



CITY OF LODI

COUNCIL COMMUNICATION

AGENDA TITLE: Communications (August 10, 1994 through August 30, 1994)

MEETING DATE: September 7, 1994

PREPARED BY: City Clerk

RECOMMENDED ACTION: No action - information only.

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

- a) Jim Murdaca Food Service, Inc., Pietro's of Lodi, 317 E. Kettleman Lane, Lodi, Amended On Sale Beer and Wine Eating Place, Person to Person Transfer; and
- b) Ruchiporn and Surasak Kliengklom, A Taste of Thai, 116-A W. Turner Road, Lodi, On Sale Beer and Wine Eating Place, Original License.

317 East Kettleman Lane is zoned C-2, General Commercial. 116-A W. Turner Road is zoned P-D(17), Planned Development District #17. These are appropriate zonings for these types of Alcoholic Beverage Control licenses.

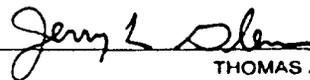
FUNDING: None required.


Jennifer M. Perrin
City Clerk

JMP

Attachments

APPROVED



THOMAS A. PETERSON
City Manager



COPY

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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)

RECEIVED
AUG 12 1997

AMENDED
On Sale Beer & Wine Eating

RECEIPT NO.

GEOGRAPHICAL
CODE 3902

Date
Issued

Temp. Permit

The undersigned hereby applies for
licenses described as follows:

2. NAME(S) OF APPLICANT(S)

Jim Mardaca Food service, Inc.

Applied under Sec. 24044
Effective Date: Issuance

Effective Date:

3. TYPE(S) OF TRANSACTION(S)

FEE

**LIC.
TYPE**

Per to Per Self Inc.

\$ 60.00

41

Receipt #708345

Per to Per 24071

50.00

41

4. Name of Business
Pietro's of Lodi

5. Location of Business—Number and Street
317 E. Kettleman Lane

City and Zip Code
Lodi, CA 95240

County
San Joaquin

TOTAL

\$ 50.00
~~50.00~~

6. If Premises Licensed,
Show Type of License 41

7. Are Premises Inside
City Limits? NO

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

(Temp) (Perm)
Per M

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 per-
taining 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 San Joaquin Date 8/10/94

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; 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 _____

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA County of San Joaquin Date 8/10/94

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.

COPY

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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)
AMENDED
RECEIVED
On Sale Beer & Wine Eating
AUG 12 AM 1994

JENNIFER M. PERRIN
CLERK

Applied under Sec. 24044
Effective Date: ISSUANCE

FILE NO:
RECEIPT NO. 708345
GEOGRAPHICAL CODE 3902
Date Issued
Temp. Permit
Effective Date:

2. NAME(S) OF APPLICANT(S)

Jim Murdaca Food service, Inc.

3. TYPE(S) OF TRANSACTION(S)

FEE LIC. TYPE

Per to Per Self Incc

\$ 60.00 41

Receipt #708345

Per to Per 24071

50.00 41

4. Name of Business

Pietro's of Lodi

5. Location of Business—Number and Street

317 E. Kettleman Lane

City and Zip Code
Lodi, CA 95240

County
San Joaquin

TOTAL \$ 50.00

6. If Premises Licensed, Show Type of License 41

7. Are Premises Inside City Limits? NO

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

(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? 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 San Joaquin

Date 8/10/94

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

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA

County of San Joaquin

Date 8/10/94

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; 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)

James P. Murdaca

41-204587

19. Location State

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

8/10/94

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

COPY

Do not detach—Return all copies

Do Not Write Above This Line—For Headquarters Office Only

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

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

RECEIVED
 STOCKTON
 DISTRICT OFFICE

1. TYPE(S) OF LICENSE(S)
 On Sale Beer & Wine Eating

FILE NO.
 RECEIPT NO.
 GEOGRAPHICAL CODE 3902
 Date Issued
 Temp. Permit
 Effective Date:

The undersigned hereby applies for licenses described as follows:

JENNIFER M. PERRIN
 CITY CLERK

2. NAME(S) OF APPLICANT(S)
 KLIENGLON, Ruchiporn

Applied under Sec. 24044 Issuance
 Effective Date:

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
Original Application	\$ 300.00	41
Annual Fee	205.00	
TOTAL		\$ 505.00

4. Name of Business
 A Taste Of Thai

5. Location of Business—Number and Street
 116 A - West Turner Road

City and Zip Code 95240 San Joaquin County

6. If Premises Licensed, Show Type of License --
 7. Are Premises Inside City Limits? Yes

8. Mailing Address (if different from 5)—Number and Street
 (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? 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 San Joaquin Date 8/17/94

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14. APPLICANT SIGN HERE _____

APPLICATION BY TRANSFEROR

15. STATE OF CALIFORNIA County of _____ Date _____

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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) _____
 COPS MAILED 8/17/94
 Renewal: Fee of _____ Paid at _____ Office on _____ Receipt No. _____