



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 Meeting 05/30/2018

TO: The Hearings Officer

FROM: Mariah Ziegenbein
Business License Specialist

DATE: June 21, 2018

SUBJECT: Liquor License: Saffron (Liquor License #18-32752) 1301 N Carson St

Recommendation: To approve a Dining Room with Beer and Wine liquor license for Saffron LLC doing business as Saffron at 1301 N Carson St, with Randy Letter as the liquor manager subject to the following conditions of approval:

1. The applicant must sign a sworn affidavit consistent with CCMC 4.13.060 regarding a server training course.
2. Served alcohol must come from approved sources
3. No changes to the bar set up may be made without approval from the health authority

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 Hearings Officer considers the recommendation of the Sheriff's office and the Health Department in making his decision.

The subject request is to allow Saffron LLC doing business as Saffron to have a Dining Room with Beer and Wine liquor license, with Randy Letter as the liquor manager. The applicant is operating a full service restaurant. The business is located at 1301 N Carson St.

This request has been reviewed by both the Health Department and the Sheriff's Office. The Health Department inspected the premises and is recommending approval based on the conditions above being met.

The Sheriff's office conducted a background check and did not find any disqualifying information based on CCMC 4.13.125.



CARSON CITY LICENSE APPLICATION

Business License #: **LL: 18-32752****18-32744**

Please type or print in black ink: Incomplete or illegible applications will not be accepted. Applications must bear an original signature

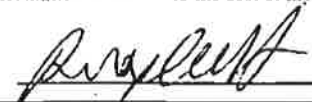
Submittal Date: **3/01/18**

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 checked="" 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 checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company
4	Entity Name Saffron LLC			Business Opening Date 09/01/18	
5	Business Name (DBA) Saffron			EIN #	
6	Business Address 1301 N. Carson St.			City Carson City	State NV
7	Mailing Address Same			City	State
8	Corporate Phone	Business Phone	Cellular Phone 775-223-9051	Business Fax	
9	E-mail Address Letter.randy@gmail.com			Business Website www.Saffronline.com	
10	Owner(s), Manager(s), or other Principal(s) attach additional pages if required				
11	Last, First, MI Letter, Randy			Percent Owned 75.0	Title owner/Manager
12	Residence Address (Street) 2516 water crest Ct.			City, State, Zip Carson City, NV 89703	Residence Telephone 775-223-9051
13	Last, First, MI Tavakoli Taghi Amiriasalan			Percent Owned 7.30	Title chef
14	Residence Address (Street) 20 West Colledge Pkwy #R371			City, State, Zip Carson City, NV 89706	Residence Telephone 775-335-7739
15	Last, First, MI Kheradmand Shima			Percent Owned 2.0	Title
16	Residence Address (Street) 20 West Colledge Pkwy #R371			City, State, Zip Carson City, NV 89706	Residence Telephone 775-335-7739
17	Liquor Manager (if applicable)			<input type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	Contact Phone Number
18	Residence Address (Street)			City, State, Zip	

13	Describe in detail the activity of your business Restaurant, Tea, Juice, Coffee bar. NO LIQUOR Dining Room w/ wine				
14	Type of Liquor License Applying for (If applicable)				
15	<input type="checkbox"/> Tavern/Bar	<input checked="" 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)
16	<input type="checkbox"/> Catering	<input type="checkbox"/> Additional Wet Bars	Will there be an Interim Management Agreement?		
17	List number of slot machines (If applicable)		List number of table games (If applicable)		
18	<input type="checkbox"/> 1 cent	<input type="checkbox"/> Multi	<input type="checkbox"/> Craps	<input type="checkbox"/> Baccarat	
19	<input type="checkbox"/> 5 cent	<input type="checkbox"/> Poker	<input type="checkbox"/> Roulette	<input type="checkbox"/> Race Book	
20	<input type="checkbox"/> 25 cent	<input type="checkbox"/> Mega Buck	<input type="checkbox"/> Twenty-One	<input type="checkbox"/> Sports Book	
21	<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:				
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Miscellaneous Information	Please answer this section if your business is located 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	no
	Will you be installing any outdoor signs?	Are there any existing signs of the property?
	yes	yes
	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)?		
Not yet		
Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business.		
Ø		

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
		2-26-18

FEE STRUCTURE	FEE	LICENSE TOTAL FEES
Business License Fee	63.85	Business License Annual Fee: 245.70
Square Footage	32.25	Business License Pro-rated Fee: 184.28
Number of Employees 4	24.60	Business License Application/Update Fee: 25.00
Health Fee H1110	125.00	Liquor License Annual Fee: 600.00
Number of Rental Units		Liquor License Pro-rated Fee:
Number of Coin Operated Machines		Liquor License Application Fee: 500.00
Number of Slot Machines		Liquor License Investigation Fee: 500.00
TOTAL FEES DUE: 254.28		Gaming License Quarterly Fee:
Payment Type C2 7670 G		Gaming License Application Fee:
Received By M2	Date 3/1/18	Fictitious Name Fee: 20.00
Date Applicant Fingerprinted	By	Health Pre-Inspection Fee: 25.00
	File #	

\$1,000 paid on 05/01/18 for Liquor License