



108 E. Proctor Street
Carson City, Nevada 89701
(775) 887-2105
Hearing Impaired: 711

MEMORANDUM

Liquor License Hearing - Wednesday, February 2, 2022, 1:30 pm

TO: The Hearings Officer
FROM: Natalie Kiel, Business License Specialist
DATE: January 26, 2022

AGENDA ITEM 4.B: For Possible Action: Discussion and possible action regarding an application to approve a Dining Room with Beer and Wine Liquor License (LIQUOR-006824-2021) with Manpreet Kaur as the liquor manager for Flavors of India located at 240 E Winnie Lane, Carson City, NV 89706.

Recommendation: To approve an application for a Dining Room with Beer and Wine Liquor License with Manpreet Kaur as the liquor manager for Manpreet Kaur dba Flavors of India at 240 E Winnie Lane, Carson City, NV 89706 subject to the following approval:

1. The applicant must sign a sworn affidavit consistent with Carson City Municipal Code (CCMC) 4.13.060 regarding a server training course.
2. Alcohol sold must come from approved sources.
3. The owner of the liquor license must maintain on the premises, evidence of employee server training certification for all employees that serve or sell alcohol.
4. Approval is for bottled beer and wine only at this point.
5. Additional changes must be reviewed by Health Department.

Per CCMC 4.13, all liquor license requests are to be reviewed by the Hearings Officer. The Hearings Officer may grant or deny the application for a liquor license or place conditions on a license to ensure compliance with the Municipal Code.

The subject request is for Manpreet Kaur dba Flavors of India to have a Dining Room with Beer and Wine Liquor license with Manpreet Kaur as the liquor manager. The restaurant is located at 240 E Winnie Lane, business license number BL-006421-2021.

The Sheriff's office did an inspection of said location on 01/21/2022 and conducted a background check and did not find any disqualifying information based on CCMC 4.13.125.

This request has been reviewed by the Health Department. The Health Department inspected the premises and is recommending approval based on the above conditions being met.



Ken Furlong
Sheriff

911 E. Musser St.
Carson City, NV 89701

775-887-2500
Hearing Impaired: 711
Fax: 775-887-2026

To: Liquor Board

From: Carson City Sheriff's Office

Re: Liquor License Application – Liquor Manager
Flavors Of India
Kaur, Manpreet

The Sheriff's Office has conducted a background investigation on the above applicant as the liquor manager for Flavors of India.

- **Background of premises:** Flavors of India originally opened for business on Carson Street in 2017 and closed for business during the pandemic. The restaurant then reopened for business on Basque Way and was operated by the applicant's mother. Flavors of India has now relocated to 240 E Winnie Lane and Manpreet Kaur is reapplying as the liquor manager as her license expired after not renewing it.
- **Financial arrangements:** The investment of approximately \$50,000 is being financed by the applicant's mother, Daljit (Dolly) Kaur but the business is owned by Manpreet Kaur. There is a monthly lease on the property of \$2400.
- **Method of operation:** Flavors of India is open for carry out and dine in service and is run by the applicant's mother, Dolly Kaur, on a full-time basis, The applicant, Manpreet Kaur resides in and is employed in San Jose, CA but stated she would be at the restaurant a few times a week. The restaurant plans on offering sales of beer and wine in the dining room. It should be noted that the applicant's mother is financing the restaurant for her daughter and I was informed that at their previous locations the applicants participation stopped and her mother solely ran the business. I asked Daljit (Dolly) Kaur why she did not apply herself as the liquor manager and she stated she did not know she could, but if necessary, she would.
- **Results of background:** The background for Manpreet Kaur, consisting of DMV records, local agency checks, Nevada criminal history query, credit report and fingerprint responses did not find any disqualifying information based on CCMC 4.13.125.

By: Elizabeth Martin Date January 4th 2022
Elizabeth Martin
Administrative Assistant
Investigations Division

Recommend Approval

Do Not Recommend Approval

Ken Furlong Date 1/10/22
Ken Furlong
Sheriff



CARSON CITY, NEVADA
CONSOLIDATED MUNICIPALITY AND STATE CAPITAL

Memorandum

To: Liquor Board Hearing Officer

From: Carson City Health and Human Services (CCHHS)

Date: January 19, 2022

Re: Liquor License- Flavors of India

On January 19, 2022 an additional review of Flavors of India at 240 W. Winnie Lane was completed.

Our approval is based on the following conditions being met:

- Approval is for bottled beer and wine only as this point.
- Additional changes must be reviewed by Health Department and some improvements to facility may be required.
- Serving of alcohol must come from approved sources.

Please contact CCHHS with any questions or concerns.

