City of Carson City Agenda Report

Date Submitted: November 8, 2010 Agenda Date Requested: November 16, 2010

Time Requested: 10 minutes

To: Board of Supervisors and Mayor

From: Business License, Public Works

Subject Title: Action to approve the transfer of the gaming license for Slotworld, Inc. dba Golden Nickel (Gaming License #10-2065) to 444 E. William St., Ste 8, Carson City. (Jennifer Pruitt)

Staff Summary: All gaming license transfer requests are to be reviewed by the Board of Supervisors per CCMC 4.14.050. Slotworld, Inc. dba Golden Nickel is applying to transfer the gaming license from 1325 S. Carson St. to 444 E. William St., Ste 8. The name of the business has also changed from Smoke Shop to the Golden Nickel. Staff is recommending approval.

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 the transfer of the gaming license for Slotworld, Inc. dba Golden Nickel (Gaming License #10-2065) to 444 E. William St., Ste 8, Carson City. (Jennifer Pruitt)

Explanation for Recommended Board Action: The Board of Supervisors has the authority to approve gaming license transfers pursuant to CCMC 4.14.050.

Applicable Statute, Code, Policy, Rule or Regulation: CCMC 4.14.050

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) Carson City License Application

Board Action Report – Gaming License Slotworld – Golden Nickel November 16, 2010 Page 2

Prepared By: Lena Tripp, Senior Permit Technic	cian		
(Public Works Director) (City Manager) (District Attorney's Office) (Sheriff) (Principal Planner)		Date: ///8/10 Date: ///8/10 Date: ///8/10 Date: ///8/10 Date: ///8/10	
Board Action Taken:			
Motion:	1) 2)		Aye/Nay
(Vote Recorded By)			

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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						
I am subject to a court order for the support of one or more children and am not in compliance with a plan approved by the						
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District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to order

Г	Please answer this section if your business is located in Carson City. If you are unsure of your answer or are installing signage,					
l uo	contact the Planning Division at (775) 887-2180					
Information	Is your business location zoned for t	his type of business	Has a Special Use Permit been obtained for this business location			
I	Yes		Yes			
lξ	Will you be installing any outdoor si	gns	Are there any existing signs of the property			
	Yld		Yes			
l o	Will there be any outside storage (If yes, please explain items being stored and how being screened)					
Miscellaneous	$\mathcal{N}_{\mathcal{O}}$					
ell	Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage)					
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	NONE.					
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Г	I, the undersigned understand that	t I cannot operate my business un	til my license is actually issued by this office indicating approval by all necessary			
	city departments	city departments				
S	If any changes are made after completing said license application this office must be notified immediately and an updated is required.					
ion	toquires.					
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					
Reg	Non-payment of	annual and quarterly business lic	ense, 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 and	Any exception to any of the above is considered a violation of the Conser City Musician Code at the Co					
ule	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 information is correct to the best of my knowledge and belief. I understand that failure to complete this form truthfully is an act of perjury.					
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	Applicant's Signature	Jeffrey E	Meal Date 10-28-10			
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FEE STRUCTURE	FEE	LICENSE TOTAL FEES
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Number of Employees		Business License Application/Update Fee:
Health Fee		Liquor License Annual Fee:
Number of Rental Units		Liquor License Pro-rated Fee;
Number of Coin Operated Machines		Liquor License Application Fee:
Number of Slot Machines		Liquor License Investigation Fee:
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Date Applicant Fingerprinted	By File#	Health Pre-Inspection Fee: