Hem# 13A

City of Carson City Agenda Report

Date Submitted: April 28, 2009	Agenda Date Requested: May 7, 2009 Time Requested: 10 minutes
To: Liquor Board	
From: Business License, Development Service	s
Subject Title: Action to approve Susan Melvinfull bar liquor license (Liquor License #09-26 (Jennifer Pruitt/Lena Tripp)	n as the liquor manager for Jimmy G's Cigar Bar 251) located at 301 N. Carson St., Carson City.
Staff Summary: Per CCMC 4.13, all liquor l Board.	icense requests are to be reviewed by the Liquor
) Ordinance) Other (Specify)
Does This Action Require A Business Impac	t Statement: () Yes (X) No
Recommended Board Action: I move to ap Jimmy G's Cigar Bar full bar liquor license Carson St., Carson City.	oprove Susan Melvin as the liquor manager for (Liquor License #09-26251) located at 301 N
Explanation for Recommended Board Actionall liquor licenses pursuant to CCMC 4.13(1).	n: The Liquor Board has the authority to approve
Applicable Statute, Code, Policy, Rule or Re	gulation: CCMC 4.13
Fiscal Impact: N/A	
Explanation of Impact: N/A	
Funding Source: N/A	
Alternatives: 1) Refer back to the Business L 2) Deny	icense Division, or
Supporting Material: 1) Background check 2) Carson City Liquo	from Sheriff's Office r License Application

Board Action Report - Liquor License Susan Melvin - Jimmy G's Cigar Bar May 7, 2009 Page 2

Prepared By: Lena E. Tripp, Senior Permit Technician

Reviewed By:		
(Public Works Director) (City Manager)		ate: $\frac{4-28-09}{1/28/09}$ ate: $\frac{4-28-09}{1/28-09}$
(District Attorney's Office)	Da	ate:
(Sheriff) (Principal)Planner)		ate: 42809
Board Action Taken:		
Motion:	1) 2)	Aye/Nay
(Vote Recorded By)		

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)	isan Lynn Mel	vin Liq. Lic# 9-26251	
Corporate Name Smokin		LTD.	
Fictitious Firm Name Jimn	41 7	Date Filed 3-26-09	
Business Location 301 N	Carson	Business Phone 783 4873	
Mailing Address 1595 Hu		. 8942 Home Phone 265 - 6079	
e-mail Address Jimmygs	Claar@amail C	om	
		Management Agreement on File? NO	
	bar liquor sales	☐ Dining room w/beer & wine	
	aged Liquor ng room w/full liquor	☐ Wholesaler	
	aged beer & wine	☐ Manufacturer ☐ Additional Bar(s) @ location (#)	
		☐ Combo Packaged & on-premise liquor license	
List ALL owners, partners or consumption 9		Gardnenville, NV-89460 265	5-607
Name & Title Jeffrey L. Melvin 9	So RIVENIEW) DO	Gardnerville No 89460 783	3-487
Name & Title	Address	Phone #	
2.000	11000 005	Thone #	
Name & Title	Address	Phone #	
Are you familiar with Nevada I	Liquor Laws? yes 🔾 r	00	
Have you ever obtained a liquo			,Nv.
Non-Refundable Investigation I		Date Paid	
Original New Applicati		Date Paid	
Liquor License Per Qua	arter \$ <u>200.00</u>	Date Paid CK, NO. 1836	
CERTIFICATION: I hereby cer	tify that the above informatio	on is correct to the best of my knowledge and belief	JP_
understand that this liquor licer	ise, if approved, may not be to	ransferred to any other person or to any other	
		her understand the investigation period may be for	ty-
five (45) days or longer for prod	essing.		
Signature Sullan	74IL	Date 3-7-09	
Signature	W.	Date	
		•	
Witnessed by:		Date	
	FOR SHERIFF'S DEPART	MENT USE ONLY	
		arson City, NV 89701	
	(775)887-2020		
Date Applicant Fingerprinted	By	File #	
Date Applicant Fingerprinted	By	File #	
Date Applicant Fingerprinted	By	File #	