



CITY OF LODI

COUNCIL COMMUNICATION

AGENDA TITLE: Communications (July 11, 1996 - July 31, 1996)

MEETING DATE: August 7, 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) Elizabeth R. Montgomery to John and Lori Denigris, El Papagallo Mexican Restaurant, 1024 Victor Road, Lodi, On-Sale Beer and Wine, Person to Person Transfer; and
- b) John Maalouf to John and Mirna Maalouf and Marcel Mojalli, E & L Market, 844 South Central Avenue, Lodi, Off-Sale Beer and Wine, Person to Person Transfer.

1024 Victor Road is in an M-2, Heavy Industrial, zone and 844 South Central Avenue is in a C-1, Neighborhood Commercial, zone. These zonings are appropriate for these types of Alcoholic Beverage Control license.

FUNDING: None required.


Jennifer M. Perrin
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.....321904
Receipt Number.....1096809
Geographical Code.....3902
Copies Mailed Date 7/16/96
Issued Date

DISTRICT SERVING LOCATION:

STOCKTON

Name of Business:

El Papagallo Mexican Restaurant

Location of Business:

Number and Street
City, State Zip Code
County

1024 VICTOR RD
LODI CA 95240
SAN JOAQUIN
YES

Is premise inside city limits?

If premise licensed:

Type of license

Transferor's names/license:

MONTGOMERY ELIZABETH R 109319

Table with columns: License Type, Transaction Type, Fee Type, Master, Dup, Date, Fee. Rows include license fees and a total of \$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 JUL 16,1996

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) DENIGRIS JOHN D DENIGRIS LORI A
Applicant Signature(s) [Handwritten signatures]



DROPPING PARTNER

YES ___ NO

RECEIVED

JUL 24 PM 3:33

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.....**322132**
 Receipt Number.....**1097815**
 Geographical Code.....**3902**
 Copies Mailed Date **7/23/96**
 Issued Date

DISTRICT SERVING LOCATION: **STOCKTON**
 Name of Business: **E & L Market**
 Location of Business:
 Number and Street **844 S CENTRAL AVE**
 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: **MAALOUF JOHN 291664**

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
1. 20 OFF-SALE BEER AND	PERSON TO PERSON TRANS	NA	YES	0	JUL 23, 1996	\$50.00 :
2. 20 OFF-SALE BEER AND	ANNUAL FEE	NA	YES	0	JUL 23, 1996	\$34.00 :
3. NA NO LICENSE TYPE	STATE FINGERPRINTS	NA	YES	0	JUL 23, 1996	\$39.00 :
TOTAL						\$123.00

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 **JUL 23, 1996**

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)

MAALOUF JOHN *[Signature]*
MAALOUF MIRNA *[Signature]*
MOJALLI MARCEL *[Signature]*