



# TOWN OF ASHLAND CITY

## Regularly Scheduled Workshop Meeting

### February 01, 2022 6:00 PM

## Agenda

**Mayor:** Steve Allen

**Vice Mayor:** JT Smith

**Council Members:** Tim Adkins, Gerald Greer, Chris Kerrigan, Kevin Thompson, Tony Young

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### CALL TO ORDER

### ROLL CALL

### APPROVAL OF AGENDA

### APPROVAL OF MINUTES

- [1.](#) January 4, 2022 Workshop Meeting Minutes

### REPORTS

### OLD BUSINESS

- [2.](#) Events Policy
- [3.](#) Copier for City Hall/Public Works
- [4.](#) Ordinance: Budget Amendment #5 (Senior, Fire, and Codes)
5. Ordinance: Moving City Election
- [6.](#) Ordinance: Rezone Parcel 062 035.06.000

### NEW BUSINESS

- [7.](#) Ashland Market Package Liquor Application
- [8.](#) Summerfest Carnival Contract 2022
9. Caldwell Park-Trail Update
- [10.](#) Resolution: Check Signers
11. Resolution: Authorization to Participate in AFG Grants
- [12.](#) Ordinance: Budget Amendment #6 (Red light)

### SURPLUS PROPERTY NOMINATIONS

### EXPENDITURE REQUESTS

### OTHER

### ADJOURNMENT

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*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.*



**TOWN OF ASHLAND CITY**  
**Regularly Scheduled Workshop Meeting**  
**January 04, 2022 6:00 PM**  
**Minutes**

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**CALL TO ORDER**

Mayor Allen called the meeting to order at 6:00 p.m.

**ROLL CALL**

PRESENT

Mayor Steve Allen  
Councilman Tim Adkins  
Councilman Gerald Greer  
Councilman Roger Jackson  
Councilman Chris Kerrigan  
Councilman JT Smith

ABSENT

Vice Mayor Daniel Anderson

**APPROVAL OF AGENDA**

A motion was made by Councilman Greer, seconded by Councilman Smith, to approve the agenda with four (4) additions under other. All approved by voice vote.

**APPROVAL OF MINUTES**

1. December 07, 2021, Workshop Meeting Minutes  
Councilman Greer stated that under item #9 page 3 it states "Pam Fejowsky stated that the election in December would be more cost-effective" and that should be August and not December. A motion was made by Councilman Greer, seconded by Councilman Kerrigan, to approve the minutes with these changes. All approved by voice vote.

**REPORTS**

None.

**OLD BUSINESS**

2. Blue Cross Healthy Places Grant  
Mayor Allen stated that we would have Mr. Scott Sampson discuss this more at Council when he returns. He stated that he knows we were not approved.
3. Bicentennial Trail Grant Update  
Mayor Allen stated that Mr. Sampson would also discuss this at Council when he returns.
4. CCEC Memorandum for Understanding Agreement  
Chief Ray stated that he was waiting to hear from Ms. Jennifer Noe once she reviewed this. Mayor Allen stated for the record that Councilman Jackson was now present for the meeting.
5. Ordinance: Budget Amendment #4 (Fire and Police)  
Ms. Gayle Bowman stated that these were donations received for police and fire. She stated that we have received the money for fire, and they can now actually spend the money.
6. Ordinance: Amend Ordinance 561- Land Use Regulations  
Ms. Alicia Martin stated that when we amended the last ordinance, it conflicted with the zoning ordinance section 3.150 and there were specific regulations regarding the removal of trees. She stated that there was concern about the amendment of 3.140 not listing out every species of tree as it does in 3.150 and that those regulations do not remain. Ms. Martin stated that although it does not name every species, those regulations are spelled out in section 3.140.
7. Ordinance: Redistricting Wards

Ms. Martin stated that this would be a second reading and if there were any questions, we could wait for Ms. Noe at the Council meeting. Councilman Greer questioned if there were maps, we could look at because the ones they have are not very clear. Ms. Martin stated that there were maps provided by the Comptroller's office and that the street names were broken down by ward in the Ordinance, but she could ask if the maps could be enhanced.

8. Ordinance: Temporary Use Permit

Ms. Martin stated that we are going to take this back to the Planning Commission to change some of the language.

### **NEW BUSINESS**

9. Events Policy

Councilman Adkins asked if we would have anything on this for the Council meeting. Ms. Martin Stated that she hoped so, but Ms. Noe has been busy in court this week.

10. Hampton Signal Change Order

Mr. Biggers stated that this is the light at Walmart. He stated they will need a new pole and that it is a passthrough.

11. Ordinance: Budget Amendment #5 (Senior, Fire, and Codes)

Ms. Bowman stated that this is to move the money for the TCAD grant and Kathy's Kitchen for the Senior Citizens, to finish out a Covid grant for Fire, and to add money to salaries for Codes.

12. Ordinance: Moving City Election

Mayor Allen stated that Ms. Noe could speak more on this at Council. Councilman Adkins stated that Ms. Frejosky could give us a written plan before voting. Ms. Bowman questioned if they would like that before voting and the council stated they would. Mayor Allen stated that we would need to defer this for a month

### **SURPLUS PROPERTY NOMINATIONS**

13. 1996 Chevy 3500

Mr. Biggers stated that he has replaced this truck so he would like to sell it.

### **EXPENDITURE REQUESTS**

14. Request to Rebid Roof Replacement Public Works and Police Department

Mr. Biggers stated that they would like to try again. He stated that the bidders have a picture of what they are bidding on.

### **OTHER**

**Ordinance: Rezone Request** - Ms. Martin stated that this rezone request went before the Planning Commission last night and their recommendation was to approve. It has been advertised in the paper. Chief Walker stated that Mr. Holt is here if there are any questions, and this will take two (2) readings. Councilman Greer asked what the sq footage of the livable space is. Mr. Holt stated that the livable space is 1620 sq foot and with the garage, it is 1840 sq foot. Councilman Greer questioned if these would be rentals or for sale. Mr. Holt stated they would be for sale.

**Elected Officials Academy** - Ms. Bowman stated that this is the class the council is required to take due to the hours that are required for continuing education for elected officials. She stated that she has everyone, but a few signed up and if they do not enroll, they would be required to do it in July.

**New Exercise Instructor** - Ms. Batts stated that this agreement was for a new instructor that is evidence-based. She stated that they would be reimbursed from GNRC for the salary and cost of the classes.

**CMS Agreement** - Ms. Martin stated that this was an agreement to switch from our old merchant to this one through Tyler to process our payments. She stated that it would mean that all programs would be through Tyler and make everything run smoother.

### **ADJOURNMENT**

A motion was made by Councilman Greer, seconded by Councilman Kerrigan to adjourn the meeting. All approved by voice vote and the meeting adjourned at 6:25 p.m.

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MAYOR STEVE ALLEN

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CITY RECORDER ALICIA MARTIN, CMFO



# Town of Ashland City

## Parks & Recreation

### Reservation & Rental Rates, Policies and Forms

**Date Requested for Facility**

**Reservation/Rental** \_\_\_\_\_

Applicant Name \_\_\_\_\_

Organization \_\_\_\_\_

Name \_\_\_\_\_

Street \_\_\_\_\_

Address \_\_\_\_\_

City, State, \_\_\_\_\_

Zip \_\_\_\_\_

Phone \_\_\_\_\_

(primary) \_\_\_\_\_

Phone \_\_\_\_\_

(secondary) \_\_\_\_\_

Over 18 years old? (Proof required) Select Yes \_\_\_\_\_ ID Provided \_\_\_\_\_

City Resident? (Proof required) Select Yes \_\_\_\_\_ Select No \_\_\_\_\_

**Riverbluff Park Event Date:** \_\_\_\_\_

**Start Time:** \_\_\_\_\_

**End Time:** \_\_\_\_\_

# Of hours (Min 2)	Day	Rental Fee	AC Property owner or resident	Deposit
	Sunday-Thursday	\$25.00 per hour	\$20.00 per hour	\$100.00
	Friday-Saturday	\$50.00 per hour	\$45.00 per hour	\$200.00

**Total Costs**

Deposit Amount Paid: \_\_\_\_\_

Facility Res./Rental Paid: \_\_\_\_\_

**Total Amount Paid:** \_\_\_\_\_

Deposit fee shall be returned within 30 days upon completion of the event if there is no damage.

