Item # 4

City of Carson City
Agenda Report

Date Submitted: February 24, 2009

Agenda Date Requested: March 5, 2009
Time Requested: 10 minutes

To: Liquor Board

From: Business License, Development Services

Subject Title: Action to approve Obaid Mobaligh as the liquor manager for the packaged liquor license for Smoke Shop located at 1953 N Carson St., Carson City including the Non-Refundable Investigation Fee of $500.00.

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

Type of Action Requested:

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

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

Recommended Board Action: I move to approve Obaid Mobaligh as the liquor manager for the packaged liquor license for Smoke Shop located at 1953 N Carson St., Carson City including the Non-Refundable Investigation Fee of $500.00.

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: 2-23-09

(City Manager) Date: 2/24/09

(District Attorney's Office) Date: 2-24-09

(Sheriff) Date: 2-24-09

Board Action Taken:

Motion: _____ 1) _____ Aye/Nay

2) _____

_____

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(Vote Recorded By)

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CARSON CITY
BUSINESS LICENSE DIVISION
LIQUOR LICENSE APPLICATION

Liquor License # 09-26147

Submittal Date 1/20/09

Applicant

Business Owner's Name, LLC, or Corporation Name	OBAID MOBALIGH		Business Phone 560-5004
Business Address	1953 N. Carson St		Home Phone 882-1896
Mailing Address			Email Address Obj3501@AOL.com
City	Carson city	State NV / Zip Code 89701	Month Starting Liquor Sales ASAP approved
Fictious Firm Name	E Smoke Shop		Management Agreement on File?

List All Owners, Partners, or Corporate Officers below

Name and Title	Address	Home Phone
Obaid Mobaligh	2021 Ashwood Ct	882-1896
Name and Title	Address Carson City, NV	Home Phone
Name and Title	Address	Home Phone

Are you familiar with Nevada Liquor Laws? Yes

Have you ever obtained a Liquor License before; If yes, where? Country Store

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 1/16/09

Signature _____ Date _____

Signature _____ Date _____

FOR OFFICE USE ONLY

Office Use Only

FEE STRUCTURE	COLUMN 1	FEES
Dining Room with Beer and Wine Only		
Dining Room with Hard Liquor		
Tavern/Bar		
General Wholesale Liquor		
Packaged Liquor		800.00
Combo - Packaged Liquor and On-Premise		
Additional Bar(s) at Location		

PAID
CK NO. 4556
DATE 1/20/09

TRACKING	BUSINESS LICENSE FEES	
Fire	Annual Fee	(800.00) 400.00
Health	Pro-rated Fee	–
Planning	Application Fee	1,000.00
Environmental	Investigation Fee	500.00
Other	TOTAL FEES DUE	1,900.00

FOR SHERIFF'S DEPARTMENT USE ONLY

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