



108 E. Proctor Street  
Carson City, Nevada 89701  
(775) 887-2105  
Hearing Impaired: 711

## MEMORANDUM

Liquor License Hearing – Monday October 9th, 2023, 1:30pm

**TO:** The Hearings Officer  
**FROM:** Natalie Kiel, Business License Specialist  
**DATE:** October 3, 2023

**AGENDA ITEM 4.F: For Possible Action: Discussion and possible action regarding an application to approve a change of liquor manager to Packaged Liquor License (LIQUOR-004865-2020) to William White for Smith's Food and Drug Centers Inc. dba Smith's #356 located at 599 E William St, Carson City, NV 89701.**

**Recommendation:** To approve an application to change the liquor manager to William White for the Packaged Liquor License for Smith's Food and Drug Centers Inc. dba Smith's #356 located at 599 E William St, Carson City, Nv 89701 subject to the following conditions of approval:

1. The applicant must sign a sworn affidavit consistent with Carson City Municipal Code (CCMC) 4.13.060 regarding a server training course.
2. The holder of the liquor license must maintain on the premises, evidence of employee server training certification for all employees that serve or sell alcohol.

Per Carson City Municipal Code (CCMC) 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 for Smith's Food and Drug Centers Inc. dba Smith's #356 located at 599 E William St, Carson City, NV 89701 to change the liquor manager to William White on the existing Packaged Liquor License. The business is located at 599 E William St, Carson City, Nv 89701, license number LIQUOR-004865-2020.

The Sheriff's Office did a background investigation and did not find any disqualifying information based on CCMC 4.13.125.

The business was issued an Administrative Citation after the Sheriff's Office issued a criminal citation to a Smith's employee for selling to a minor on September 21, 2023.

It was not applicable to have the health department review the application for a change in liquor manager.



# CARSON CITY LICENSE APPLICATION

Business License #: LIQUOR-004865-2020  
Liquor License #:

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

Submittal Date:

<input 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
Type of License(s)	<input type="checkbox"/> Business	<input type="checkbox"/> Short-Term	<input type="checkbox"/> Gaming	<input checked="" type="checkbox"/> Liquor
Type of Entity	<input checked="" type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Non-Profit

Entity Name <i>William Daniel White</i>		Business Opening Date	
Business Name (DBA) <i>Smith food and drug</i>		EIN #	
Business Address <i>599 E. William St</i>	City <i>Carson City</i>	State <i>NV</i>	Zip Code <i>89701</i>
Mailing Address <i>599 E. William St</i>	City <i>Carson City</i>	State <i>NV</i>	Zip Code <i>89701</i>
Corporate Phone <i>1-800-444-8021</i>	Business Phone <i>775-885-9922</i>	Cellular Phone <i>775-720-3437</i>	Business Fax <i>NA</i>
Email Address		Business Website	

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

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
Last, First, MI	Percent Owned	Title
Residence Address (Street)	City, State, Zip	Residence Telephone
Liquor Manager (if applicable) <i>William White</i>	<input checked="" type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	Contact Phone Number <i>775-720-3437</i>
Residence Address (Street)	City, State, Zip	

13 Describe in detail the activity of your business

*William.White@Stores.Stdc.com*

Type of Liquor License Applying for (If applicable)

<input type="checkbox"/> Tavern/Bar	<input type="checkbox"/> Dining Room w/Beer and Wine Only	<input checked="" 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? <b>15</b>			

6 List number of slot machines (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 _____

7 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 located in Carson City. If you are unsure of your answer or are installing signage, contact the Planning Division at (775) 887-2180

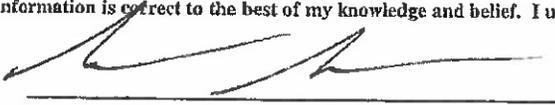
Is your business location zoned for this type of business	Has a Special Use Permit been obtained for this business location
Will you be installing any outdoor signs	Are there any existing signs of the property
Will there be any outside storage (If yes, please explain items being stored and how being 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

