



CITY OF LODI

COUNCIL COMMUNICATION

AGENDA TITLE: Communications (December 28, 1995 - January 10, 1996)

MEETING DATE: January 17, 1996

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) Walter and Hong Plattell to Inderjeet and Baljit Kang, Quik Stop Market #148, 205 West Lockeford Street, Lodi, Off-Sale Beer and Wine, Person to Person Transfer;
- b) Kenneth and Karen Paige, Lakewood Chevron, 236 North Ham Lane, Lodi, Off-Sale Beer and Wine, Original License;
- c) Beverly Vosburgh to Pargat Singh and Santokh Gill, B.J.'s, 548 South Sacramento Street, Lodi, On-Sale Beer and Wine, Person to Person Transfer; and
- d) Elizabeth Rodriques and Bruce Wickland, Richmaid Restaurant, 100 South Cherokee Lane, Lodi, On-Sale Beer and Wine, Original License.

205 West Lockeford and 100 South Cherokee Lane are both zoned C-2, General Commercial, 236 North Ham Lane is zoned C-1, Neighborhood Commercial, and 548 South Sacramento Street is zoned M-2, Heavy Industrial. These zonings are appropriate for these types of Alcoholic Beverage Control licenses.

FUNDING: None required.


Jennifer M. Perrin
City Clerk

Attachments

APPROVED: _____

H. Dixon Flynn -- City Manager



APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

TO:

Department of Alcoholic Beverage Control
31 East Channel
Stockton, CA 95202

File Number..... 315749
 Receipt Number..... 1067747
 Geographical Code..... 3902
 Copies Mailed Date 12-27-95
 Issued Date.....

DISTRICT SERVING LOCATION:

STOCKTON

Name of Business: Quik Stop Market #148
 Location of Business:
 Number and Street 205 W. Lockford
 City, State Zip Code Lodi, CA 95240
 County San Joaquin
 Is premise inside city limits? yes
 Mailing Address:
 (If different from premise address) PO Box 5745
 Fremont, CA 94537
 If premise licensed:
 Type of license Off Sale Beer & Wine
 Transferor's names/license: Walter R. Plattel/Hong Nga Plattel 20-277133

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
20	Person to Person					
TOTAL						\$

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? Temporary Suspensions and Fines of Class 20 & 21 licenses are on record

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 Date December 27, 1995

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)
Quik Stop Markets, Inc.

Inderjeet S. Kang
Baljit K. Kang

Applicant Signature(s).
 By: Larry A. Kranich
 Larry A. Kranich, President
 By: Inderjeet S. Kang
 Inderjeet Sp Kang
 By: Baljit K. Kang
 Baljit K. Kang



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.....**315697**
 Receipt Number.....**1067469**
 Geographical Code.....**3902**
 Copies Mailed Date *12-26-95*
 Issued Date

DISTRICT SERVING LOCATION:

STOCKTON

Name of Business:

LAKWOOD CHEVRON

Location of Business:

Number and Street

236 N HAM LN

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:

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
1. 20	OFF-SALE BEER AND ORIGINAL	NA	YES	0	DEC 26, 1995	\$100.00 :
2. 20	OFF-SALE BEER AND ANNUAL FEE	NA	YES	0	DEC 26, 1995	\$34.00 :
3. NA	NO LICENSE TYPE STATE FINGERPRINTS	NA	YES	0	DEC 26, 1995	\$78.00 :
TOTAL						\$212.00

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 **DEC 26, 1995**

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)

PAIGE KAREN E

Karen E. Paige

PAIGE KENNETH W

Kenneth W. Paige



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.....**315516**
 Receipt Number.....**1066826**
 Geographical Code.....**3902**
 Copies Mailed Date **12-18-95**
 Issued Date

DISTRICT SERVING LOCATION:

STOCKTON

Name of Business:

B.J.'S

Location of Business:

**548 S SACRAMENTO ST
 LODI CA 95240
 SAN JOAQUIN
 YES**

Number and Street

City, State Zip Code

County

Is premise inside city limits?

Mailing Address:

(If different from
 premise address)

**1932 ANDERSON DR
 LODI CA 95240**

If premise licensed:

Type of license

Transferor's names/license:

VOSBURGH BEVERLY 289115

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
1. 42 ON-SALE BEER AND W PERSON TO PERSON TRANS	NA	YES	0	DEC 18, 1995	\$150.00 :	
2. 42 ON-SALE BEER AND W ANNUAL FEE	NA	YES	0	DEC 18, 1995	\$205.00 :	
3. NA NO LICENSE TYPE STATE FINGERPRINTS	NA	YES	0	DEC 18, 1995	\$78.00 :	
TOTAL					\$433.00	

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

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 DEC 18, 1995

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)

GILL PARGAT SINGH <i>Pargat Singh Gill</i>
GILL SANTOKH KAURS <i>SANTOKH.K.GILL</i>



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.....**315807**
 Receipt Number.....**1068001**
 Geographical Code.....**3902**
 Copies Mailed Date *12-29-95*
 Issued Date

DISTRICT SERVING LOCATION:

STOCKTON

Name of Business:

RICHMAID RESTAURANT

Location of Business:

Number and Street
 City, State Zip Code
 County

**100 S CHEROKEE LN
 LODI CA 95240
 SAN JOAQUIN**

Is premise inside city limits?

Mailing Address:

(If different from
 premise address)

**658 ALICE RAE CR
 GALT CA 95632**

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	DEC 29,1995	\$300.00 :
2. 41 ON-SALE BEER AND W	ANNUAL FEE	NA	YES	0	DEC 29,1995	\$205.00 :
3. NA NO LICENSE TYPE	STATE FINGERPRINTS	NA	YES	0	DEC 29,1995	\$78.00 :
TOTAL						\$583.00

Have you ever been
 convicted of a felony? **NO**

Have you ever violated any provisions of the Alcoholic Beverage Control
 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 **DEC 29,1995**

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)

RODRIQUES ELIZABETH S

Elizabeth S. Rodriques

WICKLAND BRUCE E

Bruce E. Wickland