Carson City Agenda Report

Date Submitted: Nove.	miber 3, 2012	Time Requested:	10 minutes	_
To: Liquor and Ente	rtainment Board			
From: Business Licens	e Division			
3		•	the liquor manager for t 50 E., Carson City. (Jenni	
Staff Summary: All lie 4.13. Kathy Phelan is the	-	_	the Liquor Board per CCN or manager.	1C
Type of Action Reques Resolution Formal Acti		Ordinance Other (Spec	cify)	
Does This Action Requ	iire A Business Impac	t Statement: (() Yes (X) No	
Recommended Board Whiskey Tavern (Liquo		-	as the liquor manager for t 50 E., Carson City.	he
Explanation for Reconall liquor licenses pursu		n: The Liquor Board	I has the authority to appro	ve
Applicable Statute, Co	de, Policy, Rule or Re	gulation: CCMC 4.1	.3	
Fiscal Impact: N/A				
Explanation of Impact	: N/A			
Funding Source: N/A				
Alternatives: 1) Refer 2) Deny	back to the Business Li	icense Division, or		
Supporting Material:	1) Carson City Liquor 2) Carson City Sheriff		d Investigation	

Board Action Report - Liquor License Phelan - Whiskey Tavern November 13, 2012 Page 2

Prepared By: Lena Reseck, Senior Permit 1	echnician	
Reviewed By: (Public Works Director) (City Manager) (District Attorney's Office) (Principal Planner) (Finance Director)	Date: //	1-5-12 1/5/12 1/5/12 2-12
Board Action Taken:		
Motion:	1)	Aye/Nay
(Vote Recorded By)		

a der	CARSON CITY LICENSE APPLICATION			Business License #: 4413 29378				
	Please type or print in black ink; Incomplete or illegible applications will not be accepted. Applications must bear an original signature				112 - 296 Submittal Date: Q	12-29/97 Submittal Date: 0-18-10/2		
X New 1	Business	☐ Change of	Location/Mailing	☐ Change of Name	☐ Change of Corpo		□ Other	
Type of I	icense(s)	מ	Business	□ Short-Term	☐ Gamir	ng	KLiquer	
Type of Entity	□ Sole Pro	prietor	☐ Corporation	□ Partnership	Limited Liabilit	у Сотралу	🛘 Noa-Profit	
Entity Name	5P EN	TERPR	ISES,UC		Business Opening Date			
Business Name (D)	BA) Whis,	Key To	avern		FEIN#GO	08651	te	
Business Address	181 HW4:	50 E		Parson Clhy	State V	Zip Codes 970		
Mailing Address	59 Ridge	Crest D)r	Coxon City	State NV	Zip Code	70Ce	
Corporate Phone	7-1591	Business Phone	7-1591	Cellular Phone 77-15	Business Fax	NA		
E-mail Address	Herorise	SICON	ahar. lom	Business Website N/A				
Owner(s), Manage	r(s), of other Princ	ipal(s) attack a	dditional pages if req	puired		loont		
Phelan	Kathy!	5	Percent Owned	Owner	Date of Birth	21304	7161	
Residence Address	1-4	- Drive	_	City, State, Zip	M 89704	Residence Tele	7-159]	
Last, First, MI			Percent Owned	Title	Date of Birth	SSN		
Residence Address	(Street)			City, State, Zip		Residence Tele	рћане	
Last, First, MI			Percent Owned	Title	Date of Birth	SSN		
Residence Address (Street)			City, State, Zip Residence Telephone					
Manager/Liquor Manager Phelan, Kothil E			XOn-Site	Contact Phone Number				
Residence Address	daeprest	Drive		Cars on Atu	M 89704			
				to provide your social secur				
				iled to comply with a subpo- e support of a child or you a				
Describe in detail the activity of your business I am opening a bar/takern with a weskern/Cabin Rel. I plan to focus my OUS ness towards the 30 and over Crowd to eliminate any possible region issue								
business	+owards	the 30	and over L	Crowd to elim	nate any po	Sible Add	stive 1550	
Type of Liquor Li	cense Applying fo	or (If applicabl	e)					
Tavern/Bar	□ Dining Room Wine C		□ Packaged Liquor	□ Dining Room w/Hard Liquor	□ Combo (On-Premise & Pkg)	☐ Genera	l Wholesale	
☐ Catering	□ Additio	nal Wet Bars		Will there be an Interim M	anagement Agreement?			
List number of slo	ot machines (If ap	plicable)		List number of table games	(If applicable)			
1 cent NA		D MUITE NA	}	ປ Craps <u>M/A</u>	🛭 Baccarat 🚶	7/11_		
0 5 cent		□ Poker	E.	① Roulette ② Twenty-One /	□ Race Book □ Sports Book			
0 1.00	•	□ Mega Buck	<i>У</i>	© Keno	□ Poker	ν		
If this application i	s for a change of b	usiness name, k	ocation, or ownership	b, get the previous name, addr	ess, and owner below			
	X	I am not subjec	et to a court order for	r the support of a child				
	I am subject to a court order for the support of one or more children and am in compliance with a plan approved by the							
Check One					<u> </u>			
				support of one or more child ency enforcing the order for t		-	· · · ·	