I, the applicant, agree to personally inspect the facility, parking lot and grounds to make certain that it is in a good and clean condition before and after use. I have read the rules and regulations and agree that I and my guests or invitees will comply with the same and with all rules of the park. I understand that all conditions must be met and that violations of the rules or the agreement may result in the forfeiture of part or all the Security & Damage Deposit. It is expressly understood and agreed that any person coming in or upon the premises shall be the guest of the applicant. The applicant has inspected the premises, finding the facility in a good and safe condition. The reservation/rental use by the applicant, after completion of the application, and payment of the rental sum and deposit, shall act as a release to the Town of Ashland City Tennessee, as to all risk of damage, loss of personal property, or injury that might occur in or upon the premises during the term of the reservation/rental period. The applicant and all persons utilizing the facility as a guest or invitee of the applicant specifically releases and agrees to indemnify and hold the Town of Ashland City harmless by reason of any defect in or as to the condition of the premises upon when the rental event is held. **I understand that if I am having an event, I am required to purchase Event Liability Insurance.** This does not apply to noncommercial events, (i.e., birthday parties, family reunions, etc.). It is the sole discretion of the Parks Director what constitutes non-commercial. However, any non-commercial event that uses inflatables shall provide event liability insurance. A copy of the event insurance will be provided to the Town. I further state that all information given on this entire application is true and accurate.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

# **Town of Ashland City Parks & Recreation Riverbluff Park Rental Policy**

**Rental Area and Parking:** Rental fees and deposits cover only the designated area rented; plus, on-site parking limited to the availability of spaces within Riverbluff Park. (i.e., rental of the park does not entitle the renters to additional, exclusive use of the pavilions, soccer fields, etc.) Parking is available at Riverbluff Park on a first come, first serve basis during regular hours. For after park hours use, renters are responsible for regulating traffic and parking within the parking lots and accessibility to ensure exclusive parking for their guests.

**Rental Events:** The rental use of the park is for events, not on-going business or regularly events.

**Rental Period:** The rental period begins at the time designated on the Reservation Form but not before that time. If time is needed to setup, extra time should be rented to accommodate setup or clean up. The rental period ends at the designated time on the Reservation Form. Extra time used that has not been paid for in advance will be deducted from the deposit.

**Payment:** The rental payment for any part of the park must be paid at the time the reservation is made. No reservation will be accepted without full payment of deposits and rental fees. No partial payments will be accepted.

**501c3 Organizations:** A 501c3 organization registered as located within Cheatham County may rent part of or all the park once a year at a 50% discount on regular park rental fees for a charitable fundraising event. (This does not include presentation dinners, socials, etc.) No other discounts apply. Deposits remain at 100%. Proof of current 501c3 status will be required at the time the reservation is made. All other requirements and rental policies apply. Proof of insurance for the event must be provided. **Town staff will not be provided for set up or cleanup work, this must be done by the organization/person responsible for the rental.**

**Decorations & Clean-up:** Absolutely no nails, tacks, or putty are to be used inside or on the outside of any park pavilion, the stage or other park facility. Nails are not to be used on trees, tables, or fences. Decorations that attach by strings or another method of tying may be used if it does not damage the facility in any manner. Any confetti, glitter, rice, birdseed, or similar type material must be completely removed from the park as part of the cleanup process. Any bubbles that might be used must be used over grass and not on any concrete surfaces. Please do not release any helium balloons into the air, as they can have a negative impact on the wildlife. Any decorations used must be completely removed at the end of the event. At the end of the rental use, we ask that you bag and

remove all trash from the premises. Failure to comply may result in the forfeiture of the deposit.

**Security Policy:** The Town reserves the right to require one or more Ashland City police officers or other emergency personnel be present at all events that occur within the city limits. Please budget for this request at a rate of \$50.00 per hour at a minimum of (2) hours.

**Cancellation of Reservation:** Events cancelled at least 7 days before the event will receive a refund of the rental fees, but not the reservation/deposit fee. Events cancelled less than 7 days before the event will forfeit all fees paid. Events cancelled at least 30 days before the event will receive a full refund of the rental fees and the reservation/deposit fee.

**Rain Policy:** In the event of enough rain or other inclement weather to cancel the scheduled event, another date may be scheduled at no additional charge. There is no refund of the rental fee for rain outs. It is in the sole discretion of the staff with Ashland City to determine what is considered inclement weather to reschedule the event at no additional charge.

**Insurance Information:** To hold an event at Riverbluff Park, you are required to purchase event liability insurance. This will cover you in the event someone is injured and chooses to seek financial restitution through a costly lawsuit. It will also protect the Town of Ashland City from any liability during your event. This type of insurance is affordable and fairly ease to obtain.

There are several ways to obtain the insurance:

1. Your homeowner's insurance company may issue event policies.
2. Online through providers of Tenant User Liability Insurance Police (TULIP). This a low-cost insurance that protects the renter as well as the Town from claims arising from injuries by a third party.
3. You may solicit local area insurance agents to see if they issue EVENT POLICIES.

In addition:

You will need a policy that has a minimum value of \$1,000,000 (one million dollars). The Town of Ashland City, Tennessee must be listed as secondary insured on the policy. The policy must be presented to the Town of Ashland City (City Hall) at least 7 days prior to the event. Failure to meet this deadline will result in the cancellation of the reservation and forfeiture of all deposits and rental fees paid.

**Alcohol Use:** No alcohol is allowed in the park unless as designated below.

**Permitted Alcohol Use:** Alcohol use is only permitted for special events authorized by the City Council. Alcohol use is only permitted at River Bluff Park.

All applicable state and local laws pertaining to alcohol sales and consumption of alcohol apply. The Town of Ashland City is not responsible for any consequences of violations of these laws.

Alcohol may only be consumed in a designated area that shall be separated by temporary fencing or boundaries. It shall not be served or consumed in any other area of the park. Violation constitutes a violation of the Open Container laws and is subject to all routine penalties.

The renter is fully responsible for policing the use of alcohol during the event. The Town reserves the right to have staff present or to inspect/police the use of alcohol at the event.

Beer consumption: The renter must acquire a special event beer permit from the Town's Beer Board to sell beer during the event. This shall comply with all regulations as set out in the special event permit. No permit is required if beer is not being sold.

Wine, alcohol and mixed drinks: No permit is required unless the alcohol is being sold. For all sales, all permitting requirements required by the State of Tennessee, Alcohol Beverage Commission must be met. A state issued catering license or appropriate licensing from the Alcohol Beverage Commission must be present to the Town prior to the event.

The Town reserves the right to require the renter to provide professional security or the hiring of Town officers, depending on the size of the event and the conditions under which alcohol is being served. This shall be reviewed on a case by case basis for any event exceeding 100 people and is at the discretion of the Town.

All open containers of alcohol must be consumed on premises and is prohibited from the removal from the premises.

Under no circumstances may a minor be served any alcohol. Any violation may result in applicable legal penalties and the forfeiture of all deposits to the Town for the use of the facility.

The Town reserves the right to approve or disapprove the consummation of alcohol on City property based upon the size of the event, history with the applicant, or any other information that the Town thinks is relevant.

### **Park Rules**

For your safety and protection, The Town of Ashland City has established the following rules and regulations for park use:



- Park hours are 5:30 am – 11 pm, seven days a week
- Park curfew for the park is 11:00 pm-5:30
- Glass bottles and containers are prohibited
- No unreasonably loud or raucous noise
- Pets must be on a leash, and all feces collected and disposed of properly by handler
- No pets allowed on athletic fields
- Golfing or (practice) driving of golf balls in the parks is prohibited
  
- Motorized vehicles are allowed in designated areas on pavement only
  
- No campfires allowed without prior approval
- No dunking booths, hot air balloons, pony rides, or horses/livestock allowed in City parks
- It is unlawful to cut or destroy vegetation
- All wildlife in City Parks is protected
- No overnight parking
- It is unlawful to litter in City Parks
- Advertising in City Parks is prohibited
- No off-road vehicles are allowed in City Parks
- Please obey all “Fields Closed” signs
- No fireworks allowed.

### **Vandalism**

The Parks and Recreation Department inspects properties on a regular basis. Should you notice broken equipment, unsafe conditions, or vandalism, report it to the Parks and Recreation office at 615-792-7553 ext. 5727. All non-emergency calls should be through the County Dispatch Office at 615-792-2098.

**There is no variance from this policy. Please do not put the Town's employees in an awkward position by requesting an exception to this policy!**

**Town of Ashland City  
Parks & Recreation  
Pavilion Rental Application Form**

Please fill out the application and email to [rcohen@ashlandcitytn.gov](mailto:rcohen@ashlandcitytn.gov) for approval.



Pavilions are available on a first come first serve basis, if not reserved. Applications for renting a pavilion are available at Public Works or on the Town of Ashland City’s website. Rental fees must be paid at Public Works, 233 Tennessee Waltz Parkway, Suite 103, Ashland City, TN or by calling 615-792-4211 ext. 5232 (fee involved). Fees will be returned if the reservation is cancelled by the renter with a 7- day notice. Rental fees will be refunded if cancelled due to severe weather-related conditions, otherwise, there will be no refunds for rainouts. Rental requests can be made by calling 615-792-7553 ext. 5721 to check availability.

**Pavilion Fees:**

# Of hours (Min 2)	Day	Rental Fee	AC Property owner or resident	Deposit
	Sunday-Thursday	\$25.00 per hour	\$20.00 per hour	\$100.00
	Friday-Saturday	\$50.00 per hour	\$45.00 per hour	\$200.00

Rental times are from 9am to 1pm and 2pm to 6pm.

**Pavilions:**

911 Memorial Playground Pavilion: seats 24, restrooms.

Riverbluff Park Pavilion: seats 72, water, electric and restrooms.

Christopher LaCrosse Pavilion: seats 72, water, electric and restrooms.

**Town of Ashland City  
Parks & Recreation  
Facility Agreement for Athletic Fields**

Applicant/Group  
Representative: \_\_\_\_\_  
Group/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_

Additional phone number: \_\_\_\_\_

Field requested (Location and which field): \_\_\_\_\_

Pitching Distance: \_\_\_\_\_ Feet    Base Distance: \_\_\_\_\_ Feet

Dates/Days: \_\_\_\_\_ (Please attach schedule)

Weeks Used: \_\_\_\_\_

Hours requested: \_\_\_\_\_

Number of Attendees expected: \_\_\_\_\_

**Ashland City Elementary Ballfields (Softball)**

**J.W. Johns Jr. Park (Baseball)**

**Event Date:** \_\_\_\_\_

**Start Time:** \_\_\_\_\_

**End Time:** \_\_\_\_\_

# Of hours	Facility	Reservation Fee	Subtotal
	Ballfield	\$10.00 per hour	_____
	Lighting	\$15.00 per reservation	_____

**Total amount Paid:** \_\_\_\_\_

The applicant agrees that if said premises, or the buildings, equipment or furnishings thereon, are damaged during the terms of this agreement , by the act, default or negligence of the signed, or its officers, agents, employees, guests, patrons or any person or person admitted to said facility by the signed, the signed shall pay to the Town of Ashland City upon demand such sum as shall be necessary to restore said facility to the

condition that it was in at the commencement of this agreement and to replace and to repair any equipment or furnishings so damaged.

### **Athletic Field Use Rules**

- A. Please leave the park clean – dispose of all waste in designated receptacles.
- B. Reservation is for the designated athletic field only. It does not include any concession stands or bathroom facilities. All other park attractions and facilities are open to the public.
- C. In the event the organization is an athletic league, the organization shall provide Ashland City Parks and Recreation with a complete schedule of all games and practices to be played at the Parks and Recreation facilities, and proof of liability insurance naming Town of Ashland City in the amount of \$1,000,000.
- D. In the event a Town of Ashland City Parks and Recreation program or function conflicts with an organization’s use of the athletic field identified in this agreement, the Parks and Recreation’s program or function shall have the priority and the conflict will be resolved by the organization’s rescheduling its use of the athletic field.
- E. Ashland City Parks and Recreation shall have the absolute right and discretion to cancel this agreement and any permission granted to the organization to use the park facilities in the event the organization fails to fully satisfy the rules set forth in this agreement, provided Parks and Recreation has given written notification to the organization of the specific rule infraction(s) and a reasonable time to correct any infraction(s) prior to cancellation.
- F. Organizations making the reservation shall be responsible for the supervision of parking and the supervision and control of spectators.
- G. Organizations and spectators shall follow all Park Use Rules.
- H. No tournaments will be scheduled until approval is given by the Ashland City Parks and Recreation Department Director.

### **Park Rules**

For your safety and protection, The Town of Ashland City has established the following rules and regulations for park use:

- Park hours are 5:30 am – 11 pm, seven days a week
- Park curfew for community neighborhood parks is 11:00 pm-5:30 am
- No alcoholic beverages
- Gun carry by permit only
- Glass bottles and containers are prohibited
- No unreasonably loud or raucous noise
- Pets must be on a leash, and all feces collected and disposed of properly by handler

- No pets allowed on athletic fields or play areas
- Golfing or (practice) driving of golf balls in the parks is prohibited
- An event permit is required for organized activities
- Motorized vehicles are allowed in designated areas on pavement only
- No use of charcoal grills allowed
- No campfires allowed without prior approval
- No dunking booths, hot air balloons, pony rides, or horses/livestock allowed in City parks
- It is unlawful to cut or destroy vegetation
- All wildlife in City Parks is protected
- No overnight parking
- It is unlawful to litter in City Parks
- Advertising in City Parks is prohibited
- No off-road vehicles are allowed in City Parks
- Please obey all “Fields Closed” signs
- No fireworks allowed.

### **Vandalism**

The Parks and Recreation Department inspects properties on a regular basis. Should you notice broken equipment, unsafe conditions, or vandalism, report it to the Parks and Recreation office at 615-792-7553 ext. 5727. All non-emergency calls should be through the County Dispatch Office at 615-792-2098.

### **Liability Insurance Requirements**

- A. In the event the organization is an athletic league, a certificate of insurance indication comprehensive general liability coverage of not less than \$1,000,000.00 C.G.L. and naming Ashland City Parks and Recreation is required. Certificates must be delivered to the Parks and Recreation Director or his/her designee prior to issuance of any permit under this Policy.
- B. The liability of Ashland City Parks and Recreation for failure to honor an issued permit for use of the athletic fields in any park because of 1) an act of God; 2) condition of the facilities; 3) or other condition beyond the reasonable control of Ashland City Parks and recreation, shall be limited to:
  1. Providing a mutually satisfactory alternate date and/or time for the event or activity scheduled under the permit.
  2. Refund of any monies received by the Town of Ashland City from the applicant/permit holder because of a specific permit.
- C. Liability Waiver: Participants on teams must sign a hold harmless liability waiver indemnifying Ashland City Parks and Recreation from all claims resulting from injuries, damages or losses sustained or associated with the use/program.

D. The applicant, group, and/or league utilizing the equipment or facility under the terms of this agreement, agrees to indemnify and hold harmless and defend the Ashland City Parks and Recreation Department, its officers, agents, and employees from any and all claims resulting from injuries, including death, damages, and losses including, but not limited to the general public, which may arise or may be alleged to have arisen out of or in connection with the applicant, group or leagues' use of the equipment or facility.

Signature of Applicant \_\_\_\_\_ Print Name \_\_\_\_\_

Date \_\_\_\_\_

Signature of Parks and Recreation Employee \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_





**State of Tennessee Contract Quote Sheet**

Issued Under:

**SWC 400 Multifunction Devices**

Contract #: 62117 - *State contract #*

**QUOTE AND PURCHASE ORDER DOCUMENT**

Quote #: LK118 Date: 1/27/2022

**BILL TO:** ("Customer")

Customer Name: Town of Ashland City  
 Dept: \_\_\_\_\_  
 Contact: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**SHIP TO:** (if different)

Customer Name: \_\_\_\_\_  
 Dept: \_\_\_\_\_  
 Contact: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Auto Toner Contact (if different from above):**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**CSA to Pick Up Current Copier if Completed:**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial #: \_\_\_\_\_

**Color Group IV - Canon IRADV DX C5860I (60 CPM)**

Qty	Model Description - Base Configuration	Monthly Rental Price	Vendor Item ID
1	Canon IRADV DX C5860I MONTHLY RENTAL Cost Per Copy Charges apply		3825C002
Equipment Maintenance cost per copy/print includes toner and staples: B/W CPC: \$ 0.0032 Color CPC \$ 0.0350			
<b>ACCESSORIES (INCLUDED WHEN QUANTITY NOTED):</b>			
	CABINET TYPE-V		5358C001
1	INNER FINISHER-L1		4000C002
	STAPLE FINISHER-AB1		3999C002
	BUFFER PASS UNIT-P1		4003C002
	INNER 2/3 HOLE PUNCHER-D1		4002C002
1	SUPER G3 FAX BOARD-AX1		3998C001
1	HD CARD-SCANNER/FOLLOW-ME-PRINT		3575B678
1	TRACKING SOFTWARE		3575B436
1	ADD'L INPUT TRAY (CASSETTE FEEDING UNIT-AM1)		0609C002
<b>THE BELOW ITEMS ARE NOT AVAILABLE ON STATE CONTRACT #62117. CUSTOMER HEREBY ACKNOWLEDGES THE REQUISITE PURCHASING AUTHORITY IS CHAPTER 0690-3-1 OF THE DGS RULES, OR LOCAL PURCHASING REGS, AS APPLICABLE, NOTWITHSTANDING, THESE ITEMS ARE SUBJECT TO THE TERMS OF 62117, WHICH IS CONTROLLING.</b>			

