



CITY OF LODI

COUNCIL COMMUNICATION

AGENDA TITLE: Communications
 Alcoholic Beverage Control License Applications

MEETING DATE: September 3, 1997

PREPARED BY: City Clerk

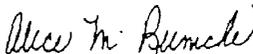
RECOMMENDED ACTION: No action - information only.

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) Me N' Ed's Pizza Parlor, Kettleman Lane & Lower Sacramento Road, Lodi, On-Sale Beer and Wine, Original License, **zoned C-S, Commercial Shopping**;
- b) Lidia F. and Otilia F. Gutierrez, Ritmos, 112 South Cherokee Lane, Lodi, On-Sale Beer and Wine, Original License, **zoned C-2, General Commercial**; and
- c) Kam Wing Dwan and Judy Chu Leung, Chef Wayne Restaurant, 429 West Lockeford Street, Lodi, On-Sale Beer and Wine, Person to Person Transfer, **zoned C-2, General Commercial**.

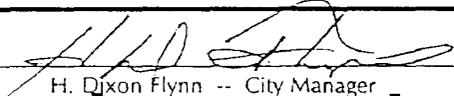
The zonings for these licenses are appropriate for this type of business.

FUNDING: None required.


Alice M. Reimche
City Clerk

Attachment

APPROVED: _____


H. Dixon Flynn -- City Manager



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.....334174
Receipt Number.....1149993
Geographical Code.....3902
Copies Mailed Date District to notify 8-19-97
Issued Date

DISTRICT SERVING LOCATION:

STOCKTON

Name of Business:

ME N ED'S PIZZA PARLOR

Location of Business:

Number and Street

KETTLEMAN LANE & LOWER SACRAMENTO RD SEC

City, State Zip Code

LODI CA 95242

County

SAN JOAQUIN

Is premise inside city limits?

YES

Mailing Address:

(If different from
premise address)

5701 N WEST AVE

FRESNO CA 93711

If premise licensed:

Type of license

Transferor's names/license:

Table with columns: License Type, Transaction Type, Fee Type, Master, Dup, Date, Fee. Includes rows for ON-SALE BEER AND W ORIGINAL and ANNUAL FEE, and a TOTAL row.

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? YES

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 AUG 12,1997

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)

Applicant Signature(s)

PIZZA WORLD SUPREME INC

see abc 211 sig



DROPPING PARTNER

YES ___ NO X

RECEIVED

97 AUG 25 AM 11:13

APPLICATION FOR ALCOHOL BEVERAGE LICENSE(S)

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

File Number.....334551
Receipt Number.....1151523
Geographical Code.....3902
Copies Mailed Date 8/22/97
Issued Date

DISTRICT SERVING LOCATION: STOCKTON
Name of Business: RITMOS
Location of Business:
Number and Street 112 S CHEROKEE LN
City, State Zip Code LODI CA 95240
County SAN JOAQUIN
Is premise inside city limits? YES
Mailing Address:
(If different from premise address) 836 S CENTRAL AVE
LODI CA 95240
If premise licensed:
Type of license
Transferor's names/license:

Table with columns: License Type, Transaction Type, Fee Type, Master, Dup, Date, Fee. Rows include ON-SALE BEER AND W ORIGINAL, ANNUAL FEE, and STATE FINGERPRINTS. Total fee: \$583.00

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

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 AUG 22,1997

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) GUTIERREZ LIDIA F
GUTIERREZ OTILIA F
Applicant Signature(s) Lidia Gutierrez Forcha
Otilia Gutierrez

RECEIVED

97 AUG 25 AM 11:13



DROPPING PARTNER

YES ___ NO

APPLICATION FOR ALCOHOL BEVERAGE LICENSE(S)

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

File Number.....334546, Receipt Number.....1151478, Geographical Code.....3902, Copies Mailed Date 8/22/97, Issued Date

DISTRICT SERVING LOCATION: STOCKTON, Name of Business: CHEF WAYNE RESTAURANT, Location of Business: 429 W LOCKEFORD ST, Lodi CA 95240, SAN JOAQUIN, Is premise inside city limits? YES, If premise licensed: Type of license, Transferor's names/license: CHEN ELAINE 311973

Table with columns: License Type, Transaction Type, Fee Type, Master, Dup, Date, Fee. Rows include ON-SALE BEER AND W PERSON TO PERSON TRANS, ON-SALE BEER AND W ANNUAL FEE, ON-SALE BEER AND W STATE FINGERPRINTS. Total fee: \$433.00

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 AUG 22,1997

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) KWAN KAM WING, LEUNG JUDY CHU. Applicant Signature(s) [Handwritten signatures]