	Please answer this section if your business is located in Carson City. If you are unsure of your answer or are installing signage,					
1.5	contact the Planning Division a	, ,				
mat	ls your business location zoned for this type of business		Has a Special Use Permit been obtained for this business location NO - NO (1894) (1894)			
Information	Will you be installing any outdoor signs		Are there any existing signs of the property 105-2 1-on building 1-to left of property			
2	Will there he any outside storage (If	ves, please explain items being store				
neo		Will there be any outside storage (If yes, please explain items being stored and how being screened) NO - OLL Storage is inside.				
Miscellaneous	Will any commercial vehicles be used	Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage)				
Mis	IVU Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business					
L	N/A					
	the undersigned understand the	t I connot operate my husiness unt	til my license is actually issued by this office indicating approval by all necessary			
l	I, the undersigned understand that I cannot operate my business until my license is actually issued by this office indicating approveity departments					
s		re made after completing said lice	nse application this office must be notified immediately and an updated is			
Regulations	A business license, liquor license, and/or gaming license are issued to a given owner at a SPECIFIC LOCATION and are NON-TRANSFERRABLE to a different owner or different location					
and Regu	Non-payment of annual and quarterly business license, liquor license, and/or gaming license fees by the due date will result in applied penalties and is grounds for the revocation of the license.					
Rules an	 Any exception to any of the above is considered a violation of the Carson City Municipal Code and is subject to citation 					
~	I hereby certify that the above info truthfully is an act of perjury.	ormation is correct to the best of m	ny knowledge and belief. I understand that failure to complete this form			
L	Applicant's Signature	Kathyf. Phelan	Date Sept 28,2012			
FEE STRUCTURE FEE		FEE	LICENSE TOTAL FEES			
Bus	lness Liceuse Fee	63.85	Business Liceuse Annual Fee: \$9,55			
Son	are Footage	32,25	Business License Pro-rated Fee: 15,17) Det 2017			
Nun	Number of Employees 3 1845		Business License Application/Update Fee:			
Hex	ith Fee	75.00	Liquor License Annual Fee:			
Nun	nber of Rental Units		Liquor License Pro-rated Fee:			
Number of Coin Operated Machines			Liquor License Application Fee:			
Nus	Number of Slot Machines		Liquor License Investigation Fee:			
TOTAL FEES DUE: 1774.72		4.72	Gaming License Quarterly Fee:			
Payment Type MASTEN CIV		Car	Gaming License Application Fee:			
	Received By Date 05-3012		Fictitious Name Fee: 2002			
Date Applicant Finger printed By File#		By File#	Health Pre-Inspection Fee: 25,00			