers and emergency equipment
- All electrical breakers, controls, and switches

Injury Reporting

All work-related injuries must be reported to the bar manager immediately.

Safety Orientation Training

GSS is committed to providing safety and health related orientation. GSS will maintain and support a program to educate and familiarize bar staff with safety and health procedures, rules, and safe work practices. The training subjects and materials have been developed using industry best practices criteria and site-specific data.

The training may include, but not be limited to the following:

1. Hazards associated with the work area
2. Hazards associated with a specific job or task
3. Operation of specific equipment
4. Personal protective equipment
5. Emergency procedures
6. Accident reporting requirements

Periodic Inspections

It is the policy of GSS that workplaces are subject to periodic safety and health inspections to ensure implementation and execution of policies and procedures as relates to bar staff, contractors, and vendors.

Everyone is responsible for cooperating during these inspections and the bar manager is responsible for initiating corrective actions to improve items discovered during the walk-through inspection.

Emergency Action Plan

General Emergency Guidelines

- Stay calm and think through your actions
- Know the emergency numbers: **Posted on wall behind bar by phone.**
- Fire/Police/Ambulance 911
- Know where the exits are located
- First aid supplies and emergency equipment are located (insert location) for use by those who are authorized and properly trained

Evacuation

- Upon becoming aware of a fire, staff should immediately evacuate the building. Do not delay evacuation to get personal belongings or to wait for co-workers. Also, all doors should be closed as the last person passes through.
- Bar staff shall make sure that everyone has evacuated.
- If anyone remains in building report to the first available fire department officer.
- Don't re-enter building until receiving direction from fire department's incident commander.

Fire Safety

- Alert other persons in the immediate hazard area.
- If you have been trained, you can decide to use a fire extinguisher following these instructions:
 - P=Pull the safety pin
 - A=Aim the nozzle at the base of the fire
 - S=Squeeze the operating lever
 - S=Sweep side to side covering the base of the fire

**When using a fire extinguisher always stay between the fire and an exit; stay low and back away when the fire is extinguished.*

**Never feel that using a fire extinguisher is required. If the fire is too hot, too smoky or you are frightened, evacuate.*

Emergency Action Plan

Medical Emergency

- Upon discovering a medical emergency, call 911.
- Notify the bar manager and report the nature of the medical emergency.
- Stay with the person involved being careful not to come in contact with any bodily fluids.

Severe Weather

- The bar manager will monitor a weather alert radio. If a severe weather report is issued, she/he will immediately notify bar staff and take appropriate action to insure everyone's safety.

Emergency Contact Information

FIRE DEPARTMENT: _____

TELEPHONE: _____

POLICE DEPARTMENT: _____

TELEPHONE: _____

EMERGENCY MEDICAL SERVICES (AMBULANCE): _____

TELEPHONE: _____

HOSPITAL: _____

TELEPHONE: _____

DOCTOR: _____ **ADDRESS:** _____

TELEPHONE: _____

JOBSITE TELEPHONE NUMBERS:

BAR MANAGER: Vonne Osborne

TELEPHONE: _____

ASST. BAR MANAGER: _____

Cell/Home TELEPHONE: _____

SECURITY: _____

OFFICE TELEPHONE: _____

Cell/Home TELEPHONE: _____

Sexual Harassment Policy

GSS does not tolerate harassment of our staff, clients, guests, vendors, customers, or persons doing business with us. Any form of harassment related to a bar staff member's race, color, sex, religion, national origin, age, citizenship status, veteran status, or handicap is a violation of this policy and will be treated as a disciplinary matter. For these purposes, the term harassment includes, but is not limited to, slurs, jokes, or other verbal, graphic, or physical conduct relating to an individual's race, color, sex, religion, or national origin; sexual advances; requests for sexual favors and other verbal, graphic, or physical conduct of a sexual nature. Violation of this policy by a bar staff member shall subject to disciplinary action, up to and including immediate discharge.

Examples of conduct prohibited by this policy include but are not limited to:

- Unwelcome sexual flirtation, advances, or propositions;
- Verbal comments related to an individual's age, race, gender, color, religion, national origin, disability, or sexual orientation;
- Explicit or degrading verbal comments about another individual or his/her appearance;
- The display of sexually suggestive pictures or objects in any workplace location including transmission or display via computer;
- Any sexually offensive or abusive physical conduct;
- The taking of or the refusal to take any personnel action based on an employee's submission to or referral of sexual overtures; and
- Displaying cartoons or telling jokes that relate to an individual's age, race, gender, color, religion, national origin, disability, or sexual orientation.

Harassment of bar staff in connection with their work by non-employees may also be a violation of this policy.

If you believe that you are being subjected to workplace harassment, you should:

1. Tell the harasser that his or her actions are not welcome and they must stop, if you feel comfortable enough to do so.
2. Report the incident immediately to the bar manager.
3. Report any additional incidents to the bar manager.

Retaliation of any kind against a bar staff member who reports a suspected incident of sexual harassment is prohibited.

Workplace Violence

- Any bar staff member who feels that she/he has been threatened should immediately report their concern to the bar manager.
- If any person is observed exhibiting threatening behavior or making threatening statements, the person discovering the situation should warn others in the area and immediately notify the bar manager and stay away from the person exhibiting threatening behavior.
- Depending upon the level of concern, the police department (911) should be called immediately.
- Never attempt to confront any person exhibiting threatening behavior.

If you have reason to believe that events in your personal life could result in acts of violence occurring at work, you are urged to confidentially discuss the issue with the bar manager so that a prevention plan can be developed.

Bloodborne Pathogens

1. Blood and other bodily fluids can carry pathogens, which are capable of causing diseases in others. This includes HIV, which leads to AIDS and hepatitis.
2. Because we cannot tell by looking at a person if they are infected with a pathogenic disease, we must take precautions following an illness or injury when bodily fluids are released.
3. In the event of a person losing bodily fluids, stay away from the area and warn others to also do so. You can still stay close to the ill/injured person to support him/her, just be sure to stay out of contact any bodily fluids.
4. In the event that you find spilled bodily fluids, a syringe, or other medically contaminated materials, do not attempt clean up by yourself. Call bar manager immediately for instructions.

Fire Prevention & Electrical Safety

Fire Prevention

1. Smoking is only allowed in designated exterior smoking areas.
2. No candles or open flames are allowed within the saloon.
3. No flammable chemicals are allowed inside the building at any time. If you feel that there is a work-related need to use a flammable chemical, contact the bar manager for guidance on Hazard Communication and fire safety.
4. Only trained and authorized employees are allowed to use a portable fire extinguisher in the event of an emergency.

Electrical Safety

1. With the exception of independently fused multi-tap cords for computers, extension cords are not allowed.
2. Keep electric cords out of areas where they will be damaged by stepping on or kicking them.
3. Turn electrical appliances off with the switch, not by pulling out the plug.
4. Turn all appliances off before leaving for the day.
5. Never run cords under rugs or other floor coverings.
6. Any electrical problems should be reported immediately.

The following areas must remain clear and unobstructed at all times:

- Exit doors,
- Aisles,
- Electrical panels, and
- Fire extinguishers.

General Safety Precautions

Lifting

1. Plan the move before lifting; ensure that you have an unobstructed pathway.
2. Test the weight of the load before lifting by pushing the load along its resting surface.
3. If the load is too heavy or bulky, use lifting and carrying aids such as hand trucks, dollies, pallet jacks and carts, or get assistance from a co-worker.
4. If assistance is required to perform a lift, coordinate and communicate your movements with those of your co-worker.
5. Position your feet 6 to 12 inches apart with one foot slightly in front of the other.
6. Face the load.
7. Bend at the knees, not at the back.
8. Keep your back straight.
9. Get a firm grip on the object using your hands and fingers. Use handles when they are present.
10. Hold the object as close to your body as possible.
11. While keeping the weight of the load in your legs, stand to an erect position.
12. Perform lifting movements smoothly and gradually; do not jerk the load.
13. If you must change direction while lifting or carrying the load, pivot your feet and turn your entire body. Do not twist at the waist.
14. Set down objects in the same manner as you picked them up, except in reverse.
15. Do not lift an object from the floor to a level above your waist in one motion. Set the load down on a table or bench and then adjust your grip before lifting it higher.
16. Never lift anything if your hands are greasy or wet.
17. Wear protective gloves when lifting objects that have sharp corners or jagged edges.

Ladders & Stepladders

1. Read and follow the manufacturer's instructions label affixed to the ladder if you are unsure how to use the ladder.
2. Do not use ladders that have loose rungs, cracked or split side rails, missing rubber foot pads, or are otherwise visibly damaged.
3. Keep ladder rungs clean and free of grease. Remove buildup of material such as dirt or mud.
4. Do not place ladders in a passageway or doorway without posting warning signs or cones that detour pedestrian traffic away from the ladder. Lock the doorway that you are blocking with the ladder and post signs that will detour traffic away from your work.
5. Do not place a ladder at a blind corner or doorway without diverting foot traffic by blocking or roping off the area.
6. Allow only one person on the ladder at a time.
7. Face the ladder when climbing up or down it.
8. Maintain a three-point contact by keeping both hands and one foot or both feet and one hand on the ladder at all times when climbing up or down the ladder.
9. When performing work from a ladder, face the ladder and do not lean backward or sideways from the ladder. Do not jump from ladders or step stools.
10. Do not stand on tables, chairs, boxes or other improvised climbing devices to reach high places. Use the ladder or stepstool.
11. Do not stand on the top two rungs of any ladder.
12. Do not stand on a ladder that wobbles, or that leans to the left or right of center.
13. When using a straight or extension ladder, extend the top of the ladder at least 3 feet above the edge of the landing.
14. Secure the ladder in place by having another employee hold it if it cannot be tied to the structure.
15. Do not move a rolling ladder while someone is on it.
16. Do not place ladders on barrels, boxes, loose bricks, pails, concrete blocks or other unstable bases.
17. Do not carry items in your hands while climbing up or down a ladder.

General Safety Precautions

Housekeeping

1. Do not place materials such as boxes or trash in walkways and passageways.
- 2.
3. Mop up water around drinking fountains, drink dispensing machines and ice machines immediately.
4. Do not store or leave items on stairways.
5. Do not block or obstruct stairwells, exits or accesses to safety and emergency equipment such as fire extinguishers or fire alarms.
- 6.
7. Straighten or remove rugs and mats that do not lie flat on the floor.
8. Remove protruding nails or bend them down into the lumber by using a claw hammer.
9. Return tools to their storage places after using them.
10. Do not use gasoline for cleaning purposes.
11. Use caution signs or cones to barricade slippery areas such as freshly mopped floors.

Job-Specific Safety Precautions

Glassware

1. Do not place drinking glasses inside each other.
2. Carry one rack of glassware at a time.
3. Visually inspect all glassware for cracks or chips before handling. If chips or cracks are discovered in the glasses, place them in containers labeled "broken glass."
4. Do not use a drinking glass to scoop ice. Use the metal scoop or pan.
5. When a glass is broken in the ice bin, pour hot water into the bin to melt down the ice letting the melted ice empty through the drain, remove the glass using a whisk broom and dust pan, hose down minute pieces of glass into the drain with clean water, and wipe the bin dry with a towel before refilling it with ice.
6. Do not submerge hot glass in cold water or submerge cold glass in hot water.

Knives/Sharp Instruments

1. When handling knife blades and other cutting tools, direct sharp points and edges away from you.
2. Cut in the direction away from your body when using knives.
3. Use a knife that has been sharpened; do not use knives that have dull blades.
4. Do not use knives that have broken or loose handles.
5. Do not use knives as screwdrivers, pry bars, can openers or ice picks.
6. Do not leave knives in sinks full of water.
7. Do not pick up knives by their blades.
8. Carry knives with their tips pointed towards the floor.
9. Do not carry knives, scissors or other sharp tools in your pockets or an apron unless they are first placed in their sheath or holder.
10. Do not attempt to catch a falling knife.
11. Store knives in knife blocks or in sheaths after using them.
12. Do not use honing steels that do not have disc guards.

Job-Specific Safety Precautions

Microwave Ovens

1. Do not operate a microwave oven if it has a bent door, broken hinges or latches, or cracking in its seals.
2. Use caution when removing hot items from the microwave.
3. Do not place metal containers or other metal objects in microwave ovens.
4. Do not place meat in the microwave that weighs less than or greater than the manufacturer's capacity limits posted on the microwave door.

Refrigerated Cooler

1. If provided, wear the back belt/brace when stocking shelves.
2. Check for loose product on the top of the cases prior to lifting down a case for restocking of shelves.

Dishwasher

1. Wear rubber gloves when washing and sanitizing dishes and cooking equipment.
2. If glassware breaks in the sink, use tongs to remove the large fragments of glass; open the drain; run the water to wash any remaining small glass fragments down the drain.
3. Remove all chipped or cracked dishes and glassware from use.

Storeroom/Stockroom:

1. Stack heavy or bulky storage containers on middle and lower shelves of the storage rack.
2. Do not stack boxes, cases, or packages of product above the number or height recommended by the supplier. Check with your manager if you are unsure.
3. Do not use razorblades, screwdrivers, or knives which were not supplied by the company to open boxes or cases.
4. Do not lift slippery or wet objects; use a hand truck.
5. Follow the safe handling instructions listed on the label of the container or listed on the corresponding Material Safety Data Sheet when handling each chemical stored in the stockroom.
6. Do not smoke while handling chemicals labeled "Flammable."
7. Do not store chemicals labeled "Flammable" near sources of ignition such as space heaters.
8. Do not handle or load any containers of chemicals if their containers are cracked or leaking.
9. Obey all safety and danger signs posted in the workplace.

Hazardous Materials

1. Follow the instructions on the label and in the corresponding Material Safety Data Sheet (MSDS) for each chemical product used in your workplace.
2. Use personal protective clothing or equipment such as neoprene gloves, rubber boots, shoe covers, rubber aprons, and protective eyewear, when using chemicals labeled "Flammable", "Corrosive", and "Caustic" or "Poisonous."
3. Do not use protective clothing or equipment that has split seams, pin holes, cuts, tears, or other signs of visible damage.
4. Each time you use your gloves, wash your gloves before removing them using cold tap water and normal hand washing motion. Always wash your hands after removing the gloves.

Hand Truck Safety

1. When loading hand trucks, keep your feet clear of the wheels.
2. Do not exceed the manufacturer's load rated capacity. Read the capacity plate on the hand truck if you are unsure.
3. Place the load so that it will not slip, shift or fall. Use the straps, if they are provided, to secure the load.
4. For extremely bulky or pressurized items, such as gas cylinders, strap or chain the items to the hand truck.
5. Tip the load slightly forward so that the tongue of the hand truck goes under the load.
6. Push the tongue of the hand truck all the way under the load that is to be moved.
7. Keep the center of gravity of the load as low as possible by placing heavier objects below the lighter objects.
8. Push the load so that the weight will be carried by the axle and not the handles.
9. If your view is obstructed, ask a spotter to assist in guiding the load.
10. Do not walk backward with the hand truck, unless going up ramps.

11. When going down an incline, keep the hand truck in front of you so that it can be controlled at all times.
12. Move hand trucks at a walking pace.
13. Store hand trucks with the tongue under a pallet, shelf, or table.

Robberies

1. Greet all customers that come into the restaurant.
 2. If an argument or fight breaks out on the premises, call the police and do not use physical force.
 3. Do not be drawn outside the saloon for any reason.
 4. Do not try to physically stop a shoplifter.
 5. Keep the robbery as short as possible. Do not resist or argue with a robber.
 6. Keep your hands visible at all times.
 7. Warn the robber of the movements you are going to make such as reaching for a bag or opening the cash register.
 8. Do not chase or follow the robber as he leaves; call the police.
 9. Do not pull a weapon if you are being held up.
-
-

Liquor Liability Agreement Form

As a condition of bar staff membership, I agree to the following company rules regarding the sale and distribution of alcoholic beverages.

1. I have completed GSS formal Liquor Liability Training Program. Any questions I had regarding the program have been fully explained to me to my satisfaction.
2. I will not sell beer, ale, wine or liquor to any person that is not of legal drinking age at the time of the sale.
3. I will not sell any beer, ale, wine or liquor to any person who appears intoxicated or is acting disorderly.
4. I understand the state, county and city laws regarding the legal hours of the day during which I may sell beer, ale, wine or liquor to a customer. I will not sell or serve beer, ale, wine or liquor to anyone during the restricted hours.
5. I will not purchase any beer, ale, wine or liquor from my employer for the use or benefit of any underage person or any intoxicated person.
6. I understand GSS will only accept certain forms of personal identification as outlined in my training program and I will accept no other form of I.D. from anyone purchasing beer, ale, wine or liquor.
7. I will request acceptable identification and verify that the customer is of legal age before making the sale.
8. I understand that if I do make an illegal sale of beer, ale, wine or liquor, I may be personally arrested and charged with a criminal offense. If I am found guilty I could be FINED or JAILED or BOTH. I understand I am personally responsible for my attorney fees as well as paying any fine.
9. I understand that any infraction of my GSS rules concerning the sale of beer, ale, wine or liquor could result in automatic termination.
10. I understand that my activities will be monitored by GSS as well as by state and local law enforcement investigators.

