



Carson City Planning Division

108 E. Proctor Street
Carson City, Nevada 89701
(775) 887-2180 – Hearing Impaired: 711
planning@carson.org
www.carson.org/planning

MEMORANDUM

Liquor License

TO: The Hearings Officer **Item D-2**

FROM: Hope Sullivan, AICP
Planning Manager


DATE: May 12, 2017

SUBJECT: Liquor License: Whiskey Tavern – 3481 Highway 50 East

Per Carson City Municipal Code 4.13, all liquor license requests, including the assignment of a liquor manager, are to be reviewed by the Hearings Officer. The Hearings Officer may grant or deny the application for a liquor license or place conditions on a license to ensure compliance with the Municipal Code. The Hearings Officer considers the recommendation of the Sheriff's Office and the Health Department in making his decision.

The subject request is to allow Rene M. Richardson to serve as the liquor manager for the Whiskey Tavern, located at 3481 Highway 50 East.

The Health Department does not oppose the request. It has inspected the premises, and finds that any items that need to be addressed are minor in nature.

		CARSON CITY LICENSE APPLICATION		Business License #: 17-32215	
		Please type or print in black ink; Incomplete or illegible applications will not be accepted. Applications must bear an original signature		Liquor #: 17-32070	
				Submittal Date: 4/20/17	

1	<input checked="" type="checkbox"/> New Business	<input type="checkbox"/> Change of Location/Mailing	<input type="checkbox"/> Change of Name	<input type="checkbox"/> Change of Corporate Officer	<input type="checkbox"/> Other
2	Type of License(s)	<input type="checkbox"/> Business	<input type="checkbox"/> Short-Term	<input type="checkbox"/> Gaming	<input type="checkbox"/> Liquor
3	Type of Entity	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company
4	Entity Name Kep Enterprises LLC			Business Opening Date	
5	Business Name (DBA) Whiskey Tavern			EIN #	
6				7 10149688-4-001	
8	Business Address 3481 Hwy 50 E		City Carson City	State NV	Zip Code 89701
9	Mailing Address 3481 Hwy 50 E		City Carson City	State NV	Zip Code 89701
10	Corporate Phone	Business Phone 775-885-1522	Cellular Phone 775-409-5979	Business Fax	
11	E-mail Address 1363barnard@gmail.com			Business Website	

12 Owner(s), Manager(s), or other Principal(s) attach additional pages if required

Last, First, MI Richardson, Rene, M	Percent Owned	Title
Residence Address (Street) 3481 Churchill Dr.	City, State, Zip Washoe Valley NV 89704	Residence Telephone (775) 409-5979
Last, First, MI	Percent Owned	Title
Residence Address (Street)	City, State, Zip	Residence Telephone
Last, First, MI	Percent Owned	Title
Residence Address (Street)	City, State, Zip	Residence Telephone
Liquor Manager (if applicable)	<input type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	Contact Phone Number
Residence Address (Street)	City, State, Zip	

13 Describe in detail the activity of your business

Bar, Tavern

14 Type of Liquor License Applying for (If applicable)

<input checked="" type="checkbox"/> Tavern/Bar	<input type="checkbox"/> Dining Room w/Beer and Wine Only	<input type="checkbox"/> Packaged Liquor	<input type="checkbox"/> Dining Room w/Hard Liquor	<input type="checkbox"/> Combo (On-Premise & Pkg)	<input type="checkbox"/> General Wholesale
<input type="checkbox"/> Catering	<input type="checkbox"/> Additional Wet Bars _____		Will there be an Interim Management Agreement?		

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List number of slot machines (If applicable)	List number of table games (If applicable)
<input type="checkbox"/> 1 cent _____ <input type="checkbox"/> 5 cent _____ <input type="checkbox"/> 25 cent _____ <input type="checkbox"/> 1.00 _____	<input type="checkbox"/> Multi _____ <input type="checkbox"/> Poker _____ <input type="checkbox"/> Mega Buck _____
	<input type="checkbox"/> Craps _____ <input type="checkbox"/> Roulette _____ <input type="checkbox"/> Twenty-One _____ <input type="checkbox"/> Keno _____
	<input type="checkbox"/> Baccarat _____ <input type="checkbox"/> Race Book _____ <input type="checkbox"/> Sports Book _____ <input type="checkbox"/> Poker _____

17 If this application is for a change of business name, location, or ownership, list the previous name, address, and owner below:

Miscellaneous Information	Please answer this section if your business is <i>located</i> in Carson City. If you are unsure of your answer or are installing signage, contact the Planning Division at (775) 887-2180	
	Is your business location zoned for this type of business	Has a Special Use Permit been obtained for this business location
	Will you be installing any outdoor signs	Are there any existing signs of the property
	Will there be any outside storage (If yes, please explain items being stored and how being screened)	
	Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage)	
	Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business	

Rules and Regulations	<p>I, the undersigned understand that I cannot operate my business until my license is actually issued by this office indicating approval by all necessary city departments</p> <ul style="list-style-type: none"> • If any changes are made after completing said license application this office must be notified immediately and an updated is required. • A business license, liquor license, and/or gaming license are issued to a given owner at a SPECIFIC LOCATION and are NON-TRANSFERRABLE to a different owner or different location. • Non-payment of annual and quarterly business license, liquor license, and/or gaming license fees by the due date will result in applied penalties and is grounds for the revocation of the license. • Any exception to any of the above is considered a violation of the Carson City Municipal Code and is subject to citation. <p>I hereby certify that the above information is correct to the best of my knowledge and belief. I understand that failure to complete this form truthfully is an act of perjury.</p>
	<p>Applicant's Signature <u><i>Benjamin Anderson</i></u> Date <u>3-22-17</u></p>

FEE STRUCTURE	FEE	LICENSE TOTAL FEES
Business License Fee	63.85	Business License Annual Fee: 201.85
Square Footage 2000	32.25	Business License Pro-rated Fee: 135.24
Number of Employees 5	30.75	Business License Application/Update Fee: 25
Health Fee	75	Liquor License Annual Fee: 800
Number of Rental Units		Liquor License Pro-rated Fee:
Number of Coin Operated Machines		Liquor License Application Fee: 1000
Number of Slot Machines		Liquor License Investigation Fee: 500
TOTAL FEES DUE: 1705.24		Gaming License Quarterly Fee:
Payment Type #1014		Gaming License Application Fee:
Received By <i>Beserch</i>	Date 4/20/17	Fictitious Name Fee: 20
Date Applicant Fingerprinted Appt - 4/24/17 @ 9:30	By	File #
		Health Pre-Inspection Fee: 25