

CITY COUNCIL MEETING

January 7, 1981

CC-7(f)
528

ABC LICENSE

The City Clerk presented an application for Alcoholic Beverage License which had been issued on behalf of Leon H. Mitchell, Winifred K. Mitchell, and Ralph A. Small of the Loft.

THE REPRODUCTION
OF THIS DOCUMENT
CANNOT BE IMPROVED
DUE TO THE CONDITION
OF THIS ORIGINAL

Corrected
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
1215 O Street
Sacramento, 95834 Stockton
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S)
ON SALE BEER & WINE PUBLIC PREMISES

2. NAME(S) OF APPLICANT(S)
BOEL, John H.

3. TYPE(S) OF TRANSACTION(S)

TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
NEW LICENSE	\$ 300.00	A2
AERIAL FEE	184.80	

4. Name of Business
Finals

5. Location of Business—Number and Street
107 N. School St.

City and Zip Code
Lodi 95240 County **San Joaquin**

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
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 San Joaquin Date _____

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 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 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 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 *[Signature]*

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; (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) _____

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

COPIES MAILED 1-12-61

ABC 211 (9-74) JAN 13 1961

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
1215 O Street
Sacramento, Calif. 95814 Stockton
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S)

**ON SALE BEER & WINE
PUBLIC PREMISES**

FILE NO.

FEE NO.

GEOGRAPHICAL CODE 3902

Date Issued

Temp. Permit #13776

Applied under Sec. 24044
Effective Date: When Trfd.

Effective Date: 12-5-80

2. NAME(S) OF APPLICANT(S)

HOORA, Diana J.

3. TYPE(S) OF TRANSACTION(S)

PER TO PER

FEE

\$ 150.00

LIC. TYPE

42

4. Name of Business
The Hopping

5. Location of Business—Number and Street

212 W. Kettleman Lane

City and Zip Code Lodi 95240 San Joaquin County

RECEIPT NO. TOTAL \$ 150.00

6. If Premises Licensed, Show Type of License 42-75683

7. Are Premises Inside City Limits? Yes

8. Mailing Address (if different from 5)—Number and Street
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 to be violated any of the provisions of the Alcoholic Beverage Control Act.

13. STATE OF CALIFORNIA County of San Joaquin Date 11-6-80

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 or to for any 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 11-6-80

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)**

<u>CAMPER, Joe T.</u>	<u>[Signature]</u>	<u>42-75683</u>

19. Location Number and Street 212 W. Kettleman Lane, Lodi 95240 City and Zip Code San Joaquin County

Do Not Write Below This Line; For Department Use Only

Attached Recorded notice, Fiduciary papers, 280, 231 COPIES MAILED 11-6-80

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

NOV 07 1980

COPY

Do not detach—Return with copies

DEC 18 1960

Do Not Write Above This Line—For Headquarters Office Only

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

To: Department of Alcoholic Beverage Control
1215 O Street
Sacramento, Calif. 95814 Stockton
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S)

ON SALE BEER & WINE
PUBLIC PREMISES

Applied under Sec. 24044
Effective Date: Issuance

FILE NO.

FEE NO.

GEOGRAPHICAL CODE 3902

Date Issued

Temp. Permit

Effective Date:

2. NAME(S) OF APPLICANT(S)

MITCHELL, Leon H. / Winifred K. K.

SMALL, Ralph A.

3. TYPE(S) OF TRANSACTION(S)

NEW LICENSES

ANNUAL FEE

FEE

\$ 300.00

124.50

LIC. TYPE

42

4. Name of Business
The Loft

5. Location of Business—Number and Street
112
100-A S. Cherokee Lane

City and Zip Code Lodi 95240 San Joaquin County

RECEIPT NO. 112521

TOTAL

\$ 424.50

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
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? 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 12-17-60

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 any 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 _____ 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

12-17-60

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