I have read, understand and agree to comply with the liquor liability policy rules as stated above.

Signature

Date

Bar Staff Acknowledgement Form

Gable Square Saloon (GSS) is firmly committed to your safety. We will do everything possible to prevent workplace accidents and are committed to providing a safe working environment for you and all employees. We value you not only as a bar staff member but also as a human being critical to the success of your family, the local community, and GSS. You are encouraged to report any unsafe work practices or safety hazards encountered on the job. All accidents/incidents (no matter how slight) are to be immediately reported to the bar manager.

A key factor in implementing this policy will be the strict compliance to all applicable federal, state, local, and GSS policies and procedures. Failure to comply with these policies may result in disciplinary actions. Respecting this, GSS will make every reasonable effort to provide a safe and healthful workplace that is free from any recognized or known potential hazards. Additionally, GSS subscribes to these principles:

1. All accidents are preventable through implementation of effective Safety and Health Control policies and programs.
2. Safety and Health controls are a major part of our work every day.
3. Accident prevention is good business. It minimizes human suffering, promotes better working conditions for everyone, holds GSS in higher regard with customers, and increases productivity. This is why GSS will comply with all safety and health regulations which apply to the course and scope of operations.
4. Management is responsible for providing the safest possible workplace for bar staff. Consequently, management of GSS is committed to allocating and providing all of the resources needed to promote and effectively implement this safety policy.
5. Employees are responsible for following safe work practices, company rules, and for preventing accidents and injuries. Management will establish lines of communication to solicit and receive comments, information, suggestions, and assistance from employees where safety and health are concerned.
6. Management and bar manager of GSS will set an exemplary example with good attitudes and strong commitment to safety and health in the workplace. Toward this end, management must monitor the bar's safety and health performance, working environment, and conditions to ensure that program objectives are achieved.
7. Our safety program applies to all bar staff and persons affected or associated in any way by the scope of this business. Everyone's goal must be to constantly improve safety awareness and to prevent accidents and injuries.

Everyone at GSS must be involved and committed to safety. This must be a team effort. Together, we can prevent accidents and injuries and keep each other safe and healthy in the work that provides our livelihood.

By signing this document, I confirm the receipt of GSS's employee safety handbook. I have read and understood all policies, programs, and actions as described, and agree to comply with these set policies.

Employee Signature

Date

ATTACHMENT 1

Gable Square Saloon Code Compliance Information Safety Plan Birmingham, Alabama

1. Contact person is the Vonne Osborn, bar manager (cell 205.401.6574, bar 205.251.0960).
2. Security Personnel is LT Smith (205.516.9919). He is retired military and received appropriate training on de-escalation techniques. He is exempt from license requirement because he only works for Gable Square Saloon.
3. The clubs occupancy load is 46, and the average patron attendance on most nights is less than 25. It is a neighborhood bar and not an event space. The bartenders are responsible for monitoring the number of people in the bar. There has not been an occasion that has caused the bar to be over the occupancy load.
4. Gable Square bartenders check the photo ID of anyone entering the business. A sign is posted on the door that no one under 21 is allowed in the bar and the bartenders check the photo ID of anyone entering the bar. Bartenders are educated on how to inspect ID's to identify fraudulent ID cards.
5. Bartenders are the first line of defense associated with a potentially violent act. If an argument starts, they first attempt to de-escalate the situation by asking the patron to stop and if the patron refuses, they ask them to leave the bar. If the patron continues to be unruly security is called to attempt to de-escalate. If patron continues to refuse to cooperate, 911 for BPD is called.
8. There is a camera system allowing staff to monitor activity throughout the bar including the patio and parking lots. The patio is serviced by the bartender, so they always know how many customers are sitting outside.

ATTACHMENT 2

Bar Safety Practices

Bars, taverns, and pubs are usually places filled with laughter and merriment. On occasions however, broken glass, slippery floors, and intense noise can create a high-risk environment for employees on the job. By taking steps to prevent workplace injuries, you can help safeguard your employees—and your business.

Ensuring safety at bar:

The most common injuries experienced by bartenders are:

- Cuts and wounds
- Burns
- Tendonitis
- Shoulder injuries
- Slips and falls
- Back problems

Mixology can cause repetitive-stress injuries

Did you know that bartenders can develop carpal tunnel syndrome, tennis elbow, and rotator cuff issues? The popularity of America's cocktail culture means more shaking, mixing, and bottle twisting. Bartenders shake each cocktail 30 to 40 times and repeat the process throughout their shifts. It's no wonder that many of them are sustaining repetitive stress injuries (RSIs) to their wrists, shoulders, and backs. RSIs are common when a person performs the same movement repeatedly. There are more than 25 bones in the hand that are connected to muscles, tendons, and nerves. When your hand performs the same motion over and over, that movement can put stress on the tendons and joints.

Since bartenders are at risk for developing RSIs, it's important that your employees know the symptoms. Symptoms may include pain, swelling, tingling, numbness, stiffness, weakness, or heat/cold sensitivity in the hands, wrists, elbows, or shoulders. In addition to RSIs, most bartenders are on their feet for 8 to 12 hours a shift, lifting heavy cases of liquor, beer, and ice.

Injury-prevention tips:

Here are some tips to help insure safe work environment at GSS:

- Avoid overcrowding behind the bar.
- Provide proper storage so the area behind that bar isn't cluttered.
- Use non-slip surfaces on floors.
- Require employees to wear slip-resistant footwear since it can reduce as much as 75 percent of work-related slips and falls.
- Establish a floor-cleaning schedule.
- Only use wet floor signs when floors are wet. Employees may ignore signs if they are used in areas that aren't wet. OSHA recommends yellow signs that are visible from 360 degrees.
- Design workspaces so the most frequently used items are on the most accessible shelves.
- Provide adequate ladders and footstools to reach high spaces safely.
- Maintain good lighting in work, delivery, and storage areas.
- Clearly mark one trash can for broken glass and sharp can lids.
- Provide smaller bus pans and trays to avoid overfull loads.
- Provide hand trucks and other lifting devices to transport kegs, bottles, and cases.
- Provide training in safe lifting methods.
- Provide ice scoops to minimize contamination and spills.
- Train employees in knife skills, including which knife to use, how to use it, and proper maintenance and storage.
- Provide box cutters, goggles, and cut-resistant gloves for added safety.
- Keep cords, plugs, and outlets in good condition.
- Place electrical equipment away from water.
- Make sure fire extinguishers are up to date and located in convenient locations. Ensure employees know where they are and how to use them.
- Store cleaning supplies and other chemicals in their original containers away from food and heat sources.

- Make safety information available for each chemical used in the workplace and ensure employees know where to find them.
- Have more than one exit that workers can reach in case of emergency, and post emergency telephone numbers in multiple locations.
- Have working locks and alarms kept in good condition, and consider adding surveillance cameras and/or mirrors.
- Make sure workers know how to report an incident where there is exposure to blood. Perhaps most importantly, require that all employee injuries—no matter how small—are reported ASAP.

Safety tips for bartenders:

Train and remind your employees to:

- Take a few moments during their shifts to stretch or take breaks, especially if they spend a lot of time carrying loads, bending, reaching, or repeating the same motions. Neck shrugs, shoulder stretches, forearm stretches and twists, and torso twists can be helpful. Allow frequent breaks for joints, muscles, and tendons to relax.
- Not carry more than they can handle. Make extra trips if necessary or ask for help. Objects weighing more than 50 pounds require a two-person lift.
- Lift cases, kegs, ice, and other heavy loads with their legs and wear a back brace if needed.
- When setting down heavy items, they should let their leg muscles carry it down.
- Store glasses in racks. Don't stack them directly on top of each other.
- Not to use chipped or cracked glasses or dishware.
- If glass breaks, wrap up the broken glass and shards and discard in trash.
- Use a dustpan and broom when cleaning up broken glass.
- Ensure no glass has fallen into coolers or ice bins.
- Move their feet when changing direction between tasks, not twist from the waist.
- Try to vary the hand used for shaking or pouring drinks to allow muscles and joints to rest a bit.
- Switch the order that tasks are done to avoid repeatedly doing the same activities in the same exact pattern.
- Try shaking cocktails at chest or waist height instead of over the head or shoulder.
- Use an arm brace if needed.
- Move their arms instead of their wrists when opening bottles to avoid wrist injuries.

- Where possible, avoid bending the wrist unnecessarily. For example, when pouring, try pouring with the full arm instead of just bending the wrist. It may feel weird at first, but it can reduce the stress on the wrist.
- Use cocktail shakers away from their ears.
- Wash hands thoroughly after handling acidic ingredients like lemons and limes to avoid skin irritation.
- Stand away from speakers if possible, or use foam ear plugs when appropriate.
- Never leave knives soaking in water.
- Place a damp cloth under the cutting board to keep it from moving.
- Pass a knife to another person by laying it on a counter, or pass it with the blade pointed down.
- Don't try to catch a falling knife.
- Only use cleaning chemicals in well-ventilated areas and wash hands after using them.
- Warn other workers when walking behind them, using warnings like "behind you," "coming through," or "hot plate."
- Wear non-skid, closed-toe waterproof shoes with low heels.
- Not to wear over-sized or baggy pants that could cause them to trip.
- Keep floors dry near electrical equipment and outlets.
- Clean up spills immediately.
- Wash floors regularly with a clean mop and the appropriate floor cleaner.

ATTACHMENT 3

SAFETY AUDIT CHECKLIST

Inspection Performed by: _____

Date: _____

	YES	NO	SEE CMT
FIRE PROTECTION EQUIPMENT AND TRAINING			
1. Are all fire extinguishers properly mounted, locations labeled, and accessible?			
2. Are all fire extinguishers inspected and tagged noting monthly inspection and annual maintenance check?			
3. Are extinguishers of proper size and type for the hazards?			
4. If property is protected by automatic sprinklers, has the system been inspected in the past year and is it currently operable?			
5. Has the automatic fire protection system over the cooking area been inspected within the past year?			
6. Are manual control panels to the automatic fire protection system clearly visible and access to them unimpeded?			
7. Is the grease collection hood clean?			
8. Have employees been trained on how to use fire extinguishers?			
9. Do employees know where the fire extinguishers are located?			
10. Do employees know where the automatic fire protection system is, the wall control switch locations, and the location of the manual control panel?			
11. Are emergency telephone numbers posted?			
12. Are employees trained on what to do in a fire emergency?			

COMMENTS: _____

SAFETY AUDIT CHECKLIST

	YES	NO	SEE CMT
ELECTRICAL SAFETY			
1. Electrical equipment properly grounded?			
2. Use of multiple plugs examined to prevent overloading of circuits?			
3. Electrical cords have no splices, cuts, or taped areas?			
4. Electrical plugs in good condition with no missing ground plug?			
5. Switches for electrical equipment located so that employees do not have to lean on or against metal equipment to reach them?			
6. Electrical switches so located so that they can be reached easily in case of an emergency?			
7. Switches guarded to prevent inadvertent or accidental switching on of the equipment?			
8. All switches and receptacles provided with cover plates?			
9. Circuit breaker box kept closed?			
10. All electrical switch boxes, switch gear panels labeled to identify each individual circuit breaker function?			
11. All live parts of electrical equipment guarded by approved/listed cabinets or enclosures to prevent accidental contact?			
12. Gaps in circuit breaker slots guarded with a filler plate?			
13. Electrical panel not obstructed and readily accessible in case power needs to be cut off at the circuit breaker?			
14. Thermostat and temperature controls on cooking equipment serviced and inspected by an authorized maintenance professional?			
15. Extension cords are not being used for permanent power?			
16. Battery or emergency generator operated lights in good working order?			

COMMENTS: _____

SAFETY AUDIT CHECKLIST

	YES	NO	SEE CMT
EXTERIOR SURROUNDINGS, PARKING LOTS AND WALKWAYS			
1. All means of egress from parking lots to thoroughfares have clear view in both directions.			
2. Are paths of travel to exterior ways of access unobstructed, free from carts, boxes, cans, and other debris which constitute a hazard?			
3. Are means available for good lighting of walks and parking lots during night hours?			
4. Are hanging signs, awnings, menu boards, unit signs, and other accessories safely secured?			
5. Are bottled gas cylinders or gas pipes and meters properly supported and guarded from physical damage?			

EXTERIOR GARBAGE, TRASH STORAGE AND DISPOSAL AREA			
1. Is disposal area free from broken glass, metal cans, and food spillage?			
2. Is safe access to garbage and trash containers maintained?			
3. Are fences, gates and pads, if present, well maintained around disposal areas?			
4. Are dumpster containers fitted with tight closing lids or doors?			
5. Are drive surfaces around disposal areas free of trash and grease spillage?			
6. Is combustible trash stored away from the building?			
7. If present, do employees operate compactors in a safe manner properly using guards and protective devices?			

EXITS			
1. Are there sufficient exits to permit prompt escape in the case of a fire or other emergency?			
2. Is every exit in the building clearly marked with a standard sign and visible?			
3. Are exit facilities clearly illuminated?			
4. Are non-exit doorways, which could be mistaken for exits, marked to avoid confusion?			
5. Are paths of travel to exits clearly evident and are they free of cartons, trash, equipment, and supplies?			
6. Are all exit doors provided with approved emergency hardware? Do they work?			
7. Can all exit doors be opened from the inside during occupied periods? Do they open toward the outside?			
8. Do emergency lights work? Are they tested on a regular schedule?			
9. Are exit door jams, threshold plates and doors themselves in good repair and operating condition?			

COMMENTS: _____

SAFETY AUDIT CHECKLIST

	YES	NO	SEE CMT
STORAGE - REFRIGERATED AND FROZEN			
1. Are floors outside of refrigerators and freezers clean, dry, and non slippery?.			
2. Are entrances areas dry? Are mats, if used, in good condition?			
3. Are aisle spaces free from obstacles?			
4. Are heavy items stored on lower shelves?			
5. Is the light fixture operative in walk-in?			
6. Is the emergency interior door latch assembly or handle in good working condition?			
7. Are blower fans properly guarded?			
8. Is electrical wiring properly shielded or guarded?			

STORAGE-DRY			
1. Are heavier or bulkier items stored on pallets or shelves near the floor?			
2. Are precautions taken to keep cleaning agents, chemicals, paints, etc. stored below eye level of all employees?			
3. Are cartons stored away from wetness or dampness which could cause their collapse?			
4. Are items properly stacked to avoid tipping or tumbling?			
5. Are aisleways in the storage room unobstructed?			
6. Is lighting adequate?			
7. Are light fixtures guarded and stored items kept at least two feet away from light fixtures?			

CHEMICALS			
1. Are detergents, drying agents, sanitizers, and pesticides stored away from food and utensils and separated from other chemicals?			
2. Are polishes, acids, paints, and other chemicals stored away from food and separated from pesticides and detergents?			
3. Are all chemical containers properly marked and tightly covered?			
4. Is only a reasonable amount of detergent and sanitizer located near dish washing and utensil washing stations?			
5. Are only non-flammable solvents or cleaning acids used for hoods, fans, ducts, and grease removal devices?			
6. Is proper protective equipment available and used when handling chemicals?			
7. Are Material Safety Data Sheets (MSDS) available for all chemicals?			

COMMENTS: _____

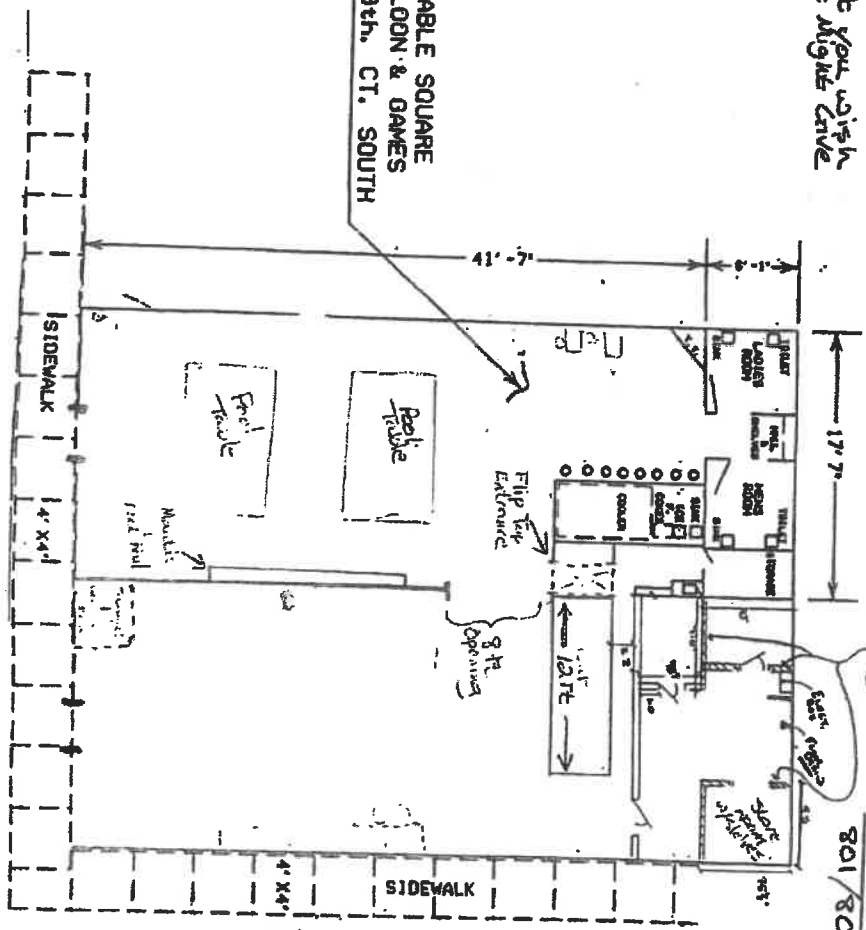
SAFETY AUDIT CHECKLIST

	YES	NO	SEE CMT
PREVENTING BACK INJURIES			
1. Are hand trucks available for moving heavy loads?			
2. Are employee instructed to ask for help when lifting heavy loads?			
3. If possible, are you having the distributor set beer kegs, soda syrup, and other heavy items?			
4. Have you asked distributors to deliver goods in smaller portions, to reduce the weight of supplies?			
5. Are you storing heavy items off the floor, so that an employee does not need to lift below knee level or above shoulder height?			
6. Are carts available for moving goods? Store goods at cart level for easy transfer of heavy items from the shelf to the cart.			
7. Are abdominal (back) belts being used? If so, have the employees received training on how to use the back belt and its limitations?			
8. Are all new employees being trained in proper lifting techniques during their initial training period?			
9. Are employees that must stand in one area provided with floor mats to help reduce back and spine stress?			

COMMENTS: _____

Jimbo's Copy
 of a stupid Childhood Idea?
 Be Careful what you wish
 for - God Wast Might Give
 It to You...

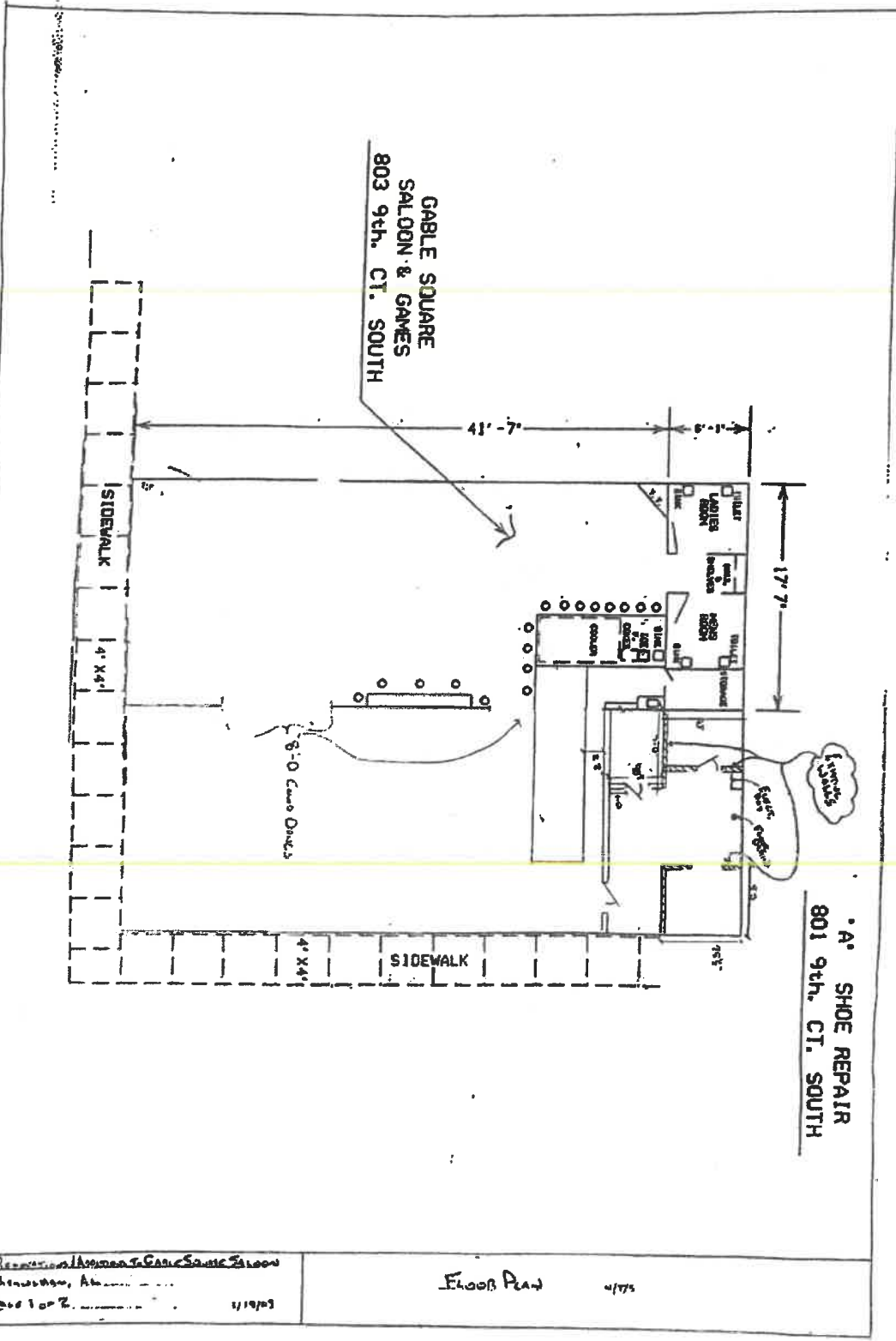
CABLE SQUARE
SALOON & GAMES
 801 / 803 9th. CT. SOUTH



SHOE REPAIR
 801 9th. CT. SOUTH
 801 / 803 9th. CT. SOUTH

Permitting Authority to Cable Square Saloon
 Applicant: Al
 Date: 1/2/82

Floor Plan 1/1/82

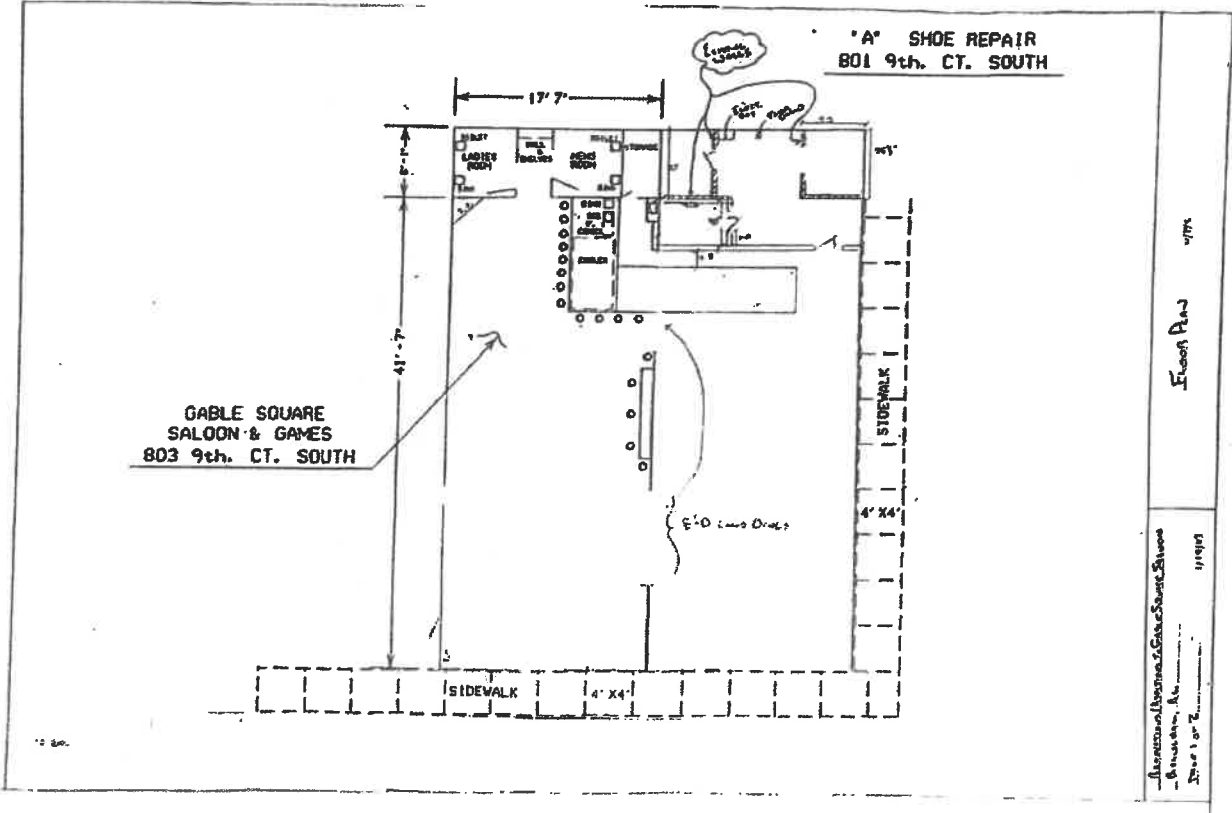


GABLE SQUARE
 SALOON & GAMES
 803 9th. CT. SOUTH

'A' SHOE REPAIR
 801 9th. CT. SOUTH

Revised from Amen to Gable Square Saloon
 Benton, Ark
 1/19/23

FLOOR PLAN 4/17/23



11/19/18
Floor Plan

801 9th Ct. South
Shoe Repair
11/19/18

PARCEL ID: 012900024012001000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2019

DATE: Thursday, September 16, 2021 7:47:31 AM

OWNER: MAKA INVESTMENT CO INC

ADDRESS: PO BOX 12004

CITY/STATE: BIRMINGHAM AL

ZIP+4: 35202--2004

SITE ADDR: 1100 10TH ST S

CITY/STATE: BHAM, AL

ZIP: 35205



LAND: \$91,500.00

BLDG: \$289,100.00

OTHER: \$0.00

AREA: 14,470.12

ACRES: 0.33

SUBDIVISION INFORMATION:

NAME

BLOCK:

LOT:

NAME	BLOCK:	LOT:
Section: 2-18-3W		
Land Slide Zones: Not in Land Slide Zones		
Historic Districts: Not in Historic Districts		
Commercial Revitalization District: Not in Commercial Revitalization District		
Fire District: In Fire District		
Flood Zones: Not in Flood Zones		
Tax Increment Financing District: In Tax Increment Financing District		
Neighborhoods: Glen Iris (1702)		
Communities: Southside (17)		
Council Districts: District - 3 (Councilor: Valerie A. Abbott)		
Zoning Outline: B1		
Demolition Quadrants: DEM Quadrant - 1		
Impaired Watersheds: Not in Impaired Watersheds		
Strategic Opportunity Area: Not in Strategic Opportunity Area		
RISE Focus Area: In RISE Focus Area		
Tax Delinquent Property: Not in Tax Delinquent Property		
EPA Superfund: Not in EPA Superfund		
Opportunity Zones: In Opportunity Zones		
Judicial Boundaries: JEFFERSON		

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

LICENSE STATUS REPORT FORM

Date: **10/18/21**

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name Kuntry Klubb Inc
Business Name Kuntry Klubb
Business Address 1157 Bankhead Hwy W

Type of License & Description

- | | |
|---|--|
| <input checked="" type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input checked="" type="checkbox"/> Pool Table Permit |
| <input checked="" type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Thomas Neighborhood Association met on 11-2-21 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

9 Attendance ___ Oppose 9 Support ___ No Recommendation

Reason for Opposition _____

Applicant: attended NA meeting did not attend NA meeting

Alonso Devoce
President

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

New Application: Lounge Retail Liq – Class I On/Off Premise Type 010

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Kuntry Klubb Inc.
Mailing Address: 1157 Bankhead Hwy W
Birmingham, AL 35204
Trade Name: Kuntry Klubb
Location Address: 1157 Bankhead Hwy W
Contact Number: (205)563-2075
Contact Person: Lynette Peters

New Application Transfer

Type of License

- | | |
|--|--|
| <input checked="" type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input checked="" type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input checked="" type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 50TBS/200CHS

Date Applied: 10/18/21

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

LOUNGE RETAIL LIQ-CLASS I ON/OFF PREM TYPE 010
(Enter Type of License Applied For)

By: GS
(Revenue Official)

1. Name of Applicant (s) Kuntry Klubb Inc.
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
ALDL# [REDACTED] Maurice Montez King	President	[REDACTED]	729 Sunhill Rd NW, Apt. C Birmingham, AL 35215	2 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 946-421 Page: 1 of 3 Date: 10/05/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Kuntry Klubb

4(a) Location 1157 Bankhead Hwy W
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35204 County Jefferson Shelby

(b) Length of time at this location

(c) Mailing Address: 1157 Bankhead Hwy W Birmingham, AL 35204

(d) Business Phone Fax:

Other Contact: (205)563-2075

5. Name, trade name and License number of last or previous licensee: 2016 Carmichael Inc
Trade name Carmichael's Year 2017 Type 150H 150M Taxpayer ID 469301

6 (a) Owner of real estate for which license is desired National Eagle
PO Box 110962 Campbell, CA 95011 Address

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? 50TBS/200CHS

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully

8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II
(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
NO-Applicant				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 14th day of October, 2021

M. Curtis King
Signature of Applicant

[Signature]
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

\$25.00 Application Fee to be paid to cashier before processing

Application For

Pool Table Permit

**Office of the Mayor
City of Birmingham
Birmingham, Alabama**

Date:10/18/21

Your petitioner, Kuntry Klubb Inc.

(Name)

[REDACTED]

(D.O.B)

;

B

(RACE)

; respectfully represents that he is a resident Citizen of

Alabama, residing at 729 Sunhill Rd NW Apt. C

(Street Address)

Birmingham

(CITY)

;

35215

(ZIP)

;

(205)563-2075

(TELEPHONE)

and that he desires to

operate

(Number)

slot or coin-operated pool table(s) or

standard pool table(s) at (Number)

Kuntry Klubb

(Name of Business)

;

1157 Bankhead Hwy W

(Location Address)

563-2075

(TELEPHONE)

in the City of Birmingham; wherefore your petitioner

prays that he may be granted a permit to operate such business under and in accordance with the provisions of Title 12, Article C, Volume II of the General Code of the City of Birmingham, Alabama 1980, regulating the same.

I presently hold a

Applying for Lounge Retail Liq-Class I

(TYPE OF BUSINESS)

at this place of business

Approved by;

Date: _____

DANCE APPLICATION

(DIV I, DIV II & DIV III)

10/18/2021
DATE

Chief of Police
City of Birmingham
Birmingham, Alabama

I, Maurice King _____ [REDACTED] _____ B _____
(Name of Applicant) (D.O.B.) (Race)
respectfully represent that I am a resident citizen of Alabama, residing at

729 Sunhill Rd NW _____ Birmingham _____ 563-2075
(Street Address) (City) (Telephone)

and as operator of Kuntry Klubb _____
(Name of Business)

1157 Bankhead Hwy W _____ 563-2075
(Street Address) Telephone)

in the City of Birmingham, Alabama, request that I be granted to allow

Division I _____
(Division I) (Division II) (Division III)

dancing at such place of business under and in accordance with the provisions of (Title 12, Article B, Vol. II of the General code of the City of Birmingham, Alabama 1980) as amended, regulating the same. I have paid the fee of _____ to cover the (\$25 or \$500) cost of investigation. The size of the dance area is 155 square feet

and is located as described in the drawing on the reverse side of this application I presently hold a Applying for Lounge Retail Liquor _____
(Type of Alabama A.B.C. Board License)

At this place of business in the name of Kuntry Klubb Inc. _____
(Person, Firm or Corp. Holding License)

The name of the person in control of the premises and under whose supervision dancing will be conducted is Maurice King _____

\$25.00 for Division I, \$50.00 for Division II Birmingham Police Department Background Investigation Form will be completed.

KOUNTRY KLUBB INC.

SAFETY PLAN

Location: 1157 Bankhead Hwy West, Birmingham AL 35204

October 18, 2021

Is an Upscale Night Club, and Entertainment Venue.

The venue has an occupancy capacity of about 200 people. The average attendance will be approximately 150 people. The Venue will host shows, workshops, concerts, conferences, weddings, and receptions.

This is privately owned facility that will exercise serious discretion as to who will be allowed to use the venue. There will not be anyone admitted under 21 years of age. Crowd control no admittance over capacity. All clients who reserve the venue will have an agreement that states all rules and regulations.

For all openings using this venue Birmingham Police Department off duty personnel will be paid to provided security. No tolerance zone.

There are two entries and exits.

There will not be any trash or debris on the parking lot or premises.

The contact information for the person responsible for address safety, security, City Codes, and ordinances dealing with the City of Birmingham and the surrounding neighborhood. Patrons and the neighbors will be number one priority in making sure the venue is not a nuisance.

Contact person Maurcie King (205) 480-4849.

KOUNTRY KLUBB INC.

SAFETY PLAN

Location: 1157 Bankhead Hwy West, Birmingham AL 35204

November 30, 2021

Is an Upscale Night Club, and Entertainment Venue.

The venue has an occupancy capacity of about 200 people. The average attendance will be approximately 150 people. The Venue will host shows, workshops, concerts, conferences, weddings, and receptions.

This is privately owned facility that will exercise serious discretion as to who will be allowed to use the venue. There will not be anyone admitted under 21 years of age. Crowd control no admittance over capacity. All clients who reserve the venue will have an agreement that states all rules and regulations. We will hire Birmingham Police Department for security.

For all openings using this venue Birmingham Police Department off duty personnel will be paid to provided security. No tolerance zone.

There are two entries and exits.

There will not be any trash or debris on the parking lot or premises.

The contact information for the person responsible for address safety, security, City Codes, and ordinances dealing with the City of Birmingham and the surrounding neighborhood. Patrons and the neighbors will be number one priority in making sure the venue is not a nuisance.

Contact person Maurcie King (205) 480-4849.

TIME 5pm - until 2AM
Friday, Saturday

KOUNTRY KLUBB INC.

SAFETY PLAN

Location: 1157 Bankhead Hwy West, Birmingham AL 35204

November 30, 2021

Is an Upscale Night Club, and Entertainment Venue.

The venue has an occupancy capacity of about 200 people. The average attendance will be approximately 150 people. The Venue will host shows, workshops, concerts, conferences, weddings, and receptions.

This is privately owned facility that will exercise serious discretion as to who will be allowed to use the venue. There will not be anyone admitted under 21 years of age. Crowd control no admittance over capacity. All clients who reserve the venue will have an agreement that states all rules and regulations. We will hire Birmingham Police Department for security.

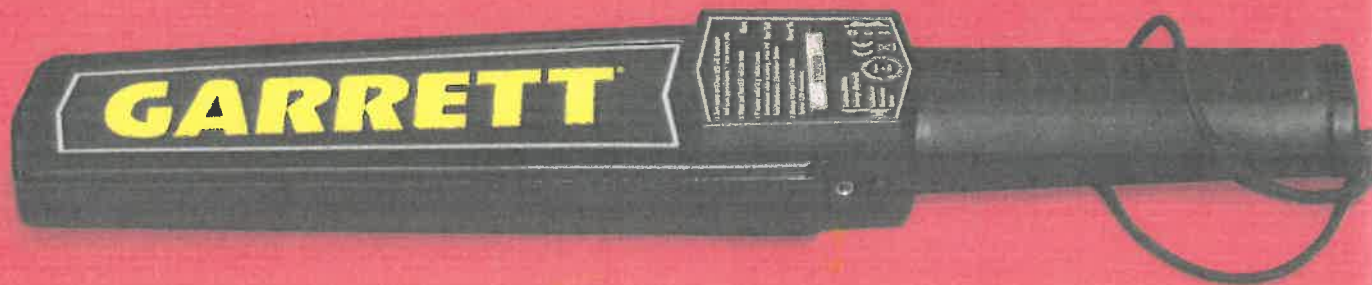
For all openings using this venue Birmingham Police Department off duty personnel will be paid to provided security. No tolerance zone.

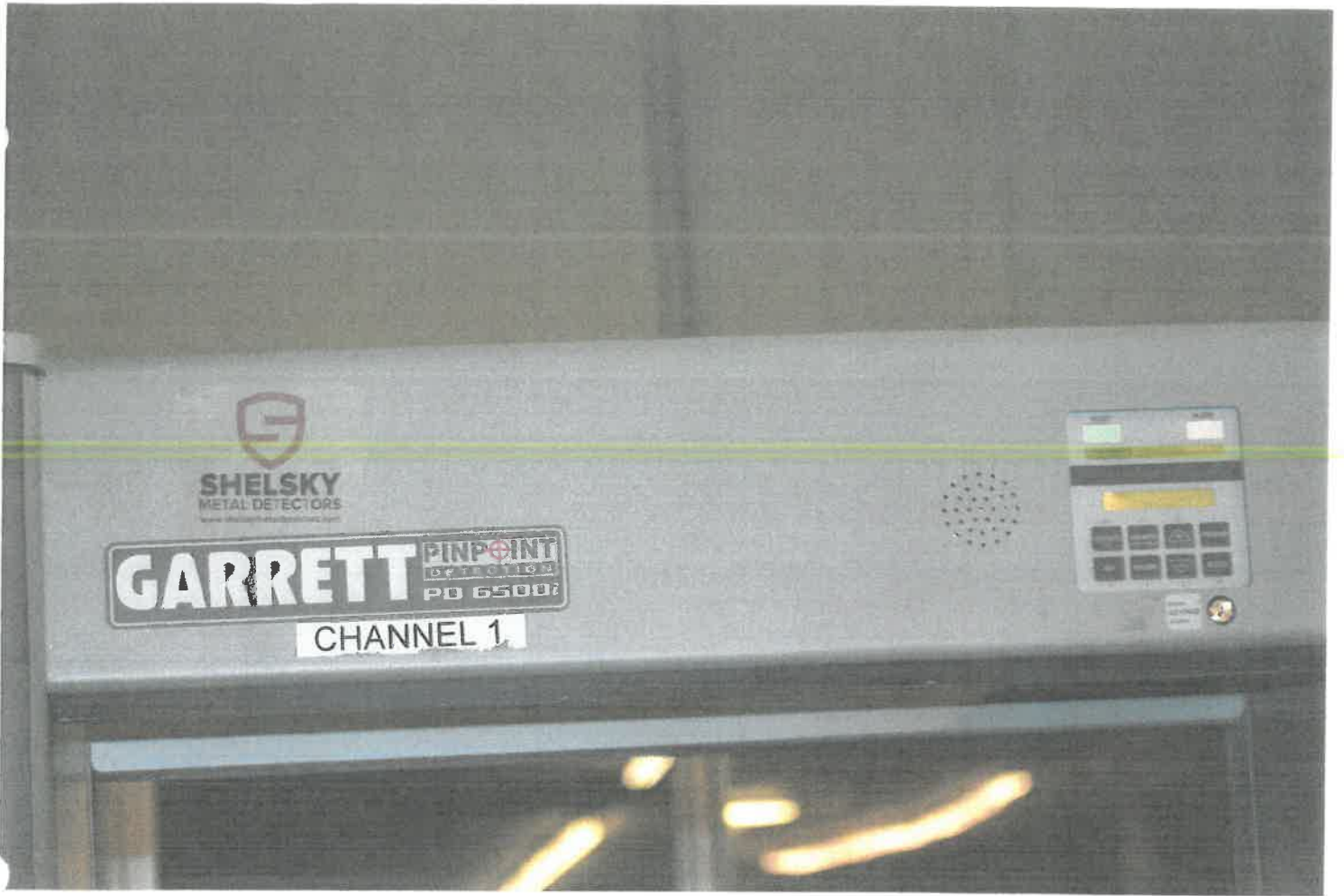
There are two entries and exits.

There will not be any trash or debris on the parking lot or premises.

The contact information for the person responsible for address safety, security, City Codes, and ordinances dealing with the City of Birmingham and the surrounding neighborhood. Patrons and the neighbors will be number one priority in making sure the venue is not a nuisance.

Contact person Maurcie King (205) 480-4849.







PARCEL ID: 012200281008008000

SOURCE: TAX ASSESOR RECORDS **TAX YEAR:** 2019

DATE: Thursday, October 14, 2021 1:17:06 PM

OWNER: ATLANTA CAPITAL LLC

ADDRESS: P O BOX 110962

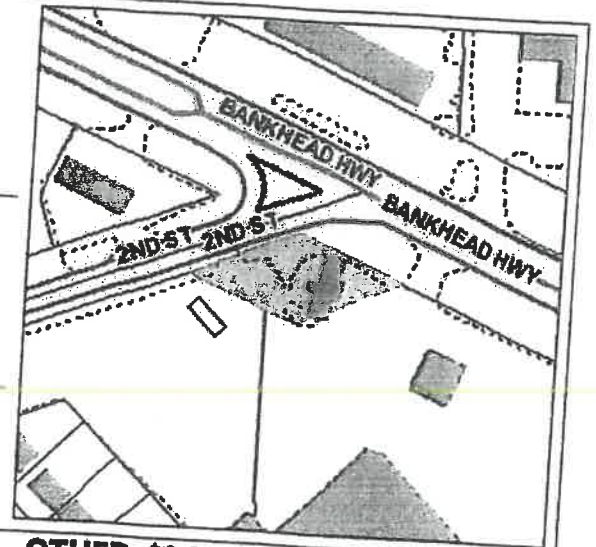
CITY/STATE: CAMPBELL CA

ZIP+4: 95011

SITE ADDR: 1117 BANKHEAD HWY W

CITY/STATE: BHAM, AL

ZIP: 35204



LAND: \$33,100.00

BLDG: \$72,100.00

OTHER: \$0.00

AREA: 14,756.34

ACRES: 0.34

SUBDIVISION INFORMATION:

NAME

BLOCK: 0000

LOT: 0000

Section: 28-17-3W
Land Slide Zones: Not in Land Slide Zones
Historic Districts: Not in Historic Districts
Commercial Revitalization District: Not in Commercial Revitalization District
Fire District: Not in Fire District
Flood Zones: Not in Flood Zones
Tax Increment Financing District: Not in Tax Increment Financing District
Neighborhoods: Thomas (1306)
Communities: Pratt (13)
Council Districts: District - 8 (Councilor: Steven W. Hoyt)
Zoning Outline: CB2
Demolition Quadrants: DEM Quadrant - 2
Impaired Watersheds: Impaired Watershed - Upper Village Creek
Strategic Opportunity Area: Not in Strategic Opportunity Area
RISE Focus Area: In RISE Focus Area
Tax Delinquent Property: Not in Tax Delinquent Property
EPA Superfund: Not in EPA Superfund
Opportunity Zones: In Opportunity Zones
Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

LICENSE STATUS REPORT FORM

Date: **7/15/21**

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name Magic City Elite Event Center1 LLC
Business Name MCE Event Center
Business Address 2019 Avenue C Ens

Type of License & Description

- | | |
|---|---|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input checked="" type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input checked="" type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The _____ Neighborhood Association met on _____ and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

10 Attendance 3 Oppose 6 Support 1 No Recommendation

Reason for Opposition _____

Applicant: attended NA meeting did not attend NA meeting


President VP

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

NEW APPLICATION: SPECIAL RETAIL LIQ TYPE 160/MORE 30 DAYS

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Magic City Elite Academy Event Center1 LLC
Mailing Address: 2019 Avenue C Ens
Birmingham, Al 35218
Trade Name: MCE Event Center
Location Address: 2019 Avenue C Ens
Contact Number: (205) 410-4195 Contact Person:
Brenda Kennedy

New Application Transfer

Type of License

- | | |
|--|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input checked="" type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input checked="" type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 11tbs/58chs

Date Applied: 7/13/2021

Revenue Examiner: TB

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

SPECIAL RETAIL LIQ TYPE 160/MORE 30 DAYS

(Enter Type of License Applied For)

By: **GS**

(Revenue Official)

1. Name of Applicant (s) Magic City Elite Academy Event Center1 LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence, Address	Length of Residence at Place Named
<u>ALDL# [REDACTED] Fred Douglas Kennedy</u>	<u>Member</u>	<u>[REDACTED] Newark NJ</u>	<u>1308 U.W. Clemon DR Birmingham, AL 35214</u>	<u>16 years</u>

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 865-401 Page: 1 of 3 Date: 6/2/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name MCE Event Center
- 4(a) Location 2019 Avenue C Ens
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35218 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: **2019 Avenue C Ens Birmingham, AL 35218**
- (d) Business Phone _____ Fax: _____ Other Contact: **(205) 410-4195**

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired New Good Hope Missionary
PO Box 8135 Birmingham, AL 35218
Address _____

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? **11TBS/58CHS**

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II
(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required Yes No
- (4) Park Board Permission Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 13th day of July, 2021

G. Kennedy
Signature of Affiant

[Signature]
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

Magic City Elite Academy Event Center

Safety Plan

Fred Kennedy
Magic City Elite Academy Event Center
2019 Ave C Birmingham, AL 35218
June 22, 2021

What days of the week is your business open?

The Hours of Operation are:

Tuesday 6pm-2am

Thursday 6pm-2am

Friday 9pm-3pm

Saturday 9pm-3pm

Sunday 6pm- 2pm

How do you make sure crowds inside your establishment remain orderly? How do you ensure crowds outside your establishment remain orderly?

We make sure security enforcement monitor the crowds inside and out frequently to make sure the crowd is under control.

(A) Do you have no Loitering signs, If so how many, where?

Yes, we have four No Loitering signs; there locations are two on the fence, one in the front of the building and one on the side of the building.

(B) Do you have cameras? If so how many? Inside/Outside or both?

Yes, 6 cameras all around the premises.

Where do your customers/patrons park when they're at your establishment?

Our customers park in our gated parking lot.

How does your establishment control who comes in and out of your establishment? How do you control who uses your parking area if it's private parking.

We control who comes in and out our establishment and who uses our parking lot with Private property signs, our trained security guards, cameras around the premises and our gated parking lot.

Do you use Security Guard? If so how many? How often do you use them? Where they trained "in house" or by a company? If they were trained by a company, provide the name(s). Do you employ Off-Duty BPD officers? If so how many and how often?

We have 4 in house Security Guards. We use the every night that we are open. Our security guards were trained in house. We have 2 off duty BPD officers. BPD officers are used every night we are open.

What do you/your employees do to ensure that individuals under the age of 21 are not allowed to buy/ consume alcohol at your establishment?

We check everyone ID that enters the establishment. We use a calculator to determine if they are under 21 and a wristband is place on them if they are under 21.

Does your establishment allow individuals under the age of 21 to enter? If so how do you identify people who are under 21 years of age?

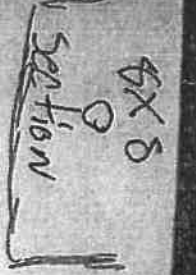
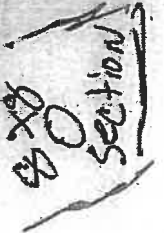
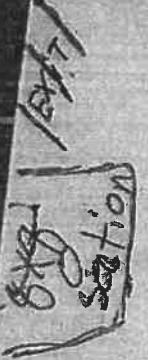
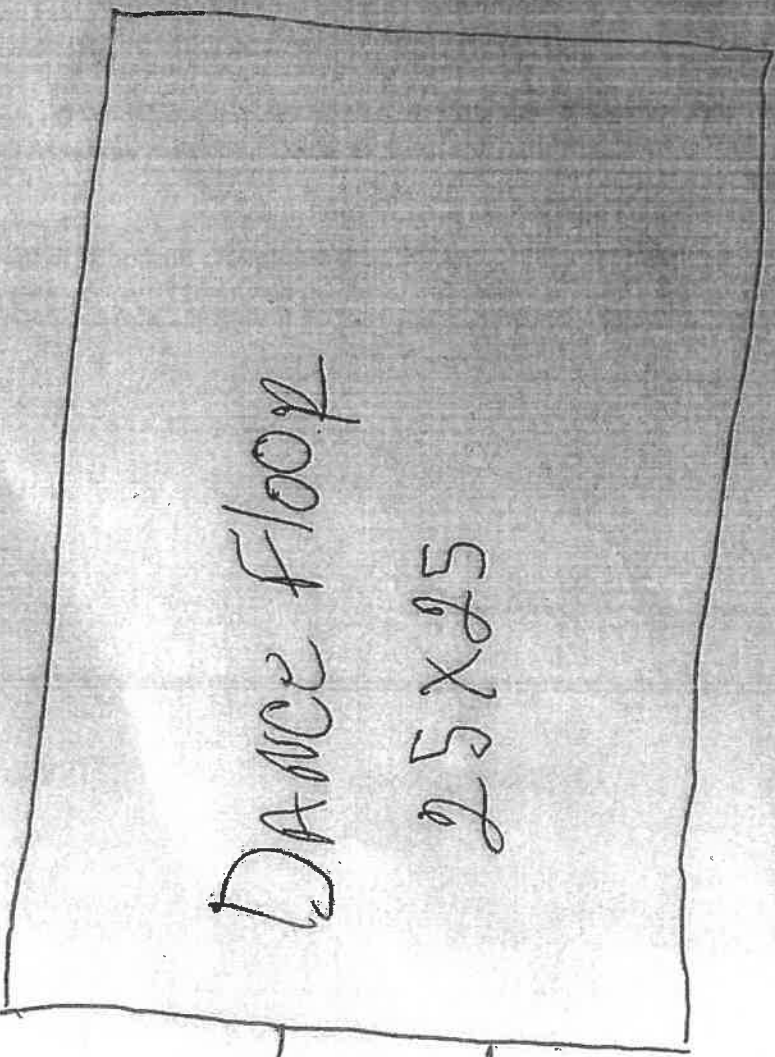
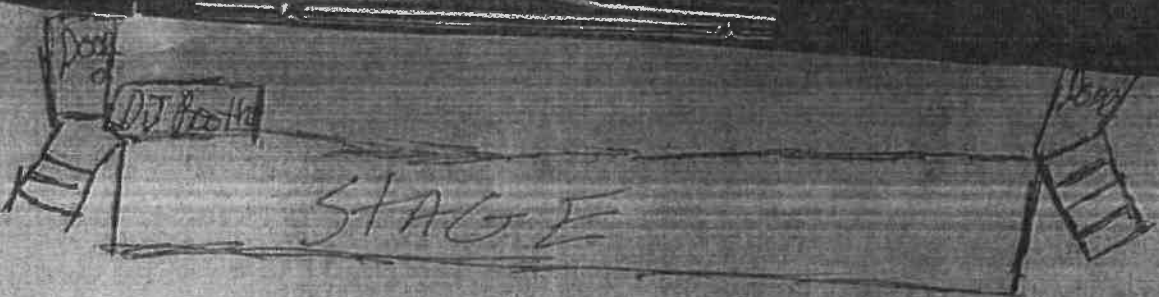
Yes we allow individuals under the age of 21 to enter. They are identified with wristbands.

