



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

FROM: Mariah Ziegenbein
Business License Specialist

DATE: January 24, 2018

SUBJECT: Liquor License: Palidin LLC (Liquor License #18-31666)

Recommendation: To approve a transfer of location of a general wholesale liquor license for Palidin LLC from 2033 Lompa Lane #102 to 3160 N. Deer Run Rd #4. Kurt Brown will remain the liquor manager.

Per Carson City Municipal Code 4.13, all liquor license requests 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 subject request is to allow, Palidin LLC to transfer the location of their general wholesale liquor license to 3160 N. Deer Run Rd #4, with Kurt Brown as the liquor manager.

This request has been reviewed by both the Health Department and the Sheriff's Office. The Health Department does not need to inspect the new location, as the operations are not subject to health department jurisdiction, as articulated in Nevada Administration Code 446.

The Sheriff's office reviewed the background check, and did not find any disqualifying events in the last 5 years.

		CARSON CITY LICENSE APPLICATION		Business License #:	
Please type or print in black ink; Incomplete or illegible applications will not be accepted. Applications must bear an original signature					
Submittal Date: <i>1/24/17</i>					
1	<input type="checkbox"/> New Business	<input checked="" type="checkbox"/> Change of Location/Mailing	<input type="checkbox"/> Change of Name	<input type="checkbox"/> Change of Corporate Officer	<input checked="" type="checkbox"/> Liquor
2	Type of License(s)	<input checked="" type="checkbox"/> Business	<input type="checkbox"/> Short-Term	<input type="checkbox"/> Gaming	<input checked="" type="checkbox"/> Liquor
3	Type of Entity	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company
4	Entity Name <i>Palidin LLC</i>			5	Business Opening Date
6	Business Name (FBA) <i>Palidin LLC</i>			7	EIN #
8	Business Address <i>3160 N. Deer Run Rd #4</i>		City <i>Carson City</i>	State <i>Nevada</i>	Zip Code <i>89701</i>
9	Mailing Address <i>2033 S. Compa Ln #102</i>		City <i>Carson City</i>	State <i>Nevada</i>	Zip Code <i>89701</i>
10	Corporate Phone <i>775-885-7576</i>	Business Phone <i>775-885-7576</i>	Cellular Phone <i>775-223-9595</i>	Business Fax <i>NONE</i>	
11	E-mail Address <i>palidindistributing@gmail.com</i>				
12	Owner(s), Manager(s), or other Principal(s) attach additional pages if required				
	Last, First, MI <i>Brown Kurt R</i>	Percent Owned <i>100%</i>	Title <i>Owner</i>		
	Residence Address (Street) <i>3711 Paradise View</i>	City, State, Zip <i>Carson City NV 8970</i>	Residence Telephone <i>775-220-7447</i>		
	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) <i>Shelly Brown</i>	<input checked="" type="checkbox"/> On-Site <input checked="" type="checkbox"/> Off-Site	Contact Phone Number <i>775-223-9595</i>		
	Residence Address (Street) <i>1100 Granite Ct Dr</i>	City, State, Zip <i>Reno NV 89521</i>			
13	Describe in detail the activity of your business <i>We are a marijuana distributor</i>				
Type of Liquor License Applying for (If applicable)					
14	<input 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"/> Catering	<input type="checkbox"/> Additional Wet Bars _____		Will there be an Interim Management Agreement?	
15	List number of slot machines (If applicable)		List number of table games (If applicable)		
	<input type="checkbox"/> 1 cent _____	<input type="checkbox"/> Multi _____	<input type="checkbox"/> Craps _____	<input type="checkbox"/> Baccarat _____	
	<input type="checkbox"/> 5 cent _____	<input type="checkbox"/> Poker _____	<input type="checkbox"/> Roulette _____	<input type="checkbox"/> Race Book _____	
	<input type="checkbox"/> 25 cent _____	<input type="checkbox"/> Mega Buck _____	<input type="checkbox"/> Twenty-One _____	<input type="checkbox"/> Sports Book _____	
	<input type="checkbox"/> 1.00 _____		<input type="checkbox"/> Keno _____	<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:				
	<i>Previous address is 2033 S. Compa Ln #102 Carson City NV 89701</i>				

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
	Yes	Yes
	Will you be installing any outdoor signs	Are there any existing signs on the property
	No	No
Will there be any outside storage (If yes, please explain items being stored and how being screened)		
No		
Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage)		
Yes 2006 GMC Savana G3500 Van - Vehicle will be parked inside location		
Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business		
None		

Rules and Regulations	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	
	<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. 	
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.		
Applicant's Signature		Date 11/24/17

FEES STRUCTURE		FEES	LICENSE TOTAL FEES
Business License Fee			Business License Annual Fee:
Square Footage			Business License Pro-rated Fee:
Number of Employees			Business License Application/Update Fee: 75.00
Health Fee			Liquor License Annual Fee:
Number of Rental Units			Liquor License Pro-rated Fee:
Number of Coin Operated Machines			Liquor License Application Fee:
Number of Slot Machines			Liquor License Investigation Fee:
TOTAL FEES DUE:			Gaming License Quarterly Fee:
Payment Type			Gaming License Application Fee:
Received By	Date		Fictitious Name Fee:
Date Applicant Fingerprinted	By	File #	Health Pre-Inspection Fee: