



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

MEMORANDUM

Liquor License Hearing - Wednesday, June 22, 2022, 1:30pm

TO: The Hearings Officer

FROM: Natalie Kiel, Business License Specialist

DATE: June 15, 2022

AGENDA ITEM 4.C: For Possible Action: Discussion and possible action

regarding an application for a Tavern/Bar Liquor License (LIQUOR-007283-2022) with David Scott Tate as the liquor manager for Woody's Entertainment, Inc. dba Lucky Tavern located at 444 E William Street #8, Carson City, NV 89701.

Recommendation: To approve an application for a Tavern/Bar Liquor License with David Scott Tate as the liquor manager for Woody's Entertainment, Inc. dba Lucky Tavern at 444 E William Street #8, Carson City, NV 89701 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 holder of the liquor license must maintain on the premises, evidence of employee server training certification for all employees that serve or sell alcohol.
- 4. Adherence to FDA Food Code and NAC 446 for operational purposes.

Per Carson City Municipal Code (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 Woody's Entertainment, Inc. dba Lucky Tavern to have a Tavern/Bar Liquor License with David Scott Tate as the liquor manager.

A background investigation by the Sheriff's Office was not required as Woody's Entertainment, Inc. has an additional liquor license for another location in Carson City, per CCMC 4.13.070.

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.





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The Hearings Officer

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CARSON C. Y LICENSE APPLICATION

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TUNOR-007283.2023

Incomplete or illegible applications will not be accepted.

Applications must bear an original signature

Submittal Date:

3-30-02

New Business	Change of Pl	ysical Location	D Other					
Type of Entity:	Proprietor [Corporation	☐ Partnership	Limited Liabil	lity Company	☐ Non-Profit		
Required: NV State Buiness License Number			Specialty License Number	Business	Opening Date in C	arson City		
Entity Name	body 5	En	ectainmen	+ In	16_			
HICKY TANGGO								
44	e.		A	City, State, Zip	City,	11/18976		
Mailing Address		City, State, Zip	647,1	W18976 W, 89763				
Email Address			fabile l'hane	T-4004	Dusiness Phone			
Scottate anua					880	8720		
First, Middle, Last	Owner(s), Man	ager(s), or other	Principal(s) attach addition	nl pages:if required				
Davia	1 5004	+ Tax	e					
Residence Address (Street) 2390 Rimo	e View	14	City, State, Zip RENO/ NV	89519	Residence Teleph	17-2700		
First, Middle, Last								
						i		
Residence Address (Street)			City, State, Zip		Residence Teleph	one		
		Describe in deta	til the activity of your busine	ess;				
casino à	bursta	veca	With 15 5	10+ mai	chines	**		
hesticited	gaming	literse	With 15 5					
	If this application	is for a change to	your business, please note t	he information belo	w.			
OFFICE USE ONLY								

	Miscellane	ous Information								
M I	Commercial Location Square Footage:	1967		Number of Full-T Employees/		6				
S C	Attach a list of the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business									
	Health Dep	artment								
	Do you provide or manufacture food, beverages, or supplements for eating or drinking to the public?									
П		Yes								
E A	Do you provide seat	rovide seating for customers? How many people can be scaled?								
Ĺ		Yes, 15 a + bot, 15 a + 5 lot s								
T	Do you provide tatte	u provide tattooing, permanent make up, microblading or piercing within your establishment?								
H	Do man acceptate a *	<u> 10</u>								
D	Do you provide swimming pools, hot tubs, hot springs, childcare or lodging at your establishment?									
E	Daes your establish	es your establishment utilize a septic system or well?								
P T	Selfic System									
	Please comp	plete the following if a			License					
	Liquor Manager - F	irst, Mil, Last 😞	^		Em	ail Address				
L		David.	200++	1ate	Scottage &	Juga P+1/1520512				
I	Residence Address (Street)		City, State, Zip		Contact Number				
Q U	2340	Range Vieu	1(+	Keno, 1	N 89519	15-423-3/01				
O R	Tavern/Bar	Dining Room w/Beer and Wine Only	☐ Packaged Liquor	Dining Room w/Hard Liquor	Combo (On- Premise & Pkg)	General Wholesale				
œ.	Catering	Additional Wet Bars	1750	Will there be an Interim Ma	nagement Agreement?					
G	List number of slot machines (If applicable)			List number of table games (If applicable)						
Ā	1 cent			☐ Craps ☐ Baccarat ☐						
M ,	5 cent	— Multi_		Roulette						
וֹא	25 cent	Poker		☐ Twenty-One						
G	1,00	— ☐ Mega Buel	·	☐ Keno	☐ Poker					
	I, the undersigned understands that I cannot operate my business until my license is issued by Carson City indicating approval by all necessary city departments									
	If any changes are made after completing said license application the husiness license division must be notified immediately and an application 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 penaltics 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 Date 3 29/22									
		£ 3	PORT 1 A	re_						

Certificate of Business: Fictitious Firm Name	Please Print or Type						
The undersigned do hereby certify that Wood 'S Envertainment Inc							
(Name of Individual, corporation, partnership, or trust)							
located at HH F. Williams 5+ is conducting business in Carson City, (Street Address of Business or Residence)							
Nevada, under the fictitious name of Lucky Taveco (Fictitious Firm Name)							
and that said firm is composed of the following person(s) whose name(s) and address(es) are as follows: By signing below, I do solemnly affirm, under penalty of perjury, that all statements made in this document are true.							
1. David Start Tale Full Name and Title 2390 Range View Ct Street Address Hill Address, if different from above	Signature Date City, State, Zip City, State, Zip						
2 Full Name and Title	Signature Date						
Street Address	City, State, Zip						
Mailing Address, if different from above 3.	City, State, Zip						
Full Name and Title	Signature Date						
Street Address	City, State, Zip						
Mailing Address, if different from above	City, State, Zip						
	RECEIVED AND FILED 9.12.22 Date Deputy County Clerk						
Please provide the following details where verification of filing should be Shandy Hunter Ony of Phone Phone HI A CUSTY St. Mailing Address	775-882-8770 644 216						
Return to Carson City Business License, 108 E. Proctor St., Carson City, NV 89701 with \$25 filing fee							



■CARSON CITY, NEVADA■

CONSOLIDATED MUNICIPALITY AND STATE CAPITAL

Memorandum

To: Liquor Board Hearing Officer

From: Carson City Health and Human Services (CCHHS)

Date: August 3, 2021

Re: Liquor License- Lucky Tavern - BLR-2022-0235 and -0236, 444 E WILLIAM

ST #8 CARSON CITY, NV 89701

On June 2, 2022 a pre-opening inspection with Lucky Tavern Management was conducted.

Our approval is based on adherence to the FDA Food Code and NAC 446 for operational purposes.

Please contact CCHHS with any questions or concerns.

Phone: (775) 283-7227

Kandis Harvey Environmental Health Specialist

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