What is being done at your location to help ensure there are no accentual fires?

The establishment has multiple fire alarms and extinguishers and different locations.

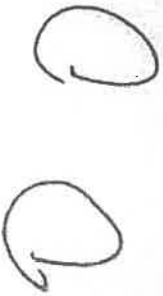
In the event of an emergency how is your staff trained to evacuate patrons? Do certain employees have certain duties during emergencies? How does your establishment contact/work with police and EMS during an emergency?

The staff are trained to evacuate our patrons threw one of our 4 exits. Yes, we have designated employees to check the scene and victims , call the local emergency authority. In the line of emergency someone at the establishment would contact the police by dialing 911 also the BPD police staff that works at the establishment would notify Police and EmS.



Men / Women
Restroom Restroom

Restroom Restroom



PARCEL ID: 012200313033002000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2019

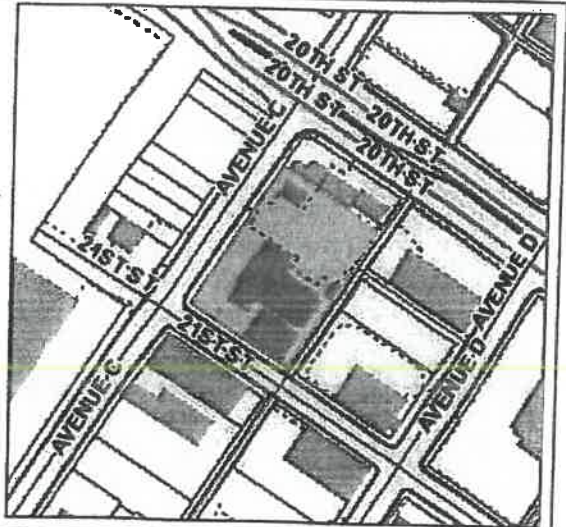
DATE: Friday, June 25, 2021 11:42:54 AM

OWNER: NEW GOOD HOPE MISSIONARY

ADDRESS: PO BOX 8029

CITY/STATE: BIRMINGHAM AL

ZIP+4: 35218--1650



SITE ADDR: 2019 AVENUE C

CITY/STATE: ENSLEY, AL

ZIP: 35218

LAND: \$29,000.00

BLDG: \$257,600.00

OTHER: \$0.00

AREA: 31,979.73

ACRES: 0.73

SUBDIVISION INFORMATION:

NAME ENS RE BLK 20C 22-31-3

BLOCK: 20-C

LOT: 5-A

Section: 31-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Downtown Ensley

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Ensley (801)

Communities: Ensley (8)

Council Districts: District - 9 (Councilor: John Hilliard)

Zoning Outline: CM1

Demolition Quadrants: DEM Quadrant - 2

Impaired Watersheds: Impaired Watershed - Upper Village Creek

Strategic Opportunity Area: In Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: Not in Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

LICENSE STATUS REPORT FORM

Date: **11/13/2020**

To: **Hunter Williams, Chairman
Public Safety**

Subject: **Applicant's Name** Montego Temple
Business Name Mahogany
Business Address 1709 3rd Ave W

Type of License & Description

- | | |
|---|--|
| <input checked="" type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input checked="" type="checkbox"/> Pool Table Permit |
| <input checked="" type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The RISING-WEST PRINCETON Neighborhood Association met on FEB 8, 2021 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

18 Attendance 1 Oppose 17 Support _____ No Recommendation

Reason for Opposition _____

Applicant: Yes attended NA meeting _____ did not attend NA meeting

Hattie L. Williams /em
President

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain _____
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____ 184
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
(Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required Yes No
- (4) Park Board Permission Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 27th day of April, 2021

[Signature]
Signature of Affiant

[Signature]
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

Transfer Application: Lounge Retail Liquor Class I On/Off Prem & Pool Permit

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Montego Temple
Mailing Address: 779 Montclair Rd Apt F
Birmingham AL 35213
Trade Name: Mahogany
Location Address: 1709 3rd Ave W
Contact Number: (205)876-7817 Contact Person: Montego Temple

New Application Transfer

Type of License

- | | |
|--|--|
| <input checked="" type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input checked="" type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 10TBS/20CHS

Date Applied: 11/13/2020

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)

Revenue Examiner: GS

New Application: Division I Dance Permit (customer)

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Montego Temple

Mailing Address: 779 Montclair Rd Apt F
Birmingham AL 35213

Trade Name: Mahogany

Location Address: 1709 3rd Ave W

Contact Number: (205)876-7817 Contact Person:
Montego Temple

New Application Transfer

Type of License

- | | |
|--|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input checked="" type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 10TBS/20CHS

Date Applied: 11/13/2020

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

For Zoning Purposes Only:
Lounge Retail Lic - Class I
Transfer: NO SPU Needed

TAXPAYER IDENTIFICATION NUMBER
(City Office Use Only)

CITY OF BIRMINGHAM
APPLICATION FOR TAX CERTIFICATE

The information that you provide in this application is protected by the confidentiality provisions outlined in Ordinance No. 97-183, "The Business License Code of the City of Birmingham", Article II, Section 14. Please type or print. This application should be completed fully to avoid delays in processing.

Section 1 - WHAT WOULD YOU LIKE TO DO?

- Register a new business (Please complete all sections)
- Add a New Location or Tax Type to your current registration (Please complete Sections 2, 3, 5-10, 12, 13, and 14)
- Change Business Ownership of your current registration (Please complete all sections)
- Change the Mailing Address only for your current registration (Please complete Sections 2, 8-10, 12, 13 and 14)
- Change the Location Address of your current registration (Please complete Sections 2, 3, 5-13, and 14)
- Change in Corporate Officers, Members, or Partners (Please complete Sections 2, 5, 7-9,, 11-13, and 14)
- Provide a general "update" of your current registration information (Please complete all sections)

Section 2 - LEGAL NAME AND MAILING ADDRESS to which tax forms are to be sent:
(Note: If mailing address is a post office box, the street address of the business must also be indicated.)

Full Legal Name: Montego Temple
Attention: _____
Address: 779 Montclair Rd Apt F
City: Birmingham State: AL Zip Code: 35213
Area Code and Phone Number: (205)876-7817
Area Code and Fax Number: _____
Name of Contact Person: Montego Temple
E-Mail: _____ Website Address: _____

Section 3 - TRADE NAME AND LOCATION ADDRESS of office in Birmingham. If you are registering more than one location, please see reverse side of this form. (Important Note: All business locations are subject to zoning approval.)

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): Mahogany
Attention: _____
Address: 1709 3rd Ave W
City: Birmingham State: AL Zip: 35208
Area Code and Phone Number of Business Location: _____
Area Code and Fax Number of Business Location: _____
Name of Contact Person at Business Location: _____
E-Mail: _____ Website Address: _____

Section 4 - CHANGE OF OWNERSHIP resulting from merger, purchase or acquisition of an existing business.
If applicable, this section MUST be completed.

Former Owner: Montego Temple
Trade Name (d/b/a) Mahogany
Mailing Address of Former Owner 779 Montclair Rd Apt F Birmingham AL 35213
Address (es) of Former Location(s) 1700-A 3rd Ave W Birmingham AL 35208
Area Code and Phone Number of Former Owner: (205)876-7817

APPLICATION FOR TAX CERTIFICATE (CITY OF BIRMINGHAM, ALABAMA)

SECTION 14 - ADDITIONAL TAXABLE LOCATIONS

Trade Name and Location Address of office in Birmingham. If you are registering more than one location, please use this section. Attach additional sheets if necessary. **(Important Note: All business locations are subject to zoning approval.)**
Location

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): _____
 Attention: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Area Code and Phone Number of Business Location: _____
 Area Code and Fax Number of Business Location: _____
 Name of Contact Person at Business Location: _____
 E-Mail: _____ Website Address: _____

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:
HOME OCCUPATION CERTIFICATE EXECUTED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE

SIC OR NAICS _____
BLIC _____
TERRITORY _____
ANNEX _____
HEALTH DEPT PERMIT _____
OTHER REQUIRED PERMIT _____
ARTICLES OF INCORPORATION _____
CERTIFICATE OF AUTHORITY _____
TAX FORMS ORDERED <input type="checkbox"/> NBL ORDERED <input type="checkbox"/>

Trade Name and Location Address of office in Birmingham. If you are registering more than one location, please use this section. Attach additional sheets if necessary. **(Important Note: All business locations are subject to zoning approval.)**
Location

Please select: Commercial Establishment Private Residence No Physical Birmingham Location

Trade Name (d/b/a): _____
 Attention: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Area Code and Phone Number of Business Location: _____
 Area Code and Fax Number of Business Location: _____
 Name of Contact Person at Business Location: _____
 E-Mail: _____ Website Address: _____

CITY OFFICE USE ONLY Location

ZONING APPROVAL AND COMMENTS:
HOME OCCUPATION CERTIFICATE EXECUTED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE

SIC OR NAICS _____
BLIC _____
TERRITORY _____
ANNEX _____
HEALTH DEPT PERMIT _____
OTHER REQUIRED PERMIT _____
ARTICLES OF INCORPORATION _____
CERTIFICATE OF AUTHORITY _____
TAX FORMS ORDERED <input type="checkbox"/> NBL ORDERED <input type="checkbox"/>

Section 5 - TYPE OF OWNERSHIP

Please indicate the form of organization. NOTE: Please refer to the accompanying "General Information for Preparing an Application for Tax Certificate Form" instruction sheet for a listing of supplemental documentation to be included with this application.

1. Alabama Corporation (Incorporated in Alabama) 1. Foreign Corporation (Incorporated in another state)
2. Partnership (two or more owners)
3. Sole Proprietor (one owner)
4. Unincorporated Association (i.e., PA)
5. Other _____
6. Limited Liability Partnership (LLP)
7. Limited Liability Company (LLC)

Section 6 - TYPE OF BUSINESS

Please indicate the principal business activity category.

1. Manufacturer
2. Contractor (Please Specify) _____
3. Wholesaler
4. Retailer
5. Other (Please Specify) **Lounge**
6. Food/Eating Establishment
7. Day Care Center
8. Home Occupation/Home Office
(Please Specify the type of occupation or office) _____
9. State Certified, State Regulated, or State Licensed Occupations, (Please Specify) _____
10. Transient Vendors/Special Events:
Date(s) of the Event _____
Event Location _____

Section 7 - PRINCIPAL BUSINESS ACTIVITY AND PRODUCT

You should indicate the one business activity that accounts for the largest percentage of gross income. State the broad field of business activity as well as the product or service. For example-Activity: Wholesale Sales / Product: Pharmaceuticals OR Activity: Manufacturing / Product: Automobiles. Note: This information should be the same information as required by the Internal Revenue Service on Schedule c of Form 1040 for Sole Proprietorships.

Activity: Lounge Product: Alcohol

Section 8 - FEDERAL TAX ID NUMBER / NUMBER OF EMPLOYEES

Enter Federal Identification Number (REQUIRED) and the number of employees that will be working in Birmingham.

Federal ID Tax Number _____ Number of Employees in Birmingham (Required) _____

Section 9 - COMMENCEMENT OF BUSINESS ACTIVITY

Enter Date Business Activity Will Begin in Birmingham: Month _____ Day _____ Year _____

Enter Date City of Birmingham Taxpayer ID Applied For: Month _____ Day _____ Year _____

Section 10 - Tax Liabilities Check the taxes for which you are liable.

- Sales Tax TAX IDENTIFICATION NUMBERS NOW ASSIGNED TO YOU: (Write "None" if no number assigned)
- Sellers Use Tax State of Alabama Sales Tax Number _____
- Consumers Use Tax State of Alabama Sellers Use Tax Number _____
- Lease Tax State of Alabama Consumers Use Tax Number _____
- Occupational Tax- Employers State of Alabama Lease Tax Number _____
- Lodgings Tax State of Alabama Lodgings Tax Number _____
- Business License Tax State of Alabama Unemployment Tax Number _____

If you have more than one business location, it is assumed that you will file consolidated returns for each of the taxes for which you may be liable, including sales, use, lease, occupational, and lodgings taxes. Each separate business location requires a separate business license

TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE
(CONTROLLED)

I, Montego Temple (current taxpayer), holding City of Birmingham License ID# 469831 (six-digit City ID), located at 1700-A 3rd Ave W (business address) Birmingham AL 35208, hereby agree that said License be transferred to Montego Temple - 1709 3rd Ave W Bham, AL 35208 (applicant) provided Montego Temple (applicant) obtains approval from the local governing body and meets all the requirements of the ABC Board. I understand that I am responsible for the operation of this licensed establishment and for all taxes due until Montego Temple (applicant) obtains his/her license from the ABC Board.

I also understand that if for any reason this transfer is not approved by the local governing body or the ABC Board, I must take over complete control, operation, and responsibility of these licensed premises. If I do not continue operating this licensed establishment, then, I will turn in my ABC Board License to the local ABC Board Field Office and all my City of Birmingham licenses to the Revenue Division of the Finance Department of the City of Birmingham.

I further understand that this license will not be transferred until all taxes and licenses are paid and current.

LICENSEE Montego Temple

DATE 11.13.20

APPLICANT Montego Temple

DATE 11.13.20

WITNESS
NOTARY Gregory Stanley

DATE 11/13/20

STORAGE

5,000 Sq Ft

Rest Room

DANCE FLOOR

DJ Booth

Outside BACK DOOR

HALL WAY

OFFICE

POOL TABLE

BAR

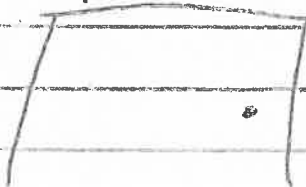
Seating Area

PAY Here

NOODLE

FRONT DOOR

1709 3rd AVE WEST MINN



DANCE APPLICATION

(DIV I, DIV II & DIV III)

11/13/2020

DATE

Chief of Police
City of Birmingham
Birmingham, Alabama

I, Montego Temple 07/26/78 Black
(Name of Applicant) (D.O.B.) (Race)
respectfully represent that I am a resident citizen of Alabama, residing at

779 Montclair Rd Apt F Birmingham 876-7817
(Street Address) (City) (Telephone)

and as operator of Mahogany
(Name of Business)

1709 3rd Ave W 876-7817
(Street Address) Telephone)

in the City of Birmingham, Alabama, request that I be granted to allow

Division I
(Division I) (Division II) (Division III)

dancing at such place of business under and in accordance with the provisions of (Title 12, Article B, Vol. II of the General Code of the City of Birmingham, Alabama 1980) as amended, regulating the same. I have paid the fee of _____ to cover the
(\$25 or \$500)

cost of investigation. The size of the dance area is 500 square feet

and is located as described in the drawing on the reverse side of this application. I presently hold a Lounge Retail Liquor
(Type of Alabama A.B.C. Board License)

At this place of business in the name of Mahogany
(Person, Firm or Corp. Holding License)

The name of the person in control of the premises and under whose supervision dancing will be conducted is Montego Temple

\$25.00 for Division I, \$50.00 for Division II Birmingham Police Department Background Investigation Form will be completed.

