



CITY OF LODI

COUNCIL COMMUNICATION

AGENDA TITLE: Communications
Alcoholic Beverage Control License Applications

MEETING DATE: November 19, 1997

PREPARED BY: City Clerk

RECOMMENDED ACTION: No action - information only.

BACKGROUND INFORMATION: A copy of an application for Alcoholic Beverage Control License has been received from the State of California Department of Alcoholic Beverage Control for the following:

- a) Pargat Singh Gill to Santokh Kaur Gill, BJs, 548 South Sacramento Street, Lodi, On-Sale Beer and Wine, Person to Person Transfer. **Zoned M-2, Heavy Industrial.**
- b) Gertrud Schultze to Lori A. Smith and Raymond G. Smith, Gerties Place, 105 West Pine Street, Lodi, On-Sale General, Person to Person Transfer. **Zoned C-2, General Commercial.**

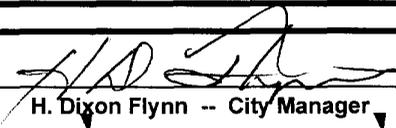
The zonings for these licenses are appropriate for this type of business.

FUNDING: None required.


Alice M. Reimche
City Clerk

Attachment

APPROVED: _____


H. Dixon Flynn -- City Manager

RECEIVED

97 OCT 27 AM 10:21



DROPPING PARTNER

YES NO

APPLICATION FOR ALCOHOL BEVERAGE LICENSE(S)

TO: ALICE H. REED
CITY CLERK
CITY OF LODI
Department of Alcoholic Beverage Control
31 East Channel Street, Room 168
P.O. Drawer 150
Stockton, CA 95201
(209) 948-7739

File Number.....336592
Receipt Number.....1160854
Geographical Code.....3902
Copies Mailed Date 10/23/97
Issued Date

DISTRICT SERVING LOCATION: STOCKTON
Name of Business: BJS
Location of Business:
Number and Street 548 S SACRAMENTO ST
City, State Zip Code LODI CA 95240
County SAN JOAQUIN
Is premise inside city limits? YES
If premise licensed:
Type of license
Transferor's names/license: GILL PARGAT SINGH 315516

Table with columns: License Type, Transaction Type, Fee Type, Master, Dup, Date, Fee. Row 1: 42 ON-SALE BEER AND W REDUCED FEE TRANSFER NA YES 0 OCT 23,1997 \$50.00. TOTAL \$50.00

Have you ever been convicted of a felony? NO
Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the Department pertaining to the Act? NO

Explain any "Yes" answer to the above questions on an attachment which shall be deemed part of this application.

Applicant agrees (a) that any manager employed in on-sale licensed premise will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

STATE OF CALIFORNIA County of SAN JOAQUIN Date OCT 23,1997

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is an applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing and knows the contents thereof and that each of the above statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant or applicant's business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filled with the Department or to gain or establish a preference to or for any creditor or transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

Applicant Name(s)
GILL SANTOKH KAUR

Applicant Signature(s)
SANTOKH KAUR GILL

RECEIVED

7 NOV -6 AM 10:17

ALICE H. REINHOLD
CITY CLERK
TO: CITY OF LODI



DROPPING PARTNER

YES ___ NO ___

APPLICATION FOR ALCOHOL BEVERAGE LICENSE(S)

Department of Alcoholic Beverage Control
31 East Channel Street, Room 168
P.O. Drawer 150
Stockton, CA 95201
(209) 948-7739

File Number.....336982
Receipt Number.....1162421
Geographical Code.....3902
Copies Mailed Date 11/5/97
Issued Date

DISTRICT SERVING LOCATION: **STOCKTON**
Name of Business: **GERTIES PLACE**
Location of Business:
Number and Street **105 W PINE ST**
City, State Zip Code **LODI CA 95240**
County **SAN JOAQUIN**
Is premise inside city limits? **YES**
If premise licensed:
Type of license
Transferor's names/license: **SCHULTZE GERTRUD 294695**

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
1. 48 ON-SALE GENERAL PU PERSON TO PERSON TRANS		P40	YES	0	NOV 05, 1997	\$1250.00 :
2. 48 ON-SALE GENERAL PU ANNUAL FEE		P40	YES	0	NOV 05, 1997	\$695.00 :
3. 30 TEMPORARY RETAIL P DUPLICATE		NA	NO	1	NOV 05, 1997	\$100.00 :
4. 48 ON-SALE GENERAL PU STATE FINGERPRINTS		NA	NO	2	NOV 05, 1997	\$78.00
TOTAL						\$2123.00

Have you ever been convicted of a felony? **NO** Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the Department pertaining to the Act? **NO**

Applicant agrees (a) that any manager employed in on-sale licensed premise will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

STATE OF CALIFORNIA County of **SAN JOAQUIN** Date **NOV 05, 1997**

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is an applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing and knows the contents thereof and that each of the above statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant or applicant's business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor or transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

Applicant Name(s) **SMITH LORI A**
SMITH RAYMOND G
Applicant Signature(s) *Lori A Smith*
Raymond G Smith