



CITY OF LODI

COUNCIL COMMUNICATION

AGENDA TITLE: Communications
Alcoholic Beverage Control License Applications

MEETING DATE: March 4, 1998

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) Don R. Griffith to Chanmony Buo and Phally Sap, Del Monte Club, 121 North Cherokee Lane, Lodi, On-Sale General, Person to Person Transfer. **This is zoned C-2, General Commercial.**
- b) Maria G. Martinez, El Rosal, 728 West Kettleman Lane, Lodi, On-Sale Beer and Wine, Original License. **This is zoned PD(15), Planned Development 15 - Commercial.**
- c) John A. Anagnos to Candy L. Jackson, Sports Shack, 1420 West Kettleman Lane, Suite L & M, Lodi, On-Sale General Eating Place, Person to Person Transfer. **This is zoned PD(15), Planned Development 15 - Commercial.**

The zonings for these licenses are appropriate for these types of businesses.

FUNDING: None required.

Alice M. Reimche
Alice M. Reimche
City Clerk

Attachment

APPROVED: _____

H. Dixon Flynn
H. Dixon Flynn -- City Manager



DROPPING PARTNER

YES ___ NO

RECEIVED

98 FEB 17 AM 10:06

APPLICATION FOR ALCOHOL BEVERAGE LICENSE(S)

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

File Number.....339845
Receipt Number.....1173243
Geographical Code.....3902
Copies Mailed Date 2/13/98
Issued Date

CITY CLERK
CITY OF LODI

DISTRICT SERVING LOCATION: STOCKTON
Name of Business: Del Monte Club
Location of Business: 121 N CHEROKEE LN
Lodi CA 95240
SAN JOAQUIN
Is premise inside city limits? YES
Mailing Address: 1105 PLEASANTWOOD CT
STOCKTON CA 95210
If premise licensed:
Type of license
Transferor's names/license: GRIFFITH DON R 236752

Table with columns: License Type, Transaction Type, Fee Type, Master, Dup, Date, Fee. Includes rows for ON-SALE GENERAL PU PERSON TO PERSON TRANS, ANNUAL FEE, STATE FINGERPRINTS, and TEMPORARY RETAIL P DUPLICATE. Total fee: \$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 FEB 13, 1998

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)

Applicant Signature(s)

BUO CHANMONY
SAP PHALLY

Handwritten signatures of Buo Chanmony and Sap Phally



DROPPING PARTNER

YES ___ NO ✓

APPLICATION FOR ALCOHOL BEVERAGE LICENSE(S)

TO:

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

File Number.....**339719**
Receipt Number.....**1172673**
Geographical Code.....**3902**
Copies Mailed Date **2/9/98**
Issued Date

RECEIVED
99 FEB 11 AM 10:26
ALISE A. FERROCHE
CITY CLERK
CITY OF LODI

DISTRICT SERVING LOCATION: **STOCKTON**
Name of Business: **EL ROSAL**
Location of Business:
Number and Street **728 W KETTLEMAN LN**
City, State Zip Code **LODI CA 95242**
County **SAN JOAQUIN**
Is premise inside city limits? **YES**
If premise licensed:
Type of license
Transferor's names/license:

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
1. 41 ON-SALE BEER AND W ORIGINAL		NA	YES	0	FEB 09,1998	\$300.00 :
2. 41 ON-SALE BEER AND W ANNUAL FEE		NA	YES	0	FEB 09,1998	\$205.00 :
3. 41 ON-SALE BEER AND W STATE FINGERPRINTS		NA	NO	1	FEB 09,1998	\$39.00
TOTAL						\$544.00

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 **FEB 09,1998**

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Applicant Name(s)

MARTINEZ MARIA G

Applicant Signature(s)



DROPPING PARTNER

YES ___ NO ___

APPLICATION FOR ALCOHOL BEVERAGE LICENSE(S)

TO:

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

File Number.....340284
Receipt Number.....1175227
Geographical Code.....3902
Copies Mailed Date 3/2/98
Issued Date

DISTRICT SERVING LOCATION: STOCKTON
Name of Business: SPORTS SHACK
Location of Business:
Number and Street 1420 W KETTLEMAN LN STES L & M
City, State Zip Code LODI CA 95242
County SAN JOAQUIN
Is premise inside city limits? YES
If premise licensed:
Type of license
Transferor's names/license: ANAGNOS JOHN A 317988

Vertical stamp: RECEIVED MAR 2 1998

Table with columns: License Type, Transaction Type, Fee Type, Master, Dup, Date, Fee. Rows include ON-SALE GENERAL EA PERSON TO PERSON TRANS, ANNUAL FEE, STATE FINGERPRINTS, and a TOTAL row.

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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.

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STATE OF CALIFORNIA County of SAN JOAQUIN Date MAR 02,1998
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) Applicant Signature(s)
DOMANOVICH MILAN SEE ATTACHED ABC-211 SIG FOR SIGNATURES
JACKSON CANDY L