Pg. 331

CC 1f

CITY COUNCIL MEETING

NOVEMBER 17, 1982

ABC LICENSE

The City Clerk presented the following application for Alcoholic Beverage License:

Rose Four Aces
Aguilar, Eliss G/Rosemarie
9 North Sacramento Street
Lodi, CA 95240
On Sale Beer and Wine Eating Place and Public Premises

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 and Wine Eating Place

RECEIVED
1982 NOV -9 AM 8:49
ALICE M. REIMCHE
CITY CLERK
CITY OF LODI

Applied under Sec. 24044
Effective Date: Issuance

FILE NO.

RECEIPT NO. 77111

GEOGRAPHICAL CODE 3902

Date Issued

Temp. Permit

Effective Date:

2. NAME(S) OF APPLICANT(S)

AGUILAR, Elias G./Rosemarie

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
NEW LICENSE	$ 300.00	41
Annual Fee	92.40	
TOTAL	$ 392.40	

4. Name of Business Rose Four Aces

5. Location of Business—Number and Street

9 N. Sacramento St.

City and Zip Code Lodi 95240 County San Joaquin

6. If Premises Licensed, Show Type of License 41-097762

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 11-5-82

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 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,
☐

COPIES MAILED 11-5-82

☒ Renewal: Fee of $184.80 Paid at (OTHER) Stockton Office on 11-5-82 Receipt No. 77111

ABC 211 (1-81) 83101 104 1 81 20M SEPT CAM W OSP

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

Applied under Sec. 24044 ☐
Effective Date: Immediate

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

2. NAME(S) OF APPLICANT(S): AMMIAR, Elias G./Bonnerie

3. TYPE(S) OF TRANSACTION(S)	FEE	LIC. TYPE
New License (Rec. No. 97179)	$	42
Annual Fee (Rec. No. 97179)		
Service Charge	50.00	
TOTAL	$ 50.00	42

4. Name of Business: Bone Four Aces

5. Location of Business—Number and Street: 9 N. Sacramento Street

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

6. If Premises Licensed, Show Type of License: 41-097762

7. Are Premises Inside City Limits? Yes

8. Mailing Address (if different from 5)—Number and Street: (Temp) None (Perm) None

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 11-9-82

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,
☒ ABC-209
(OTHER)

COPIES MAILED 11-9-82

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

ABC 211 (1-81)

83103 104 3 81 20M SEPT 1 AM W OSP