CITY OF LODI

COUNCIL COMMUNICATION

AGENDA TITLE: Communications (April 13, 1994 through April 26, 1994)

MEETING DATE: May 4, 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) Lucky Stores, Inc. Deleware, 530 West Lodi Avenue and 340 West Kettleman Lane, Lodi, Off-Sale General License, Person to Person Transfer; and

b) VFW Post 1968, 23 West Elm Street, Lodi, Veterans Club License, Premises to Premises Transfer.

530 West Lodi Avenue is in a C-1, Neighborhood Commercial, zone, 340 West Kettleman Lane is a C-S, Commercial Shopping, zone, and 23 West Elm Street is in a C-2, General Commercial, zone. These are appropriate zonings for these types of Alcoholic Beverage Control Licenses.

FUNDING: None required.

Jennifer M. Perrin
City Clerk

JMP

Attachment

APPROVED _____

THOMAS A PETERSON
City Manager

recycled paper

COPY Do not detach—Retain all copies

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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

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

Oakland for Stockton
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S)
21, Off-sale General

Applied under Sec. 24044 ☐
Effective Date: ISSUE

FILE NO.

RECEIPT NO. 1.92517

GEOGRAPHICAL CODE 3902

Date Issued

Temp. Permit 53738

Effective Date: 11/15/94

2. NAME(S) OF APPLICANT(S)

LUCKY STORES, INC. DELAWARE

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
BPU (2)	$ 48	21
per-to-per (2)	100	
renewal annual fee	1446	
TOTAL	$ 594	21

4. Name of Business
Lucky

5. Location of Business—Number and Street
530 W. Lodi Ave

City and Zip Code: Lodi 95240
County: San Joaquin

6. If Premises Licensed, Show Type of License 21, Off-sale General

7. Are Premises Inside City Limits? Yes

8. Mailing Address (if different from 5)—Number and Street
6303 Knott Ave., Buena Park, CA 90620-1158

(Temp) (Perm) 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? Yes

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

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 Alameda Date April 11, 1994

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 (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 an creditor of 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

14. APPLICANT SIGN HERE for LUCKY STORES, INC. DELAWARE

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA County of Alameda Date April 11, 1994

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)
Lucky Stores, Inc. Florida		[illegible]

19. Location Number and Street: 530 W. Lodi Ave. City and Zip Code: [illegible] County: San Joaquin

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

ABC 2[illegible] 82

COPY Do not detach—Return all copies

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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

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

Oakland for Stockton
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S): 21, Off-sale General

Applied under Sec. 24044 ☐
Effective Date: 1550C

FILE NO.
RECEIPT NO. 692817
GEOGRAPHICAL CODE 3902
Date Issued
Temp. Permit 3737
Effective Date: 4-15-94

2. NAME(S) OF APPLICANT(S): LUCKY STORES, INC. DELAWARE

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
BPU (2)	$ 45	21
per-to-per (74471 & 2)	40	
renewal [illegible]	[illegible]	
TOTAL	$ 574	21

4. Name of Business: Lucky

5. Location of Business—Number and Street: 340 W. Kettleman Lane

City and Zip Code: Lodi 95240
County: San Joaquin

6. If Premises Licensed, Show Type of License: 21, Off-sale General

7. Are Premises Inside City Limits? Yes

8. Mailing Address (if different from 5)—Number and Street: 6565 Knott Ave., Buena Park, CA 90620-1158 (Temp) (Perm) 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? Yes

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

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 Alameda Date April 11, 1994

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. 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 an creditor of 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.

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APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA County of Alameda Date April 11, 1994

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16. Name(s) of Licensee(s)	17. Signature(s) of Licensee(s)	18. License Number(s)
Lucky Stores, Inc. Delaware		

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

COPIES MAILED

Renewal Fee of | Paid at | Office on | Receipt No.

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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

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

Stockton
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S)

Veterans RECEIVED
94 APR 14 AM 8:10
[illegible]

Applied under Sec. 24044 ☐
Effective Date:

FILE NO.

RECEIPT NO. [illegible]

GEOGRAPHICAL CODE 3902

Date Issued

Temp. Permit

Effective Date:

2. NAME(S) OF APPLICANT(S)

V. F. W. POST 1968

William Hill Commander
Silas Henninger, Sr. Vice Commander
Dennis Araiza, Jr. Vice Commander
Bernard Krebsbach, Quartermaster

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
Prem to Prem	$ 100.00	52
Renewal Fee	398.00	52
TOTAL	$ 498.00	

4. Name of Business
V.F.W. Post 1968

5. Location of Business—Number and Street
23 W. Elm Street

City and Zip Code Lodi, 95240
County San Joaquin

6. If Premises Licensed, Show Type of License NO

7. Are Premises Inside City Limits? Yes

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

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?
NO

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 [illegible] Date [illegible]

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14. APPLICANT SIGN HERE [illegible]

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA County of [illegible] Date [illegible]

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16. Name(s) of Licensee(s)	17. Signature(s) of Licensee(s)	18. License Number(s)
V. F. W. POST Inc.	[illegible]	[illegible]

19. Location **Number and Street** **City and Zip Code** **County**
[illegible]

Do Not Write Below This Line; For Department Use Only

Attached: ☐ Recorded notice,
☐ Fiduciary papers,
☒ _____ COPIES MAILED _____
(OTHER)

☐ Renewal: Fee of _____ Paid at _____ Office on _____ Receipt No. _____

ABC 211 (1-82)