Phone: (775) 283-7225

Brendon Gibb
Environmental Health Specialist

Carson City Health & Human Services

900 East Long Street • Carson City, Nevada 89706 • (775) 887-2190 • Hearing Impaired-Use 711

Clinical Services (775) 887-2195 Fax: (775) 887-2192	Public Health Preparedness (775) 887-2190 Fax: (775) 887-2248	Human Services (775) 887-2110 Fax: (775) 887-2539	Disease Control & Prevention (775) 887-2190 Fax: (775) 887-2248	Chronic Disease Prevention & Health Promotion (775) 887-2190 Fax: (775) 887-2248
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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

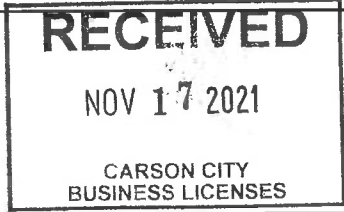
Bus License #: *LFQVOR-00682*
Liquor License #: *18-32236*
Submittal Date: *11.17.21*

1	<input type="checkbox"/> New Business	<input checked="" type="checkbox"/> Change of Location/Mailing	<input type="checkbox"/> Change of Name	<input type="checkbox"/> Change of Corporate Officer	<input type="checkbox"/> Other	
2	Type of License(s)		<input checked="" type="checkbox"/> Business	<input type="checkbox"/> Short-Term	<input type="checkbox"/> Gaming	<input type="checkbox"/> Liquor
3	Type of Entity	<input checked="" type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Non-Profit
4	Entity Name <i>MANPREET KAUR</i>			5	Business Opening Date <i>11/1/21</i>	
6	Business Name (DBA) <i>Flavors of India</i>			7	EIN #	
8	Business Address <i>240 E. Winnie Lane</i>		City <i>Carson City</i>	State <i>NV</i>	Zip Code <i>89706</i>	
9	Mailing Address <i>2645 HIGHWOOD DR</i>		City <i>SAN JOSE</i>	State <i>CA</i>	Zip Code <i>95116</i>	
10	Corporate Phone <i>408-644-1483</i>	Business Phone	Cellular Phone	Business Fax		
11	E-mail Address <i>MJSTS1026@yahoo.com</i>		Business Website			

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

Last, First, MI <i>MANPREET KAUR</i>	Percent Owned <i>100%</i>	Title <i>owner</i>
Residence Address (Street) <i>2645 HIGHWOOD DR</i>	City, State, Zip <i>SAN JOSE, CA 95116</i>	Residence Telephone <i>408-644-1483</i>
Last, First, MI	Percent Owned	Title
Residence Address (Street)	City, State, Zip	Residence Telephone
Last, First, MI	Percent Owned	Title
Residence Address (Street)	City, State, Zip	Residence Telephone
Liquor Manager (if applicable) <i>MANPREET KAUR</i>	<input checked="" type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	Contact Phone Number <i>408-644-1483</i>
Residence Address (Street)	City, State, Zip	

13 Describe in detail the activity of your business
Indian restaurant



14 Type of Liquor License Applying for (If applicable)

<input type="checkbox"/> Tavern/Bar	<input checked="" type="checkbox"/> Dining Room w/Beer and Wine Only	<input type="checkbox"/> Packaged Liquor	<input type="checkbox"/> Dining Room w/Hard Liquor	<input type="checkbox"/> Combo (On-Premise & Pkg)	<input type="checkbox"/> General Wholesale
<input type="checkbox"/> Catering	<input type="checkbox"/> Additional Wet Bars		Will there be an Interim Management Agreement? <i>NO</i>		

16 List number of slot machines (If applicable)

<input type="checkbox"/> 1 cent	<input type="checkbox"/> Multi
<input type="checkbox"/> 5 cent	<input type="checkbox"/> Poker
<input type="checkbox"/> 25 cent	<input type="checkbox"/> Mega Buck
<input type="checkbox"/> 1.00	

List number of table games (If applicable)

<input type="checkbox"/> Craps	<input type="checkbox"/> Baccarat
<input type="checkbox"/> Roulette	<input type="checkbox"/> Race Book
<input type="checkbox"/> Twenty-One	<input type="checkbox"/> Sports Book
<input type="checkbox"/> Keno	<input type="checkbox"/> Poker

17 If this application is for a change of business name, location, or ownership, list the previous name, address, and owner below:

*1105 S. CARSON ST
Carson City, NV 89701*

*Change of location
Re-apply for LL*

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 <i>Yes</i>	Has a Special Use Permit been obtained for this business location <i>NO</i>
	Will you be installing any outdoor signs <i>No</i>	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) <i>NO</i>	
	Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage) <i>NO</i>	
	Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business <i>N/A</i>	

Rules and Regulations	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
	<ul style="list-style-type: none"> • 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 <u><i>[Signature]</i></u> Date <u><i>11/17/2021</i></u>

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	By	File #
		Health Pre-Inspection Fee:

PAID

NOV 17 2021

CARSON CITY BUSINESS LICENSES