LICENSE STATUS REPORT FORM

Date: 10/14/21

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name Neighborhood Market LLC
Business Name Neighborhood Market
Business Address 1313 14th Ave N

Type of License & Description

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input checked="" type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input checked="" type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Fountain Heights Neighborhood Association met on October 26, 2021 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

6 Attendance _____ Oppose 6 Support _____ No Recommendation

Reason for Opposition _____

Applicant: ✓ attended NA meeting _____ did not attend NA meeting

by conference call

Bondaria A. Lynn
President

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

Transfer Application: Beer – Type 050/ Wine – Type 070 (Off Premise)

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Neighborhood Market LLC
Mailing Address: 1313 14th Ave N
Birmingham, AL 35204
Trade Name: Neighborhood Market
Location Address: 1313 14th Ave N
Contact Number: (615)364-9490
Contact Person: Brian Sanders

New Application Transfer

Type of License

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input checked="" type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input checked="" type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs NA

Date Applied: 10/14/21

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

BEER-TYPE 050/WINE-TYPE 070(OFF PREMISE ONLY)
(Enter Type of License Applied For)

By: **GS**
(Revenue Offic

1. Name of Applicant (s) Neighborhood Market LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
TNDL# [REDACTED] Brian E Sanders	Member	[REDACTED] Birmingham, AL	709 Cedar Crest Dr Nashville, TN 37209	18 years
ALDL# [REDACTED] Gregory Lamon Ramsey	Member	[REDACTED] Birmingham, AL	2086 Greenside Way Hoover, AL 35226	13 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 895-179 Page: 1 of 3 Date: 09/02/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Neighborhood Market
- 4(a) Location 1313 14th Ave N
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35204 County Jefferson Shelby
- (b) Length of time at this location _____
- (c) Mailing Address: **1313 14th Ave N Birmingham, AL 35204**
- (d) Business Phone _____ Fax: _____ Other Contact: **(615)364-9490**

5. Name, trade name and License number of last or previous licensee: **KPS Food Mart Inc**
Trade name Singh Groceries Year 2013 Type 150K 150N Taxpayer ID 466443

- 6 (a) Owner of real estate for which license is desired E&J Properties
2104 Trailridge Circle Birmingham, AL 35214 Address _____
- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? _____

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other? _____

- 9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II
(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain Grocery Items
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days. Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days. Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days. Starting _____ Ending _____
 Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>No Applicants</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 14th day of October, 2021

B. Sanders
Signature of Applicant

Mary Stanley
Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE
(CONTROLLED)

I, KPS Food Mart Inc (current taxpayer), holding City of Birmingham
License ID# [REDACTED], located at 1313 14th Ave N

Birmingham, AL 35204 (six-digit City ID), (business address)
hereby agree that said License be

~~transferred~~ to Neighborhood Market LLC
~~provided~~ Neighborhood Market LLC (applicant)

~~from~~ Neighborhood Market LLC (applicant) obtains approval
from the local governing body and meets all the requirements of the

~~ABC~~ Board. I understand that I am responsible for the operation of
~~this~~ licensed establishment and for all taxes due until Neighborhood Market LLC
~~obtains~~ his/her license from the ABC Board. (applicant)

I also understand that if for any reason this transfer is not
approved by the local governing body or the ABC Board, I must take
over complete control, operation, and responsibility of these licensed
premises. If I do not continue operating this licensed establishment,
then I will turn in my ABC Board License to the local ABC Board Field
Office and all my City of Birmingham licenses to the Revenue Division
of the Finance Department of the City of Birmingham.

I further understand that this license will not be transferred
until all taxes and licenses are paid and current.

LICENSEE [Signature]
APPLICANT [Signature]
Witness [Signature]
NOTARY [Signature]

DATE 10/14/2021
DATE 10/14/2021
DATE 10/14/2021

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain Grocery Items
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____

(h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days. Starting Date _____ Ending Date _____

(i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days. Starting Date _____ Ending Dec. 31, _____

(j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days. Starting _____ Ending _____
 Note: Application must be filed 120 days in advance of event for which license is applied for)

- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required? Yes No
- (4) Park Board Permission? Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
NO Applicants				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 14th day of October, 2021

B. Sanders
 Signature of Applicant

Greg Stanley
 Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

**TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE
(CONTROLLED)**

I, KPS Food Mart Inc, holding City of Birmingham
(current taxpayer)

License ID# [REDACTED], located at 1313 14th Ave N
(six-digit City ID) Birmingham, AL 35204
(business address)

hereby agree that said License be
transferred to Neighborhood Market LLC
(applicant)

provided Neighborhood Market LLC
(applicant) obtains approval
from the local governing body and meets all the requirements of the

ABC Board. I understand that I am responsible for the operation of
this licensed establishment and for all taxes due until Neighborhood Market LLC
(applicant) obtains his/her license from the ABC Board.

I also understand that if for any reason this transfer is not
approved by the local governing body or the ABC Board, I must take
over complete control, operation, and responsibility of these licensed
premises. If I do not continue operating this licensed establishment,
then, I will turn in my ABC Board License to the local ABC Board Field
Office and all my City of Birmingham licenses to the Revenue Division
of the Finance Department of the City of Birmingham.

I further understand that this license will not be transferred
until all taxes and licenses are paid and current.

LICENSEE [Signature]
APPLICANT [Signature]
Witness [Signature]
NOTARY [Signature]

DATE 10/14/2021
DATE 10/14/2021
DATE 10/14/2021

PARCEL ID: 012200263004001000

SOURCE: TAX ASSESOR RECORDS **TAX YEAR:** 2019

DATE: Tuesday, October 12, 2021 9:17:12 AM

OWNER: SINGH HARMINDER JIT & LOBANA PA

ADDRESS: 2735 BESSEMER RD

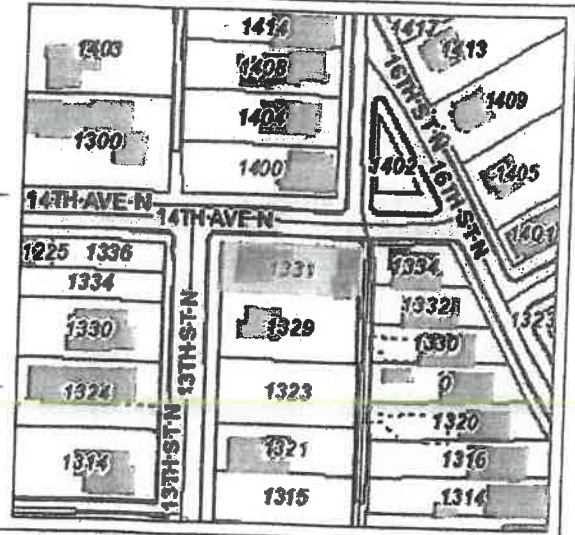
CITY/STATE: BIRMINGHAM AL

ZIP+4: 35208

SITE ADDR: 1331 13TH ST N

CITY/STATE: BHAM, AL

ZIP: 35204



LAND: \$4,900.00

BLDG: \$28,900.00

OTHER: \$0.00

AREA: 6,822.69

ACRES: 0.16

SUBDIVISION INFORMATION:

NAME FOUNTAIN HGTS LD 22-26-3

BLOCK: C

LOT: 1

Section: 26-17-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Fountain Hghts (1204)

Communities: Northside (12)

Council Districts: District - 5 (Councilor: Darrell O'Quinn)

Zoning Outline: CR4A

Demolition Quadrants: DEM Quadrant - 3

Impaired Watersheds: Impaired Watershed - Upper Village Creek

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: In RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: In Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

LICENSE STATUS REPORT FORM

Date: **10/28/21**

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name 3rd & 25 Investments LLC
Business Name P4L FoodMart
Business Address 3016 Winewood Rd

Type of License & Description

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input checked="" type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input checked="" type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Echo Highlands Neighborhood Association met on 11/4/21 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

24 Attendance 1 Oppose 23 Support ___ No Recommendation

Reason for Opposition There was some concern about recapture devices

at the station. Mr. Thuku did send emails the following day to show devices on gas pumps. There were some concerns about police reports and Mr. Thuku said he would come back to a future meeting to discuss security.

Applicant: attended NA meeting ___ did not attend NA meeting


President

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.



FIRE INSPECTION REPORT

BIRMINGHAM FIRE AND RESCUE SERVICE DEPARTMENT

FIRE PREVENTION DIVISION
317 1/2 15th STREET NORTH
BIRMINGHAM, AL 35203

PHONE NO. 205-250-7540 FAX NO. 205-250-7543

SUNPRO #: 033824

DATE: 11/16/21 TIME: _____ RECHECK OF INSPECTION ON: _____ (date) Page 1 of 1

COMPANY NAME: P46 Foodmart OCCUPANCY/USE: 13

ADDRESS: 3016 Winewood Rd BUSINESS LIC #: _____ PHONE: 205 742 084

CONTACT: 1211 S. ... INSPECTOR: J. D. ...

FIRE CODE/LIFE SAFETY

- | YES | NO | N/A | |
|-------------------------------------|--------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 01. Is the available number of exits adequate and properly arranged? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 02. Are corridor/aisle/stairways clear and unobstructed? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 03. Are exit doors equipped with approved hardware? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 04. Do exit doors swing in the direction of egress travel? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 05. Is the illumination of exits adequate? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 06. Are exit and directional signs provided and maintained? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 07. Is emergency lighting provided, maintained and tested? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 08. Are vertical openings protected? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 09. Is the integrity of rated corridors maintained? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Is interior wall finish and ceiling finish adequate? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Is separation from high hazard areas maintained? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Are combustible materials stored properly? _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13. Is address visible and properly posted? _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 14. Are fire dampers provided, maintained and tested properly? _____ |

HIGH RISE: Y N WINDOWLESS BLDG: Y N

COMMON FIRE HAZARDS

- | YES | NO | N/A | |
|-------------------------------------|--------------------------|--------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Are junction boxes and receptacle outlets covered? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Is permanent wiring used throughout? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Does Electrical equipment appear to be in good condition? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Is there proper clearance between heating unit and combustibles? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Are there "No Smoking" signs posted where needed? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 20. Does the facility maintain good housekeeping, including exterior? _____ |

SMOKE DETECTORS

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 21. Are smoke detectors installed and maintained? _____ |
|--------------------------|--------------------------|--------------------------|---|

FIRE EXTINGUISHERS

- | | | | |
|-------------------------------------|--------------------------|--------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 22. Are extinguishers accessible and mounted properly? _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 23. Are extinguishers inspected and serviced? _____
Date: <u>11/21</u> |

GENERATORS

- | | | | |
|--------------------------|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 24. Is an emergency generator provided? _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 25. Is it tested, maintained and serviced properly? _____ |

FIRE ALARM/SUPPRESSION SYSTEMS: See Page 2
SPECIAL FIRE HAZARDS: See Page 2

ADDITIONAL REMARKS:

All serious violations were taken care of.

RECHECK DATE: _____

Contact's Signature: X Inspector's Signature: J. D. ...

(Signature is to verify inspection was conducted, and it is not an admission of liability.)

COMPLETION OF THIS REPORT DOES NOT ENSURE THAT ALL VIOLATIONS/HAZARDS HAVE BEEN IDENTIFIED AND NOTED.

DISTRIBUTION: WHITE - Fire Prevention Division YELLOW - Occupant/Business Representative

Transfer Application: Beer-Type 050/ Wine-Type 070 (Off Premise Only)

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: 3rd & 25 Investments LLC

Mailing Address: 807 Royal Oaks DR
Birmingham, AL 35244

Trade Name: P4L FoodMart

Location Address: 3016 Winewood Rd

Contact Number: (205)942-0814

Contact Person:
Joshuah Thuku

New Application

Transfer

Type of License

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input checked="" type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input checked="" type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs NA

Date Applied: 10/28/21

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

BEER-TYPE 050/WINE-TYPE 070(OFF PREMISE ONLY)
(Enter Type of License Applied For)

By: **GS**
(Revenue Official)

1. Name of Applicant (s) 3rd & 25 Investments LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
ALDL# [REDACTED] Joshuah Kiniu Thuku	Member	[REDACTED] Nairobi, Kenya	807 royal Oaks Dr Birmingham, AL 35244	2 months

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 853-667 Page: 1 of 3 Date: 5/6/2021 County: Jefferson
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name P4L FoodMart

4(a) Location 3016 Winewood Rd
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35215 County Jefferson Shelby

(b) Length of time at this location

(c) Mailing Address: **807 Royal Oaks Dr Birmingham, AL 35244**

(d) Business Phone _____ Fax: _____ Other Contact: **(205)942-0814**

5. Name, trade name and License number of last or previous licensee: **HHPR Corp**
Trade name Jet Pep Year 2011 Type 150k 150n Taxpayer ID 466390

6 (a) Owner of real estate for which license is desired LGP Realty Holdings LP
600 Hamilton St, Ste 500 Allentown, PA 18101

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description Gas Station

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? _____

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:

(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No

(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other? _____

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

- 10 (a) Are these premises kitchen equipped? Yes No Not Applicable
- (b) Is kitchen apart from but convenient to the dining room? Yes No
- (c) Is place of business habitually and principally used for providing food to the public? Yes No
- (d) If not kitchen equipped, is any type of food served? Yes No If "Yes", explain Grocery Items
- (e) Are these premises equipped for on premises consumption of liquor? Yes No
- (f) Will this business be operating primarily as a package store? Yes No
- (g) Seating Capacity: _____
- (h) For a SPECIAL RETAIL LICENSE, less than thirty (30) days: Starting Date _____ Ending Date _____
- (i) For a SPECIAL RETAIL LICENSE, more than thirty (30) days: Starting Date _____ Ending Dec. 31, _____
- (j) For a SPECIAL EVENTS RETAIL LICENSE, not to exceed seven (7) days: Starting _____ Ending _____
 (Note: Application must be filed 120 days in advance of event for which license is applied for)
- (k) Event Sponsor _____ Phone Number _____
- (1) Sponsor Letter of Designation? Yes No
- (2) Multi-Vendor Sponsorship? Yes No
- (3) Street Closing Required Yes No
- (4) Park Board Permission Yes No

- 11 (a) Does the club charge and collect dues from elected members? Yes No
- (b) How many paid-up members are there in the club? _____
- (c) Are regular meetings held? Yes No If so, when? _____
- (d) Is business conducted through officers regularly elected? Yes No
- (e) Are members admitted by written application, investigation, and ballot? Yes No
- (f) For what purpose is the club organized and operated? Social Patriotic Political Athletic Other

12. List below the court records for law violations in the last ten (10) years, if any, of each person interested in this application, including the manager, whether as sole applicant, partner, officer, member, or landlord. (Do not include traffic violations, except D.U.I. and reckless driving. If no record, state "None".)

Name	Violation Charged	Name of Court	Date	Disposition of Case
<u>NO-Applicant</u>				

Applicant for the Alcoholic Beverage license requested by the aforementioned applicant hereby swears or affirms that he or she has read said application and that all the statements therein and the facts set forth therein are true and correct, and that the applicant is the only person interested in the business for which said license is requested.

Sworn and subscribed before me this 28th day of October, 2021

Signature of Affiant

Signature of Revenue Official

This application will not be processed until all fees due at the time of application are paid and receipts are on file.

**TRANSFER OF CITY OF BIRMINGHAM BUSINESS LICENSE
(CONTROLLED)**

I, HHR Corp holding City of Birmingham
(current taxpayer)

License ID# [REDACTED] located at 3016 WineWood Rd
(six-digit City ID) (business address)

Birmingham, AL 35215, hereby agree that said License be

transferred to FHL 3rd 425 Investments LLC
(applicant)

provided 8th 425 Investments LLC obtains approval
(applicant)

from the local governing body and meets all the requirements of the

ABC Board. I understand that I am responsible for the operation of

this licensed establishment and for all taxes due until 3rd 425 Investments LLC
(applicant) obtains his/her license from the ABC Board.

I also understand that if for any reason this transfer is not approved by the local governing body or the ABC Board, I must take over complete control, operation, and responsibility of these licensed premises. If I do not continue operating this licensed establishment, then, I will turn in my ABC Board License to the local ABC Board Field Office and all my City of Birmingham licenses to the Revenue Division of the Finance Department of the City of Birmingham.

I further understand that this license will not be transferred until all taxes and licenses are paid and current.

