COMMUNICATIONS
CITY CLERK

ABC LICENSES

CC 7f

Applications for the following Alcoholic Beverage License were received:

1) Pietro's Pizza Parlors, Inc.
317 East Kettleman Lane
Lodi, California
On sale beer and wine eating place

2) Rinehart Oil, Inc.
900 South Cherokee Lane
Lodi, California
Off sale beer and wine

3) Pizza Mill
550 South Cherokee Lane, #E
Lodi, California
On sale beer and wine eating place

**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 Sacto. FOR: 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

FILE NO.

RECEIPT NO. 231217

GEOGRAPHICAL CODE 3902

Date Issued

Temp. Permit

Effective Date:

2. NAME(S) OF APPLICANT(S)

SABEH, Hoawia

Applied under Sec. 24044 ☐
Effective Date: Issu.

| 3. TYPE(S) OF TRANSACTION(S) | FEE | LIC. TYPE |
|---|---|---|
| New | $ 300.00 | 41 |
| Annual | 196.50 | |
| | | |
| | | |
| | | |
| TOTAL | $ 496.50 | 41 |

4. Name of Business
Pizza Mill

5. Location of Business—Number and Street
550 So. Cherokee Lane, #E

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
3510 Auburn Blvd., Sacto., CA 95821

(Temp) (Perm)
TEMP.

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 Sacramento Date April 16, 1985

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 x Hoawia Sabeh

# 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 [illegible] 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 ~~DISTRICT TO NOTIFY~~ 4-18-85 SL

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

ABC 211 (1-82) 67331-204 6/83 20 M SEPT - OSP

RECEIVED
DATE: APR 19 1985
ALICE M. REIMCHE
CITY CLERK
CITY OF LODI

**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 SANTA ROSA for
(DISTRICT SERVING LOCATION)
STOCKTON

*The undersigned hereby applies for licenses described as follows:*

1. TYPE(S) OF LICENSE(S): OFF SALE BEER & WINE

FILE NO.

RECEIPT NO. 211114

GEOGRAPHICAL CODE 3902

Date Issued

Temp. Permit

Applied under Sec. 24044 ☐

Effective Date:

Effective Date:

2. NAME(S) OF APPLICANT(S)

RINEHART OIL, INC

Pres: Robert F. Rinehart

Treas: Dennis Heth

Sec: Faye Rinehart

| 3. TYPE(S) OF TRANSACTION(S) | FEE | LIC. TYPE |
|---|---|---|
| per to per tfr | $ 50.00 | 20 |
| | | |
| | | |
| | | |
| | | |
| | | |
| TOTAL | $ | |

4. Name of Business

5. Location of Business—Number and Street

900 S. Cherokee Ln.

City and Zip Code: Lodi 95241 County: SAN JOAQUIN

6. If Premises Licensed, Show Type of License: OFF-SALE BEER & WINE

7. Are Premises Inside City Limits? yes

8. Mailing Address (if different from 5)—Number and Street *(Temp) (Perm)*
P.O. Box 725, Ukiah, CA 95482

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 Mendocino Date 2/13/85

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 Robert F. Rinehart, Faye Rinehart, Dennis Heth, _____

## 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.

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) |
|---|---|---|
| KAYO OIL COMPANY | R. G. Pierce | 20-148155 |
| | | |
| | | |
| | | |

| 19. Location | Number and Street | City and Zip Code | County |
|---|---|---|---|
| | 900 S. Cherokee Ln | Lodi 95241 | |

*Do Not Write Below This Line; For Department Use Only*

Attached: ☒ Recorded notice,
☐ Fiduciary papers,
☐ _____ (OTHER) COPIES MAILED 3-26-85

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

ABC 211 (1-82)

67331-204 6/83 20 M SKPP - DSF

RECEIVED
1985 APR -1 AM 9:51
ALICE M. REINKE
CITY CLERK
CITY OF LODI

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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 & Wine Eating Place

Applied under Sec. 24044 ☒
Effective Date: 4-15-86

FILE NO.

RECEIPT NO. 237332

GEOGRAPHICAL CODE 3902

Date Issued

Temp. Permit

Effective Date:

2. NAME(S) OF APPLICANT(S)

PIETRO'S PIZZA PARLORS, INC.

Pietro Murdaca, President

Joseph Murdaca, V. Pres.

James Murdaca, Sec./Treas.

| 3. TYPE(S) OF TRANSACTION(S) | FEE | LIC. TYPE |
|---|---|---|
| NEW LICENSE | $ 300.00 | 41 |
| Annual Fee | 196.50 | |
| | | |
| | | |
| | | |
| TOTAL | $ 496.50 | |

4. Name of Business
Pietro's of Lodi

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

City and Zip Code: Lodi, 95240
County: San Joaquin

6. If Premises Licensed, Show Type of License

7. Are Premises Inside City Limits?

8. Mailing Address (if different from 5)—Number and Street
~~Stockx~~ 407 Cernon St., Vacaville, CA 95688

(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?

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 4-15-85

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 _____

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| 16. Name(s) of Licensee(s) | 17. Signature(s) of Licensee(s) | 18. License Number(s) |
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| | | |
| | | |

| 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 4-15-85

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

ABC 211 (1-82)

87331-104 6/83 20 M SEPT - CSP

RECEIVED
DATE: APR 16 1985
ALICE M. REIMCHE
CITY CLERK
CITY OF LODI