## 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 the addition of a catering liquor license to Grandma Hattie's/A Catered Affaire's liquor license (Liquor License #13-4020) located at 2811 S. Carson St., Carson City. (Lena Reseck) Staff Summary: All liquor license requests are to be reviewed by the Liquor Board per CCMC 4.13. Grandma Hattie's/A Catered Affaire currently has a dining room with beer and wine license. John Hurzel will remain the liquor manager. Staff is recommending approval. Type of Action Requested: Resolution Ordinance Formal Action/Motion Other (Specify) Does This Action Require A Business Impact Statement: ( ) Yes (X) No Recommended Board Action: I move to approve the addition of a catering liquor license to Grandma Hattie's/A Catered Affaire's liquor license (Liquor License #13-4020) located at 2811 S. 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

Board Action Report - Liquor License Hurzel - Grandma Hattie's/A Catered Affaire June 6, 2013 Page 2

Prepared By: Lena Reseck, Senior Permit Technician

Reviewed By:

| Cate: 5-28-13 |
| City Manager| | Date: 5/28/13 |
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and the same of th	CARSON CITY LICENSE A			PPLICATION	Business License #:			
	Please type or i	ase type or print in black ink; Incomplete or illegible applications will			13-4	020		
	not be accepted. Applications must bear a				Submittal Date: 5 14 2013			
□ New Business □ C		□ Change o	f Location/Mailing	☐ Change of Name	and the filling was a first		Other	
2 Type of License(s)		☐ Business		□ Short-Term			Liquor	
3 Type of Entity	□ Sole Pro	prietor	☐ Corporation	□ Partnership	☐ Limited Liability	Company	□ Non-Profit	
Entity Name	11' 8	1 0 51	7		Business Opening Date			
Business Name (DBA)								
Business Address			Contered attains	7 8F-0214744   State				
8 7811 S. Caron St.			Cherson City	rw.	Zip Code 89 JU	1		
9 Mailing Address			City ,	State	Zip Code			
Corporate Phone  S&L-46	Corporate Phone Business Phone			Cellular Phone	7 775 - 887-2281			
E-mail Address	E-mail Address			Business Website				
	1 Jun hurzele Me. Com Wh. 2 Owner(s), Manager(s), or other Priocipal(s) attach additional pages if required							
Last, First, MI	11. 1107.0	<u> </u>	Percent Owned	Title CEO	Date of Birth 4-4-56		-	
Residence Address	(Street)	<u> </u>	1700	City, State, Zip	1 1 36	Residence Telep	phone,	
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Last, First, MI	S. Horza	el	Percent Owned	Secretary	Date of Birth	55~		
Residence Address	(Street)	1.		City, State, Zip	11/ 8921	Residence Telep	S/LZ	
Last, First, MI	7 11 11	<b>.</b> . Í	Percent Owned	Title	Date of Birth	, ,, , , <u>,</u> l		
Residence Address	(Street)	<u>el</u>		City State, Zip	6-26-83	Residence Telep	ohone .	
4018	Sxeth	pointe		Oaran Cit	N 89701	702-493		
Manager/Liquor N	Urz-e	Dres H	Urzes	ZOn-Site □-Off-Site	Contact Phone	1900		
Residence Address	: 1// r	1		City, State, Zip				
Fursuant to NRS		U.S.C. Sec. 66	6, you are required	to provide your social secur	ity number on the applic	ation for a licer	nse, permit, or	
certificate for the	purpose of detern	nining whethe	r or not you have fai	iled to comply with a subpoo	ena or warrant relating t	o a proceeding	to determine	
more children	clind or to estable	sa or enforce :	an obligation for the	support of a child or you a	re in arrears in the payin	ent for the supp	port of one or	
3 Describe in detail					<u> </u>			
	add Caterins to liquor license							
Type of Liquor L								
14 ☐ Tavern/Bar	□ Dining Room Wine O		□ Packaged Liquor	☐ Dining Room w/Hard Liquor	□ Combo (On-Premise & Pkg)	🗆 Gелега	l Wholesale	
5 V Catering	□ Addition	ıal Wet Bars		Will there be an Interim M	anagement Agreement?			
6 List number of slo	ot machines (If app	olicable)		List number of table games (If applicable)				
□ 1 cent	- Mnih			□ Craps □ Baccarat □				
□ 5 cent	□ 25 cent □ Poker □			□ Roulette □ Twenty-One	□ Race Book □ Sports Book			
□ 1.00	- (	□ Mega Buck	—	□ Keno	□ Poker			
7 If this application is	s for a change of be	siness name, l	ocation, or ownership	, list the previous name, addr	ess, and owner below			
	-							
10	X	am not subject	t 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

Check One

ءِ ا	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							
matic	Is your business location zoned for the	his type of business	Has a Special Use Permit been obtained for this business location					
Miscellaneous Information	Will you be installing any outdoor si	gns	Are there any existing signs of the property					
neons	Will there be any outside storage (If yes, please explain items being stored and how being screened)							
scella	Will any commercial vehicles be use	d for this business (If yes, please desc	ribe size, type, and location of storage)					
Μ̈́	Please list the quantities, types, and	storage location of any chemicals or b	azardous materials that will be used for this business					
	I, the undersigned understand tha city departments	t I cannot operate my business unt	il my license is actually issued by this office indicating approval by all necessary					
l su	If any changes a required.	re made after completing said lice	se application this office must be notified immediately and an updated is					
Regulations		se, liquor license, and/or gaming lic BLE to a different owner or differe	tense are issued to a given owner at a SPECIFIC LOCATION and are NON- ent location					
d Regi	• • •	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.						
les and	Any exception to	on to any of the above is considered a violation of the Carson City Municipal Code and is subject to citation						
Rules	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  5-9-13							
		(am)	Date 5-9-13					
		(AM)	Date 5-9-13					
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## Memorandum

TO: Carson City Liquor and Entertainment Board

FROM: Carson City Health and Human Services

DATE: May 21, 2013

RE: June 6, 2013 Meeting - Grandma Hattie's/A Catered Affair Liquor License

On Tuesday, May 21, 2013 the services A Catered Affair will offer with the addition of a liquor license to the existing catering license were verified by CCHHS. At the time of verification the catering business 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

Marissa Ure Environmental Health Specialist I Mul

Copied: Lena Reseck, Business License