Item # 3B

City of Carson City
Agenda Report

Date Submitted: July 8, 2008

Agenda Date Requested: July 17, 2008
Time Requested: 10 minutes

To: Liquor Board

From: Business License, Development Services

Subject Title: Action to approve a full liquor license for Thomas W Fletcher and Cheri E Fletcher dba Crowbar, located at 4750 Hwy 50 E, Ste #1, Carson City.

Staff Summary: Per CCMC 4.13, all liquor license requests are to be reviewed by the Liquor Board.

Type of Action Requested:

( ) Resolution ( ) Ordinance
(X) Formal Action/Motion ( ) Other (Specify)

Does This Action Require A Business Impact Statement: ( ) Yes (X) No

Recommended Board Action: I move to approve a full liquor license for Thomas W Fletcher and Cheri E Fletcher dba Crowbar, located at 4750 Hwy 50 E, Ste #1, Carson City, including the Non-Refundable Investigation Fee of $575.00, the Original New Application Fee of $1000.00, and the Liquor License Per Quarter Fee of $200.00. Additionally, all sellers or servers of liquor must attend the Sheriff's Office Servers Education class within three months of the business opening or this approval.

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) Background check from Sheriff's Office
2) Carson City Liquor License Application

Prepared By: Lena E. Tripp, Senior Permit Technician

Reviewed By:

(Development Services Director) Date: 7/7/08

(City Manager) Date: 7/8/08

(District Attorney's Office) Date: 7-8-08

(Sheriff) Date: 7-8-08

Board Action Taken:

Motion: _____ 1) _____ Aye/Nay

2) _____

_____

_____

_____

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_____

(Vote Recorded By)

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CITY OF CARSON CITY
LIQUOR LICENSE APPLICATION

2621 Northgate Lane, Suite 6 Carson City, NV 89703
(775)887-2105 fax (775)887-2202

Full Name of Applicant(s) THOMAS WELLSLEY FLETCHER Liq. Lic#_____

Corporate Name_____

Fictitious Firm Name CROWBAR Date Filed 6-9-08

Business Location 4750 Hwy 50 E. suite 1 Business Phone 775 887-9998

Mailing Address 4010 KNOBLOCK RD Carson City NV Home Phone 775 885-9570

e-mail Address SCARECROW1959@SBCGLOBAL.NET

Date Liquor Sales will start? 6-10-08 Management Agreement on File? yes

Type of Liquor Sales: (check all that apply)

- ☑ Full bar liquor sales
- ☐ Packaged Liquor
- ☐ Dining room w/full liquor
- ☐ Packaged beer & wine
- ☐ Dining room w/beer & wine
- ☐ Wholesaler
- ☐ Manufacturer
- ☐ Additional Bar(s) @ location (#____)
- ☐ Combo Packaged & on-premise liquor license

List ALL owners, partners or corporate officers below:

Name & Title	*Address*	*Phone #*
THOMAS W. FLETCHER	4010 KNOBLOCK RD.	775 885-9570
~~Name & Title~~ CHERIE FLETCHER ~~THOMAS W. FLETCHER~~	Address 4010 KNOBLOCK	Phone # 775 885-9570
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?

Non-Refundable Investigation Fee	$ 500.00 IV	Date Paid JUNE 11, 2008
Original New Application Fee	$ 1,000.00 ON	Date Paid JUNE 11, 2008
Liquor License Per Quarter	$ 200.00 LL	Date Paid JUNE 11, 2008

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 6-11-08

Signature _____ Date_____

Signature _____ Date_____

Witnessed by: _____ Date JUNE 11, 2008

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

2621 Northgate Lane, Suite 6 Carson City, NV 89703
(775)887-2105 fax (775)887-2202

Full Name of Applicant(s) Cheri Elizabeth Fletcher Liq. Lic# 08-25869
Corporate Name
Fictitious Firm Name Crow Bar Date Filed 6-9-08
Business Location 4750 Hwy 50 E. suite 1 Business Phone (775) 887-9998
Mailing Address 4010 Knoblock rd. CC NV 89706 Home Phone (775) 885-9570
e-mail Address Cheri-cheri@sbcglobal.net
Date Liquor Sales will start? 6-10-08 Management Agreement on File? yes

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

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

Name & Title	*Address*	*Phone #*
Cheri Fletcher owner	4010 Knoblock rd CC NV 89706	(775) 885-957
Thomas Fletcher owner	4010 Knoblock rd. CC NV 89706	(775) 885-9570

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

Non-Refundable Investigation Fee $ 75.00 IV Date Paid June 11, 2008
Original New Application Fee $ 0 Date Paid
Liquor License Per Quarter $ 0 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 Cheri Fletcher Date 6-11-08
Signature _____ Date _____
Signature _____ Date _____

Witnessed by: [illegible] Date June 11, 2008

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 # _____

CARSON CITY HEALTH & HUMAN SERVICES
900 EAST LONG STREET CARSON CITY, NV 89706
PHONE: 775-887-2190 FAX: 775-887-2248

Crow Bar: Liquor License #08-25869 – 4750 Hwy 50 E, Ste. #1

Carson City Health and Human Services has no objections to the issuance of a liquor license for Crowbar.