

**Carson City
Agenda Report**

Date Submitted: January 27, 2015

Agenda Date Requested: February 5, 2015

Time Requested: 10 minutes

To: Liquor and Entertainment Board

From: Community Development - Business License Division

Subject Title: For possible action to approve Timothy Morrissey as the liquor manager for Carson Nugget, Inc. (Liquor License #15-27165) located at 507 N. Carson St. (Lena Reseck)

Staff Summary: All liquor license requests are to be reviewed by the Liquor Board per CCMC 4.13. Carson Nugget, Inc. is appointing a new liquor manager. 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 Timothy Morrissey as the liquor manager for Carson Nugget, Inc. (Liquor License #15-27165) located at 507 N. Carson St.

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

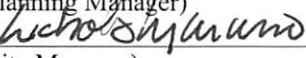
Prepared By: Lena Reseck, Senior Permit Technician

Reviewed By:



(Planning Manager)

Date: 1.23.15



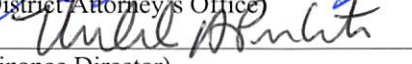
(City Manager)

Date: 1/23/15



(District Attorney's Office)

Date: 1/27/15



(Finance Director)

Date: 1/27/15

Board Action Taken:

Motion: _____

1) _____

Aye/Nay

2) _____

(Vote Recorded By)



CARSON CITY LICENSE APPLICATION

Business License #:

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

15-27165
Submittal Date: 1-8-2015

1	<input type="checkbox"/> New Business	<input type="checkbox"/> Change of Location/Mailing	<input type="checkbox"/> Change of Name	<input checked="" type="checkbox"/> Change of Corporate Officer	<input type="checkbox"/> Other
2	Type of License(s)	<input 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	Carson Nugget, Inc.			5	Business Opening Date	March 1954	
6	Business Name				7	EIN #	89-0094601	
8	Business Address	507 N Carson St	City	Carson City	State	NV	Zip Code 89701	
9	Mailing Address	Same	City		State		Zip Code	
10	Corporate Phone	892-1626	Business Phone		Cellular Phone		Business Fax	
11	E-mail Address	Tmorrissey@nugget.com			Business Website			ccnugget.com

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

Last, First MI	Percent Owned	Title	Date of Birth	
MORRISSEY TIMOTHY J	100%		2-22-78	
Residence Address (Street)	City, State, Zip	Residence Telephone		
3055 SUSI LERN DR	RENO NV 89509			
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 <input type="checkbox"/> Off-Site	Contact Phone Number		
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

Casino w/ Food & Bar / New Liquor manager

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 type="checkbox"/> Dining Room w/Hard Liquor	<input checked="" 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 <i>Yes</i>	Has a Special Use Permit been obtained for this business location <i>no</i>
	Will you be installing any outdoor signs <i>no</i>	Are there any existing signs of the property <i>Yes</i>
	Will there be any outside storage (If yes, please explain items being stored and how being screened) <i>no</i>	
	Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage) <i>Parking lot</i>	
	Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business	

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  Date <i>1/5/15</i>

FEE STRUCTURE	FEE	LICENSE TOTAL FEES
Business License Fee		Business License Annual Fee:
Square Footage		Business License Pro-rated Fee:
Number of Employees		Business License Application/Update Fee:
Health Fee		Liquor License Annual Fee:
Number of Rental Units		Liquor License Pro-rated Fee:
Number of Coin Operated Machines		Liquor License Application Fee:
Number of Slot Machines		Liquor License Investigation Fee: <i>500⁰⁰</i>
TOTAL FEES DUE: <i>500⁰⁰</i>		Gaming License Quarterly Fee:
Payment Type <i>check # 5955</i>		Gaming License Application Fee:
Received By <i>SU</i>	Date <i>1-8-2015</i>	Fictitious Name Fee:
Date Applicant Fingerprinted	By	File #
		Health Pre-Inspection Fee: