Carson City Agenda Report

Date Submitted: November 10, 2015 Agenda Date Requested: November 19, 2015 Time Requested: 10 minutes Liquor and Entertainment Board To: From: Community Development - Business License Division Subject Title: For Possible Action: To approve Dalbir Singh as the liquor manager for Bhavneet Corporation dba One Stop Food Mart (Liquor License #16-30841) located at 3150 E. Nye Ln. (Lena Reseck, lreseck@carson.org) Staff Summary: All liquor license requests are to be reviewed by the Liquor and Entertainment Board per CCMC 4.13. Bhavneet Corporation dba One Stop Food Mart is applying for a packaged liquor license. Tenant Improvement plans have been submitted for review for a building permit. Staff is recommending approval. Type of Action Requested: ☐ Resolution Ordinance ☐ Resolution ☐ Formal Action/Motion Other (Specify) Does This Action Require A Business Impact Statement: () Yes (X) No Recommended Board Action: I move to approve Dalbir Singh as the liquor manager for Bhavneet Corporation dba One Stop Food Mart (Liquor License #16-30841) located at 3150 E. Nye Ln. 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

Board Action Report - Liquor License Singh – One Stop Food Mart November 19, 2015 Page 2

Prepared By: Lena Reseck, Senior Permit Technic	cian	
Reviewed By: (Planning Manager) (City Manager) (District Attorney's Office) (Finance Director)	Date:	
Board Action Taken: Motion:	1) Aye/Nay 2)	
(Vote Recorded By)		

11416-30841

<u>.</u>		CARS	ON CITY	LICENSE AF	PLICATION	Business License #:		
		Please type or p	Please type or print in black ink; Incomplete or illegible applications will Submitted Date: Submitted Date:			44 =		
		not be accepted. Applications must bear an original signature						74)
I	New I	lusiness	☐ Change of	Location/Mailing	☐ Change of Name	☐ Change of Corpor		□ Other
2	Type of L	icense(s)	01	Business	☐ Short-Term	□ Gaming		3 Liquor
	Type of Entity	C Sole Pro	prietor	K Corporation	O Partnership	☐ Limited Liability		□ Non-Profit
4	_			ORATION		Business Opening Date SEP 15 ' 2015		
6	Business Name (D)	ba) one s	TOP FO	OD MART		FEIN# 41 - 332 - 4090		
8	Business Address	3150 E.	NYE L	. N	City CARSON	State NV Zip Code 89706		
		3150 E . A			City CARSON	State NV	Zip Code 89	706
10	Corporate Phone		Business Phone	82-1300	Cellular Phone (775) 315- 7	928 Business Fax		
	E-mail Address	1		ahoo. Com	Business Website			
	Owner(s), Manage	r(s), or other Princ	cipal(s) attach a	dditional pages if req	uired			
	Lest, First, MI			Percent Owned	PRESIDENT	Date of Birth 06-10-1971		
	SINGH :	(Street)		<u> </u>	City, State, Zip		Residence Tele	phone
		EGE PAR	KWAY /	11/# 18	CARBON CITY	NV . 89706	(<i>775) - 3</i> ssn	15-7920
	Last, First, MI			Percent Owned	Title	Date of Birth	2214	
	Residence Address	(Street) N	A	· · · · · · · · · · · · · · · · · · ·	City, State, Zip		Residence Tele	phone
	Last, First, MI	NI	4	Percent Owned	Title	Date of Birth	SSN	
	Residence Address			<u> </u>	City, State, Zip		Residence Tele	phone
	Manager/Liquor l	Manager DAL	BIR S	INGH	□ On-Site ☐ Off-Site	Contact Phone (775)		28
	Residence Addres		104	V07 T 18	City, State, Zlp	N CITY A	W 80	1706
	Pursuant to NRS	LEGE PA 244.33507 and 42	U.S.C. Sec. 60	66, vou are required	to provide your social secur	ity number on the appli	cation for a lice	ense, permit, or
	Pursuant to NRS 244.33507 and 42 U.S.C. Séc. 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 subpoens 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 detai	the activity of yo	our business	CONVENIEN	CE STORE W	TH FOOD, LI	QUOR W	INE BEER
	1			GROCERIE	:S	, , , , ,		,
	Type of Liquor I	icense Applying						
14	E Tavern/Bar	Dining Room Wine	n w/Beer and	Packaged Liquor	Dining Room w/Hard Liquor	□ Combo (On-Premise & Pkg)	🗆 Gener	al Wholesale
15	□ Catering	□ Additi	onal Wet Bars		Will there be an Interim M	anagement Agreement?		
16	List number of s	ot machines (If a	pplicable)		List number of table games			
	1 cent		□ Multi		☐ Craps	☐ Baccarat ☐ Race Book		
	□ 5 cent □ 25 cent	-	□ Poker □ Mega Buci		□ Twenty-One	☐ Sports Book		
	□ 1,00 <u> </u>		<u>-</u>		☐ Keno	Poker	=	
17	If this application is for a change of business name, location, or ownership, list the previous name, address, and owner below							
18					or the support of a child			
	Check One		I am subject t District Attor	o a court order for the ney or other public a	e support of one or more child gency enforcing the order for (ren and am <i>in complianc</i> the repayment of the amo	e with a plan a unt owed pursu	pproved by the ant to order
			I am subject t District Attor	o a court order for the ney or other public a	ne support of one or more chik gency enforcing the order for	ren and am <i>not in compli</i> the repayment of the amo	ance with a pla unt owed pursu	n approved by the ant to order

mation	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	
Info	Will you be installing any outdoor signs YES	Are there any existing signs of the property YES	
Miscellaneous	Will there be any outside storage (If yes, please explain items being stored and how being screened)		
	Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage)		
	Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business **NONE***		

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 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

Rules and Regulations

Dalhar	Simb
	8

Date

1-30-15

FEE	LICENSE TOTAL FEES
63.85	Business License Annual Fee: 18340
32,25	Business License Pro-rated Fee: (60, 52 S4) - DC
1 230	Business Litense Application/Update Fee: 25.10
7500	Liquor License Annual Fee;
NONE	Liquor License Pro-rated Fee:
NONE	Liquor License Application Fee:
	Liquor License Investigation Fee: 00,000
5 0	Gaming Liceuse Quarterly Fee:
io40	Gaming License Application Fee:
Date 7-30-2015	Fictitious Name Fee: 20,00
By File#	Health Pre-Inspection Fee:
	(3.85 -32.25 1 2.30 75.00 NONE NONE NONE S2 Date 7-30-2015



■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: November 5, 2015

Liquor License- One Stop Foodmart Re:

On October 27, 2015 construction plans for Once Stop Foodmart located at 3150 e. Nye Ln. were submitted for review. The premises depicted on the construction plans met the minimal standards for the sale of packaged beer, wine and liquor.

Our approval is based on the following conditions being met:

A pre operational inspection is conducted prior to opening.

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

(775) 887-2195 Fax: (775) 887-2192

Clinical Services Public Health Preparedness (775) 887-2190 Fax: (775) 887-2248

Human Services (775) 887-2110 Fax: (775) 887-2539

Prevention (775) 887-2190 Fax: (775) 887-2248

Disease Control & Chronic Disease Prevention & Health Promotion (775) 887-2190 Fax: (775) 887-2248