LICENSEE Sohag. S. Patel

DATE 10/28/2021

APPLICANT Joseph [unclear]

DATE 10/28/21

Witness [Signature]
NOTARY [Signature]

DATE 10/28/21

PARCEL ID: 011300221000001015

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2019

DATE: Tuesday, October 26, 2021 2:37:15 PM

OWNER: FRATERNAL ORDER OF POLICE

ADDRESS: 2988 WINEWOOD RD

CITY/STATE: BIRMINGHAM AL

ZIP+4: 35215--4198

SITE ADDR:

CITY/STATE: , AL

ZIP:

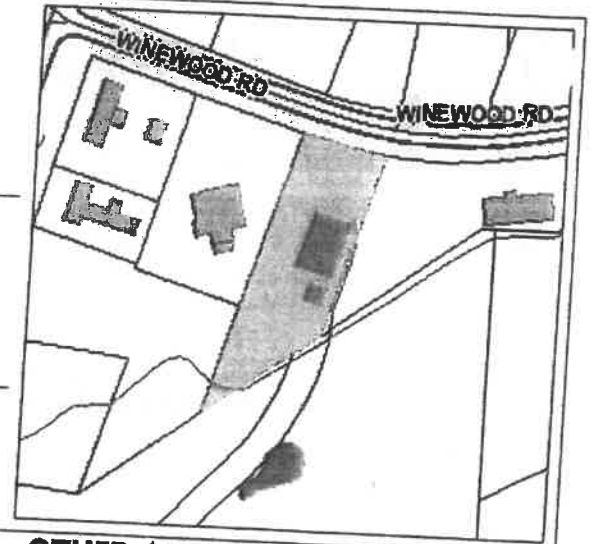
LAND: \$312,000.00

BLDG: \$452,900.00

OTHER: \$0.00

AREA: 65,433.11

ACRES: 1.50



SUBDIVISION INFORMATION:

NAME WINEWOOD 3RD SEC 4TH ADD

BLOCK:

LOT: A

Section: 22-16-2W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Echo Highlands (703)

Communities: East Pinson Valley (7)

Council Districts: District - 1 (Councilor: Clinton Woods)

Zoning Outline: CC2

Demolition Quadrants: DEM Quadrant - 4

Impaired Watersheds: Not in Impaired Watersheds

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: Not in RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: Not in Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

LICENSE STATUS REPORT FORM

Date: 4/27/21

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name Two Amigos Mexican Cantina LLC
Business Name Two Amigos Mexican Cantina
Business Address 328 Palisades Blvd Ste 10

Type of License & Description

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Glen Iris Neighborhood Association met on Dec. 6 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

22 Attendance Oppose Support No Recommendation

Reason for Opposition _____

Applicant: attended NA meeting did not attend NA meeting

James Burton Secretary
President

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

New Application: Restaurant Retail Liquor – Type 020

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Two Amigos Mexican Cantina, LLC
Mailing Address: 328 Palisades Blvd Ste 10
Birmingham, AL 35209
Trade Name: Two Amigos Mexican Cantina
Location Address: 328 Palisades Blvd Ste 10
Contact Number: (562)547-0772 Contact Person: Angelica Garcia

New Application Transfer

Type of License

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 30TBS/184CHS

Date Applied: 4/27/21

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

RESTAURANT RETAIL LIQUOR-TYPE 020
(Enter Type of License Applied For)

By: **GS**
(Revenue Official)

1. Name of Applicant (s) Two Amigos Mexican Cantina, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
██████████ ALDL# ██████████ Damian Rodriguez Tellez	Member	██████████ Mexico	107 Canterbury Ct Oneonta, AL 35121	6 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 509-384 Page: 1 of 3 Date: 2/5/2018 County: Blount
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Two Amigos Mexican Cantina
- 4(a) Location 328 Palisades Blvd Ste 10
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35209 County Jefferson Shelby
- (b) Length of time at this location
- (c) Mailing Address: 328 Palisades Blvd Ste 10 Birmingham, AL 35209
- (d) Business Phone (205)493-0101 Fax: _____ Other Contact: (562)547-0772

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

- 6 (a) Owner of real estate for which license is desired Palisades of Birmingham LLC
3500 Lenox RD NE Ste 200 Atlanta, GA 30326 Address
- (b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg
- (c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? 30TBS/184CHS

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

- 8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:
(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No
(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

- 9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II
(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

PROJECT DESCRIPTION:

TWO AMIGOS RESTAURANT WILL ALTER AND RESTORE THE INTERIOR OF AN EXISTING RESTAURANT TO A NEW MEXICAN RESTAURANT. WORK WILL INCLUDE MINOR DEMOLITION OF NON-LOADBEARING WALLS AND FINISHES, CONSTRUCTION OF NEW NON-LOADBEARING PARTITIONS, FINISHES, BASE, TRIM, ROOFS, PLUMBING, AND ELECTRICAL.

CODE REVIEW DATA: (2016 INTERNATIONAL BUILDING CODE)

OCCUPANCY TYPE: ASSEMBLY (A2) RESTAURANT
 CONSTRUCTION TYPE: TYPE 2B SPRINKLERED
 NUMBER OF STORIES: TWO ALLOWED TWO
 HEIGHT: ALLOWED: 40 FT. PROVIDED: LESS THAN 40 FT.

AREA:

ASSEMBLY (DINING/DRINK) 5,349 SF
 KITCHEN/WATER STATIONS 1,665 SF
 TOILET/WATER STORAGE 709 SF
 TOTAL AREA 7,723 SF

OCCUPANT LOAD:

ASSEMBLY - 3,349 SF @ 15 SF/OCCUPANT = 223 OCCUPANTS
 KITCHEN/WATER - 1,665 SF @ 100 SF/OCCUPANT = 17 OCCUPANTS/NUMBER OF FIXTURES/TOILET STORAGE - 709 SF @ 100 SF/OCCUPANT = 7 OCCUPANTS
 TOTAL OCCUPANT LOAD 240 OCCUPANTS

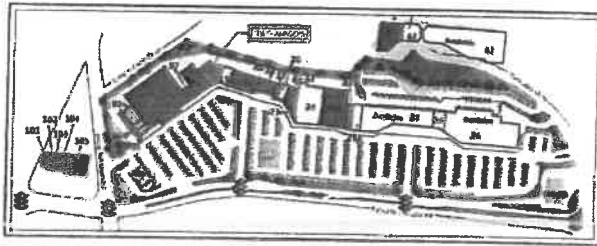
NUMBER OF EXITS: REQUIRED = 2 PROVIDED = 3

EXIT WIDTH REQUIRED = 242 OCCUPANTS X 0.2 INCH/OCCUPANT = 48 INCHES
 EXIT WIDTH PROVIDED = 6 DOORS X 34 INCHES/DOOR = 204 INCHES

DISTANCE TO AN EXIT: MAX ALLOWED = 900 FT. PROVIDED = LESS THAN MAX

GENERAL NOTES:

1. THE CONTRACTOR SHALL VERIFY ALL CONDITIONS AND DIMENSIONS AT THE SITE & RETIFY DISCREPANCIES IMMEDIATELY TO THE ARCHITECT'S OFFICE.
2. THE OWNER SHOULD EMPLOY ONLY GENERAL CONTRACTORS LICENSED IN THE STATE OF ALABAMA FOR THE CONSTRUCTION OF THIS PROJECT. PRESENTLY THESE SERVICES ARE IN PURSUANCE OF THE TYPE OF CONSTRUCTION AND OCCUPANCY.
3. CONTRACTOR TO INSTALL TEMPORARY BRACING AND SHORING AS NECESSARY FOR THE STABILIZATION OF THE WORK DURING CONSTRUCTION.
4. BRACE ALL WALLS SECURELY TO THE STRUCTURE.
5. ALL NEW CONSTRUCTION SHALL COMPLY WITH ALL APPLICABLE BUILDING CODES AND RESTRICTIVE ORDINANCES FOR ALL CONSTRUCTION DISCIPLINES.
6. FIELDER IS CAUTIONED AGAINST SCALING FROM THESE DRAWINGS.
7. THE INTENT OF THESE DRAWINGS IS TO PROVIDE THE OWNER WITH GENERAL GUIDELINES FOR THE SOUND CONSTRUCTION OF THE STRUCTURES INDICATED WITHIN. DEVIATION FROM THESE DRAWINGS ARE AT THE BUILDER'S RISK UNLESS APPROVED IN WRITING OR WITH SUPPLEMENTARY DRAWINGS FROM THE ARCHITECT.
8. CONTRACTOR TO SECURE AND PAY FOR ALL NECESSARY FEES AND PERMITS FOR CONSTRUCTION, ELECTRICAL, AND PLUMBING INSPECTIONS, ETC...
9. PROVIDE PORTABLE FIRE EXTINGUISHERS OF TYPES AND IN LOCATIONS AS INDICATED ON THE PLANS OR AS DIRECTED BY THE FIRE MARSHAL.
10. PROVIDE TEMPERED GLASS IN ALL HAZARDOUS LOCATIONS. SEE LIST FOR LOCATIONS.
11. ALL SUBCONTRACT WORK (ELECTRICAL, HVAC, PLUMBING, ETC) SHALL BE PERFORMED BY QUALIFIED CONTRACTORS LICENSED IN THE STATE OF ALABAMA.
12. ALL TRIPLET RECORDS SHALL BE FULLY ACCESSIBLE. PROVIDE ALL REQUIRED HARDWARE, CLEARANCES, AND MOUNT UTILITIES AND ACCESSORIES AS REQUIRED HEREIN. PROVIDE CEILING FINISHES PER HEALTH DEPT. REQUIREMENTS.
13. ALL HARDWARE IS AN ACCESSIBLE REXITE SHALL BE THE ACCESSIBLE TYPE.
14. INSTALL ALL DOORS AND HARDWARE PER MANUFACTURER'S INSTRUCTIONS.
15. UNLESS NOTED OTHERWISE, ALL LUMBER EXPOSED OR IN CONTACT WITH CONCRETE OR MASONRY SHALL BE PRESURE TREATED.
16. THE ARCHITECT IS NOT RESPONSIBLE FOR WORK DOES THE ARCHITECT HAVE CONTROL OF CONSTRUCTION MEANS, METHODS, TECHNIQUES, SEQUENCES, PROCEDURES, PROGRAMS OR SAFETY IN CONNECTION WITH THE HANDLING, STORAGE, INSTALLATION OR BRACING OF THE MATERIALS OR WORK OF ANY PORTION OF THIS PROJECT. THE CONTRACTOR OR THE OWNER, IN THE ABSENCE OF A CONTRACTOR ASSUMES THIS RESPONSIBILITY.
17. THE ARCHITECT FOR THIS PROJECT HAS BEEN CONTRACTED TO PROVIDE SERVICES LIMITED TO A REVIEW OF THE SAFETY REQUIREMENTS AND TO PROVIDE A MINIMAL SET OF DRAWINGS NECESSARY TO OBTAIN A BUILDING PERMIT. ALL ADDITIONAL INFORMATION NOT CONTAINED HEREIN SHALL BE ACQUIRED AS PART OF THE OWNER/CONTRACTOR'S WRITTEN AGREEMENT. ALL SITE WORK AND ENGINEERING IS PROVIDED BY OTHERS AND IS NOT PART OF THE ARCHITECT'S RESPONSIBILITY OF THE OWNER OR CONTRACTOR. THESE LIMITED ARCHITECTURAL DOCUMENTS HAVE BEEN PROVIDED SPECIFICALLY FOR A DESIGN-BUILD PROJECT. THE USE OF THESE DRAWINGS IN COMPETITIVE BIDDING IS NOT RECOMMENDED AND IS THE SOLE RESPONSIBILITY OF THE CONTRACTOR OR OWNER.
18. METAL WALL FRAMING: CONTRACTOR SHALL SUBMIT THE FOLLOWING INFORMATION FROM THE SELECTED METAL FRAMING MANUFACTURER: FRAMING MANUFACTURER, STUD SPACING, ANCHORS AND BRACKETS FOR NEW WALLS AND PARTITIONS AS IT APPLIES TO THIS PROJECT. SUBMIT TO ARCHITECT.



TWO AMIGOS RESTAURANT
 200 PALMBOOM SHOPPING CENTER • WASHINGTON, AL 35890

PROJECT: TWO AMIGOS RESTAURANT

DATE: 06/28/2011

REVISIONS:

NO.	DATE	DESCRIPTION

SCALE: NTS

SHEET TITLE: COVER SHEET

SHEET NO: C-1



PROJECT:
**RENOVATION & ADDITION FOR
 TWO AMIGOS RESTAURANT**

PROJECT DESCRIPTION:
 RENOVATION & ADDITION OF
 2000 SQ. FT. RESTAURANT SPACE
 2000 SQ. FT. RESTAURANT SPACE

CLIENT:
 NAME:
 ADDRESS:
 CITY:

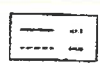
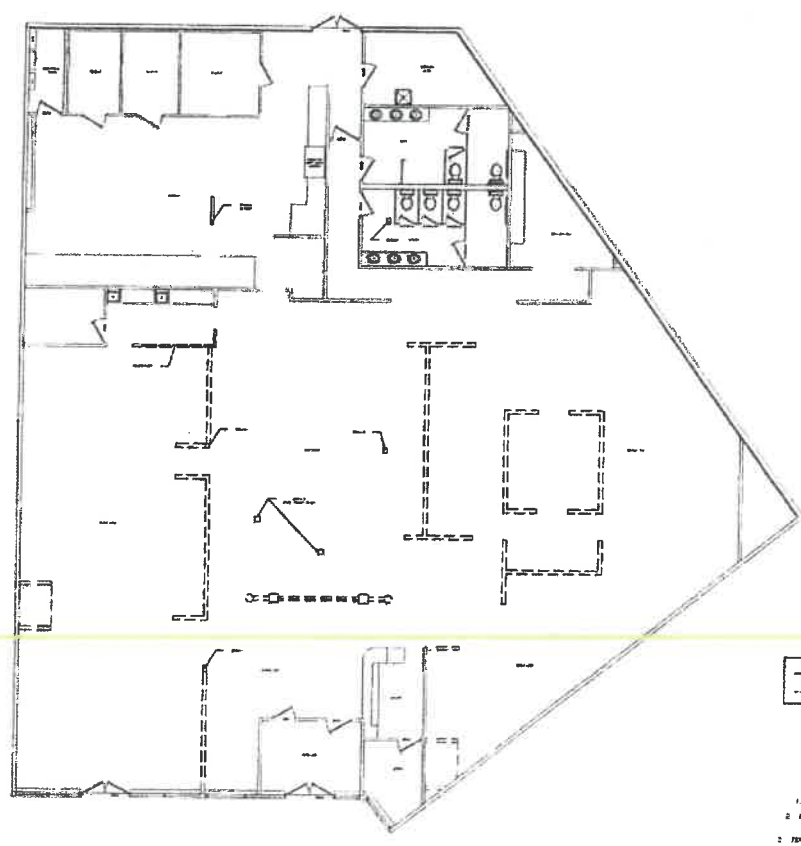
DETAILS:

NO.	DATE

SCALE:
5/8" = 1'-0"

PROJECT TITLE:
**DESIGN
 FLOOR PLAN**

PROJECT NO.
A-1



- DESIGN NOTES:
1. REMOVE ALL TRAP WALLS IN DINING AREA.
 2. PROVIDE GLASS BEHIND PRODUCE WARE AT BACK OF DINING AREA BY STORAGE ROOM.
 3. REMOVE ALL GARAGE FLOOR, AND BRING UP ALL GARAGE FLOOR FROM CONCRETE FINISH.

PARCEL ID: 012900144018002000

SOURCE: TAX ASSESSOR RECORDS **TAX YEAR:** 2019

DATE: Tuesday, April 13, 2021 3:11:51 PM

OWNER: PALISADES OF BIRMINGHAM LLC 481174

ADDRESS: 3500 LENOX RD NE STE 200

CITY/STATE: ATLANTA GA

ZIP+4: 30326--4237

SITE ADDR:

CITY/STATE: , AL

ZIP:



LAND: \$1,986,300.00

BLDG: \$4,086,200.00

OTHER: \$0.00

AREA: 343,005.28

ACRES: 7.87

SUBDIVISION INFORMATION:

NAME A RESURVEY OF LOT 1D OF T

BLOCK:

LOT: PT 1

Section: 14-18-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Glen Iris (1702)

Communities: Southside (17)

Council Districts: District - 3 (Councilor: Valerie A. Abbott)

Zoning Outline: B5

Demolition Quadrants: DEM Quadrant - 1

Impaired Watersheds: Impaired Watershed - Upper Shades Creek

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: Not in RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: Not in Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.

LICENSE STATUS REPORT FORM

Date: 4/27/21

To: Hunter Williams, Chairman
Public Safety

Subject: Applicant's Name Two Amigos Mexican Cantina LLC
Business Name Two Amigos Mexican Cantina
Business Address 328 Palisades Blvd Ste 10

Type of License & Description

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail License (over 30 days) |
| <input type="checkbox"/> Special Retail License (under 30 days) | <input type="checkbox"/> Pool Table Permit |
| <input type="checkbox"/> Division I Dance Permit (customers) | <input type="checkbox"/> Division II Dance Permit |

The Glen Iris Neighborhood Association met on Dec. 6 and voted in reference to the above named license application. The concerns of the Neighborhood regarding the granting of this license are indicated as follows: (Please check one)

²² Attendance Oppose ^x Support No Recommendation

Reason for Opposition _____

Applicant: ^x attended NA meeting did not attend NA meeting

James Burton Secretary
President

(Please return this form to the of attention Hunter Williams /Public Safety; City of Birmingham; 710 North 20th Street, Birmingham, AL 35203; City Council Chambers; 3rd Floor) Failure to attend the neighborhood meeting may result in a delay in the liquor process.

