

Confirmation Number: 20241219163130525

Type License: 040 - RETAIL BEER (ON OR OFF PREMISES) State: \$150.00 County: \$75.00

Type License: 060 - RETAIL TABLE WINE (ON OR OFF PREMISES) State: \$150.00 County: \$75.00

Trade Name: PIZZA HUT Filing Fee: \$100.00

Applicant: HUT MOBILE LLC Transfer Fee:

Location Address: 1350 S MCKENZIE STREET FOLEY, AL 36535

Mailing Address: 6200 OAK TREE BLVD; SUITE 250 INDEPENDENCE, OH 44131

County: BALDWIN Tobacco sales: NO Tobacco Vending Machines:

Product Type: Type Ownership: LLC

Book, Page, or Document info: 000-822-059

Do you sell Draft Beer?:

Date Incorporated: 11/19/2020 State incorporated: DE County Incorporated: NEW CASTLE

Date of Authority: 11/20/2020

Federal Tax ID: 85-4352584 Alabama State Sales Tax ID: R010969976

Name:	Title:	Date and Place of Birth:	Residence Address:
GREGORY GRANT FLYNN			14824 JACKSON STREET
LOPIN MICHAEL			
RONALD SCOTT			

Has applicant complied with financial responsibility ABC RR 20-X-5-.14? YES

Does ABC have any actions pending against the current licensee? NO

Has anyone, including manager or applicant, had a Federal/State permit or license suspended or revoked? NO

Has a liquor, wine, malt or brewed license for these premises ever been denied, suspended, or revoked? NO

Are the applicant(s) named above, the only person(s), in any manner interested in the business sought to be licensed? YES

Are any of the applicants, whether individual, member of a partnership or association, or officers and directors of a corporation itself, in any manner monetarily interested, either directly or indirectly, in the profits of any other class of business regulated under authority of this act? NO

Does applicant own or control, directly or indirectly, hold lien against any real or personal property which is rented, leased or used in the conduct of business by the holder of any vinous, malt or brewed beverage, or distilled liquors permit or license issued under authority of this act? NO

Is applicant receiving, either directly or indirectly, any loan, credit, money, or the equivalent thereof from or through a subsidiary or affiliate or other licensee, or from any firm, association or corporation operating under or regulated by the authority of this act? NO

Contact Person: CHERYL REES

Home Phone: 503-722-2825

Business Phone: 334-222-4106

Cell Phone:

Fax:

E-mail: crees@flynn.com

PREVIOUS LICENSE INFORMATION:

Previous License Number(s)

Trade Name:

License 1:

Applicant:

License 2:



ALCOHOL LICENSE APPLICATION



Confirmation Number: 20241219163130525

If applicant is leasing the property, is a copy of the lease agreement attached? YES

Name of Property owner/lessor and phone number: FRONTIER FOLLEY TWO LLC 306-692-9992

What is lessors primary business? REAL ESTATE

Is lessor involved in any way with the alcoholic beverage business? NO

Is there any further interest, or connection with, the licensee's business by the lessor? NO

Does the premise have a fully equipped kitchen? YES

Is the business used to habitually and principally provide food to the public? YES

Does the establishment have restroom facilities? YES

Is the premise equipped with services and facilities for on premises consumption of alcoholic beverages? YES

Will the business be operated primarily as a package store? NO

Building Dimensions Square Footage: 2719 Display Square Footage:

Building seating capacity: 67 Does Licensed premises include a patio area? NO

License Structure: SINGLE STRUCTURE License covers: ENTIRE STRUCTURE

Number of licenses in the vicinity: 0 Nearest: 0

Nearest school: Nearest church: Nearest residence: 0 blocks

Location is within: CITY LIMITS Police protection: CITY

Has any person(s) with any interest, including manager, whether as sole applicant, officer, member, or partner been charged (whether convicted or not) of any law violation(s)? NO

Name:	Violation & Date:	Arresting Agency:	Disposition:



Initial each

Signature page

*MS*

In reference to law violations, I attest to the truthfulness of the responses given within the application.

*MS*

In reference to the Lease/property ownership, I attest to the truthfulness of the responses given within the application.

*MS*

In reference to ACT No. 80-529, I understand that if my application is denied or discontinued, I will not be refunded the filing fee required by this application.

*MS*

In reference to Special Retail or Special Events retail license, Wine Festival and Wine Festival Participant Licenses, and Food or Beverage Truck Licenses, I agree to comply with all applicable laws and regulations concerning this class of license, and to observe the special terms and conditions as indicated within the application.

*MS*

In reference to the Club Application information, I attest to the truthfulness of the responses given within the application.

