Carson City Agenda Report

Date Submitted: June 23, 2015	Agenda Date Requested: July 2, 2015 Time Requested: 10 minutes
To: Liquor and Entertainment Board	
From: Community Development - Business Lic	eense Division
	Lea Mejia as the liquor manager for Lake Tahoe 6) located at 302 N. Carson St. (Lena Reseck,
Staff Summary: All liquor license requests are 4.13. Lea Mejia is replacing the previous liquor	to be reviewed by the Liquor Board per CCMC 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 app Tahoe Brewing Co, LLC. (Liquor License #16-3	rove Lea Mejia as the liquor manager for Lake 30216) located at 302 N. Carson St.
Explanation for Recommended Board Actional liquor licenses pursuant to CCMC 4.13(1).	: The Liquor Board has the authority to approve
Applicable Statute, Code, Policy, Rule or Reg	gulation: CCMC 4.13
Fiscal Impact: N/A	
Explanation of Impact: N/A	
Funding Source: N/A	
Alternatives: 1) Refer back to the Business Li 2) Deny	cense Division, or
Supporting Material: 1) Carson City Liquor 2) Carson City Sheriff	License Application 's Office Background Investigation

Board Action Report - Liquor License Mejia – Lake Tahoe Brewing Co LLC July 2, 2015 Page 2

Prepared By: Lena Reseck, Senior Permit Technicia	an	
Reviewed By:		
(Planning Manager) (City Manager) (District Attorney's Office) (Finance Director)		Date: $6.23.15$ Date: $6.23.15$ Date: $6/23/15$ Date: $6/23/15$
Board Action Taken:		
Motion:	1)	Aye/Nay
(Vote Recorded By)		

	CARSON CITY LICENSE APPLICATION			Business License #:	2. ~	,
	Please type or print in black ink; Incomplete or illegible appli			10-	5001	6
	not be accepted. Appl	ications must bear	an original signature	Submittal Date: (0-9-20)		15
□ New I	Business Change of Location/Mailing		C Change of Name	☐ Change of Corporate Officer ☐ ☐		□ Other
2 Type of L	Type of License(s)		☐ Short-Term	☐ Gaming ☐ Lk		🗅 Liquor
3 Type of Entity	C Sole Proprietor	C Corporation	☐ Partnership	☐ Limited Liability Company ☐ Non-P		□ Non-Profit
Entity Name	Vo Tahop P	mandina (TOLLC	Business Opening Date		
Business Name (DI	BA)			EIN#	····	
Business Address	M Carco		CITY OUSING HELL	State / /	Zip Code	470
8	US IV CUISSI	7	City	State Zip Code		-1 10 1
Corporate Phone	Business Phor	ie I I com	Cellular Phone	Business Fax		
() E-mail Address		16655	450 - 8266 Business Website			
1 (40,00) VO	ve tance velya	<u>)M</u>	CLYP TO VIO	Welk Com		
2 Owner(s), Manage Last, First, MI	r(s), or other Principal(s) attach	edditional pages if rec Percent Owned	juired Title	Date of Birth	 	
Me 10	I Lea J.	OY.	PHEMERICA) Marga	1.		
Residence Address		1 corB	City, State, Zip	AND A GALLO	Residence Tele	phone 150:1826
Last, First, MI	immurling m	Percent Owned	Title	Date of Birth	SSN	SO. 8 LUG
				<u> </u>	Desidence Tale	
Residence Address	(Street)		City, State, Zip		Residence Tele	pnone
Last, First, MI		Percent Owned	Title	Date of Birth	SSN	
Residence Address	Residence Address (Street)			City, State, Zip Residence Telephone		
Manager/Liquor N	lanager 11 1 2 1 C		70n-Site	Contact Phone		/// / / 0
Residence Address	(Street)		☐ Off-Site City, State, Zip	1075)2	150-1	52610
1222	LA WANN KAN KAN KA		Conditionally.	NV 81460		
Pursuant to NRS	244.33507 and 42 U.S.C. Sec.	66, you are required er or not you have fa	to provide your social secur	ity number on the applic ons or warrant relating t	cation for a lice to a proceeding	nse, permit, or to determine
the paternity of a	child or to establish or enforce	an obligation for the	e support of a child or you a	re in arrears in the paym	ent for the sup	port of one or
	the activity of your business	11110 C	HOURD. TIME	Poll IS	BUPL	ud
We ger	ve food beli	wive 's	11000 , IN	. 1,000	0.00	
	icense Applying for (If applical	ole)	· · · · · · · · · · · · · · · · · · ·			
☐ Tavern/Bar	Rining Room w/Beer and Wine Only	☐ Packaged Liquor	Dining Room w/Hard	☐ Combo (On-Premise & Pkg)	🛭 Gener	al Wholesale
Catering	☐ Additional Wet Bars	<u></u>	Will there be an Interim M	anagement Agreement?		
List number of sl	ot machines (If applicable)	 	List number of table games	(If applicable)	<u> </u>	
□ 1 cent	<u> </u>	, , , , , , , , , , , , , , , , , , , 	□ Craps	C Baccarat		
□ 5 cent □ Poker		☐ Roulette ☐ Race Book ☐				
□ 25 cent □ 1.00	□ Mega Buci	k	☐ Twenty-One ☐ Sports Book ☐ Keno ☐ Poker			
	is for a change of business name,	location, or ownershi	p, list the previous name, addr	ess, and owner below	•	
o	I am not subfi	ect to a court order fo	r the support of a child	· · · · · · · · · · · · · · · · · · ·		
8	I am subject t	o a court order for th	e support of one or more child gency enforcing the order for t	ren and am in compliance	with a plan ap	proved by the
Check One		•				
I am subject to a court order for the support of one or more children and am <i>not in compliance</i> with a plan approved District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to orde						nt to order

	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			
matic	Is your business location zoned for this type of business	Has a Special Use Permit been obtained for this business location		
Infor	Will you be installing any outdoor signs	Are there any existing signs of the property		
neous	Will there be any outside storage (If yes, please explain items being stored and how being screened)			
scella) · · · · · · · · · · · · · · · · · ·			
W	Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business			

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

- 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 at 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

Rules and Regulations

Date

06/09/2015

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 Stot Machines		Liquor License Investigation Fee:
TOTAL FEES DUE:	Ω	Gaming License Quarterly Fee:
Payment Type	174	Gaming License Application Fee:
Received By	Date /0-9-15	Fictitious Name Fee:
Date Applicant Fingerprinted	By File#	Health Pre-Inspection Fee: