

**Carson City
Agenda Report**

Date Submitted: May 28, 2013

Agenda Date Requested: June 6, 2013

Time Requested: 10 minutes

To: Liquor and Entertainment Board

From: Business License Division

Subject Title: For possible action to approve Francisco Paredes as the liquor manager for Mi Casa Too (Liquor License #13-29690) located at 3809 N. Carson St., Carson City. (Lena Reseck)

Staff Summary: All liquor license requests are to be reviewed by the Liquor Board per CCMC 4.13. Francisco Paredes is purchasing the business and will be the liquor manager. He is applying for a dining room with hard liquor license. Staff is recommending approval.

Type of Action Requested:

☐ Resolution
☒ Formal Action/Motion

☐ Ordinance
☐ Other (Specify)

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

Recommended Board Action: I move to approve Francisco Paredes as the liquor manager for Mi Casa Too (Liquor License #13-29690) located at 3809 N. Carson St., Carson City.

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

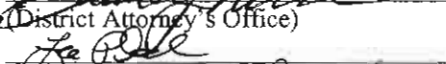
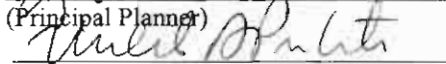
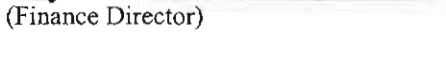
Alternatives: 1) Refer back to the Business License Division, or
2) Deny

Supporting Material: 1) Carson City Liquor License Application
2) Carson City Sheriff's Office Background Investigation

Prepared By: Lena Reseck, Senior Permit Technician

Reviewed By:


(Public Works Director)

(City Manager)

(District Attorney's Office)

(Principal Planner)

(Finance Director)

Date: 5-28-13
Date: 5/28/13
Date: 5/28/13
Date: 5-28-13
Date: 5/28/13

Board Action Taken:

Motion: _____

1)	_____	Aye/Nay
2)	_____	_____

(Vote Recorded By)

**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

Business License #:

13-29997 / 13-29690

Submittal Date:

4-20-2013

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
4	Entity Name	F & R PAREDES LLC			Business Opening Date
5	Business Name (DBA)	MI PASA TOO			Apr 2013
6	Business Address	City	State	Zip Code	
8	3809 N. CARSON ST.	CARSON	NV	89706	
9	Mailing Address	City	State	Zip Code	
9	SOME				
10	Corporate Phone	Business Phone	Cellular Phone	Business Fax	
10		882 4680	846 5918	882 5956	
11	E-mail Address	Business Website			
11					
12	Owner(s), Manager(s), or other Principal(s) attach additional pages if required				
	Last, First, MI	Percent Owned	Title	Date of Birth	
	PAREDES FRANCISCO	100%	MGR	Nov 12 1952	
	Residence Address (Street)	City, State, Zip	Residence Telephone		
	9370 OAKLEY CT	RENO NV 89521	851 4458		
	Last, First, MI	Percent Owned	Title	Date of Birth	SSN
	Residence Address (Street)	City, State, Zip	Residence Telephone		
	Last, First, MI	Percent Owned	Title	Date of Birth	SSN
	Residence Address (Street)	City, State, Zip	Residence Telephone		
	Manager/Liquor Manager	☒ On-Site ☐ Off-Site	Contact Phone Number		
			882 - 4080		
	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				
	RESTAURANT				
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)
15	☐ Catering	☐ Additional Wet Bars	Will there be an Interim Management Agreement?		
			YES		
16	List number of slot machines (If applicable)		List number of table games (If applicable)		
	☐ 1 cent	Multi	☐ Craps	☐ Baccarat	
	☐ 5 cent	Poker	☐ Roulette	☐ Race Book	
	☐ 25 cent	Mega Buck	☐ Twenty-One	☐ Sports Book	
	☐ 1.00		☐ Keno	☐ Poker	
17	If this application is for a change of business name, location, or ownership, list the previous name, address, and owner below				
18					
Check One	☒	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 <i>located</i> 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 NO
	Will you be installing any outdoor signs NO	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 N/A	

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	Date 4-19-13
		

FEE STRUCTURE	FEE	LICENSE TOTAL FEES
Business License Fee	6385.25⁰⁰	Business License Annual Fee: 347.25
Square Footage	96.90	Business License Pro-rated Fee: (260.44) April-Dec
Number of Employees x10	61.50	Business License Application/Update Fee: 25.00
Health Fee	125.00	Liquor License Annual Fee:
Number of Rental Units		Liquor License Pro-rated Fee:
Number of Coin Operated Machines		Liquor License Application Fee: 1000.00
Number of Slot Machines		Liquor License Investigation Fee: 500.00
TOTAL FEES DUE: 1830.44		Gaming License Quarterly Fee:
Payment Type CASH 6/6/1		Gaming License Application Fee:
Received By SW	Date 4-24-2013	Fictitious Name Fee: 20.00
Date Applicant Fingerprinted	By	Health Pre-Inspection Fee: 25.00

Memorandum



TO: Carson City Liquor and Entertainment Board

FROM: Carson City Health and Human Services

DATE: May 21, 2013

RE: June 6, 2013 Meeting – Mi Casa Too Liquor License

On Tuesday, May 21, 2013 an inspection of Mi Casa Too (bar and restaurant), located 3809 N. Carson Street, was conducted. At the time of inspection the premises met CCHHS standards and received approval by this department. Please contact CCHHS with any questions or concerns.

Phone: (775)887-2190

Fax: (775)887-2248

Dustin Boothe
Environmental Health Program Manager

A handwritten signature in black ink, appearing to be "DB", is written over the printed name and title of Dustin Boothe.

Becky W. Purkey
Environmental Health Specialist II

A handwritten signature in black ink, appearing to be "BWP", is written over the printed name and title of Becky W. Purkey.

Copied:

Lena Reseck, Business License