*MS*

In reference to the transfer of license/location, I attest to the truthfulness of the information listed on the attached transfer agreement.

*MS*

In accordance with Alabama Rules & Regulations 20-X-5-.01(4), any social security number disclosed under this regulation shall be used for the purpose of investigation or verification by the ABC Board and shall not be a matter of public record.

*MS*

The undersigned agree, if a license is issued as herein applied for, to comply at all times with and to fully observe all the provisions of the Alabama Alcoholic Beverage Control Act, as appears in Code of Alabama, Title 28, and all laws of the State of Alabama relative to the handling of alcoholic beverages.

The undersigned, if issued a license as herein requested, further agrees to obey all rules and regulations promulgated by the board relative to all alcoholic beverages received in this State. The undersigned, if issued a license as herein requested, also agrees to allow and hereby invites duly authorized agents of the Alabama Alcoholic Beverage Control Board and any duly commissioned law enforcement officer of the State, County or Municipality in which the license premises are located to enter and search without a warrant the licensed premises or any building owned or occupied by him or her in connection with said licensed premises. The undersigned hereby understands that he or she violate any provisions of the aforementioned laws his or her license shall be subject to revocation and no license can be again issued to said licensee for a period of one year. The undersigned further understands and agrees that no changes in the manner of operation and no deletion or discontinuance of any services or facilities as described in this application will be allowed without written approval of the proper governing body and the Alabama Alcoholic Beverage Control Board.

*MS*

I hereby swear and affirm that I have read the application and all statements therein and facts set forth are true and correct, and that the applicant is the only person interested in the business for which the license is required.

Applicant Name (print):

*RONALD S. JONASHT*

Signature of Applicant:

*MS*

Notary Name (print):

*Mallory Sobota*

Notary Signature:

*MS*



MALLORY SOBOTA  
Notary Public, State of Ohio  
My Commission Expires:  
November 09, 2028

Commission expires:

*NOV 9th 2028*

Application Taken:

App. Inv. Completed:

Forwarded to District Office:

Submitted to Local Government:

Received from Local Government:

Received in District Office:

Reviewed by Supervisor:

Forwarded to Central Office:



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**Private Clubs / Special Retail / Special Events / Wine Festival or Wine Festival  
Participants licenses ONLY**

**Private Club**

Does the club charge and collect dues from elected members?

Number of paid up members:

Are meetings regularly held?

How often?

Is business conducted through officers regularly elected?

Are members admitted by written application, investigation, and ballot?

Has Agent verified membership applications for each member listed?

Has at least 10% of members listed been confirmed and highlighted?

Agent's Initials:

For what purpose is the club organized?

Does the property used, as well as the advantages, belong to all the members?

Do the operations of the club benefit any individual member(s), officer(s), director(s), agent(s), or employee(s) of the club rather than to benefit of the entire membership?

**Special Retail**

Is it for 30 days or less?

More than 30 days?

Franchisee or Concessionaire of above?

Other valid responsible organization:

Explanation:

**Special Events / Special Retail (7 days or less)**

Starting Date:                      Ending Date:

Special terms and conditions for special event/special retail:

**Wine Festival / Wine Festival Participant licenses (5 Days or Less)**

Starting Date:                      Ending Date:

Special terms and conditions for special event/special retail:

**Other Explanations**

Does anyone involved with this license application have any monetary interest in any other ABC licensed/permitted establishment?: PIZZA HUTS IN ANDALUSIA AND BREWTON

What is the applicant(s) primary source of funding?: EXISTING OPERATIONS



Application Fee for License 040 and License 060	\$100.00
<b>Total Amount to be Charged</b>	<b>\$100.00</b>

**License Payment Confirmation Number:**

Payment Summary			
Payment Item	County Fee	State Fee	Total Fee
040 - RETAIL BEER (ON OR OFF PREMISES)	\$75.00	\$150.00	\$225.00
060 - RETAIL TABLE WINE (ON OR OFF PREMISES)	\$75.00	\$150.00	\$225.00
<b>Total Amount to be Charged</b>	<b>\$150.00</b>	<b>\$300.00</b>	<b>\$450.00</b>

**Application Type**

Application Type: APPLICATION

**Applicant Information**

License Type 1: 040 - RETAIL BEER (ON OR OFF PREMISES)  
License Type 2: 060 - RETAIL TABLE WINE (ON OR OFF PREMISES)

License County: BALDWIN

Business Type: LLC

Trade Name: **PIZZA HUT**

Applicant Name: **HUT MOBILE LLC**

Location Address: 1350 S MCKENZIE STREET  
FOLEY, AL 36535

Mailing Address: 6200 OAK TREE BLVD; SUITE 250  
INDEPENDENCE, OH 44131

Contact Person: CHERYL REES

Contact Home Phone: 503-722-2825

Contact Business Phone: 334-222-4106

Contact Fax:

Contact Cell Phone:

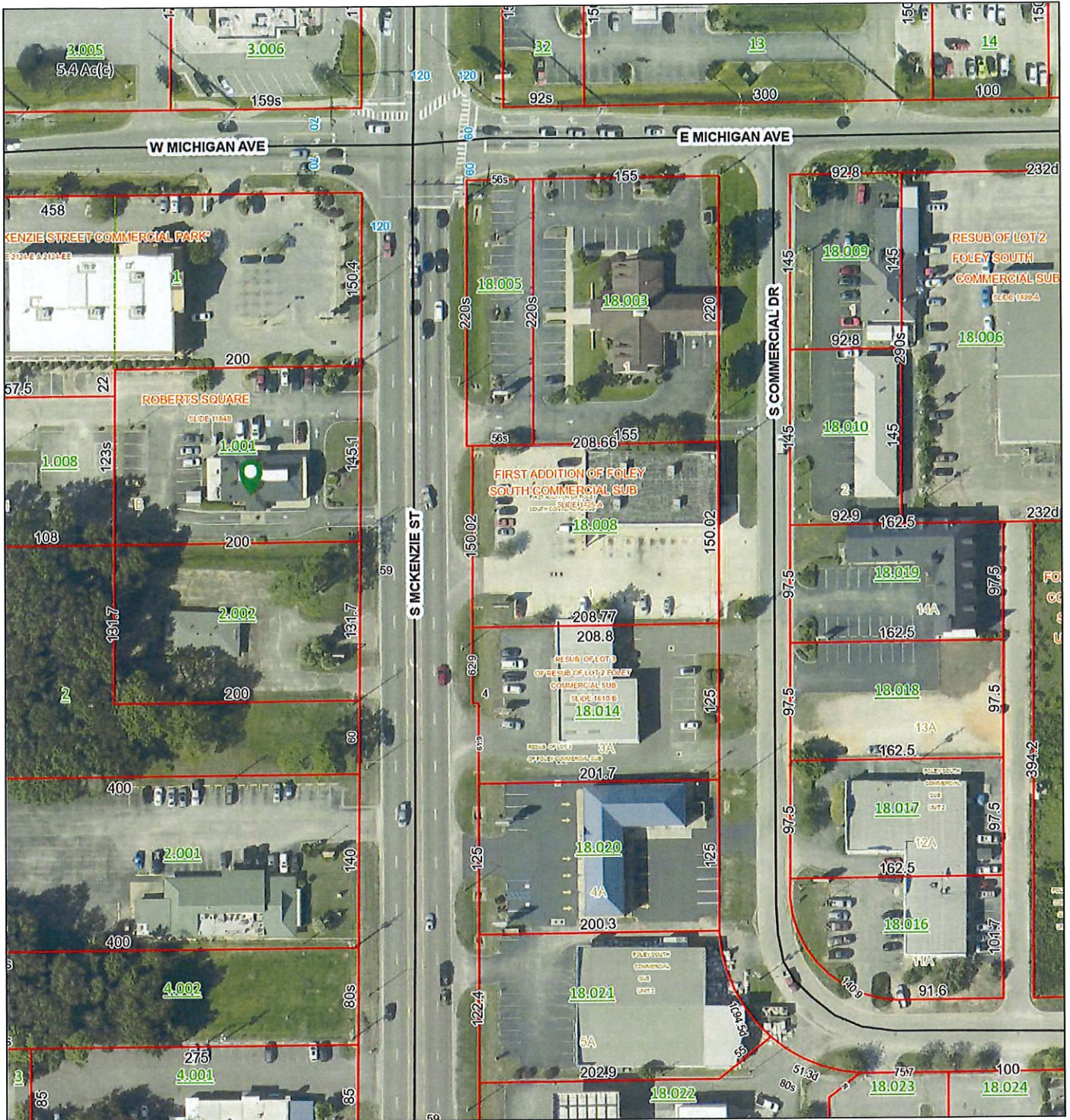
Contact Email Address:

Contact Web Address:

Contact Relationship to Applicant: DIRECTOR OF LICENSING



# Viewer Map

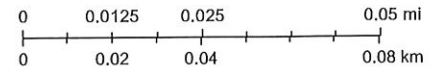


January 2, 2025

**Parcel Line Labels**

- COGO
- Parcels
- Conveyance Divisions
- Centerlines
- Coastal Control Line
- Lot Lines
- Conflicts
- County Boundary

1:1,128



KCS, Pictometry  
KCS