Item#4C

City of Carson City Agenda Report

Date Submitted: March 23, 2007	Agenda Date Requested: April 5, 2007 Time Requested: 5 minutes Liquor Board
To: Mayor and Liquor Board	
From: Business License Department	
	quor license for Save Mart Supermarkets, Inc. dba President and liquor manager, located at 3620 North
Staff Summary: Per CCMC 4.13 all liquor reques	sts are to be brought before the liquor board.
	rdinance hther (Specify)
Does This Action Require A Business Impact S	Statement: () Yes (X_) No
· · · · · · · · · · · · · · · · · · ·	pprove a packaged liquor license for Save Mar with Mr. Robert Piccinini as President and liquo Carson City.
Save Mart Supermarkets Inc. dba Albertson's Sto	Mr. Robert Piccinini, President and liquor manager or Fre #194, is requesting approval of a packaged liquo Orth Carson Street. All departmental approvals have Fror your review.
Applicable Statue, Code, Policy, Rule or Regul	ation: CCMC 4.13
Fiscal Impact: \$1000 for original new fee, \$500 l	nvestigation, \$200 for a quarterly fee
Explanation of Impact:	
Funding Source:	
Alternatives: Do not approve or approve with con	iditions
Supporting Material: Application and Sheriff's su	ımmary
Prepared By: Christine Burchiel, Business Licens	e Technician

Reviewed By: Alund June	Date: 3-27-07
(Department Head)	Date: 3-27-07
(City Manager) Willamic Bruketta	Date: 3-21-07
(District Attorney)	Date: 3/27/7
(Finance Director)	
Board Action Taken:	
Motion: 1)	Aye/Nay
	The state of the s
(Vote Recorded By)	

CITY OF CARSON CITY LIQUOR LICENSE APPLICATION BL# 24159

201 N Carson Street #5 Carson City, NV 89701 (775)887-2092 #2 fax (775)887-2102

		and the second s	
Full Name of Applicant(s) Rol	bert M Piccini	Account # O	t-24(6
Corporate Name Sove Mo	xt Supermarke	<u> </u>	
Fictitious Firm Name Same		Date Filed N/A	
Business Location 3600 NC	orson St Conson	C. L. NU Business Phone 2095	74620
		Home Phone (2003) 5	
and the second of the second o		lanagement Agreement on file? <u>W\$</u>	
	ing dia menggalang dia periodikan Penggalang dia penggalang dia penggalang	a gamma a sa	
	.iquor m w/full liquor	☐ Dining room w/beer & wine ☐ Wholesaler ☐ Manufacturer	
Packaged b	eet or wille	☐ Additional Bar(s) @ location (#) ☐ Combo Packaged & on-premise liquor license	
List ALL owners, partners or corp	orate afficare below		
The state of the s		and marin Coorse	2.0 /
ar e m. e	4.55	IFORD AVE, MODESTO, CA 95350	4.54
RONALD RIESENBECK C	FO 1800 FAMOIT	and AUE, MORESO, CA 95,50 20	9577/60
Maria & Tiela	Address	Dhana il	and the second
MICHAEL SILVEIRA, SECT	TY 1800 STANDIA	000 AUG, MODESTO CA95350 20	5577/60
Name & Title	Address	Phone #	
Have you ever obtained a liquor lice Non-Refundable Investigation			LICENSE
Original New Application F	ee \$ <u>/,000.00</u>	Date Paid	
Liquor License Per Quarter	\$ 200.0	⊃ Date Paid	
	nsferred to any other person o	t to the best of my knowledge and belief. I understa or to any other location, without prior approval by 15) days or longer for processing. Date Nov 26, 2006	
		Date	
Signature		Date	
Witnessed by:		Date "/28/06	
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	(775)887-2020 x	· ·	
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ate Applicant Phigerprinted			
Date Applicant Fingerprinted Date Applicant Fingerprinted	By	File #	