TOTAL: \$74.67

Auto Toner Fulfillment \*\*(Requires use of imageWare Remote)

Send Signed Purchase Canon Solutions America, Inc.  
 Order or Email Attn. Lisa Kimbrell  
 Acknowledgement to: 402 BNA Drive, Ste. 360  
 Nashville, TN. 37217  
 -- OR --

**Send Payments To:** Canon Financial Services, Inc.  
 14904 Collections Center Drive  
 Chicago, IL 60693

Email lkimbrell@csa.canon.com

Toner  
Service  
Staple  
travel

5 years  
CAN'T new  
machine  
could

6-12 weeks  
out



Terms and Conditions

**INTRODUCTION:**

**1. NEGOTIATED CONTRACT.** The Products are subject solely to the terms in the Negotiated Contract identified on the face of this Agreement, and, for any option you have selected that is not addressed in the Negotiated Contract, the then-current standard Xerox terms for such option.

**GOVERNMENT TERMS:**

**2. REPRESENTATIONS & WARRANTIES.** This provision is applicable to governmental entities only. You represent and warrant, as of the date of this Agreement, that: (1) you are a State or a fully constituted political subdivision or agency of the State in which you are located and are authorized to enter into, and carry out, your obligations under this Agreement and any other documents required to be delivered in connection with this Agreement (collectively, the "Documents"); (2) the Documents have been duly authorized, executed and delivered by you in accordance with all applicable laws, rules, ordinances and regulations (including all applicable laws governing open meetings, public bidding and appropriations required in connection with this Agreement and the acquisition of the Products) and are valid, legal, binding agreements, enforceable in accordance with their terms; (3) the person(s) signing the Documents have the authority to do so, are acting with the full authorization of your governing body and hold the offices indicated below their signatures, each of which are genuine; (4) the Products are essential to the immediate performance of a governmental or proprietary function by you within the scope of your authority and will be used during the Term only by you and only to perform such function; and (5) your payment obligations under this Agreement constitute a current expense and not a debt under applicable state law and no provision of this Agreement constitutes a pledge of your tax or general revenues, and any provision that is so construed by a court of competent jurisdiction is void from the inception of this Agreement.

**3. FUNDING.** This provision is applicable to governmental entities only. You represent and warrant that all payments due and to become due during your current fiscal year are within the fiscal budget of such year and are included within an unrestricted and unencumbered appropriation currently available for the purchase/maintenance of the Products, and it is your intent to use the Products for the entire term and to make all payments required under this Agreement. If (1) through no action initiated by you, your legislative body does not appropriate funds for the continuation of this Agreement for any fiscal year after the first fiscal year and has no funds to do so from other sources, and (2) you have made a reasonable but unsuccessful effort to find a creditworthy assignee acceptable to Xerox in its sole discretion within your general organization who can continue this Agreement, this Agreement may be terminated. To effect this termination, you must, at least 30 days prior to the beginning of the fiscal year for which your legislative body does not appropriate funds, notify Xerox in writing that your legislative body failed to appropriate funds and that you have made the required effort to find an assignee. Your notice must be accompanied by payment of all sums then owed through the current year under this Agreement. You will return the Equipment, at your expense, to a location designated by Xerox and, when returned, the Equipment will be in good condition and free of all liens and encumbrances. You will then be released from any further payment obligations beyond those payments due for the current fiscal year (with Xerox retaining all sums paid to date).

**SOLUTION/SERVICES:**

**4. OVERSIZE PRINTS.** Each print made on the following Equipment: C8155H2, that is larger than 145 square inches (e.g., 11 x 17 = 187 square inches), but less than or equal to 491 mm in length, will register as two (2) prints on the applicable (B&W/color) meter, and, for that Equipment with extra-long print capability, for any impressions greater than 491 mm will register up to four (4) prints on the applicable (B&W/color) meter.

**PRICING PLAN/OFFERING SELECTED:**

**5. FIXED PRICING.** If "Pricing Fixed for Term" is identified in Maintenance Plan Features, the maintenance component of the Minimum Payment and Print Charges will not increase during the initial Term of this Agreement.

**GENERAL TERMS & CONDITIONS:**

**6. REMOTE SERVICES.** Certain models of Equipment are supported and serviced using product information that is automatically collected by Xerox or transmitted to or from Xerox by the Equipment connected to your network ("Remote Product Info") via electronic transmission to a secure off-site location ("Remote Transmission"). Remote Transmission also enables Xerox to transmit Releases of Software to you and to remotely diagnose and modify Equipment to repair and correct malfunctions. Examples of Remote Product Info include product registration, meter read, supply level, Equipment configuration and settings, software version, and problem/fault code information. Remote Product Info may be used by Xerox for billing, report generation, supplies replenishment, support services, recommending additional products and services, and product improvement/development purposes. Remote Product Info will be transmitted to and from you in a secure manner mutually agreeable to the parties. Remote Transmission will not allow Xerox to read, view or download the content of any of your documents or other information residing on or passing through the Equipment or your information management systems. You grant the right to Xerox, without charge, to conduct Remote Transmission for the purposes described above. Upon Xerox's request, you will (a) provide contact information for Equipment such as name and address of your contact and IP and physical addresses/locations of Equipment and (b) ensure that any Maintenance Release or Update released by Xerox to provide security patches, releases and/or certificates for the Remote Transmission and/or Software is promptly enabled by Customer upon notification by Xerox or by the Equipment or when otherwise made available on xerox.com. You will enable Remote Transmission via a method mutually agreeable to both parties, and you will provide reasonable assistance to allow Xerox to provide Remote Transmission. Unless Xerox deems Equipment incapable of Remote Transmission, you will ensure that Remote Transmission is maintained at all times Maintenance Services are being performed. If you are unable to maintain Remote Transmission, or if Xerox disables Remote Transmission from any Equipment at your request, or if you disable Remote Transmission from any Equipment, Xerox reserves the right to charge you a per device fee for such affected Equipment due to the increased service visits that will be required in order to (x) obtain such information, (y) provide such transmissions, and (z) provide such Maintenance Services and Consumable Supplies that otherwise would have been provided remotely and/or proactively.

Financial Information

**7. REFINANCE.** The "Amount Refinanced" is included in the amount financed under this Agreement. If the Amount Refinanced is under an agreement with a third party, you acknowledge you have the right to terminate the agreement and you will provide Xerox with a statement from the third party identifying the equipment at issue, the amount to be paid off and the payee's name and mailing address. If the Amount Refinanced is under an agreement with Xerox, the refinancing will render your prior agreement null and void. If you breach any of your obligations under this Agreement, the full Amount Refinanced will be immediately due and payable.

Item	Finance Activity	Amount Refinanced	Int. Rate	Total Int. Payable
1. C8155H2	- Refinance of Xerox Agreement	\$422.00	7%	\$79.00

**FW: Xerox upgrade**

Gayle Bowman &lt;GBowman@ashlandcitytn.gov&gt;

Fri 12/3/2021 12:11 PM

To: Jamie Winslett &lt;JWinslett@ashlandcitytn.gov&gt;; Rebecca Cohen &lt;RCohen@ashlandcitytn.gov&gt;; Alicia Martin &lt;ayoung@ashlandcitytn.gov&gt;

Cc: Jake Greer &lt;jake.greer@ashlandcitytn.gov&gt;

 1 attachments (37 KB)

Xerox order to sign.pdf;

She wants to change out our copier and upgrade. Do we need to do this? If we do, it has to go on the workshop agenda.

Gayle

**From:** Karen McGinnis <karen.mcginnis@usa.net>**Sent:** Monday, November 22, 2021 5:28 PM**To:** Gayle Bowman <GBowman@ashlandcitytn.gov>**Subject:** Xerox upgrade

Hello Gayle, I'm excited to let you know that Ashland City can save money and upgrade their Xerox MFP in the City Recorder's office. Currently you have a 45 ppm machine and the cost for the lease is \$299.54/month and then your average copy volume is 2364 black and 2094 color. That brings your average bill to \$421.81/month.

The new Xerox C8155 is 55 ppm and has the copies included. You are a member of Omnia which is the largest purchasing organization for public sector purchasing (like State and Local Governments) and it's already competitively bid. Your cost on the Omnia contract would be \$295.52/month and that includes your copy costs. That's a savings of \$126.29 a month over your current average bill! There are no other costs...this includes delivery, onsite analyst set up and training, Xerox service/supplies.....includes everything except paper!

See the attached order agreement. It shows you that you will have 10,000 black included and 5,000 color each month at no additional cost. I realize you don't use that many but the contract offers this level or unlimited and you surely don't need the unlimited! This will be a good fit for you and will be easy for budgeting because the cost won't fluctuate each month based on the number of copies.

I know you have a council meeting coming up, so please let me know if you have any questions after you review this. I'll also send a brochure for the C8155 in my next email (it's a large file). It's a very fast, reliable machine that you can add apps to if you want to enhance some workflows. Thanks!

--

**Karen McGinnis**  
Xerox Sales Agent

931-358-4888

karen.mcginnis@usa.net | karen.mcginnis@usa.net



Customer Information

XEROX CORPORATION  
PO BOX 660502  
DALLAS TX  
75266-0502  
WWW.XERDX.COM/MYACCT

THE EASY WAY  
TO ORDER SUPPLIES  
CALL OUR TOLL  
FREE NUMBER  
1-800-822-2200

Purchase Order Number

Special Reference  
VTE00000X-000  
Contract Number  
NET 30 DAYS  
Terms Of Payment

Telephone 888-435-6333  
Please Direct Inquiries To:  
Ship To/Installed At:

Bill To:

TOWN OF ASHLAND CITY  
RECORDER  
STE 103 PKWY  
233 TENNESSEE WALTZ  
ASHLAND CITY TN  
37015

TOWN ASHLAND CITY  
CITY RECORDER  
PO BOX 36  
ASHLAND CITY TN  
37015

08-01-21  
Invoice Date  
013976841  
Invoice Number  
713315687  
Customer Number

PAID  
06/13/20  
AUG 05 2021

1ahr 944 80.66

W7845PT W7845PT TANDEM SER.# MX4-495882

arks 944 > 80.66  
rects 944 >

inance 944 > 80.65  
urt 944 >  
des 944 >

AMOUNT

BASE CHARGE

JULY 2021

299.54

Invoice

METER USAGE	METER READ 06-21-21 TO	METER READ 07-21-21	NET COPIES
TOTAL BLACK	249337	252711	3374
TOTAL COLOR	118453	121637	3184

METER CHARGES			
TOTAL BLACK	3374		
BLACK BILLABLE PRINTS	3374	.006900	23.28
TOTAL COLOR	3184		
COLOR BILLABLE PRINTS	3184	.050600	161.11
NET PRINT CHARGE			184.39

CONVEN STAPLER KIT	SER.# STAPLERKT	INCL
	SUB TOTAL	483.93
	TOTAL	483.93

INVOICE FOR THE PERIODIC PAYMENT ON YOUR XEROX AGREEMENT  
THIS AGREEMENT INCLUDES EQUIPMENT, MAINTENANCE AND SUPPLY CHARGES  
TOTAL OF INVOICE MAY VARY ACCORDING TO METER USAGE BILLED

XEROX FEDERAL IDENTIFICATION #16-0468020

PLEASE INCLUDE THIS STUB WITH YOUR PAYMENT, OR WRITE YOUR INVOICE NUMBER(S) ON YOUR CHECK.

Ship To/Installed At  
TOWN OF ASHLAND CITY  
RECORDER  
STE 103 PKWY  
233 TENNESSEE WALTZ  
ASHLAND CITY TN  
37015

Bill To  
TOWN ASHLAND CITY  
CITY RECORDER  
PO BOX 36  
ASHLAND CITY TN  
37015

When Paying By Mail  
Send Payment To:  
XEROX CORPORATION  
P.O. BOX 827598  
PHILADELPHIA, PA  
19182-7598

Please check here if your "Bill To" address or "Ship To/Installed At" location has changed and complete reverse side.

Invoice Amount

00-419-0435 4 713315687 013976841 08-01-21 THIS AMOUNT  
RT004073 C 040117  
03 6M2B 1R58 W A7310 2TC5 2 115

\$483.93  
VTE50

ITEM #3.

Payment



Customer Information

XEROX CORPORATION  
PO BOX 660502  
DALLAS TX  
75266-0502  
WWW.XEROX.COM/MYACCT

THE EASY WAY  
TO ORDER SUPPLIES  
CALL OUR TOLL  
FREE NUMBER  
1-800-822-2200

Purchase Order Number

Special Reference  
VTE00000X-000  
Contract Number  
NET 30 DAYS  
Terms Of Payment

Telephone 888-435-6333  
Please Direct Inquiries To:   
Ship To/Installed At:

TOWN OF ASHLAND CITY  
RECORDER  
STE 103 PKWY  
233 TENNESSEE WALTZ  
ASHLAND CITY TN  
37015

Bill To:  
TOWN ASHLAND CITY  
CITY RECORDER  
PO BOX 36  
ASHLAND CITY TN  
37015

#3468

01-01-22  
Invoice Date  
015171265  
Invoice Number  
713315687  
Customer Number

Invoice

W7845PT W7845PT TANDEM

SER.# MX4-495882

35.85 → 320 → H2O Sewer

Codes  
Parks 771.71  
Streets  
Finance  
Court → 71.70

BASE CHARGE

DECEMBER 2020

AMOUNT

299.54

METER READ METER READ NET COPIES

METER USAGE	11-21-21 TO	12-21-21	
TOTAL BLACK	264833	267866	3033
TOTAL COLOR	128823	130992	2169

METER CHARGES			
TOTAL BLACK	3033		
BLACK BILLABLE PRINTS	3033	.006900	20.93
TOTAL COLOR	2169		
COLOR BILLABLE PRINTS	2169	.050600	109.75
NET PRINT CHARGE			130.68

CONVEN STAPLER KIT SER.# STAPLERKT INCL  
SUB TOTAL 430.22  
TOTAL 430.22

INVOICE FOR THE PERIODIC PAYMENT ON YOUR XEROX AGREEMENT  
THIS AGREEMENT INCLUDES EQUIPMENT, MAINTENANCE AND SUPPLY CHARGES  
TOTAL OF INVOICE MAY VARY ACCORDING TO METER USAGE BILLED

XEROX FEDERAL IDENTIFICATION #16-0468020

PLEASE INCLUDE THIS STUB WITH YOUR PAYMENT, OR WRITE YOUR INVOICE NUMBER(S) ON YOUR CHECK.

Ship To/Installed At  
TOWN OF ASHLAND CITY  
RECORDER  
STE 103 PKWY  
233 TENNESSEE WALTZ  
ASHLAND CITY TN  
37015

Bill To  
TOWN ASHLAND CITY  
CITY RECORDER  
PO BOX 36  
ASHLAND CITY TN  
37015

When Paying By Mail  
Send Payment To:  
XEROX CORPORATION  
P.O. BOX 827598  
PHILADELPHIA, PA  
19182-7598

Payment

Please check here if your "Bill To" address or "Ship To/Installed At" location has changed and complete reverse side.

Invoice Amount

PLEASE PAY THIS AMOUNT \$430.22  
00-419-0435 4 713315687 015171265 01-01-22  
RT003757 C 040117 VTE50  
03 6M2B 1R58 W A7310 2TC5 2 115

**ORDINANCE #**

**AN ORDINANCE BY THE MAYOR AND CITY COUNCIL TO ACCEPT A BUDGET AMENDMENT FOR THE 21/22 FISCAL YEAR**

**WHEREAS**, the Mayor and Council appropriate \$45,810 in the General Fund; in the Senior Center Department \$5,000 for the TCAD Grant and \$13,000 for Kathy’s Kitchen, \$7,810 in the Fire Department for the COVID 19 Supplemental FEMA Grant and \$20,000 in Building and Codes for Personnel Salaries and Benefits.

**NOW THEREFORE, BE IT ORDAINED**, by the Council of the Town of Ashland City, Tennessee that this ordinance shall become effective 20 days after final passage the public welfare requiring.

Section 1. A budget amendment consisting of the available funds and appropriations be adopted for the General Fund:

<i>General Fund</i>	<u>Beginning Departmental Budget</u>	<u>Ending Departmental Budget</u>
Senior Center Department	\$393,770	\$411,770
Fire Department	\$7,273,717	\$7,281,527
Building & Codes	\$271,695	\$291,695

1<sup>st</sup> reading \_\_\_\_\_  
Public Hearing \_\_\_\_\_  
2<sup>nd</sup> reading \_\_\_\_\_

Attest:

\_\_\_\_\_  
Mayor Steve Allen

\_\_\_\_\_  
City Recorder Alicia Martin, CMFO



**ORDINANCE NO.**

**AN ORDINANCE TO AMEND THE OFFICIAL ZONING MAP OF THE TOWN OF ASHLAND CITY, TENNESSEE, BY REZONING PARCEL 035.06.000 OF CHEATHAM COUNTY TAX MAP 062, LOCATED ON HIGHWAY 12 SOUTH**

**WHEREAS**, the Town of Ashland City has recognized the need to reclassify certain parcels located within its corporate limits to a zoning district classification more appropriate to the existing land use and the surrounding area to promote and protect the health, safety, morals, convenience, order, prosperity, and other aspects of general welfare; and

**WHEREAS**, a request has been made to the Ashland City Municipal-Regional Planning Commission to rezone said parcel; and

**WHEREAS**, the Ashland City Municipal-Regional Planning Commission has reviewed and recommended to the Town Council that the Official Zoning Map, be amended as hereinafter described; and

**NOW, THEREFORE, BE IT ORDAINED BY THE COUNCIL OF THE TOWN OF ASHLAND CITY, TENNESSEE:**

*SECTION 1.* Pursuant to provisions of Sections 13-7-201 to 13-7-204, Tennessee Code Annotated, the property described herein is rezoned as follows:

The property included on Tax Map 62, Parcel 035.06.000, located on Highway 12 South be rezoned from R-1 (Low Density Residential) to R-4 (High Density Residential), as taken from the records of the Assessor of Property of Cheatham County, Tennessee as of January 2022. The property is marked with a red “X” and shown on the map below.

*SECTION 2.* This ordinance shall be effective 20 days after its final passage, the public welfare requiring it.

First Reading: January 11, 2022  
Second Reading: February 8, 2022  
Public Hearing: January 11, 2022  
Public Hearing Advertisement December 28, 2021

ATTEST:

\_\_\_\_\_  
Mayor Steve Allen

\_\_\_\_\_  
City Recorder Alicia Martin, CMFO



TOWN OF ASHLAND CITY

Application for Limited Certificate of Compliance for State Licensure for Sale of Package Liquor  
 \$500.00 Additional \$100.00 fee for each additional background check.

**THIS SECTION FOR CITY USE ONLY:**

Date Application Filed: <u>1/18/22</u> Time: <u>2:57 PM</u> Receipt No. <u>R00143354</u> Amount Paid: <u>\$500.00</u> Cash: _____ Check# <u>1821</u> Application for: <input checked="" type="checkbox"/> Retail sale of packaged alcoholic beverages <input type="checkbox"/> Renewal	City Attorney review completed by: _____ on _____ Police Chief review completed by: _____ on _____  BOARD ACTION: Granted: ___/___/___ Issued: ___/___/___ Denied: ___/___/___ Deferred: ___/___/___ Withdrawn: ___/___/___	Zoning: _____ Map No. _____ Parcel No. _____ Street Address: _____  Property inspection completed by: _____ on: _____ Location Approved: _____
---	---	--

**ANSWER ALL OF THE FOLLOWING QUESTIONS:**

APPLICANT IS SEEKING A PERMIT WHICH WOULD ALLOW THE SALE OF ALCOHOLIC BEVERAGES FOR:

OFF-PREMISES PACKAGED LIQUOR SALES ONLY

I hereby make application for a Limited Certificate of Compliance from the Town of Ashland City, Tennessee as provided for in the Tennessee Code Annotated 57-3-208, et seq., and the Town's Retail Alcoholic Beverage Ordinance#340 and the amendments thereto and base my application upon the answers of the following questions:

1. Name of Applicant: MF, LLC (EMAD AZER, SOLE MEMBER)
2. Birth date of applicant: [REDACTED] Age at time of applicant: 47
3. Residential address of applicant: [REDACTED]  
 City: BRENTWOOD State: TN Zip: 37027
4. How long a resident of Cheatham County: \_\_\_\_\_
5. Does applicant presently hold and elected office or is seeking an elected office in the next election? NO
6. Other states of residency: N/A
7. Present occupation or business: OWNER--ASHLAND MARKET How long? 5 YRS  
 If employed, name and address of employer: ASHLAND MARKET  
303 N. MAIN ST. ASHLAND CITY, TN 37015   
 Phone: 615-424-1339 Contact person: EMAD AZER
8. Name of business for which permit is sought: ASHLAND MARKET

Page 1 of 5



9. Address of the location of the business for which a permit is sought: \_\_\_\_\_  
 303 N. MAIN STREET; ASHLAND CITY, TN 37015 \_\_\_\_\_

10. Name(s) of the owner of the property: \_\_\_\_\_

Deed Book and Page No. \_\_\_\_\_ Lease Expiration Date: \_\_\_\_\_  
 (Attach a copy of the executed lease or recorded deed of ownership hereto)

11. List persons, firms, corporations, joint stock companies, syndicates, or associations, having at least a five (5%) percent ownership interest in the applicant. Complete in detail. Attach a separate sheet if necessary. If corporation, give address of applicant's principal place of business.

Name of Individual Applicant Partners, or Officers and Directors	Title Percentage	Home address and Telephone Number	Date and Place of Birth	Race and Sex	SSN	U.S. Citizen Y or N
EMAD AZER	100%	[REDACTED]	[REDACTED]	male	[REDACTED]	Yes
		Brentwood, TN				
		37027				

12. Previous Address of Applicant: \_\_\_\_\_

13. If Applicant is an individual, give name and date and place of birth of spouse: n/a

14. If Applicant is a corporation, give name and date and place of birth of any spouse of anyone having a 5% or greater interest in the business corporation or partnership:

Name: n/a Date/Place of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date/Place of Birth: \_\_\_\_\_

15. For corporations that are not publicly traded:

Registered Name of Corporation: MF, LLC (EMAD AZER, SOLE MEMBER)

Date and Place of Incorporation: JULY 18, 2016 TENNESSEE

If foreign corporation, give date of certificate of authority: N/A

16. List stockholders having five (5%) percent or more ownership interest in the business: (attach a separate sheet if necessary)

Name of Stockholder	Home Address	Date and	Race	U.S.
---------------------	--------------	----------	------	------

2 63 5



First, Middle, Last	%	and Telephone Number	Place Birth	and Sex	SSN:	Citizen Y or N
EMAD AZER	100	[REDACTED]	[REDACTED]	MALE	[REDACTED]	YES
		[REDACTED]				
		Brentwood, TN				

17. FOR CORPORATION ONLY:

At regular or special meeting held on the 1ST day of DECEMBER, 200, by the Applicant, it was resolved that said application be filed with the Town of Ashland City and that EMAD AZER (name or officer and title) or N/A (name of officer and title) is/are hereby authorized to execute said application and any other papers required by the Board.

18. Designate the person or persons who will be in charge of the operations on the premises including in the absence of the Applicant.

Name of Stockholder First, Middle, Last	Home Address and Telephone Number	Date and Place Birth	Race and Sex	SSN:	U.S. Citizen Y or N
EMAD AZER	[REDACTED]	[REDACTED]	male	[REDACTED]	yes
	brentwood, tn				
	37027				
	[REDACTED]				

19. Conviction Record: Has any person, firm, joint-stock company, syndicate or association having at least a five (5%) percent ownership interest in the Applicant been convicted of any violation of the laws against possession, sale, manufacture, or transportation of alcoholic beverages, or any crime either a felony or misdemeanor?

Yes  No

If yes, list below:

Name First Middle Last	Charge(s)	Date of Conviction	Disposition	Location, Court, County and State
n/a				

Page 3 of 5

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]




20. Name and address of representative to receive the annual tax notice and other communications: EMAD AZER; 303 N. MAIN STREET; ASHLAND CITY, TN 37015

21. Is the building to be licenses located within 300 feet of any church, school, public institution or public meeting place?  Yes  No

22. Has the Applicant ever had a liquor permit revoked, suspended or denied in the State of Tennessee?  Yes  No

If yes, explain: N/A

23. Does applicant hold a license for Liquor-by-the-Drink with the State of Tennessee?  Yes  No

24. Are you familiar with the laws of the State of Tennessee governing the retail sale of package liquor?  Yes  No

25. Does applicant hold a license or permit to sell beer?  Yes  No

Applicant hereby solemnly swears that each and every statement in the foregoing application is true and correct; that the Town of Ashland City will be notified promptly if there is a change in circumstances that affect the responses provided in this application; that (1) no sale shall be made to anyone under twenty-one (21) years of age; (2) no person, firm, corporation, joint-stock company, syndicate or association having at least a five (5%) percent ownership interest in the Applicant has been convicted of any violation of the laws against possession, sale, manufacture, or transportation of alcoholic beverages or any crime involving moral turpitude within the past ten (10) years; (3) no person employed by the Applicant in such distribution or sale has been convicted of any violation of the laws against possession, sale, manufacture, or transportation of any alcoholic beverages or any crime involving moral turpitude within the past ten (10) years; and (4) the Applicant is not a specially designated national and has legal status to hold a permit of any other U.S. Citizen might possess.

If any statement herein is false, the Application shall become void in its entirety and a new

4 5

application will not be accepted for a minimum of 90 days .

Attached to this application form is the following required documentation:

- Copy of application to the Tennessee Alcoholic Beverage Commission
- Copy of valid Tennessee Driver's License or other photo identification
- Copy of utility bills for the past 50 months to prove residency or statement from utility provider.
- Actual newspaper ad and certification of publication
- Copy of lease, Bill of Sale or deed on property to be used for retail sales
- List of personal referenced (non-related)-form provided

Sworn to and subscribed before me this the 3 day of JAN, 2027.

Signature of Applicant: [Signature]

[Signature]  
NOTARY PUBLIC

My Commission Expires: 8/27/22

Note: State law allows up to 60 days to process this application.



5 3 5 5



STATE OF TENNESSEE  
ALCOHOLIC BEVERAGE COMMISSION



Davy Crockett Tower  
500 James Robertson Parkway, 3<sup>rd</sup> Floor  
Nashville, TN 37243  
615-741-1602

One Commerce Square  
40 South Main Street  
4th Floor, Suite 415  
Memphis TN 38103  
901-543-7284

[www.tn.gov/abc](http://www.tn.gov/abc)

4420 Whittle Springs Road  
Knoxville, TN 37917  
865-594-6342

540 McCallie Avenue, Suite 341  
Chattanooga, TN 37402-2055  
423-634-6434

**Business Check, Money Order or Cashiers Check ONLY**

APPLICATION FEE  
NON-REFUNDABLE

APPLICATION FOR PERMIT TO SELL  
ALCOHOLIC BEVERAGES

ALL signature spaces MUST  
be signed and notarized.

RETAIL PACKAGE STORE

Date: 12-28-21, 20  

Name of Corp./LLC/LP, SP, etc.: MF, LLC (EMAD AZER, SOLE MEMBER)

hereby make application for a permit to sell alcoholic beverages at the following location.

Doing Business As: ASHLAND MARKET

Business Address: 303 N. MAIN ST Business Tel ( ) Fax: ( )

City: ASHLAND CITY State TN Zip Code: 37015 County: CHEATHAM

Mailing Address (if different from Business Address) \_\_\_\_\_  
Street Address City State Zip

Email Address: MF.MARKET@YAHOO.COM Web-Site Address: \_\_\_\_\_

1. Have you and all partners (if any) been legal residents of the State of Tennessee for at least the preceding two years?  
YES
2. Are you and all partners (if any) United States Citizens? YES All applicants must complete Form AB-0116 – Declaration of Citizenship.
3. Do you hold a public office (either appointive or elective), or are you a public employee (either National, State, City or County)? NO
4. Have you, partners, or any other person having any kind of interest in your business ever been convicted of any criminal offense under the laws of the State of Tennessee or of any other State or of the United States? If yes, please specify  
NO
5. Have you, partners, or any other person having any kind of interest in this business ever been convicted of any offense under the laws of the State of Tennessee, or of any other State or of the United States prohibiting, or regulating the sale, possession, transportation, storing, manufacturing or otherwise handling intoxicating liquors within ten (10) years preceding the date of this application? NO If yes, please explain on an additional sheet of paper and attach.
6. Have you or your partners (if any) ever been cited to appear before the Commissioner of Revenue or the Tennessee Alcoholic Beverage Commission and charged with a violation of the law or rules and regulations made pursuant to law?  
NO

7. In whose name is the Alcohol Dealer Registration (TTB F 5630.5d) as a retail liquor dealer issued at this location?  
MF, LLC
8. Give the names and addresses of persons related to you by blood, marriage, or otherwise who own, operate, or have any interest either in a licensed Retail Store, Wholesale Distributor, Distillery, Supplier or Liquor-By-The-Drink establishment?  
N/A
9. Give the names and addresses of all persons other than those shown on this application who have any kind of interest, financial, stock ownership, loans, gifts, or securing loans, or otherwise, made for carrying on said business:  
N/A
10. Give the names and addresses of all persons other than those shown on the application who share in the profits from this business and state their interest:  
NONE
11. Give the name and address of the owner of the premises on which the business is to be located and the amount of the rental, if any. Also submit a copy of any lease agreement which has or may be entered into for this business. \_\_\_\_\_
12. Do you sub-lease or allow anyone to occupy any of the space covered in this lease? NO  
If so, state the name of the person and the type of business being operated. \_\_\_\_\_  
N/A
13. Who will be in active control in the management of this business? \_\_\_\_\_  
EMAD AZER
14. Give the name and address of any other business in which you or your partners, if any, are actively engaged.  
ASHI AND MARKET (CONVENIENCE STORE NOW-TO BE CONVERTED TO LIQUOR STORE)
15. Do you employ some person not otherwise connected with your store to keep your books? NO  
If the answer is yes, give name and address of person. \_\_\_\_\_  
N/A
16. Do you agree to accept full responsibility for the action of any member of the partnership or any person employed by you in the conduct of your business? YES
17. If this is an application for a renewal license, state whether you received any additional or new financial assistance, loans, or otherwise, during the previous year? N/A
18. If the answer to question 17 is "yes", state all facts and details in connection with said financial assistance, loans, etc.  
N/A
19. If you are indebted to the State of Tennessee for any tax, state the tax and amount. \_\_\_\_\_  
NO
20. Furnish Tennessee Sales Tax Registration Number: [REDACTED]
21. Give name and address of any relative employed by the Tennessee Alcoholic Beverage Commission \_\_\_\_\_  
NONE



All data, written statements, affidavits, evidence or other documents submitted in support hereof, or upon bearing hereon, shall be deemed to be a part of this application.

The applicant or applicants agrees that the place for which application is made will be operated in conformity with Chapter 257, Public Acts of 1963, and in conformity with all applicable rules and regulations made pursuant to law, which are now, or may hereafter be, in force.

**WARNING:** "YOUR STATEMENT IS MADE UNDER OATH OR AFFIRMATION. PROVIDING OR INCOMPLETE INFORMATION ARE GROUNDS FOR REJECTION OF APPLICATION OR SUSPENSION OR REVOCATION OF PERMIT IF ISSUED. FALSE STATEMENTS OR INCOMPLETE INFORMATION ARE ALSO SUBJECT TO THE PENALTIES OF PERJURY UNDER TENNESSEE LAW"

\*"THE ACCEPTANCE OF FEES DOES NOT GUARANTEE THE ISSUANCE OF A LICENSE OR PERMIT"\*

Application authorized by EMAD AZER  
Print Name, Owner of Establishment

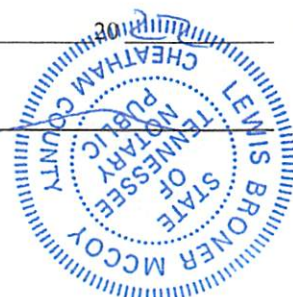
  
SIGNATURE, Owner of Establishment

EMAD AZER  
Print Name, Applicant

  
Signature of Applicant

Subscribed and sworn to before me this 3 day of July

My Commission Expires 8/27/22  
Notary Seal  Notary Public



The State of Tennessee and the Tennessee Alcoholic Beverage Commission are Equal Opportunity Employers. Discrimination, in any of its practices, which is based on age, race, sex, color, religion, national origin, disabling condition or any other non-merit factor is prohibited. Thus, the Tennessee Alcoholic Beverage Commission is an equal opportunity, equal access, affirmative action public entity.

**FOR ADDITIONAL INFORMATION:**

Contact the agency ADA Coordinator for this state agency: Assistant Director at 615-741-1602 or the Tennessee Office of Americans with Disabilities, Department of Personnel. Alternate formats of this notice are available on request.

Town of Ashland City, Tennessee  
Public Safety Department

**APPLICANT BACKGROUND CHECK**

For Application for Limited Letter of Compliance for License to Sell Retail/Alcohol

**CITY USE ONLY**

Address of Location of Proposed Store: 303 N. MAIN ST; ASHLAND CITY, TN 37015

*Use a separate form for each applicant.*

Applicant's Full Name: MF, LLC (EMAD AZER, SOLE MEMBER)

Current Address: [REDACTED] BRENTWOOD, TN 37027

Social Security Number: [REDACTED]

1. Convicted of felony, misdemeanor or any offense of the alcohol laws of the State or the U.S. in the past 10 years:  Yes  No

2. Has been engaged in business with anyone who was in violation of the laws mentioned above:  
 Yes  No

If "yes" under questions 1 or 2, explain offense: N/A

Any other information that was revealed in background check that is relative: N/A

**I have conducted a background search for all applicants for the above described retail liquor establishment.**

MARC COULON, Police Chief  
Town of Ashland City, Tennessee

\_\_\_\_\_  
Date

Resources used for background search:  TBI  ACCity  Cheatham County  NCIC

\_\_\_\_\_  
Other





WAIVER FOR BACKGROUND CHECK

I by signing this document have applied for a package liquor store/beer permit and as such understand that part of the requirement for a package liquor store/beer permit is that the applicant can not have a criminal record of a felony, a crime involving moral turpitude, or a violation of any laws dealing with the possession, sale, manufacture, or transportation of beer or any other alcoholic beverage within the last ten years. This applies to anyone with an interest in the business of five percent (5%) or more. By signing this document, I hereby consent to myself as well as the other individuals listed that have a five percent (5%) or more interest in the business to have a background check run by the local police department including a criminal check. I fully release the Town of Ashland City from any and all liability from conducting the search and understand and release them from the reliability of the information that they receive in that they are relying on third parties for the supply of the information. I hereby consent to the Town of Ashland City to conduct a background check.

12-29-21  
Date

EMAD AZER  
Applicant

[REDACTED]  
Social Security Number

[REDACTED]  
DOB

List of other individuals who own at least a five percent (5%) or more in the business:

N/A  
Owner's Name

DOB

Social Security Number

[REDACTED]

[REDACTED]

1/1/15

N/A  
Owner's Name

                      
DOB

                      
Social Security Number

**Receipt #R00143354**

No-Reply <No-Reply@ashlandcitytn.gov>

Thu 1/27/2022 1:59 PM

To: Alicia Martin <ayoung@ashlandcitytn.gov>

The Town of Ashland City would like to thank you for your payment!

Town of Ashland City Water & Sewer

PO Box 36

Ashland City, TN 37015

(615)792-4211

-----  
DATE : 1/18/2022 2:57 PM

OPER : AB

TKBY : ALYSSA BARNHILL

TERM : 1

REC# : R00143354

LIQUOR TAX - 31720 WHOLESALE LIQUOR TAX

303 N MAIN LIQUOR APP FEE 500.00

LIQUOR TAX - 31720 WHOLESALE LIQUOR TAX

303 N MAIN BACKGROUND FEE 100.00

Paid By:303 N MAIN LIQUOR APP FEE

6-110 GEN CHECK 600.00 REF:1821

RIDES AND CONCESSIONS

**AMUSEMENT ATTRACTIONS**

13007 WHITNELL WAY  
RIVERVIEW, FL 33579

William Purdy, President

612-801-2712

Memorandum of Agreement

1. This contract made and entered into this, the **18th day of January, A.D., 2022** by and between **Amusement Attractions**, Party of the first part and **Ashland City of Tennessee** party of the second part.
2. Witness: - That for and in consideration of the sum of one dollar in hand paid to each other, the receipt of which in herein acknowledged, and other good valuable consideration hereinafter set forth, both parties aforesaid bind themselves as follows: -
3. That part of the first part agrees to present their entire company consisting of high class pay shows, riding devices, concessions, etc., to the city of **Ashland City** for the period of **5** days and nights commencing for the **June 7<sup>th</sup>, 2022, to June 11<sup>th</sup>, 2022**, all dates inclusive. The party of the first part is also to furnish tickets.
4. The Party of the second party agrees to furnish all licenses and permits that may be required by law, electric current, including the connection and disconnection of transformer, water, police protection, ticket takers on shows, also a suitable location of grounds, knows as **Soccer Field at River Bluff Park in Ashland City, TN**
5. That all shows, riding devices, concessions and minor privileges shall be under management and control of the first part.
6. That: Party of the first part shall have the exclusive on all rides and games, unless otherwise stated herein, during the life of this contract.
  - a. Amusement Attractions will pay 20% of ticket box revenue and will provide accounting record of said fees to the records office
  - b. All armbands will be \$25, and each armband will have a \$5 free credit on them
  - c. Parks and Recreation will provide restroom facilities, trash dumpster, and water connection
  - d. Amusement Attractions will provide insurance certificate to the Town of Ashland City, TN **PO Box 36 Ashland City, TN 37015**
  - e. Amusement Attractions will provide 15-21 rides and 15-21 concessions
  - f. In the event of any lawsuits due to injury of a third party due to liability of the party of the first part, the party of the first part shall identify and hold party of the 2<sup>nd</sup> part harmless including reimbursement of attorney fees
  - g. Amusement Attractions will provide 150 wristbands to the town of Ashland City for use by the employees at no cost.
7. That it is mutually agreed by both parties hereto that there is no other contract or promise, either written or verbal existing between them, and that this contract is subject to the approval of the above-named shows, either by wire or letter.
8. In case of sickness or death the performer, then the party of the first part shall have a reasonable length of time to replace such performer. In case of railroad accident or delay, strikes, fire, flood, cyclone, epidemic, or unforeseen occurrence over which the party of the first cannot control, then they are not to be held for damages by party of the second part.
9. This contract entered into signed in duplicate in the City of **Riverview of Florida**, this the **18th** day of **January** A.D, **2022** by the dually authorized representatives of the parties here to.

AMUSEMENT ATTRACTIONS.

By William Purdy

Party of the first part  
Organization

By \_\_\_\_\_

Party of the Second Part

By \_\_\_\_\_

Title: \_\_\_\_\_

State of Tennessee  
Cheatham County

**RESOLUTION NO. 2022-**

**A RESOLUTION OF THE TOWN OF ASHLAND CITY, TENNESSEE  
AUTHORIZING SIGNERS TO ALL BANK ACCOUNTS**

**WHEREAS**, Councilman Daniel Anderson is no longer a member of the council; and

**WHEREAS**, The Town of Ashland City, through its City Council, as set out in the Town’s charter, Section 43, may elect to designate other officers to sign disbursement checks in the Mayor’s absence; and

**WHEREAS**, the City Council wishes ensure payments are made in a timely manner and would like to designate one city official as alternate to the Mayor and Finance Director in order to sign disbursement checks in their absence.

**NOW, THEREFORE BE IT RESOLVED BY THE MAYOR AND COUNCIL OF THE TOWN OF ASHLAND CITY, TENNESSEE** hereby remove Councilman Daniel Anderson.

We, the undersigned City Council members, meeting in Regular Session on this 8th day of February, 2022 move the adoption of the above Resolution.

Councilmember \_\_\_\_\_ moved to adopt the Resolution.

Councilmember \_\_\_\_\_ seconded the motion.

Voting in Favor \_\_\_\_\_

Voting Against \_\_\_\_\_

Attest:

\_\_\_\_\_  
Mayor Steve Allen

\_\_\_\_\_  
City Recorder Alicia Martin, CMFO

**ORDINANCE #**

**AN ORDINANCE BY THE MAYOR AND CITY COUNCIL TO ACCEPT A  
BUDGET AMENDMENT FOR THE 21/22 FISCAL YEAR**

**WHEREAS**, the Mayor and Council appropriate \$120,860 in the General Fund, Streets Department for the pass through cost of red light at Hampton Inn.

**NOW THEREFORE, BE IT ORDAINED**, by the Council of the Town of Ashland City, Tennessee that this ordinance shall become effective 20 days after final passage the public welfare requiring.

Section 1. A budget amendment consisting of the available funds and appropriations be adopted for the General Fund:

<i>General Fund</i>	<u>Beginning Departmental Budget</u>	<u>Ending Departmental Budget</u>
Streets Department	\$864,745	\$985,605

1<sup>st</sup> reading \_\_\_\_\_  
Public Hearing \_\_\_\_\_  
2<sup>nd</sup> reading \_\_\_\_\_

Attest:

\_\_\_\_\_  
Mayor Steve Allen

\_\_\_\_\_  
City Recorder Alicia Martin, CMFO