

Item #13

**City of Carson City  
Agenda Report**

**Date Submitted:** March 9, 2010

**Agenda Date Requested:** March 18, 2010

**Time Requested:** 10 minutes

**To:** Liquor and Entertainment Board

**From:** Business License, Public Works

**Subject Title:** Action to approve Rajwant Sandhu as the liquor manager for Eagle Valley Market (Liquor License #10-27117) located at 933 Woodside Dr., #105, Carson City. (Jennifer Pruitt)

**Staff Summary:** All liquor license requests are to be reviewed by the Liquor Board per CCMC 4.13. Rajwant Sandhu is applying to be listed as the liquor manager on the liquor license. The background investigation has been completed and staff is recommending approval.

**Type of Action Requested:**

Resolution

Ordinance

Formal Action/Motion

Other (Specify)

**Does This Action Require A Business Impact Statement:**  Yes  No

**Recommended Board Action:** I move to approve Rajwant Sandhu as the liquor manager for Eagle Valley Market (Liquor License #10-27117) located at 933 Woodside Dr., #105, Carson City.

**Explanation for Recommended Board Action:** The Liquor Board has the authority to approve all liquor licenses pursuant to CCMC 4.13(1).

**Applicable Statute, Code, Policy, Rule or Regulation:** CCMC 4.13

**Fiscal Impact:** N/A

**Explanation of Impact:** N/A


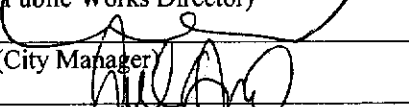
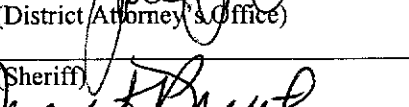
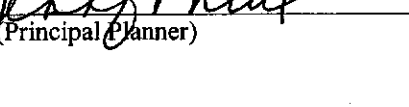
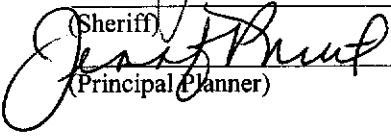
**Funding Source:** N/A

**Alternatives:** 1) Refer back to the Business License Division, or  
2) Deny

**Supporting Material:** 1) Carson City Liquor License Application  
2) Carson City Sheriff's Department Background Investigation

**Prepared By:** Lena Tripp, Senior Permit Technician

**Reviewed By:**

  
\_\_\_\_\_  
(Public Works Director)  
  
\_\_\_\_\_  
(City Manager)  
  
\_\_\_\_\_  
(District Attorney's Office)  
  
\_\_\_\_\_  
(Sheriff)  
  
\_\_\_\_\_  
(Principal Planner)

Date: 3/9/10  
Date: 3/9/10  
Date: 3/9/10  
Date: \_\_\_\_\_  
Date: 3-4-10

**Board Action Taken:**

Motion: \_\_\_\_\_

1) \_\_\_\_\_ Aye/Nay  
2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Vote Recorded By)



**CARSON CITY  
BUSINESS LICENSE DIVISION  
LIQUOR LICENSE  
APPLICATION**

Liquor License # **10-27117**  
 Submittal Date **2-8-10**

<b>Applicant</b>	Business Owner's Name, LLC, or Corporation Name <b>EAGLE VALLEY MARKET L.L.C.</b>			Business Phone <b>775-885-0553</b>	
	Business Address <b>933 WOODSIDE DR. #105</b>			Home Phone <b>775-841-9977</b>	
	Mailing Address <b>2829 S. CARSON STREET</b>			Email Address <b>jaggu1991@yahoo.com</b>	
	City <b>CARSON CITY</b>	State <b>NV</b>	Zip Code <b>89701</b>	Month Starting Liquor Sales <b>MARCH</b>	
	Fictitious Firm Name <b>RAJWANT KAUR SANDHU</b>			Management Agreement on File? <b>YES</b>	
	List All Owners, Partners, or Corporate Officers below				
	Name and Title <b>RAJWANT KAUR SANDHU OWNER</b>		Address <b>933 WOODSIDE DR. #105</b>		Home Phone <b>775-841-9977</b>
	Name and Title		Address		Home Phone
Name and Title		Address		Home Phone	
Are you familiar with Nevada Liquor Laws? <b>YES</b>			Have you ever obtained a Liquor License before; If yes, where? <b>NO</b>		

I hereby certify that the above information is correct to the best of my knowledge and belief. I understand that this liquor license, if approved, may not be transferred to any other person or to any other location, without prior approval by the Liquor Board. I further understand the investigation period may be forty-five (45) days or longer for processing.

Signature Rajwant Kaur Sandhu Date 02/01/10  
 Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

<b>Office Use Only</b>	FEE STRUCTURE		COLUMN 1	FEE'S
	Dining Room with Beer and Wine Only			
	Dining Room with Hard Liquor			
	Tavern/Bar			
	General Wholesale Liquor			
	Packaged Liquor			<b>800</b>
	Combo - Packaged Liquor and On-Premise			
	Additional Bar(s) at Location			
TRACKING		BUSINESS LICENSE FEES		
Fire	Annual Fee	<b>800</b>		
Health	Pro-rated Fee			
Planning	Application Fee	<b>1000<sup>00</sup></b>		
Environmental	Investigation Fee	<b>500<sup>00</sup></b>		
Other	TOTAL FEES DUE	<b>1500<sup>00</sup></b>		

**FOR SHERIFF'S DEPARTMENT USE ONLY**

Date Applicant Fingerprinted	By	File #
Date Applicant Fingerprinted	By	File #
Date Applicant Fingerprinted	By	File #