New Application: Restaurant Retail Liquor – Type 020

The following applicant has applied to the City of Birmingham for an alcohol, dance or pool table license:

Name of Applicant: Two Amigos Mexican Cantina, LLC
Mailing Address: 328 Palisades Blvd Ste 10
Birmingham, AL 35209
Trade Name: Two Amigos Mexican Cantina
Location Address: 328 Palisades Blvd Ste 10
Contact Number: (562)547-0772 Contact Person: Angelica Garcia

New Application Transfer

Type of License

- | | |
|---|--|
| <input type="checkbox"/> Lounge Retail Liquor Class I | <input type="checkbox"/> Lounge Retail Liquor Class II (Package Store) |
| <input type="checkbox"/> Club Liquor Class I (Fraternal) | <input type="checkbox"/> Club Liquor Class II (Private) |
| <input type="checkbox"/> Beer Off Premise | <input type="checkbox"/> Beer On & Off Premise |
| <input type="checkbox"/> Wine Off Premise | <input type="checkbox"/> Wine On & Off Premise |
| <input checked="" type="checkbox"/> Restaurant Retail Liquor | <input type="checkbox"/> Special Retail Liquor (7 days or less) |
| <input type="checkbox"/> Special Retail Liquor (over 30 days) | <input type="checkbox"/> Special Retail Liquor (under 30 days) |
| <input type="checkbox"/> Division I Dance Permit (customer) | <input type="checkbox"/> Division II Dance Permit (entertainers) |
| <input type="checkbox"/> Pool Table Permit (send copy of application) | |

Kitchen equipped: yes no

Number of table and chairs 30TBS/184CHS

Date Applied: 4/27/21

Revenue Examiner: GS

Copy: Fire Prevention
Health Department
Community Development
Operation New Birmingham
Melanie Genkin (pool tables)
Katrina Thomas (PEP)

**City of Birmingham
Application for
Alcoholic Beverage License**

New Application
Transfer

RESTAURANT RETAIL LIQUOR-TYPE 020

(Enter Type of License Applied For)

By: **GS**
(Revenue Official)

1. Name of Applicant (s) Two Amigos Mexican Cantina, LLC
(Indicate whether Individual, Partnership, Corporation, LLC, LLP, etc)
2. Name and address of individual applicant or all partners and members if partnership or assoc., or all officers and directors, if corporation
(Attach separate sheet if necessary)

Social Security Number Drivers License Number Name of Owner, Officer or Partner	Title	Date of Birth Place of Birth	Present Residence Address	Length of Residence at Place Named
██████████ ██████████ ALDL# ██████████ Damian Rodriguez Tellez	Member	██████████ Mexico	107 Canterbury Ct Oneonta, AL 35121	6 years

Note: If a corporation, LLC or LLP, give place and date of incorporation or issuance of certificate of authority to do business in Alabama:

Book 509-384 Page: 1 of 3 Date: 2/5/2018 County: Blount
Foreign Corporation: certificate of Authority Date: (get copy of original papers)

3. Trade Name Two Amigos Mexican Cantina

4(a) Location 328 Palisades Blvd Ste 10
Exact Street Number, or if on Highway, give details as to Location
Birmingham, Alabama Zip Code 35209 County Jefferson Shelby

(b) Length of time at this location

(c) Mailing Address: **328 Palisades Blvd Ste 10 Birmingham, AL 35209**

(d) Business Phone (205)455-0101 Fax: _____ Other Contact: (562)547-0772

5. Name, trade name and License number of last or previous licensee:
Trade name _____ Year Type _____ Taxpayer ID _____

6 (a) Owner of real estate for which license is desired Palisades of Birmingham LLC
3500 Lenox RD NE Ste 200 Atlanta, GA 30326 Address

(b) Give a full description of the premises for which a license is desired: New Construction Existing Structure
Description 1 Story Bldg Juke Box or Slot Musical Equipment? Yes No

(c) Is establishment equipped with tables and chairs? Yes No If "Yes", how many? 30TBS/184CHS

7. Has a liquor, malt or brewed beverage license for premises ever been denied, suspended or revoked? Yes No
If "Yes", explain fully _____

8 (a) Pool Tables? Yes No Coin Operated? Yes No Standard Provider:

(b) Video Games? Yes No Juke Box or Slot Musical Equipment? Yes No

(c) Vending Machines (Snacks/Sodas)? Yes No Cigarettes or Tobacco Products? Yes No Other?

9 (a) Will you allow dancing? Yes No If "Yes": Customer/Patron? Div I Exhibition/Performance? Div II

(b) Independent Contract Employees (Disc Jockey, Band, Bartenders, Servers)? Yes No

PROJECT DESCRIPTION:

TWO AMIGOS RESTAURANT WILL ALTER AND RESTORE THE INTERIOR OF AN EXISTING RESTAURANT TO A NEW MEXICAN RESTAURANT. WORK WILL INCLUDE MINOR DEMOLITION OF NON-CORROBORATING WALLS AND FINISHES, CONSTRUCTION OF NEW NON-CORROBORATING PARTITIONS, FINISHED BAR, TWO HOODS, PLUMBING, AND ELECTRICAL.

CODE REVIEW DATA: (2016 INTERNATIONAL BUILDING CODE)

OCCUPANCY TYPE: ASSEMBLY (A2) RESTAURANT
 CONSTRUCTION TYPE: TYPE 2B SPRINKLERED
 NUMBER OF STORIES: ONE ALLOWED: TWO
 HEIGHT: ALLOWED: 40 FT. SHOWN: LESS THAN 40 FT.

AREA:

ASSEMBLY (DINING/BAR) 5,349 SF
 KITCHEN/WATER SYSTEMS 1,622 SF
 TOILET/WATER STORAGE 709 SF
 TOTAL AREA: 7,680 SF

OCCUPANT LOAD:

ASSEMBLY = 5,349 SF @ 15 SF/OCCUP = 357 OCCUPANTS
 KITCHEN/WATER = 1,622 SF @ 100 SF/OCCUP = 17 OCCUPANTS/NUMBER OF BATH TOILETS/STORAGE = 709 SF @ 100 SF/OCCUP = 8 OCCUPANTS
 TOTAL OCCUPANT LOAD 382 OCCUPANTS

NUMBER OF EXITS: REQUIRED = 2 PROVIDED = 3

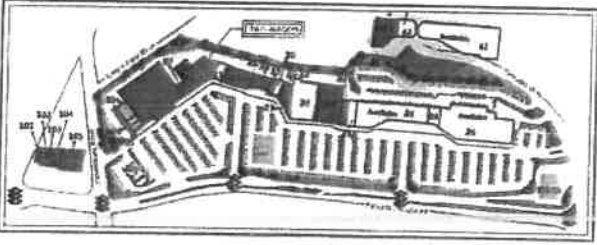
EXIT WIDTH REQUIRED = 382 OCCUPANTS X 0.2 INCH/OCCUPANT = 76 INCHES

EXIT WIDTH PROVIDED = 6 DOORS X 34 INCHES/DOOR = 204 INCHES

DISTANCE TO AN EXIT: MAX ALLOWED = 900 FT. SHOWN = LESS THAN MAX

GENERAL NOTES:

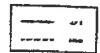
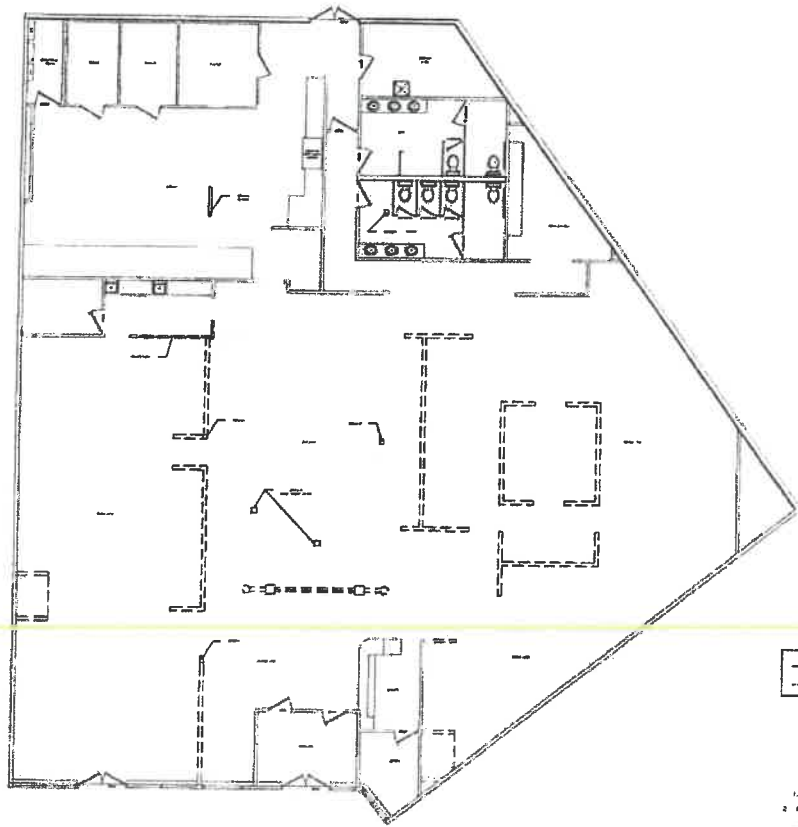
1. THE CONTRACTOR SHALL VERIFY ALL CONDITIONS AND DIMENSIONS AT THE SITE & REPORT DISCREPANCIES IMMEDIATELY TO THE ARCHITECT'S OFFICE.
2. THE OWNER SHOULD EMPLOY ONLY GENERAL CONTRACTORS LICENSED IN THE STATE OF ALABAMA FOR THE CONSTRUCTION OF THIS PROJECT, PREFERABLY THOSE LISTED IN BUREAUS OF THIS TYPE OF CONSTRUCTION AND OCCUPANCY.
3. CONTRACTOR TO INSTALL TEMPORARY BRACING AND SHORING AS NECESSARY FOR THE STABILIZATION OF THE WORK DURING CONSTRUCTION.
4. BRACE ALL WALLS SECURELY TO THE STRUCTURE.
5. ALL NEW CONSTRUCTION SHALL COMPLY WITH ALL APPLICABLE BUILDING CODES AND RESTRICTIVE ORDINANCES FOR ALL CONSTRUCTION DISCIPLINES.
6. BUILDER IS CAUTIONED AGAINST SCALING FROM THESE DRAWINGS.
7. THE INTENT OF THESE DRAWINGS IS TO PROVIDE THE BUILDER WITH GENERAL GUIDELINES FOR THE SOUND CONSTRUCTION OF THE STRUCTURES INDICATED WITHIN. DEVIATIONS FROM THESE DRAWINGS ARE AT THE BUILDER'S RISK UNLESS APPROVED IN WRITING OR WITH SUPPLEMENTARY DRAWINGS FROM THE ARCHITECT.
8. CONTRACTOR TO SECURE AND PAY FOR ALL NECESSARY FEES AND PERMITS FOR CONSTRUCTION, ELECTRICAL, AND PLUMBING INSPECTIONS, ETC.
9. PROVIDE PORTABLE FIRE EXTINGUISHERS OF TYPES AND IN LOCATIONS AS INDICATED ON THE PLANS OR AS DIRECTED BY THE FIRE MARSHALL.
10. PROVIDE TEMPERED GLASS IN ALL HAZARDOUS LOCATIONS. SEE LIST FOR LOCATIONS.
11. ALL SUBCONTRACT WORK (ELECTRICAL, HVAC, PLUMBING, ETC) SHALL BE PERFORMED BY QUALIFIED CONTRACTORS LICENSED IN THE STATE OF ALABAMA.
12. ALL TOILET REGRABS SHALL BE FIRST ACCESSIBLE. PROVIDE ALL REQUIRED HARDWARE, CLEARANCES, AND MOUNTING FIXTURES AND ACCESSORIES AT REQUIRED HEIGHTS. PROVIDE CLEANABLE FINISHES PER HEALTH DEPT. REQUIREMENTS.
13. ALL HARDWARE SHALL BE ACCESSIBLE BECAUSE SHALL BE THE ACCESSIBLE TYPE.
14. INSTALL ALL DOORS AND HARDWARE PER: MANUFACTURER'S INSTRUCTIONS.
15. UNLESS NOTED OTHERWISE, ALL LUMBER EXPOSED OR IN CONTACT WITH CONCRETE OR MASONRY SHALL BE PRESSURE TREATED.
16. THE ARCHITECT IS NOT RESPONSIBLE FOR, NOR DOES THE ARCHITECT HAVE CONTROL OF CONSTRUCTION MEANS, METHODS, TECHNIQUES, SEQUENCES, PROCEDURES, PROGRAMS OR SAFETY IN CONNECTION WITH THE HANDLING, STORAGE, INSTALLATION OR BRACING OF THE MATERIALS OR WORK OF ANY PORTION OF THIS PROJECT. THE CONTRACTOR OR THE OWNER, IN THE ABSENCE OF A CONTRACTOR, ASSUMES THIS RESPONSIBILITY.
17. THE ARCHITECT FOR THIS PROJECT HAS BEEN CONTRACTED TO PROVIDE SERVICES LIMITED TO A REVIEW OF LIFE SAFETY REQUIREMENTS AND TO PROVIDE A MINIMAL SET OF DRAWINGS NECESSARY TO OBTAIN A BUILDING PERMIT. ALL ADDITIONAL INFORMATION NOT CONTAINED HEREIN SHALL BE INCLUDED AS PART OF THE OWNER'S CONTRACTOR, WRITTEN CONTRACT FOR SERVICES. COORDINATION OF THESE SERVICES AS WELL AS THAT OF QUALITY CONTROL IS THE SOLE RESPONSIBILITY OF THE OWNER OR CONTRACTOR. THESE LIMITED ARCHITECTURAL DOCUMENTS HAVE BEEN PRODUCED SPECIFICALLY FOR A DESIGN-BUILD PROJECT. THE USE OF THESE DRAWINGS IN COMPETITIVE BIDDING IS NOT RECOMMENDED AND IS THE SOLE RESPONSIBILITY OF THE CONTRACTOR OR OWNER.
18. METAL WALL FRAMING: CONTRACTOR SHALL SUBMIT THE FOLLOWING INFORMATION FROM THE SELECTED METAL FRAMING MANUFACTURER:
 RECOMMENDED MAXIMUM HEIGHT, STUD SPACING, ANCHORS AND BRACING FOR
 RECOMMENDED MAXIMUM HEIGHT, STUD SPACING, ANCHORS AND BRACING FOR
 NEW WALLS AND PARTITIONS AS IT APPLIES TO THIS PROJECT. SUBMIT TO ARCHITECT.




B. L. HERDICK
 ARCHITECT
 2215 Commerce Street
 Birmingham, AL 35202
 205-988-1154
 bherdick@bherdick.com

TWO AMIGOS RESTAURANT
 382 PLACE OF THE SUNSHINE CENTER • BIRMINGHAM, AL 35202

SHEET NO. **RL**
 DATE: **10/26/2021**
 REVISIONS:
 NO. DATE
 1 10/26/21
 SCALE:
N.T.S.
 SHEET NO. **COVER SHEET**
 SHEET NO. **C-1**



- REMARKS:**
1. REMOVE ALL PAVE IN-ASLT IN CORRIDOR AREA.
 2. REMOVE GLASS BLOCKS FROM WALL AT BACK OF EXISTING 24'x24' STAIRWELL ROOM.
 3. REMOVE ALL EXISTING FROM FLOOR AND DEMO OFF ALL GUM RESIN FROM CONCRETE FLOOR.



PROJECT:
RENOVATION & ADDITION FOR
TWO AMIGOS RESTAURANT

PROJECT DESCRIPTION:
 RENOVATION OF EXISTING RESTAURANT AND ADDITION OF 24'x24' STAIRWELL ROOM.

PROJECT NO.:
 15000

DATE:
 FEBRUARY 11, 2021

APPROVALS:

NO.	DATE

SCALE:
 3/4" = 1'-0"

PROJECT TITLE:
 DEMO FLOOR PLAN

PROJECT NO.:
 A-1

PARCEL ID: 012900144018002000

SOURCE: TAX ASSESOR RECORDS **TAX YEAR:** 2019

DATE: Tuesday, April 13, 2021 3:11:51 PM

OWNER: PALISADES OF BIRMINGHAM LLC 481174

ADDRESS: 3500 LENOX RD NE STE 200

CITY/STATE: ATLANTA GA

ZIP+4: 30326--4237

SITE ADDR:

CITY/STATE: , AL

ZIP:



LAND: \$1,986,300.00

BLDG: \$4,086,200.00

OTHER: \$0.00

AREA: 343,005.28

ACRES: 7.87

SUBDIVISION INFORMATION:

NAME A RESURVEY OF LOT 1D OF T

BLOCK:

LOT: PT 1

:

Section: 14-18-3W

Land Slide Zones: Not in Land Slide Zones

Historic Districts: Not in Historic Districts

Commercial Revitalization District: Not in Commercial Revitalization District

Fire District: Not in Fire District

Flood Zones: Not in Flood Zones

Tax Increment Financing District: Not in Tax Increment Financing District

Neighborhoods: Glen Iris (1702)

Communities: Southside (17)

Council Districts: District - 3 (Councilor: Valerie A. Abbott)

Zoning Outline: B5

Demolition Quadrants: DEM Quadrant - 1

Impaired Watersheds: Impaired Watershed - Upper Shades Creek

Strategic Opportunity Area: Not in Strategic Opportunity Area

RISE Focus Area: Not in RISE Focus Area

Tax Delinquent Property: Not in Tax Delinquent Property

EPA Superfund: Not in EPA Superfund

Opportunity Zones: Not in Opportunity Zones

Judicial Boundaries: JEFFERSON

Parcel mapping and description information is obtained from the Jefferson County Tax Assessor's Office. This site does not provide real-time information and may contain errors. All data should be verified with the official source. The City of Birmingham makes no warranty as to the accuracy of the data and assumes no responsibility for any errors. Data from the Tax Assessor's Office may not be available for all parcels.