Carson City Agenda Report

Date Submitted: February 24, 2015 Agenda Date Requested: March 5, 2015 Time Requested: 10 minutes To: Liquor and Entertainment Board From: Community Development - Business License Division Subject Title: For possible action to approve Pissamai Sungkasit Harry 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 Ordinance Formal Action/Motion Other (Specify) **Does This Action Require A Business Impact Statement:** () Yes (X) No Recommended Board Action: I move to approve Pissamai Sungkasit Harry 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

Supporting Material: 1) Carson City Liquor License Application

2) Deny

2) Carson City Health and Human Services Inspection Report

3) Carson City Sheriff's Office Background Investigation

Board Action Report - Liquor License Harry – Siam Classic Thai Cuisine, LLC. March 5, 2015 Page 2

Prepared By: Lena Reseck, Senior Permit Technici	ian	
Reviewed By: (Planning Manager) (City Manager) (District Attorney's Office) (Finance Director)	Date: $\frac{2}{24/15}$ Date: $\frac{2}{24/15}$ Date: $\frac{2}{24/15}$	1/15
Board Action Taken:		
Motion:	1)	Aye/Nay
(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 Submittal Date ☐ Change of Corporate Officer □ Other ☐ Change of Name New Business ☐ Change of Location/Mailing ☐ Gaming □ Liquor Type of License(s) ☐ Business ☐ Short-Term ☐ Limited Liability Company □ Non-Profit ☐ Sole Proprietor □ Corporation □ Partnership Type of Entity **Business Opening Date** 01 EIN# Business Name (DBA) 6 State Mailing Address **Business Fax** Cellular Phone Corporate Phone **Business Phone** (745)2 10 Business Website E-mail Address notmai 12 Owner(s), Manager(s), or other Principal(s) attach additional pages if required Date of Birth Percent Owned Last, First, MI 12/05 apa Kreck 100 Residence Telephone Residence Address (Street) (775) 291-669 aysor 1881 Quai Date of Birth Title Percent Owned Last, First, MI Residence Telephone City, State, Zip Residence Address (Street) Date of Birth Title Percent Owned Last, First, MI Residence Telephone City, State, Zip Residence Address (Street) On-Site on-Site 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 Describe in detail the activity of your business seats Restaurar Type of Liquor License Applying for (If applicable) ☐ Combo (On-Premise ☐ Dining Room w/Hard Dining Room w/Beer and ☐ General Wholesale E □ Packaged ☐ Tavern/Bar & Pkg) Liquor Wine Only Liquor Will there be an Interim Management Agreement? 15 ☐ Additional Wet Bars ☐ Catering List number of table games (If applicable) 16 List number of slot machines (If applicable) □ Craps □ 1 cent □ Multi ☐ Race Book □ Roulette □ 5 cent □ Poker ☐ Twenty-One ☐ Sports Book □ 25 cent ☐ Mega Buck □ Poker □ Keno □ 1.00 If this application is for a change of business name, location, or ownership, list the previous name, address, and owner below I am not subject to a court order for the support of a child 18 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

٣	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					
Information	Is your business lo	_	is type of business	Has a Special Use Permit been obtained for this business location		
	Will you be installing any outdoor signs Ve S		ns	Are there any existing signs of the property \mathcal{O}		
neons	Will there be any outside storage (If yes, please explain items being stored and how being screened)					
Miscellaneous	Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage)					
M	Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business $\mathcal{N}_{\mathcal{O}}$					
I, the undersigned understand that I cannot operate my business until my license is actually issued by this office indicating approval by all city departments						
Rules and Regulations		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.				
ules ar	•	Any exception to any of the above is considered a violation of the Carson City Municipal Code and is subject to citation				
Ä	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 10/16/14					
FEE STRUCTURE FEE		FEE	LICENSE TOTAL FEES			
Bus	Business License Fee (0385		<i>(</i> 1385	Business License Annual Fee: 1951		
Squ	Square Footage 32,25		32,25	Business License Pro-rated Fee: 33.36 NW-DC 14		
Nu	Number of Employees A 24.60		24.60	Business License Application/Update Fee 5,00		
Health Fee 50 Seats 75,00 L			75,00	Liquor License Annual Fee:		

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Business License Fee	6385	Business License Annual Fee: 195,70
Square Footage	32.25	Business License Pro-rated Fee: 33,26 NW-DC 14
Number of Employees 4	24.60	Business License Application/Update Feg 5,0
Health Fee SV Scat	75.00	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:
TOTAL FEES DUE:	18.96	Gaming License Quarterly Fee:
Payment Type \\SA	511.10-14	Gaming License Application Fee:
Received By	Date (0)0304	Fictitious Name Fee:
Date Applicant Fingerprinted	By File#	Health Pre-Inspection Fee:
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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 November7, 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