ITEMS OF INTEREST

COMMUNICATIONS
CITY CLERK

City Clerk Reimche presented the following applications for Alcoholic Beverage Licenses which had been received:

1. Tokay Shell Auto Care
   420 West Kettleman Lane
   Lodi, CA 95240
   Neely, Horace E./Mary E.
   Off sale beer and wine

2. Happy Hooker Bait and Tackle
   219 East Kettleman Lane
   Lodi, CA 95240
   Lucchesi, Lory V.
   Off sale beer and wine

ABC LICENSES

3. E & L Market
   844 South Central Avenue
   Lodi, CA 95240
   Mojalli, Kalmz M./Mahfoud M.
   Off sale beer and wine

4. Chapalita Cafe
   107 North Sacramento Street
   Lodi, CA 95240
   Nieto, Guadalupe/Ralph
   On sale beer and wine eating place

5. Hollywood Cafe
   315 South Cherokee Lane
   Lodi, CA 95240
   Heim, Bert L./Judyth R.
   On sale beer and wine eating place

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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)

OFF SALE BEER & WINE

Applied under Sec. 24044 ☐
Effective Date: Issuance

FILE NO.

RECEIPT NO. 2122

RECEIVED
1983 MAR 16 AM 9:10
ALICE M. REBACHI
CITY CLERK
CITY OF LODI

GEOGRAPHICAL CODE
Date Issued
Temp. Permit
Effective Date:

2. NAME(S) OF APPLICANT(S)

NEELY, Horace E./Mary E.

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
NEW LICENSE	$ 50.00	20
ANNUAL FEE	26.40	
TOTAL	$ 76.40	

4. Name of Business
Tokay Shell Auto Care

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

City and Zip Code Lodi, Ca. 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

(Temp) (Perm)

9. Have you ever been convicted of a felony?

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 3-15-83

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 Horace E. Neely
Mary E Neely

APPLICATION BY TRANSFEROR

5. 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 3-15-83

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

ABC 211 (1-81)

83101-104 1-81 20M SEPT CAM W OBP

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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): OFF SALE BEER & WINE

Applied under Sec. 24044 ☐
Effective Date: When Trfd.

FILE NO.
RECEIPT NO.
GEOGRAPHICAL CODE 2/2
Date Issued
Temp. Permit T-25490
Effective Date: 3-30-83

2. NAME(S) OF APPLICANT(S): PECCHESI, Lory V.

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
Per to Per	$ 25.00	20
TOTAL	$ 25.00	20

4. Name of Business: Happy Hooker Bait & Tackle

5. Location of Business—Number and Street: 219 E. Kettleman Lane

City and Zip Code: Lodi 95240 County: San Joaquin

6. If Premises Licensed, Show Type of License: 20-130950

7. Are Premises Inside City Limits? Yes

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

(Temp) (Perm): Perm

9. Have you ever been convicted of a felony?

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 3-25-83

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 San Joaquin Date 3-25-83

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)
HOLLAND, James R.		20-130950
POLK, Frank S.		"

19. Location: 219 E. Kettleman Lane (Number and Street) Lodi, Ca. 95240 (City and Zip Code) San Joaquin (County)

Do Not Write Below This Line; For Department Use Only

Attached: ☐ Recorded notice, ☐ Fiduciary papers, ☐ ABC-251, ABC-250 (OTHER)

COPIES MAILED 3-25-83

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

ABC 211 (1-82)

84969-104 2-82 20M SEPT CAM OSP

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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)

[illegible]

OFF SAL[illegible] B[illegible] & [illegible]

Applied under Sec. 24044 ☐
Effective Date: When Trfd.

FILE NO.

RECEIPT NO.

GEOGRAPHICAL CODE [illegible]

Date Issued

Temp. Permit

Effective Date:

2. NAME(S) OF APPLICANT(S)

MOJALLI, KALMAZ M./MAHFOUD H.

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
PER TO PER	$ 25.00	20
TOTAL	$ 25.00	

4. Name of Business
[illegible] & L Market

5. Location of Business—Number and Street
844 S. Central Ave.

City and Zip Code Lodi 95240 San Joaquin County

6. If Premises Licensed, Show Type of License 20-117838

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?

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 3-25-83

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

5. STATE OF CALIFORNIA County of San Joaquin Date 3-25-83

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)
George J. Bandy		20-117838

19. Location Number and Street 95240 City and Zip Code County
844 S. Central Ave., Lodi, Ca. 95202 San Joaquin

Do Not Write Below This Line; For Department Use Only

Attached: ☑ Recorded notice,
☐ Fiduciary papers,
☐ (OTHER)

COPIES MAILED 3-25-83

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

ABC 211 (1-82)

84968 104 2-82 20M SF/PT CAM OSP

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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
EATING PLACE

Applied under Sec. 24044
Effective Date: Issuance

FILE NO.

RECEIPT NO. 124302

GEOGRAPHICAL CODE 3905

Date Issued

Trans. Permit

Effective Date:

RECEIVED
1983 MAR 8 AM 8:45
ALICE M. TREMONE
CITY CLERK
CITY OF LODI

2. NAME(S) OF APPLICANT(S)

NIETO, Guadalupe/Ralph

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
New License	$ 300.00	41
Annual Fee	184.80	
TOTAL	$ 484.80	41

4. Name of Business
Chapalita Cafe

5. Location of Business—Number and Street

107 N. Sacramento Street

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 (Temp) (Perm)
Same Perm

9. Have you ever been convicted of a felony? NO NORM

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 3-16-83

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 Guadalupe Nieto
Ralph Nieto

APPLICATION BY TRANSFEROR

5. 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

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Attached: ☐ Recorded notice,
☐ Fiduciary papers,
☐ ..... (OTHER) COPIES MAILED 3-16-83

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

ABC 211 (1-81)

83101-104 1-81 20M SEPT CAM W OSP

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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

Stockton
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for licenses described as follows:

1. TYPE(S) OF LICENSE(S): ON SALE BEER AND WINE EATING PLACE

Applied under Sec. 24044 ☐
Effective Date: Issuance

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

2. NAME(S) OF APPLICANT(S): [illegible], Dart L./Judyth E.

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
NEW LICENSE	$ 300.00	21
Annual Fee	1[illegible].00	
TOTAL	$ [illegible].00	

4. Name of Business: [illegible]

5. Location of Business—Number and Street: 375 E. Charles Lane

City and Zip Code: [illegible] County: San Joaquin

6. If Premises Licensed, Show Type of License: 41-36617

7. Are Premises Inside City Limits? Yes

8. Mailing Address (if different from 5)—Number and Street: [illegible] (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 3-23-83

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)

RECEIVED 1983 MAR 24 AM 8 47 CITY CLERK CITY OF LODI

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)

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ABC 211 (1-82)

84968-104 2 82 20M SEPT CAM OSP