

# **STAFF REPORT**

**Report To:** Liquor and Entertainment Board

Meeting Date: April 20, 2017

Staff Contact: Lena Reseck, lreseck@carson.org

**Agenda Title:** For Possible Action: To approve David Stern as the liquor manager for Battle Born Restaurant Group LLC dba Battle Born Social (Liquor License #17-31787) located at 318 N. Carson St. (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. Battle Born Restaurant Group LLC dba Battle Born Social is applying for an on-premise and packaged liquor license. 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 David Stern as the liquor manager for Battle Born Restaurant Group LLC dba Battle Born Social (Liquor License #17-31787) located at 318 N. Carson St. subject to the following condition that the liquor manager must complete a server training course acceptable to the Sheriff's Office within 120 days, pursuant to CCMC 4.13.060.

Board's Strategic Goal Safety

Previous Action N/A

## **Background/Issues & Analysis**

Battle Born Restaurant Group LLC dba Battle Born Social is opening a restaurant that will feature small plate dining with a full bar and tasting room for liquor and wine.

## 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
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Explanation of Fiscal Impact:

<u>Alternatives</u> Refer back to the Business License Division or Deny

Board Action Taken: Motion:	1) 2)	Aye/Nay

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(Vote Recorded By)

	and diff. the	CARSON CITY LICENSE APPLICATION			Business License #: 17-32147			
6					Liquor lic # 17-31787			
1					in original signature	Submittal Date: 3	19/201-	
1	New Business		Change of Name	Change of Corporate Officer		Other		
2	Type of L	icense(s)	01	Business	Short-Term	Gaming		Liquor
3	Type of Entity	🗆 Sole Pro	oprietor	Corporation	<b>Partnership</b>	Limited Liability Company		🗆 Non-Profit
	Entity Name					Business Opening Date		
4	Battle Business Name (D	Born Rest	CIURCIN-	Group LLC	5 EIN#			ril II
6	Battle	Born Sac	al		7			
8	Business Address	318 N	Casor	Street	City CorsonCity	State N.V Zip Code 89701		
	Mailing Address					State	Zip Code 8947	
9	1567 Corporate Phone	storiate.	<b>Business Phone</b>	e	Cellular Phone	Business Fax	0740	~
10	(775)691	1-8730	(775)(	91-8730	775.691-99	19		
11	E-mail Address	teche (	WE.CO	m	Business Website			
12	Owner(s), Manage			dditional pages if re		100-00		
	Last, First, MI	DAVID	France	1_	Percent Owned 33°70	Title	owner	
	<b>Residence</b> Address	(Street)			City, State, Zip		Residence Tele	
		ioria wa	4		Minclen N.V. 8 Percent Owned	59423	775.60	11-9919
	Last, First, MI	Theresa	Ann		33%		owner	0
	Residence Address	(Street)			City, State, Zip Residence Telephone		phone	
	ISLOG 9 Last, First, MI	Ioria Wi	ay		Minden N.V 89423 775-691-8730 Percent Owned Title			11-8730
	Sec. 23	DAVID 1	Iclam.		33% Co-owner			
	Residence Address (Street)			City, State, Zip Minden N. V. 89493 Residence Telephone 175.301-4/04				
	ISG9 C Liquor Manager (i	fapplicable)	<u>у</u>		ZOn-Site Contact Phone Number			
	CY/		Ernant		0ff-Site 775 691-9919			
	Residence Address	(Street) lovia way	,		City, State, Zip MINDEN NV 89423			
13	Describe in detail				I I I I I I I I I I I I I I I I I I I	01723		
	Restaur	ant WIF	unbar i	and tastiv	ng room where	teil for Liqu	uor and	Wine
					-1	U		
	Type of Liquor L	icense Applying f	or (If applicab	le)				
14	🛛 Tavern/Bar	Dining Roon Wirle		□□ Packaged Liquor	Dining Room w/Hard Liquor	Combo (On-Premise & Pkg)	e 🗌 🗆 Gener	al Wholesale
	Catering	🛛 Additio	onal Wet Bars		Will there be an Interim M	lanagement Agreement	?	
16	List number of slot machines (If applicable)		List number of table games (If applicable)					
10		nf		□ Craps □ Baccarat				
	5 cent        9 5 cent        9 7		Roulette Race Book					
	□ 25 cent □ 1.00	cent Mega Buck		Twenty-One Description   Keno Description				
17	If this application	is for a change of l	business name,	location, or ownershi	p, list the previous name, add	ress, and owner below:		

_	9 m m			
	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,			
l a				
ttion				
1.5	Is your business location zoned for this type of business	Has a Special Use Permit been obtained for this business location		
Ë	NES			
ΙĘ	<u>yes</u>			
Info	Will you be installing any outdoor signs	Are there any existing signs of the property		
18	NO	VES		
		<b>y</b> =		
ous	Will there be any outside storage (If yes, please explain items being stored and how being screened)			
6				
a l				
	Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage)			
Įğ	NO			
E:				
IΣ	Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business			
	INIA			

	I, the undersigne city departments	ed understand that I cannot operate my business until my license is actually issued by this office indicating approval by all necessary						
SU	٠	If any changes are made after completing said license application this office must be notified immediately and an updated is required.						
Regulations	•	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.						
and Reg	•	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.						
Rules a		Any exception to any of the above is considered a violation of the Carson City Municipal Code and is subject to citation.						
۳	I hereby certify (	hat 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 Sig	nature Date <u>3/3/17</u>						

FEE STRUCTURE	FEE	LICENSE TOTAL FEES
Business License Fee	63.85	Business License Annual Fee: 470,80
Square Footage 3000	64.70	Business License Pro-rated Fee: 353.
Number of Employees 15	92.25	Business License Application/Update Fee: 25
Health Fee 2×125	250	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: 500
TOTAL FEES DUE: 192	3.11	Gaming License Quarterly Fee:
Payment Type MIC 44	IDOJ	Gaming License Application Fee:
Received By Realeck	Date 3 9 1 -	Fictitious Name Fee:
Date Applicant Fingerprinted	By File #	Health Pre-Inspection Fee:



## **■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: April 4, 2017

Re: Liquor License- Battle Born Social

On March 31, 2017 construction plans for Battle Born Social located at 318 N. Carson St, were approved. The premises depicted on the construction plans met the minimal standards for a full service bar.

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