

Item # 4c

**City of Carson City
Agenda Report**

Date Submitted: October 9, 2007

Agenda Date Requested: October 18, 2007

Time Requested: 10 minutes

To: Liquor Board

From: Development Services, Planning Division

Subject Title: Action to approve a (packaged) liquor license and a (packaged) beer and wine liquor license for Berry-Hinckley Industries, liquor manager: Jerry Edward Herbst, dba Winners Corner located at 1615 East 5th Street, Carson City, NV, 1400 Rand Avenue, Carson City, NV, and 1102 North Carson Street., Carson City, NV.

Staff Summary: Per CCMC 4.13.030 (1), the granting or denying of all liquor license applications shall be by the Carson City Liquor Board

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 a (packaged) liquor license and a (packaged) beer and wine liquor license for Berry-Hinckley Industries, liquor manager: Jerry Edward Herbst, dba Winners Corner located at 1615 East 5th Street, Carson City, NV, 1400 Rand Street, Carson City, NV, and 1102 North Carson Street, Carson City, NV, including the Non-Refundable Investigation fee of \$75.00 for all three locations.

Explanation for Recommended Board Action: The Carson City Liquor Board has the authority to grant approval of all liquor licenses pursuant to CCMC 4.13. 030 (1).

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

Fiscal Impact: N/A

Explanation of Impact: N/A

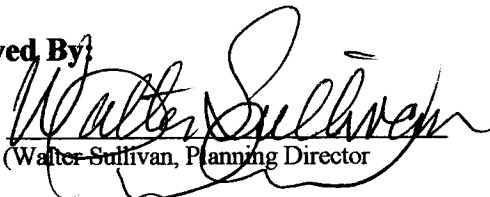
Funding Source: N/A

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

Supporting Material: 1) Background check from Sheriff's Office
2) Carson City Liquor License Application

Prepared By: Donna Fuller, Administrative Services Manager

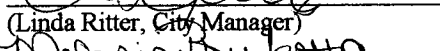
Reviewed By:


(Walter Sullivan, Planning Director)

Date: 10-9-07


(Larry Werner, Development Services Director/City Engineer)

Date: 10/8/07


(Linda Ritter, City Manager)

Date: 10-9-07


(District Attorney)

Date: 10-9-07

Board Action Taken:

Motion: _____

1) _____
2) _____

Aye/Nay

(Vote Recorded By)

CITY OF CARSON CITY
LIQUOR LICENSE APPLICATION

201 N Carson Street #5
Carson City, NV 89701
(775)887-2092 #2 fax (775)887-2102

Full Name of Applicant(s) Jerry Edward Herbst Account # _____
Corporate Name Berry-Hinckley Industries dba Winners Corner
Fictitious Firm Name -same- Date Filed _____
Business Location 1615 E. 5th St., Carson City, NV Business Phone 775-689-1222
Mailing Address PO Box 11020, Reno, NV 89510 Home Phone 702-794-0019
Date Liquor Sales will start? continuous Management Agreement on file? Attached

Type of Liquor Sales: (check all that apply)
☐ Full liquor sales
☒ Packaged Liquor
☐ Dining room w/full liquor
☒ Packaged beer & wine
☐ Dining room w/beer & wine
☐ Wholesaler
☐ Manufacturer
☐ Additional Bar(s) @ location (# _____)

List **ALL** owners, partners or corporate officers below:

Jerry Edward Herbst-Owner/President 1701 Enclave Ct., LV, NV 89134

Name & Title	Address	Phone #
		<u>702-798-6400</u>

Name & Title	Address	Phone #

Name & Title	Address	Phone #

Are you familiar with Nevada Liquor Laws? ☒ yes ☐ no
Have you ever obtained a liquor license before? ☒ yes ☐ no If yes, where? Reno, NV/Sparks, NV

Non-Refundable Investigation Fee	\$ <u>75.00</u>	Date Paid <u>7/11/07</u>
Original New Application Fee	\$ <u>0</u>	Date Paid _____
Liquor License Per Quarter	\$ <u>0</u>	Date Paid _____

CERTIFICATION: 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 [Signature] Date 6/27/07
Signature _____ Date _____
Signature _____ Date _____

Witnessed by: [Signature] Date 6/27/07

===== FOR SHERIFF'S DEPARTMENT USE ONLY =====

901 E Musser St. Carson City, NV 89701
(775)887-2020 x 1400

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

CITY OF CARSON CITY
LIQUOR LICENSE APPLICATION

201 N Carson Street #5
Carson City, NV 89701
(775)887-2092 #2 fax (775)887-2102

Full Name of Applicant(s) Jerry Edward Herbst Account # _____
Corporate Name Berry Hinckley Industries dba Winners Corner
Fictitious Firm Name -same- Date Filed _____
Business Location 1400 Rand Ave., Carson City, NV Business Phone 775-689-1222
Mailing Address PO Box 11020, Reno, NV 89510 Home Phone 702-794-0019
Date Liquor Sales will start? continuous Management Agreement on file? Attached

Type of Liquor Sales: (check all that apply)
☐ Full liquor sales
☒ Packaged Liquor
☐ Dining room w/full liquor
☒ Packaged beer & wine
☐ Dining room w/beer & wine
☐ Wholesaler
☐ Manufacturer
☐ Additional Bar(s) @ location (# _____)

List **ALL** owners, partners or corporate officers below:

<u>Jerry Edward Herbst-Owner/President</u>	<u>1701 Enclave Ct., LV, NV 89134</u>	
<i>Name & Title</i>	<i>Address</i>	<i>Phone #</i>
		<u>702-798-6400</u>
<i>Name & Title</i>	<i>Address</i>	<i>Phone #</i>
<i>Name & Title</i>	<i>Address</i>	<i>Phone #</i>

Are you familiar with Nevada Liquor Laws? ☒ yes ☐ no
Have you ever obtained a liquor license before? ☒ yes ☐ no If yes, where? Reno, NV/Sparks, NV

Non-Refundable Investigation Fee	\$ _____	Date Paid _____
Original New Application Fee	\$ _____	Date Paid _____
Liquor License Per Quarter	\$ _____	Date Paid _____

CERTIFICATION: 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  Date 6/27/07
Signature _____ Date _____
Signature _____ Date _____
Witnessed by:  Date 6/27/07

===== **FOR SHERIFF'S DEPARTMENT USE ONLY** =====

901 E Musser St. Carson City, NV 89701
(775)887-2020 x 1400

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

CITY OF CARSON CITY LIQUOR LICENSE APPLICATION

201 N Carson Street #5
Carson City, NV 89701
(775)887-2092 #2 fax (775)887-2102

Full Name of Applicant(s) Jerry Edward Herbst Account # _____
Corporate Name Berry-Hinckley Industries dba Winners Corner
Fictitious Firm Name - same - Date Filed _____
Business Location 1102 N. Carson St., Carson City, NV Business Phone 775-689-1222
Mailing Address PO Box 11020, Reno, NV 89510 Home Phone 702-794-0019
Date Liquor Sales will start? continuous Management Agreement on file? Attached

Type of Liquor Sales:
(check all that apply)

- ☐ Full liquor sales
☒ Packaged Liquor
☐ Dining room w/full liquor
☒ Packaged beer & wine

- ☐ Dining room w/beer & wine
☐ Wholesaler
☐ Manufacturer
☐ Additional Bar(s) @ location (# _____)

List **ALL** owners, partners or corporate officers below:

<u>Jerry Edward Herbst-Owner/President</u>	<u>1701 Enclave Ct., LV, NV 89134</u>	
Name & Title	Address	Phone #
		<u>702-798-6400</u>
Name & Title	Address	Phone #
Name & Title	Address	Phone #

Are you familiar with Nevada Liquor Laws? ☒ yes ☐ no
Have you ever obtained a liquor license before? ☒ yes ☐ no

If yes, where? Reno, NV/Sparks, NV

Non-Refundable Investigation Fee	\$ _____	Date Paid _____
Original New Application Fee	\$ _____	Date Paid _____
Liquor License Per Quarter	\$ _____	Date Paid _____

CERTIFICATION: 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 [Signature] Date 6/27/07
Signature _____ Date _____
Signature _____ Date _____

Witnessed by: [Signature] Date 6/27/07

===== FOR SHERIFF'S DEPARTMENT USE ONLY =====

901 E Musser St. Carson City, NV 89701
(775)887-2020 x 1400

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