City of Carson City
Agenda Report

Date Submitted: November 15, 2010

Agenda Date Requested: November 23, 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 ( ) 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 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

Prepared By: Lena Tripp, Senior Permit Technician

Reviewed By:

(Public Works Director) Date: 11/8/10

(City Manager) Date: 11/8/10

(District Attorney's Office) Date: 11/8/10

(Sheriff) Date: 11/8/10

(Principal Planner) Date: 11.8.2010

Board Action Taken:

Motion: _____ 1) _____ Aye/Nay

2) _____

_____

_____

_____

_____

_____

(Vote Recorded By)

2065

CARSON CITY LICENSE APPLICATION

Please type or print in black ink; Incomplete or illegible applications will not be accepted. Applications must bear an original signature

Busin
10 " 2015
Submittal Date: 11-1-2015

1	☐ New Business	☒ Change of Location/Mailing	☐ Change of Name	☐ Change of Corporate Officer	☐ Other
2	Type of License(s)	☐ Business	☐ Short-Term	☒ Gaming	☐ Liquor
3	Type of Entity: ☐ Sole Proprietor	☒ Corporation	☐ Partnership	☐ Limited Liability Company	☐ Non-Profit

4 Entity Name: Slot World, INC

5 Business Opening Date: 10-29-10

6 Business Name (DBA): Golden Nickel

7 EIN #: 88-0233638

8 Business Address: 444 E. William # 8 | City: Carson City | State: NV | Zip Code: 89701

9 Mailing Address: 3879 Highway 50 E. CC NV | City: Carson City | State: NV | Zip Code: 89701

10 Corporate Phone: 775-882-7568 | Business Phone: Same | Cellular Phone: 775-742-6199 | Business Fax: 775-882-8670

11 E-mail Address: | Business Website: slotworld-casino.com

12 Owner(s), Manager(s), or other Principal(s) attach additional pages if required

Last, First, MI	Percent Owned	Title	Date of Birth	SSN
Small, John, D	30	Chair	2-3-29	544-26-2618
Residence Address (Street)		City, State, Zip		Residence Telephone
1641 FAIR WAY		Carson City, NV 89701		882-2324
Last, First, MI	Percent Owned	Title	Date of Birth	SSN
Smeath, Jeffry	20	President	10-29-68	530-46-5778
Residence Address (Street)		City, State, Zip		Residence Telephone
1564 Truckee Dr		Carson City, NV 89701		885-8188
Last, First, MI	Percent Owned	Title	Date of Birth	SSN
Taylor, Steve R	24.5	Secretary	4-5-53	530-44-6169
Residence Address (Street)		City, State, Zip		Residence Telephone
2200 Sun Chaser Ct.		Reno, NV 89511		851-1090
Manager/Liquor Manager		☐ On-Site ☐ Off-Site		Contact Phone Number
Residence Address (Street)		City, State, Zip		

Pursuant to NRS 244.33507 and 42 U.S.C. Sec. 666, you are required to provide your social security number on the application for a license, permit, or certificate for the purpose of determining whether or not you have failed to comply with a subpoena or warrant relating to a proceeding to determine the paternity of a child or to establish or enforce an obligation for the support of a child or you are in arrears in the payment for the support of one or more children

13 Describe in detail the activity of your business

Gaming - Fifty to Sixty slots.

Type of Liquor License Applying for (If applicable)

14 ☐ Tavern/Bar | ☐ Dining Room w/Beer and Wine Only | ☐ Packaged Liquor | ☐ Dining Room w/Hard Liquor | ☐ Combo (On-Premise & Pkg) | ☐ General Wholesale

15 ☐ Catering | ☐ Additional Wet Bars _____ | Will there be an Interim Management Agreement? NO

16 List number of slot machines (If applicable)

☐ 1 cent 6 | ☐ Multi 22
☐ 5 cent 14 | ☐ Poker _____
☐ 25 cent 6 | ☐ Mega Buck _____
☐ 1.00 2

List number of table games (If applicable)

☐ Craps _____ | ☐ Baccarat _____
☐ Roulette _____ | ☐ Race Book _____
☐ Twenty-One _____ | ☐ Sports Book _____
☐ Keno _____ | ☐ Poker _____

17 If this application is for a change of business name, location, or ownership, list the previous name, address, and owner below

Slot World, INC dba Smoke Shop 1325 S. Carson St. Carson City NV

18 Check One

X	I am not subject to a court order for the support of a child
_____	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 District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to order
_____	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 District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to order

Miscellaneous Information

Please answer this section if your business is *located* in Carson City. If you are unsure of your answer or are installing signage, contact the Planning Division at (775) 887-2180

Is your business location zoned for this type of business: Yes	Has a Special Use Permit been obtained for this business location: Yes
Will you be installing any outdoor signs: Yes	Are there any existing signs of the property: Yes

Will there be any outside storage (If yes, please explain items being stored and how being screened)
No

Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage)
No

Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business
None

Rules and Regulations

I, the undersigned understand that I cannot operate my business until my license is actually issued by this office indicating approval by all necessary city departments

- If any changes are made after completing said license application this office must be notified immediately and an updated is required.
- 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
- Non-payment of annual and quarterly business license, 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.
- 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.

Applicant's Signature Jeffrey Smeath Date 10-28-10

FEE STRUCTURE	FEE
Business License Fee	
Square Footage	
Number of Employees	
Health Fee	
Number of Rental Units	
Number of Coin Operated Machines	
Number of Slot Machines	
TOTAL FEES DUE: 70.00	
Payment Type Ck# 10789	
Received By SF	Date 11-1-2010
Date Applicant Fingerprinted	By / File #

LICENSE TOTAL FEES	
Business License Annual Fee:	
Business License Pro-rated Fee:	
Business License Application/Update Fee:	25.00
Liquor License Annual Fee:	
Liquor License Pro-rated Fee:	
Liquor License Application Fee:	
Liquor License Investigation Fee:	
Gaming License Quarterly Fee:	
Gaming License Application Fee:	25.00
Fictitious Name Fee:	20.00
Health Pre-Inspection Fee:	