TOWN OF ASHLAND CITY
Beer Board
December 09, 2025 6:00 PM
Agenda

Mayor: Gerald Greer
Council Members: Tim Adkins, Nicole Binkley, Chris Kerrigan, Michael Smith, Kevin Thompson, Tony Young

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CALL TO ORDER

ROLL CALL

APPROVAL OF AGENDA

APPROVAL OF MINUTES

1. Approval of the August 12, 2025, Regularly Scheduled Beer Board Meeting Minutes

PUBLIC FORUM

NEW BUSINESS

2. Name Change for Hideaway Cafe to KIKI's Chicago Bar and Grill

ADJOURNMENT

Those with disabilities who require certain accommodations in order to allow them to observe and/or participate in this meeting, or who have questions regarding the accessibility of the meeting, should contact the ADA Coordinator at 615-792-6455, M-F 8:00 AM – 4:00 PM. The town will make reasonable accommodations for those persons.

APPLICATION FOR BEER PERMIT TO THE BEER BOARD OF THE TOWN OF ASHLAND CITY

COUNTY OF CHEATHAM

THIS SECTION IS FOR OFFICE USE ONLY

Date Received: 11/24/2025
Fee Received: YES - Renewal

Zoning District: C-1

PERMIT TYPE:
Off Premises: _____
On Premises: _____
On Premises/ Special Event: _____
Event Date: _____
Manufacturer / Distributor: _____
Caterer Permit: _____

Deferred: _____

Denied: _____

Granted: _____

Permit Number: _____

Applications must be completed in full. Applications should also include any application fees(s), certified criminal background checks, and a copy of the business license. Applications must be submitted by the 12th of the month to be considered for permits at the next scheduled Beer Board Meeting. Beer Board Meetings are held on the second Tuesday of every month at 6:00 PM, unless otherwise advertised and scheduled, prior to Regularly Scheduled City Council Meeting.

APPLICATION FEE(S) MUST BE SUBMITTED WITH THIS APPLICATION.

Application fee Schedule as described in Title 8 Chapter 2 of the Municipal Code.

On and/or Off-site Sales	$ 250.00
Manufacturing	$ 250.00
Caterer	$ 250.00
Special Event	$ 150.00

Applicants as well as managers of the applicant's business must provide documentation, at their expense, of a certified criminal background check from Tennessee Bureau of Investigation with this application. Applicants must certify they have not been convicted of a crime of any violation of the laws against possession, sale, manufacture, or transportation of beer or other alcoholic beverages, or of any felony, or of any crime involving moral turpitude within the last ten (10) years. Information regarding obtaining such background checks may be made online at www.tn.gov or by calling TBI at (615)744-4057.

I (WE) HEREBY APPLY FOR A PERMIT TO _____SELL _____ MANUFACTURE OR _____ DISTRIBUTE BEER OR OTHER BEVERAGES CONTAINING LESS THAN FIVE PERCENT (5%) ALCOHOL, PURSUANT TO THE PROVISIONS OF TENNESSEE CODE ANNOTATED, TITLE 57, CHAPTER 5 AND THE AMENDMENTS THERETO. THIS APPLICATION IS BASED UPON THE FOLLOWING INFORMATION.

1. TYPE OF PERMIT DESIRED:

A. _____OFF-PREMISES SALES B. X ON-PREMISES SALES C. _____MANUFACTURER/DISTRIBUTOR

2. REQUEST IS MADE FOR:

_____NEW BUSINESS

_____CHANGE IN OWNERSHIP OF EXISTING BUSINESS

_____SPECIAL EVENT

EVENT NAME: _____

LOCATION: _____

EVENT DATE: _____

_____CHANGE OF LOCATION OF BUSINESS

_____CHANGE IN THE TYOE OF PERMIT

Name Change

3. NAME OF APPLICANT: Kristine Kaplan

APPLICANT IS A(N):

X **INDIVIDUAL** _____**PARTNERSHIP** _____**FOR PROFIT CORPORATION**

_____**FOR NON-PROFIT CORPORATION** _____**OTHER** _____

4. NAME OF BUSINESS: Kiki's a Chicago Bar and ~~Restaurant~~ Grill

5. BUSINESS LOCATION: 307 N Main St, Ashland City, TN 37015

6. NAME AND ADDRESS OF THE PERSON TO WHOM CORRESPONDENCE SHOULD BE MAILED TO:

NAME:	Kristine Kaplan
ADDRESS:	167 Arbor loop
CITY, STATE, ZIP	Ashland City, TN, 37015

7. DESCRIBE THE NATURE OF THE BUSINESS/ORGANIZATION:

This location is a bar and grill.

8. NAME AND ADDRESS OF ALL PERSONS, FIRMS, CORPORATIONS, JOINT – STOCK COMPANIES, SYNDICATES OR ASSOCIATIONS HAVING AT LEAST 5% OWNERSHIP INTEREST IN THE APPLICANT:

NAME:	Darren Kaplan
ADDRESS:	1607 Arbor loop
CITY, STATE, ZIP	Ashland City, TN, 37015

NAME:	
ADDRESS:	
CITY, STATE, ZIP	

NAME:	
ADDRESS:	
CITY, STATE, ZIP	

9. Have any of the parties referred to in question above or any persons to be employed in the distribution or sale of beer been convicted of any violation of the laws against the possession, sale, manufacture or transportation of beer or other alcoholic beverages or any crime involving moral turpitude or any felony within the past ten years? If so, give particulars of each charge, court, and date convicted.

No

10. HAVE ANY OF THE PARTIES REFERRED TO IN QUESTION 8 ABOVE EVER HAD A BEER PERMIT REVOKED, SUSPENDED, OR DENIED? EXPLAIN:

No

11. NAME AND TELEPHONE NUMBER OF THE MANAGER TO BE RESPONSIBLE FOR SALE, STORAGE, OR MANUFACTURE OF BEER:

MANAGER NAME:	Isabella Kaplan
MANAGER PHONE NUMBER:	219-877-5760

12. NAME AND ADDRESS OF THE PROPERTY OWNER:

NAME:	
ADDRESS:	
CITY, STATE, ZIP	

13. NAME AND LOCATION OF THE NEAREST CHURCH:

NAME:	Seventh-Day Adventist Church
ADDRESS:	114 Ruth Dr
CITY, STATE, ZIP	Ashland City, TN, 37015
DISTANCE FROM LOCATION:	0.9 miles

14. NAME AND LOCATION OF THE NEAREST SCHOOL:

NAME:	Ashland City Elementary School
ADDRESS:	108 Elizabeth St.
CITY, STATE, ZIP	Ashland City, TN, 37015
DISTANCE FROM LOCATION:	0.5 miles

15. DESCRIBE THE STEPS WHICH WILL BE TAKEN TO PREVENT THE SALE OF BEER TO MINORS:

We require for all individuals to present their ID for purchase of alcohol. Patrons are only allowed to purchase one alcoholic beverage at a time. We have security and bartenders monitoring all patrons.

16. ANSWER WACH OF THE FOLLOWING QUESTIONS:

DO YOU AGREE NOT TO ENGAGE IN THE SALE, STORAGE, MANUFACTURE OR DISTRIBUTION OF BEER EXCEPT AT THE PALCE OR PLACES FOR WHICH A PERMIT IS ISSUED?	YES	NO
DO YOU AGREE THAT THE SALE, STORAGE, OR MANUFACTURE OR DISTRIBUTION OF BEER WILL BE MADE ONLY IN ACCORDANCE WITH THE PERMIT GRANTED?	YES	NO
DO YOU RIDGEDLY ENFORCE THE LAWS AGAINST THE SALE OF BEER TO MONORS?	YES	NO
DO YOU AGREE NOT TO PERMITU MINORS OR INTOXICATED PERSONS TO LOITER AROUND THE PLACE OF BUSINESS?	YES	NO
DO YOU AGREE NOT TO EMPLOY ANY PERSON IN THE SALE OR DISTRIBUTION OF BEER WHO HAS BEEN CONVICTED OF ANY VILATION OF THE LAWS AGAINST THE POSSESSION, SALE, MANUFACTURING, OR TRANSPORTATION OF BEER OR OTHER ALCOHOLIC BEVERAGES, OR ANY CRIME INVOLING MORAL TURPITUDE WITHIN THE PAST TEN YEARS?	YES	NO

The undersigned hereby solemnly swears that each and every statement in the foregoing application is true and correct and agrees that if any statement is false, the permit issued pursuant thereto may be revoked by the Beer Board, upon notice of hearing, in which event the burden shall be on the permittee to prove the correctness of all the statements in the application. The undersigned certifies he/she has read and is familiar with the beer laws of The Town of Ashland City in the event of a change in management, the undersigned agrees that the information requested in question 11 will ne provided to the Town of Ashland City within seven days of such change. If the applicant is other than an individual, the undersigned affirms that he/she is a representative of the applicant duly authorized to submit the foregoing application.

SIGNATURE	**TITLE (IF OTHER THAN AN INDIVIDUAL)**

SWORN TO AND SUBSCRIBED TO BEFORE ME THIS _____ DAY OF _____, _____

NOTARY PUBLIC	**COMISSION EXPIRES**