

**Carson City
Agenda Report**

Date Submitted: November 24, 2014

Agenda Date Requested: December 4, 2014
Time Requested: 10 minutes

To: Liquor and Entertainment Board

From: Community Development - Business License Division

Subject Title: For possible action to approve Jidapa Kreck as the liquor manager for Siam Classic Thai Cuisine, LLC. (Liquor License #15-30234) located at 4250 Cochise Street, Ste 40. (Lena Reseck)

Staff Summary: All liquor license requests are to be reviewed by the Liquor Board per CCMC 4.13. Siam Classic Thai Cuisine, LLC. is applying for a dining room with beer and wine only. 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 Jidapa Kreck as the liquor manager for Siam Classic Thai Cuisine, LLC. (Liquor License #15-30234) located at 4250 Cochise Street, Ste 40.

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:

Nichols Myrums
(City Manager)

Date: 11/24/14

[Signature]
(District Attorney's Office)

Date: 11/24/14

Susan O'Sullivan
(Planning Manager)

Date: 11.24.14

[Signature]
(Finance Director)

Date: 11/24/14

Board Action Taken:

Motion: _____

- 1) _____
- 2) _____

Aye/Nay

(Vote Recorded By)

4# 15-30234



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 #:

14-30830

Submittal Date:

10-16-2014

<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
Type of License(s)		<input type="checkbox"/> Business	<input type="checkbox"/> Short-Term	<input type="checkbox"/> Gaming
Type of Entity	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company
				<input type="checkbox"/> Non-Profit

Entity Name		Siam Classic Thai Cuisine, LLC		Business Opening Date	
Business Name (DBA)		N/A		EIN #	
Business Address	4250 Cochise Street, Suite 40	City	Carson City	State	NV
				Zip Code	89703
Mailing Address	Same	City		State	
Corporate Phone		Business Phone		Cellular Phone	(775) 291-6691
E-mail Address	jibbu1970@hotmail.com		Business Website		

Owner(s), Manager(s) or other Principal(s) attach additional pages if required				
Last, First, MI	Percent Owned	Title	Date of Birth	Residence Telephone
Kreck Jidapa	100%	Owner	12/05/70	(775) 291-6691
Residence Address (Street)		City, State, Zip		
1881 Quail Lane		Carson City, NV 89701		
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		<input type="checkbox"/> On-Site	Contact Phone Number	
		<input type="checkbox"/> Off-Site		
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
 Thai Restaurant 50 seats

14 Type of Liquor License Applying for (If applicable)

<input type="checkbox"/> Tavern/Bar	<input checked="" type="checkbox"/> Dining Room w/Beer and Wine Only	<input type="checkbox"/> Packaged Liquor	<input type="checkbox"/> Dining Room w/Hard Liquor	<input type="checkbox"/> Combo (On-Premise & Pkg)	<input type="checkbox"/> General Wholesale
<input type="checkbox"/> Catering	<input type="checkbox"/> Additional Wet Bars _____	Will there be an Interim Management Agreement?			

16 List number of slot machines (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 <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 <u>Yes</u>	Has a Special Use Permit been obtained for this business location
	Will you be installing any outdoor signs <u>Yes</u>	Are there any existing signs of the property <u>No</u>
	Will there be any outside storage (if yes, please explain items being stored and how being screened) <u>No</u>	
	Will any commercial vehicles be used for this business (if yes, please describe size, type, and location of storage) <u>No</u>	
	Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business <u>No</u>	

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
	<ul style="list-style-type: none"> • 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 <u>Gidara Kovetz</u> Date <u>10/16/14</u>

FEE STRUCTURE		FEE	LICENSE TOTAL FEES	
Business License Fee		<u>638.5</u>	Business License Annual Fee:	<u>195.70</u>
Square Footage		<u>32.25</u>	Business License Pro-rated Fee:	<u>33.26</u> NOV-DEC 14
Number of Employees	<u>4</u>	<u>24.60</u>	Business License Application/Update Fee:	<u>25.00</u>
Health Fee	<u>50 seats</u>	<u>75.00</u>	Liquor License Annual Fee:	<u>[600.00]</u>
Number of Rental Units			Liquor License Pro-rated Fee:	
Number of Coin Operated Machines			Liquor License Application Fee:	<u>500.00</u>
Number of Slot Machines			Liquor License Investigation Fee:	<u>500.00</u>
TOTAL FEES DUE: <u>1278.96</u>			Gaming License Quarterly Fee:	
Payment Type	<u>VISA</u>		Gaming License Application Fee:	
Received By	<u>SU</u>	Date	Fictitious Name Fee:	<u>0</u>
Date Applicant Fingerprinted		By	Health Pro-Inspection Fee:	<u>25.00</u>
		File #		

Memorandum

TO: Carson City Liquor and Entertainment Board

FROM: Carson City Health and Human Services

DATE: November 18, 2014

RE: Liquor License – Siam Classic Thai Cuisine, LLC Liquor License



On November 7, 2014 an advisory inspection of Siam Classic Thai Cuisine, located at 4250 Cochise St., was conducted. At the time of inspection the premises met CCHHS standards and received liquor license application approval for bottled beer and wine. Please contact CCHHS with any questions or concerns.

Phone: (775)887-2190

Fax: (775)887-2248

Dustin Boothe 
Environmental Health Program Manager

Becky W. Purkey
Environmental Health Specialist II 

Copied:
Lena Reseck, Business License