

**Carson City  
Agenda Report**

**Date Submitted:** March 11, 2014

**Agenda Date Requested:** March 20, 2014

**Time Requested:** 10 minutes

**To:** Liquor and Entertainment Board

**From:** Community Development - Business License Division

**Subject Title:** For possible action to approve Jose Del Real as the liquor manager for La Posada Real, Inc. (Liquor License #14-29933) located at 3205 Retail Dr. (Lena Reseck)

**Staff Summary:** All liquor license requests are to be reviewed by the Liquor Board per CCMC 4.13. La Posada Real, Inc. is a Mexican restaurant that will also have food catering services. The liquor license will be a dining room with hard liquor. Jose Del Real will be the manager for the restaurant. 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 Jose Del Real as the liquor manager for La Posada Real, Inc. (Liquor License #14-29933) located at 3205 Retail Dr.

**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 Health and Human Services Inspection Report  
3) Carson City Sheriff's Office Background Investigation

**Prepared By:** Lena Reseck, Senior Permit Technician

**Reviewed By:**

Marena A. Wark  
(Deputy City Manager)

Date: 3/11/14

Judy Allen  
(District Attorney's Office)

Date: 3/11/14

Richard J. Farley  
(Planning Manager)

Date: 3.6.14

Urbil Ahluwalia  
(Finance Director)

Date: 3/11/14

**Board Action Taken:**

Motion: \_\_\_\_\_

1) \_\_\_\_\_

Aye/Nay

2) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Vote Recorded By)



# CARSON CITY LICENSE APPLICATION

Business License #: **LL#14-29933**

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

**14 30415**  
Submittal Date: **2-5-2014**

1	<input checked="" type="checkbox"/> New Business	<input type="checkbox"/> Change of Location/Mailing	<input type="checkbox"/> Change of Name	<input type="checkbox"/> Change of Corporate Officer	<input type="checkbox"/> Other	
2	Type of License(s)	<input checked="" type="checkbox"/> Business	<input type="checkbox"/> Short-Term	<input type="checkbox"/> Gaming	<input checked="" type="checkbox"/> Liquor	
3	Type of Entity	<input type="checkbox"/> Sole Proprietor	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Non-Profit
4	Entity Name <b>La Posada Real, Inc</b>			5	Business Opening Date <b>April 4, 2014</b>	
6	Business Name (DBA) <b>La Posada Real</b>			7	EIN #	
8	Business Address <b>3205 Retail Dr.</b>		City <b>Carson City</b>	State <b>NV</b>	Zip Code <b>89706</b>	
9	Mailing Address <b>Same as above</b>		City	State	Zip Code	
10	Corporate Phone	Business Phone <b>(775) 852-1227</b>	Cellular Phone <b>(775) 232-2542</b>	Business Fax		
11	E-mail Address <b>delrealreds@aol.com</b>			Business Website		

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

Last, First, MI <b>Del Real, Jose</b>	Percent Owned <b>50%</b>	Title <b>President</b>	Date of Birth <b>09/05/1963</b>	Residence Telephone <b>775-841-7426</b>
Residence Address (Street) <b>3833 Alexa Wy Carson City</b>		City, State, Zip		
Last, First, MI <b>Posada-Campos, Manuel</b>	Percent Owned <b>50%</b>	Title <b>Secretary</b>	Date of Birth <b>01/14/1955</b>	Residence Telephone <b>(775) 825-4630</b>
Residence Address (Street) <b>2798 AZUZA</b>		City, State, Zip <b>RENO NV 89502</b>		
Last, First, MI	Percent Owned	Title	Date of Birth	SSN
Residence Address (Street)		City, State, Zip		Residence Telephone
Manager/Liquor Manager <b>Jose Del Real</b>		<input type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	Contact Phone Number <b>(775) 232-2542</b>	
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 **Food, with beverages, and catering services (e.g. cooking food, mixing drinks, serving food and drinks to customers).**

14 Type of Liquor License Applying for (If applicable)

<input type="checkbox"/> Tavern/Bar	<input type="checkbox"/> Dining Room w/Beer and Wine Only	<input type="checkbox"/> Packaged Liquor	<input checked="" type="checkbox"/> Dining Room w/Hard Liquor	<input type="checkbox"/> Combo (On-Premise & Pkg)	<input type="checkbox"/> General Wholesale
<input checked="" type="checkbox"/> Catering	<input type="checkbox"/> Additional Wet Bars _____		Will there be an Interim Management Agreement?		
16 List number of slot machines (If applicable)			List number of table games (If applicable)		
<input type="checkbox"/> 1 cent _____	<input type="checkbox"/> Multi _____	<input type="checkbox"/> Craps _____	<input type="checkbox"/> Baccarat _____		
<input type="checkbox"/> 5 cent _____	<input type="checkbox"/> Poker _____	<input type="checkbox"/> Roulette _____	<input type="checkbox"/> Race Book _____		
<input type="checkbox"/> 25 cent _____	<input type="checkbox"/> Mega Buck _____	<input type="checkbox"/> Twenty-One _____	<input type="checkbox"/> Sports Book _____		
<input type="checkbox"/> 1.00 _____		<input type="checkbox"/> Keno _____	<input type="checkbox"/> 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 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 No
	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 No	

Rules and Regulations	<p>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</p> <ul style="list-style-type: none"> <li>• If any changes are made after completing said license application this office must be notified immediately and an updated is required.</li> <li>• 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</li> <li>• 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.</li> <li>• Any exception to any of the above is considered a violation of the Carson City Municipal Code and is subject to citation</li> </ul> <p>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.</p>
	<p>Applicant's Signature <u><i>Suzette Reed</i></u> Date <u>2-7-2014</u></p>

FEE STRUCTURE		FEE	LICENSE TOTAL FEES	
Business License Fee		63.85	Business License Annual Fee:	503.00
Square Footage		96.90	Business License Pro-rated Fee:	377.25 apr-Dec
Number of Employees	x15	92.25	Business License Application/Update Fee:	25.00
Health Fee	Health 8	75.00	Liquor License Annual Fee:	(800)
Number of Rental Units	Health	175.00	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: 2022.25			Gaming License Quarterly Fee:	
Payment Type	CH# 1426		Gaming License Application Fee:	
Received By	SW	Date	Fictitious Name Fee:	20.00
Date Applicant Fingerprinted	By	File #	Health Pre-Inspection Fee:	25.00

## Memorandum



TO: Carson City Liquor and Entertainment Board

FROM: Carson City Health and Human Services

DATE: March 3, 2014

RE: March 20, 2014 Meeting – La Posada Real Liquor License

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On Monday, March 3, 2014 an inspection of La Posada Real, located 3205 Retail Drive, was conducted. At the time of inspection the premises met CCHHS standards and received liquor license 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

Copied:  
Lena Reseck, Business License