



CITY OF LODI

COUNCIL COMMUNICATION

AGENDA TITLE: Communications (May 12, 1994 through May 25, 1994)

MEETING DATE: June 1, 1994

PREPARED BY: City Clerk

RECOMMENDED ACTION: No action - information only.

BACKGROUND INFORMATION: Copies of applications for Alcoholic Beverage Control License has been received from the State of California Department of Alcoholic Beverage Control for the following:

- a) Miguel and Ramon Guerrero, El Grullense #5, 117 North Sacramento Street, Lodi, On Sale Beer and Wine Eating Place, Original License.

117 North Sacramento Street is in a C-M, Light Industrial, zone. This is an appropriate zoning for this type of Alcoholic Beverage Control License.

FUNDING: None required.


Jennifer M. Ferrin
City Clerk

JMP

Attachment

APPROVED _____

THOMAS A. PETERSON
City Manager



CC-1

COPY

Do not detach—Return all copies

Do Not Write Above This Line—For Headquarters Office Only

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

1. TYPE(S) OF LICENSE(S)

FILE NO.

To: Department of Alcoholic Beverage Control
1901 Broadway
Sacramento, Calif. 95818 Stockton

(DISTRICT SERVING LOCATION) STOCKTON

RECEIVED

On Sale Beer & Wine
12 2nd St Place

RECEIPT NO. 642-113

GEOGRAPHICAL CODE 3902

Date Issued

Temp. Permit

The undersigned hereby applies for licenses described as follows:

DEWEY M. PERRINI

2. NAME(S) OF APPLICANT(S)

GUERRERO, Miguel/Ramon

Applied under Sec. 24044
Effective Date: Issuance

Effective Date:

3. TYPE(S) OF TRANSACTION(S)

FEE

LIC. TYPE

Original License

\$ 300.00

41

Renewal Fee

205.00

4. Name of Business

El Grullense #5

5. Location of Business—Number and Street

117 N. Sacramento St.

City and Zip Code
St. Lodi, 95240

County
San Joaquin

TOTAL \$ 505.00

6. If Premises Licensed, Show Type of License

40

7. Are Premises Inside City Limits?

Yes

8. Mailing Address (if different from 5)—Number and Street

Same

(Temp/Perm)

9. Have you ever been convicted of a felony?

NO

10. Have you ever violated any of the provisions of the Alcoholic Beverage Control Act or regulations of the Department pertaining to the Act?

11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.

12. Applicant agrees (a) that any manager employed in on-sale licensed premises 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.

13. STATE OF CALIFORNIA

County of San Joaquin Date 7-17-74

Under penalty of perjury, each person whose signature appears below, certifies and says: 1. He is the 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 application and knows the contents thereof and that each and all of the statements therein made are true; 3. that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' business to be conducted under the license(s) for which this application is made; (a) 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 of transferor or to defraud or injure any creditor of transferor; (b) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

14. APPLICANT SIGN HERE

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA

County of _____ Date _____

Under penalty of perjury, each person whose signature appears below, certifies and says: 1. He is the licensee, or an executive officer of the corporate licensee named in the foregoing transfer application, duly authorized to make this transfer application on its behalf; 2. that he hereby makes application to surrender all interest in the attached license(s) described below and to transfer same to the applicant and/or location indicated on the upper portion of this application form, if such transfer is approved by the Director; 3. 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 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 of transferor or to defraud or injure any creditor of transferor; 4. that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

16. Name(s) of Licensee(s)

17. Signature(s) of Licensee(s)

18. License Number(s)

19. Location

Number and Street

City and Zip Code

County

Do Not Write Below This Line; For Department Use Only

Attached: Recorded notice,
 Fiduciary papers,

OTHER: _____

COPIES MAILED _____

Renewal Fee of _____

Paid at _____

Office on _____

Receipt No _____