

Report To: Liquor and Entertainment Board **Meeting Date:** April 6, 2017

Staff Contact: Lena Reseck, lreseck@carson.org

Agenda Title: For Possible Action: To approve Kurt Brown as the liquor manager for Capital Beverages, Inc.

(Liquor License #17-3962) located at 2333 Fairview Drive. (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. Capital Beverages, Inc. is updating the license with a new liquor manager. The applicant has met the requirements per CCMC 4.13.125 and staff is recommending approval.

Agenda Action: Formal Action/Motion **Time Requested:** 10 minutes

Proposed Motion

I move to approve Kurt Brown as the liquor manager for Capital Beverages, Inc. (Liquor License #17-3962) located at 2333 Fairview Drive.

Board's Strategic Goal

Safety

Previous Action

N/A

Background/Issues & Analysis

Kurt Brown is replacing Joe Brown as the liquor manager. No Health Report is required for this update.

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:

<u>Alternatives</u>

Refer back to the Business License Division or Deny

Motion:	1)	Aye/Nay
	/	
(Vote Recorded By)		

Staff Report Page 2

16	4	CARSON CITY LICENSE APPLICATION				Business License #:	6-127	
(3	Place type or print in block inky focomplete o			illacible applications will	11-17-3	962		
1	Please type or print in black ink; Incomplete or not be accepted. Applications must bear					Submittal Date: 2 15 2017		117
	□ New I	Business	☐ Change of	Location/Mailing	☐ Change of Name	☐ Change of Corpo		√Other
2	Type of L	icense(s)		Business	□ Short-Term	Gamin		Liquor
3	Type of Entity	□ Sole Pro		√Corporation	Partnership	☐ Limited Liability		Non-Profit
=3	Entity Name			4	Tarthership	Business Open		- Non-Tront
4			Bevera	ges In	C.	5		
6	Business Name (DI	BA) ¹		0	7 EIN #			
				City Carson City	State	V Zip Code 89701		
8	Mailing Address	0	wwa	w GC	City	State	Zip Code	1101
9	Community Discount	Same	D Di		Z+ H- (C/A D)	lw p		
10	Corporate Phone	-2122	Business Phone		Cellular Phone	Business Fax		
11	E-mail Address	Beown (att.n	et	Business Website			
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	Laner Manager (i	f a malliandalay	Liquor Manager (if applicable)			□ On-Site Contact Phone Number □ Off-Site □ 75 - 220-7447		
	Liquor Manager (il		n		☐ Off-Site	775.	220-7	447
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on	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					
rmati	ls your business location zoned for this type of business	Has a Special Use Permit been obtained for this business location				
s Info	Will you be installing any outdoor signs	Are there any existing signs of the property				
aneon	Will there be any outside storage (If yes, please explain items being stored and how being screened)					
iscell	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 h	azardous materials that will be used for this business				
	I, the undersigned understand that I cannot operate my business unti	I my license is actually issued by this office indicating approval by all necessary				

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

Date

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 Slot Machines			Liquor License Investigation Fee:		
TOTAL FEES DUE:			Gaming License Quarterly Fee:		
Payment Type			Gaming License Application Fee:		
Received By Date			Fictitious Name Fee:		
Date Applicant Fingerprinted	Ву	File #	Health Pre-Inspection Fee:		