Carson City Agenda Report

Date Submitted: October 23, 2012	Time Requested: 10 minutes
To: Liquor and Entertainment Boa	rd
From: Business License Division	
	o approve Ramneek Singh as the liquor manager for E2 ocated at 262 W. Winnie Ln., Carson City. (Jennifer Pruitt)
	equests are to be reviewed by the Liquor Board per CCMOne business and will be the liquor manager.
Type of Action Requested: Resolution Formal Action/Motion	☐ Ordinance ☐ Other (Specify)
Does This Action Require A Busines	ss Impact Statement: () Yes (X) No
	ve to approve Ramneek Singh as the liquor manager for EZ ocated at 262 W. Winnie Ln., Carson City.
Explanation for Recommended Boa all liquor licenses pursuant to CCMC	ard Action: The Liquor Board has the authority to approve 4.13(1).
Applicable Statute, Code, Policy, Ru	ıle or Regulation: CCMC 4.13
Fiscal Impact: N/A	
Explanation of Impact: N/A	
Funding Source: N/A	
Alternatives: 1) Refer back to the Br 2) Deny	usiness License Division, or
Supporting Material: 1) Carson Cit 2) Carson Cit	y Liquor License Application y Sheriff's Office Background Investigation

Board Action Report - Liquor License Singh - EZ Market November 1, 2012 Page 2

Prepared By: Lena Reseck, Senior Permit Technic	ian	
(Public Works Director) (City Manager) (District Attorney's Office) (Principal Planner) (Finance Director)		1-23-12 23/12 2/23/12 32-12
Board Action Taken:		
Motion:	1)	
(Vote Recorded By)		

atte of	CARS	ON CITY	LICENSE AF	PPLICATION	Business License #:	LL#13.	-29371
				illegible applications will	12-296	94	-, 5,7
	not be acc	cepted. Appli	cations must bear a	an original signature	Submittal Date:	<u> </u>	42
I XNew B	lusiness	□ Change of	f Location/Mailing	☐ Change of Name	□ Change of Corp	orate Officer	□ Other
2 Type of L	icense(s)	×	Business	□ Short-Term	□ Gami:	ng	Liquor
3 Type of Entity	🗆 Sole Pro	oprietor	★ Corporation	□ Partnership	☐ Limited Liabili	ty Company	🗅 Non-Profit
Entity Name 4 CHAHA	45 CO.	erort.	771074		Business Ope	ning Date	2
Business Name (DI		RKET			7 EIN# 16-	10997	58
Business Address	WINA	IIF L	N	City PASON CATY	State	Zip Code	03
Mailing Address	JAMIE	IN	2530	City CARSON CITY	State	Zip Code 970	13
Corporate Phone		Business Phon		Cellular Phone	Business Fax	111 /19	20
F-mail Address	-4402	775-80	- 4444 - 4AHOO.	Business Website	2 725-8	41-41	77
RA	nnerco	MAHAL.	edditional pages if req	-NA	_		
Last, First, MI		- 8000 V	Percent Owned	Title	Date of Birth		
SIMGH K Residence Address	(Street)		100%	City, State, Zip	07-07-1485	Residence Tele	pnoue
3251 FA	YRWAY DE	2		SPARKI, N.	V 89431	725-359	1-6063
Last, First, MI			Percent Owned	Title	Date of Birth	SSN	
Residence Address	(Street)			City, State, Zip		Residence Tele	phone
Last, First, MI			Percent Owned	Title	Date of Birth	SSN	
Residence Address	(Street)			City, State, Zip	I	Residence Tele	phone
Manager/Liquor M	lanager			☐ On-Site	Contact Phon	ne Number	
Residence Address	(Street)			City, State, Zip			
				to provide your social secur			
				iled to comply with a subpo e support of a child or you a			
more children Describe in detail	the activity of yo	ur business				- 4	
RETAIL	SALES E	FOLIO	wars, GRI	OCERIES, 7089	CCO PRODUCT IERCHANIK	TE, GEN	ERAL
Type of Liquor Li	icense Applying f	or (If applicab	le)				
☐ Tavern/Bar	□ Dining Room Wine (ackaged Liquor	□ Dining Room w/Hard Liquor	□ Combo (On-Premis & Pkg)	□ Gener:	al Wholesale
□ Catering	□ Additio	onal Wet Bars		Will here be an Interim M	anagement Agreement	TONO -	G8
List number of sk	ot machines (If aç	plicable) 🦟	NA -	List number of table games	(If applicable) ~	NA-	V
E I cent		□ Multi		□ Craps □ Roulette	BaccaratRace Bool	<u> </u>	
	_	□ Poker ⊔ Mega Buck		☐ Twenty-One	☐ Sports Bo		
□ 1.00				□ Keno	🗆 Poker		
If this application i	s for a change of b	usiness name, l	ocation, or ownership	o, list the previous name, addr	ess, and owner below	703	
0	Y	I am not subje	ct to a court order fo:	r the support of a child	TYMYTH		
8				e support of one or wore child	ren and am <i>in complian</i>	ce with a plan ap	proved by the
Check One		District Attorn	ey or other public ag	ency enforcing the order for t	he repayment of the am	ount owed pursua	nt to order
		*		e support of one or more child ency enforcing the order for t			

no	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			
rmati	Is your business location zoned for this type of business	Has a Special Use Permit been obtained for this business location		
s Infor	Will you be installing any outdoor signs	Are there any existing signs of the property		
noeur	Will there be any outside storage (If yes, please explain items being stored and how being screened)			
iscella	Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage)			
X	Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business			

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

Rules and Regulations

Date	10-01-2012	
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FEE STRUCTURE	FEE	LICENSE TOTAL FEES
Business License Fee	63.85	Business License Annual Fee: 170.30
Square Footage	13.00	Business License Pro-rated Fre: 28-948 NON-2012
Number of Employees x 3	18.45	Business License Application applate Fee:
Health Fee	7500	Liquor License Annual Fee:
Number of Reptal Units		Liquor License Pro-rated Fee:
Number of Coin Operated Machines		Liquor License Application Fee:
Number of Slot Machines		Liquor License Investigation Fee:
TOTAL FEES DUE: 1719	26	Gaming License Quarterly Fée:
Payment Type \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Gaming License Application Fee:
Received By 5	Date 10-3-2012	Fictitions Name Fee: 2010
	By File#	Health Pre-Inspection Fee: