



# STAFF REPORT

**Report To:** Liquor and Entertainment Board

**Meeting Date:** February 4, 2016

**Staff Contact:** Lena Reseck, lreseck@carson.org

**Agenda Title:** For Possible Action: To approve Scott Blazek as the liquor manager for Breakthru Beverage Nevada Reno, LLC (Liquor License #16-31210) located at 100 Distribution Dr., Sparks, NV.

**Staff Summary:** All liquor license requests are to be reviewed by the Liquor and Entertainment Board per CCMC 4.13. Breakthru Beverage Nevada Reno, LLC is applying for a general wholesale license. Staff is recommending approval.

**Agenda Action:** Formal Action/Motion

**Time Requested:** 10 minutes

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## **Proposed Motion**

I move to approve Scott Blazek as the liquor manager for Breakthru Beverage Nevada Reno, LLC (Liquor License #16-31210) located at 100 Distribution Dr., Sparks, NV.

## **Board's Strategic Goal**

N/A

## **Previous Action**

N/A

## **Background/Issues & Analysis**

N/A

## **Applicable Statute, Code, Policy, Rule or Regulation**

CCMC 4.13

## **Financial Information**

Is there a fiscal impact?  Yes  No

If yes, account name/number:

Is it currently budgeted?  Yes  No

Explanation of Fiscal Impact:

## **Alternatives**

Refer back to the Business License Division or Deny

**Board Action Taken:**

Motion: \_\_\_\_\_

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_

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

Business License #: LL# 16-31210  
BL# 16-31468  
Submittal Date: 2/28/2015

1  New Business  Change of Location/Mailing  Change of Name  Change of Corporate Officer  Other  
2 Type of License(s)  Business  Short-Term  Gaming  Liquor  
3 Type of Entity  Sole Proprietor  Corporation  Partnership  Limited Liability Company  Non-Profit

4 Entity Name Breakthru Beverage Nevada Reno, LLC  
5 Business Opening Date 1-1-2016  
6 Business Name (DBA) -  
7 EIN # 38-3983070

8 Business Address 100 Distribution Dr. City Sparks State NV Zip Code 89441

9 Mailing Address 100 Distribution Dr. City Sparks State NV Zip Code 89441

10 Corporate Phone 775-331-3400 Business Phone 775-331-3400 Cellular Phone 203-803-0425 Business Fax 775-353-3369

11 E-mail Address scott.blazek@wrtzbev.com Business Website

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

12 Last, First, MI SEE ATTACHED 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  
Last, First, MI Percent Owned Title Date of Birth SSN  
Residence Address (Street) City, State, Zip Residence Telephone

Manager/Liquor Manager Scott Blazek  On-Site  Off-Site Contact Phone Number 702-240-9050

Residence Address (Street) 1405 Saintsbury Drive City, State, Zip Las Vegas, Nevada 89144

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  
Wholesale distribution of alcoholic beverages

Type of Liquor License Applying for (If applicable)

14  Tavern/Bar  Dining Room w/Beer and Wine Only  Packaged Liquor  Dining Room w/Hard Liquor  Combo (On-Premise & Pkg)  General Wholesale

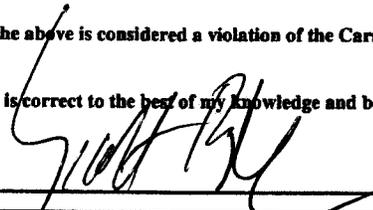
15  Catering  Additional Wet Bars Will there be an Interim Management Agreement? NO

16 List number of slot machines (If applicable) List number of table games (If applicable)  
 1 cent  Multi  Craps  Baccarat  
 5 cent  Poker  Roulette  Race Book  
 25 cent  Mega Buck  Twenty-One  Sports Book  
 1.00  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 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 N/A	Has a Special Use Permit been obtained for this business location
	Will you be installing any outdoor signs	Are there any existing signs of the property
	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	

Rules and Regulations	<p>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</p> <ul style="list-style-type: none"> <li>• If any changes are made after completing said license application this office must be notified immediately and an updated is required.</li> <li>• 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.</li> <li>• 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.</li> <li>• Any exception to any of the above is considered a violation of the Carson City Municipal Code and is subject to citation.</li> </ul> <p>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.</p>
	<p>Applicant's Signature <u></u> Date <u>November 24, 2015</u></p>

FEE STRUCTURE	FEE	LICENSE TOTAL FEES
Business License Fee		Business License Annual Fee: 79.90
Square Footage		Business License Pro-rated Fee: <del>79.90</del>
Number of Employees		Business License Application/Update Fee:
Health Fee		Liquor License Annual Fee: 800.00
Number of Rental Units		Liquor License Pro-rated Fee: <del>800.00</del>
Number of Coin Operated Machines		Liquor License Application Fee: 1000.00
Number of Slot Machines		Liquor License Investigation Fee: 500.00
TOTAL FEES DUE: 1604.90		Gaming License Quarterly Fee:
Payment Type		Gaming License Application Fee:
Received By <u>SW</u>	Date <u>12/29/15</u>	Fictitious Name Fee:
Date Applicant Fingerprinted	By	File #
		Health Pre-Inspection Fee: