



Gene Walborn
Director

Montana Department of Revenue



Steve Bullock
Governor

December 27, 2018

License Type: Montana Retail Off-Premises Consumption Beer and Wine License
License Number: 13-999-6438-303

Subject: Transfer of Ownership
Applicant: The Merc Fresh Market 2, LLC – Member: Bridget S. Joyner
Location Address: d/b/a The Merc Fresh Market, 1000 Main Street, Corvallis Ravalli County, Montana

EXISTING LICENSED PREMISES

We need your help to determine if the above applicant and location comply with all laws and ordinances administered by your office. We ask that you advise us by **January 11, 2019**, if there is a compliance issue. We will assume the laws and ordinances have been met if we don't hear from you by that date.

Building, health and fire approval will be required before department approval will be considered.
Building, health and fire officials will be contacted by the applicant to schedule final inspections.

It is important for you to understand that local laws are not enforced through the alcoholic beverage licensing process. There are additional factors that can influence the issuance of a license or prevent processing of the application such as:

- Compliance with local laws may influence our final decision; and
- Notification of a local deficiency

Questions? Please contact me at the address, telephone number or e-mail below.

Sincerely,

Patty Kautz
Compliance Specialist
Alcoholic Beverage Control Division
PO Box 1712
Helena MT 59624-1712
Phone: (406) 444-0017
Email: pkautz@mt.gov

Encl. Floor Plan and Application Pages
Certificate of Service

CERTIFICATE OF SERVICE

I certify that on this 27th day of December, 2018, a true and correct copy of the foregoing has been served by email, and addressed as follows:

RAVALLI COUNTY COMMISSIONERS
COURTHOUSE
205 BEDFORD ST #5001
HAMILTON MT 59840
commissioners@rc.mt.gov

RAVALLI COUNTY ATTORNEY
BILL FULBRIGHT
COURTHOUSE
205 BEDFORD ST. #5008 SUITE C
HAMILTON MT 59840
bfulbright@rc.mt.gov

RAVALLI COUNTY SANITARIAN
215 S 4TH STREET STE D
HAMILTON MT 59840
jfrase@rc.mt.gov
jpalacio@rc.mt.gov

RAVALLI COUNTY SHERIFF
STEVE HOLT
205 BEDFORD ST #5022 SUITE G
HAMILTON MT 59840
sholton@rc.mt.gov

DICK SWINGLEY, STATE FIRE MARSHAL
FIRE PREVENTION AND INVESTIGATION BUREAU
439-7879
diswingley@mt.gov

Dawn Drollinger, Deputy State Fire Marshal
ddrollinger@mt.gov

STATE BUILDING STANDARDS DIVISION
PROGRAM MANAGER
Steve Clark, State Building Inspector
sclark@mt.gov

Patty Kautz

Application Summary

Changes Requested

- New Business
- Purchase Business

Submitted By Barbara Amaya

Phone Number (406) 541-9700

Business and Location Information

Business #	TBD	Location #	32809
Name	THE MERC FRESH MARKET 2, LLC	Location Name	THE MERC FRESH MARKET INC
FEIN	832860223	Address 1	1000 MAIN STREET
Address 1	220 WEST MAIN	Address 2	
Address 2			CORVALLIS, MT 59828-
	HAMILTON, MT, USA 59840-	Phone Number	406-961-4830
Phone Number	406-830-4058	Fax Number	406-961-1475
Fax Number		Email Address	
Email Address	bjoyner@shortstravel.com	County	RAVALLI
Entity Type	LIMITED LIABILITY COMPANY		

License Information

License Type	License Sub Type	Count	Changed?
CIGARETTE	TOBACCO PRODUCTS RETAILER	1	Yes
CIGARETTE	ALTERNATIVE NICOTINE OR VAPOR PRODUCTS RETAILER	1	Yes
LIQUOR	OFF-PREMISES BEER/WINE COMBINATION	1	Yes
METER	PA - RETAIL METERS, MAX DELIVERY <=20 GPM	10	Yes
RETAIL FOOD ESTABLISHMENT	RETAIL FOOD ESTABLISHMENT -- LARGE	1	Yes
SCALE	SA - SCALES, 0 TO 499 LBS	3	Yes
STORAGE TANK	T2 - TANKS > 1,100 GALLONS	3	Yes

Payment Information

Amount Due	\$1319.00	Payment Amount	\$1319.00
Payment Date	12/20/2018 5:09 PM		
Payment Id	1812201707291b58bd3a-b939-4445		

Section 2. Premises

- 1. Please indicate the location of the physical address.
 City Limits County Area
- 2. Is the building complete and ready for use?
 Yes
 No. The expected completion date is _____
The delay is due to: remodel new construction
- 3. Is the location to be licensed within a zone or area where the sale of alcoholic beverages is not allowed by city, county or tribal ordinances?
 Yes
 No
- 4. Do you, as the individual or entity on the eStop Master Application, own or are you purchasing the real property, building or building area proposed for licensing?
 Yes. Please provide a warranty deed, purchase agreement or current property tax statement.
 No. Please provide a lease agreement.

