

**Carson City
Agenda Report**

Date Submitted: November 10, 2015

Agenda Date Requested: November 19, 2015

Time Requested: 10 minutes

To: Liquor and Entertainment Board

From: Community Development - Business License Division

Subject Title: For Possible Action: To approve Yvette Barrett as the liquor manager for C.C. Mystique, Inc. dba Mystique Restaurant & Lounge (Liquor License #16-31044) located at 318 N. Carson St. (Lena Reseck, lreseck@carson.org)

Staff Summary: All liquor license requests are to be reviewed by the Liquor Board per CCMC 4.13. C.C. Mystique Restaurant & Lounge is applying for a full liquor license. 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 Yvette Barrett as the liquor manager for C.C. Mystique, Inc. dba Mystique Restaurant & Lounge (Liquor License #16-31044) located at 318 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 Health and Human Services Inspection Report
3) Carson City Sheriff's Office Background Investigation

Prepared By: Lena Reseck, Senior Permit Technician

Reviewed By:



(Planning Manager)


(City Manager)


(District Attorney's Office)


(Finance Director)

Date: 11-9-15
Date: 11/9/15
Date: 11/9/15
Date: 11/9/15

Board Action Taken:

Motion: _____

1) _____ Aye/Nay
2) _____

(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

Business License #: 15 - 31349

Liq Lic. # - 16 - 31044

Submittal Date: 7/30/15

<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 checked="" type="checkbox"/> Business	<input type="checkbox"/> Short-Term	<input type="checkbox"/> Gaming	<input checked="" type="checkbox"/> Liquor	
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
Entity Name C.C. MYSTIQUE INC.		Business Opening Date Nov 2015			
Business Name (DBA) MYSTIQUE Restaurants/Lounge		EIN # 47-5103662			
Business Address 318 N. Carson St	City Carson City	State Nevada	Zip Code 89701		
Mailing Address 318 N. Carson St	City Carson City	State Nevada	Zip Code 89701		
Corporate Phone	Business Phone Suite 214	Cellular Phone 775-790-5589	Business Fax		
E-mail Address ccmystique@gmail.com		Business Website			

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

Last, First, MI Barrett, Yvette, M	Percent Owned 100%	Title President	Date of Birth 7-26-1966	Residence Telephone 775-461-0871
Residence Address (Street) 2560 Fieldcrest Dr		City, State, Zip Carson City, NV 89701		SSN
Last, First, MI	Percent Owned	Title	Date of Birth	Residence Telephone
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 Yvette Barrett		<input checked="" type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	Contact Phone Number 775-790-5589	
Residence Address (Street) 2560 Fieldcrest Dr		City, State, Zip Carson City, NV 89701		

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
Restaurant, bar, lounge

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 type="checkbox"/> Catering	<input checked="" type="checkbox"/> Additional Wet Bars 1		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"/> Race Book	<input type="checkbox"/> Sports Book
<input type="checkbox"/> 5 cent	<input type="checkbox"/> Poker	<input type="checkbox"/> Roulette	<input type="checkbox"/> Race Book	<input type="checkbox"/> Sports Book	<input type="checkbox"/> Poker
<input type="checkbox"/> 25 cent	<input type="checkbox"/> Mega Buck	<input type="checkbox"/> Twenty-One	<input type="checkbox"/> Keno	<input type="checkbox"/> Poker	
<input type="checkbox"/> 1.00					

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
	Will you be installing any outdoor signs Yes at a later date	Are there any existing signs of the property NO
	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	

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>Yvette Barrett</u> Date <u>9/30/15</u>

FEE STRUCTURE		FEE	LICENSE TOTAL FEES
Business License Fee		63.85	Business License Annual Fee:
Square Footage 4000			Business License Pro-rated Fee: 146.90
Number of Employees 12			Business License Application/Update Fee: 25.00
Health Fee BA 6.0 Dwelling \$1			Liquor License Annual Fee:
Number of Rental Units			Liquor License Pro-rated Fee:
Number of Coin Operated Machines			Liquor License Application Fee: 1000
Number of Slot Machines			Liquor License Investigation Fee: 500
TOTAL FEES DUE: 1146.90			Gaming License Quarterly Fee:
Payment Type cash			Gaming License Application Fee:
Received By Rweck	Date 9/30/15		Fictitious Name Fee: 20.00
Date Applicant Fingerprinted	By	File #	Health Pre-Inspection Fee: 25.00



CARSON CITY, NEVADA
CONSOLIDATED MUNICIPALITY AND STATE CAPITAL

Memorandum

To: Carson City Liquor and Entertainment Board
From: Carson City Health and Human Services (CCHHS)
Date: October 20, 2015
Re: Liquor License- Mystique Restaurant & Lounge

On October 8, 2015 an advisory inspection of Mystique Restaurant & Lounge, located at 318 N. Carson St., was conducted.

Our approval is based on the following conditions being met:

- Bar located near the restrooms need to meet all applicable requirements of Nevada Administrative Code 446, including but not limited to, a hand sink, a three (3) compartment sink for ware washing, and smooth and cleanable surfaces.
- A pre operational inspection.
- A menu submitted prior to public operation, for review; so that a food preparation review can be conducted.

Please contact CCHHS with any questions or concerns.

Phone: (775) 887-2190

Dustin Boothe, MPH, REHS
Disease Prevention and Control Manager

Carson City Health & Human Services

900 East Long Street • Carson City, Nevada 89706 • (775) 887-2190 • Hearing Impaired-Use 711

Clinical Services (775) 887-2195 Fax: (775) 887-2192	Public Health Preparedness (775) 887-2190 Fax: (775) 887-2248	Human Services (775) 887-2110 Fax: (775) 887-2539	Disease Control & Prevention (775) 887-2190 Fax: (775) 887-2248	Chronic Disease Prevention & Health Promotion (775) 887-2190 Fax: (775) 887-2248
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