Section 3. Type of Off-Premises Business

Please check the license type under which the premises proposed for licensing will operate.

- Grocery store (include a copy of the Grocery Inventory form)
- Pharmacy (include a copy of your current pharmaceutical license)
- Stand Alone
If applying for a Stand Alone license type, do you agree to maintain a business gross income of 95% or more from the sale of beer and wine, and that the business gross income of other retail products will not exceed 5%?
 Yes No

Section 4. Temporary Operating Authority

Has this premises been licensed within the last year and no building, health or fire deficiencies exist?

- Yes. Please enter the expected date that Temporary Operating Authority will begin 12/31/2018
- No. Temporary Operating Authority cannot be granted.

Note: Temporary Operating Authority is granted for the use of the Beer and Wine license only during the time period that your application is being processed.

The department will issue Temporary Operating Authority when we receive verification that the tax information of the current recorded licensee or seller is current. The current recorded licensee (seller) must provide the Liquor Division Authorization to Disclose Tax Information form to the department. This form is available on our website at <http://revenue.mt.gov/home/liquor/forms.aspx>. Please be aware that we will revoke Temporary Operating Authority if you or your employees violate any provisions of Montana Code Annotated or Administrative Rules of Montana.

Application Guide and Checklist (continued).

Business Name The Merk Fresh Market **License Number** 13-999-6438-303

No fees are required to make any of the changes below. Please check the appropriate boxes and include this page with your application.

Entity Type Changed

- Complete and sign the eStop Master Application and Section 5 of this application.
- Include additional documents needed to complete this application or send them to the appropriate agency. See Section 7, items 2, 3, 5, 6 and 7.
- Include the new entity's federal employers identification number (FEIN), registration document, meeting minutes and articles of organization documents.

Death of a Licensee

- Complete and sign the eStop Master Application and Section 5 of this application.
- Include additional documents needed to complete this application or send them to the appropriate agency. See Section 7, items 2, 4, 5 and 6.
- Include an original death certificate or court order document certifying the death of the individual with an ownership interest.
- Include a copy of the Last Will and Testament court document.
- Include a copy of the Personal Representative Appointment court document. An appointed conservator, trustee, executor or power of attorney court document is also acceptable.

Divorce among Licensees

- Complete and sign the eStop Master Application and include Section 5 of this application.
- Include additional documents needed to complete this application or send them to the appropriate agency. See Section 7, items 2, 4, 5 and 6.
- Include a copy of the court-filed divorce decree.
- Include a copy of the court-filed property settlement agreement.

Gifting or Sale among Licensees (The ownership interest will not change from less than 10% to more than 10% or an ownership interest is being removed from the license.)

- Complete and sign the eStop Master application and include Section 5 of this application.
- Include additional documents needed to complete this application or send them to the appropriate agency. See Section 7, items 2, 4, 5 and 6.
- Include a copy of the stock transfer document, which must show the individual or entity and the total issued share amount and percentage being transferred or gifted.

Section 6. Manager Information

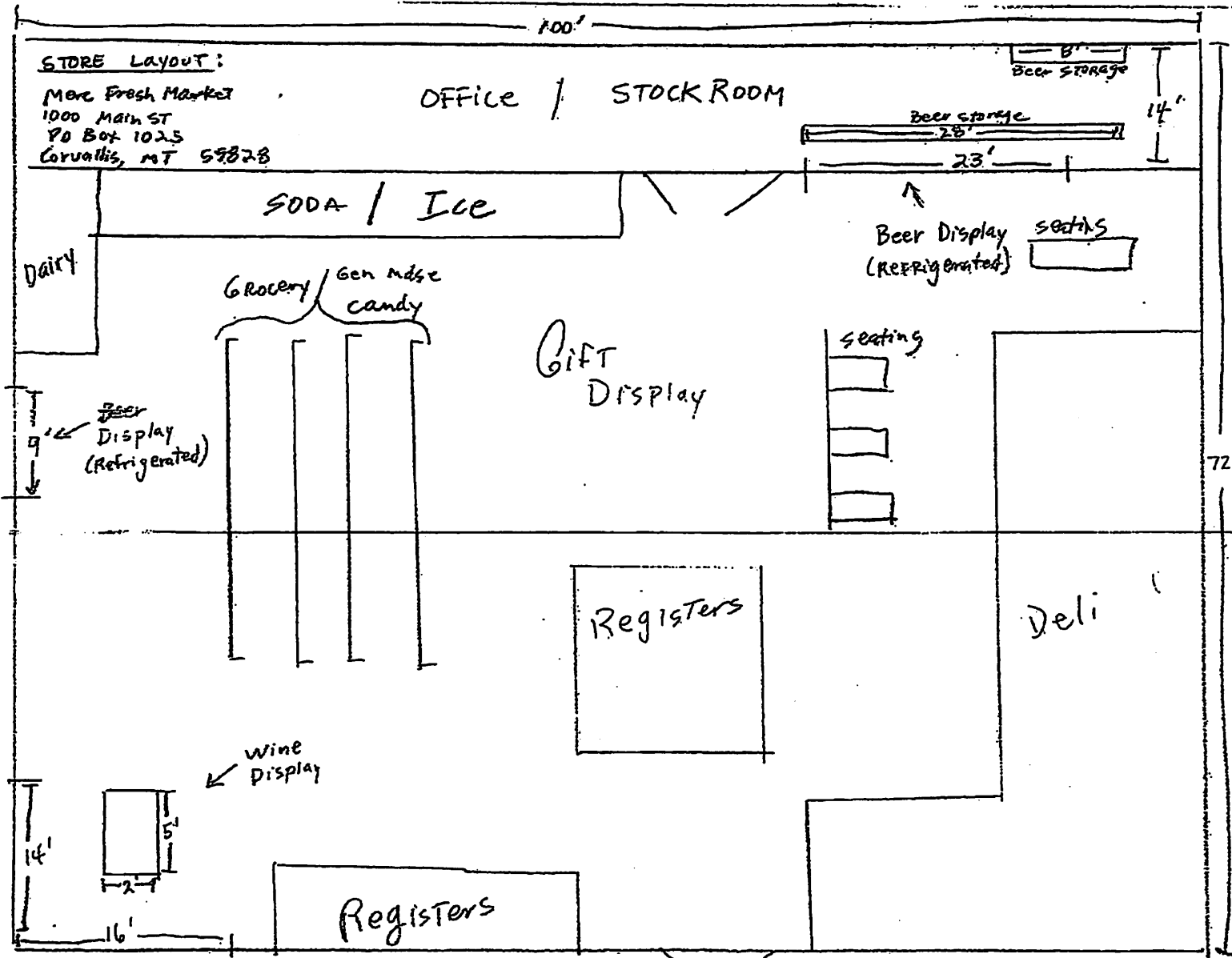
Name of person or entity that is managing or that will be managing the business _____

Bridget S. Joyner

- This person or entity is a shareholder, member or partner.
- This person or entity was employed as a manager and a current management agreement is on file with the department.
- This manager was recently employed. Date of hire _____
- Please include with your application a management agreement for this manager or management company. A Management Agreement form is available on our website at <https://svc.mt.gov/dor/eStopPortal/Default.aspx>. This form meets the requirement for ARM 42.12.132.

Section 7. Required Documents

1. A Floor Plan form detailing the outside dimensions, general layout and areas where beer and wine will be stored and sold. Please label the floor plan with the date, DBA (doing business as) and address of premises to be licensed.
2. A lease agreement, purchase agreement, warranty deed or current property tax bill verifying the applicant has possessory interest in the real property where the business is located.
3. A Registered Certificate of Existence, Authority or Fact if you are applying as a corporation, company or partnership. In addition, if your DBA is different than the applicant's name, please include the certificate as filed with the Secretary of State's (SOS) Office. In Montana, call (406) 444-3665 or go to <http://sos.mt.gov/Business/Forms/index.asp> to register the new entity and DBA by mail or online.
4. A background check fee of \$27.25, personal history statement and two fingerprint cards for each individual with an ownership interest of 10% or more of the license. In certain circumstances, a representative for the licensee will require a background check. Please contact our office toll free at (866) 859-2254, (in Helena) at (406) 444-6900, and we will mail the fingerprint cards to you. Go to your local law enforcement agency to be processed. (Local officials may charge a separate fee for this service).
5. A bank account agreement having the applicant's name, Federal Employer Identification (FEIN) or social security number and authorized signatures.
6. The Liquor Division Authorization to Disclose Tax Information form for each individual and entity that has an ownership interest of 10% or more, and for the current recorded licensee (seller). Please fax the completed form to Department of Revenue, Business Income Tax Division at (406) 444-6642. The form is available on our website at <http://revenue.mt.gov/home/liquor/forms.aspx>.
7. If you have not registered your business with Alcohol and Tobacco Tax and Trade Bureau (TTB), all alcohol beverage dealers must file the TTB F 5630.5d form and mail it to the designated address on the form, or contact TTB's National Revenue Center at (800) 937-8864 or (513) 684-2979.



The Merc Fresh Market 2, LLC
 The Merc Fresh Market
 1000 Main Street
 Corvallis, MT 59828
 License No: TBD
 Submitted December 20, 2018