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

- 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 8.7.2023

FEE STRUCTURE	FEE	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:
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:	Health Pre-Inspection Fee:
	File #:	

## Background Investigation

Please review this document prior to submitting your liquor license application

- Chapter 4.13 - LIQUOR BOARD AND LIQUOR LICENSING AND SALES

- 4.13.125 Issuance or Denial of License

1. The hearings officer or the board if an application is forwarded pursuant to Section 4.13.035 herein, may grant or deny the application for a liquor license or place conditions on a license to ensure compliance with this chapter and other applicable laws and regulations. Conditions of approval may include, but not be limited to, the payment of delinquent City fees, fines, or taxes prior to the issuance of the license. A denial must be based upon a finding that any applicant for any license, whether made by an individual, partnership, or corporation, is unsuitable for the issuance of a liquor license.
2. The following persons are unsuitable for the issuance of a liquor license:
  - a. A person who has been convicted within the past five years of:
    - (1) A felony or other crime which under the laws of this state would amount to a felony.
    - (2) Any crime of which fraud or intent to defraud was an element whether committed in this state or elsewhere.
    - (3) Larceny in any degree.
    - (4) Buying or receiving stolen property.
    - (5) Unlawful entry of a building.
    - (6) A gross misdemeanor, or equivalent conviction in another state, or unlawful possession, use, or distribution of controlled substances or dangerous drugs.
    - (7) Illegal use of a dangerous weapon.
    - (8) Operating a motor vehicle while under the influence of liquor and/or controlled substances or dangerous drugs.
    - (9) Contributing to the delinquency of a minor.
    - (10) A gross misdemeanor or equivalent conviction in another state, of battery, domestic battery, or similar offense.
  - b. A person who has intentionally falsified information on, or omitted information from, a liquor license application within the past five years.
  - c. A person under the age of 21 years.
  - d. A person who is in arrears in child support payments unless proof of an approved payment plan or similar arrangement is produced and approved to the satisfaction of the hearings officer.
  - e. A person whom the hearings officer or board determines is not a suitable person to receive a liquor license under the provisions of this Chapter, having due consideration for the proper protection of public health, safety, morals, good order, and general welfare of the inhabitants of the City.
  - f. Except any elected Carson City officer or any member of the Carson City Board of Supervisors, a Carson City employee who oversees or enforces the rules and regulations of liquor licenses shall not have any involvement with, interest in, or management of any establishment that possesses a liquor license.
3. If an application for a liquor license is denied, the applicant thereof shall be notified in writing of the reason or reasons therefore.  
(Ord. No. 2017-8 , § 1, 4-20-2017)

Acknowledgement: Printed Name: William White

Signature : \_\_\_\_\_

Date: 8-7-2023



## Carson City Business License Division

108 E. Proctor Street  
Carson City, Nevada 89701  
(775) 887-2105 – Hearing Impaired: 711  
buslic@carson.org  
www.carson.org/businesslicense

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### ACKNOWLEDGEMENT AND WAIVER OF NOTICE

The undersigned acknowledges having been notified of the time and place of the meeting of the Carson City Liquor and Entertainment Board where the undersigned's application will be reviewed and acted on. The undersigned hereby waives the notice requirements under NRS 241.033 requiring written notice be delivered personally to the applicant at least 5 working days before the meeting or if sent by certified mail, at least 21 working days before the meeting.

All correspondence will be sent to the email address provided on the application. If an email address is not provided, it will be sent by certified mail.

8-7-2023

Date

William White

Printed Name of Liquor License Applicant

[Handwritten Signature]

Signature of Liquor License Applicant





**Carson City Business License Division**  
 108 E. Proctor St.  
 Carson City, Nevada 89701  
 (775) 887-2105

**CARSON CITY LIQUOR LICENSE**

**APPLICANT'S AUTHORITY TO RELEASE INFORMATION**

Having made application for a Carson City Liquor License, I wish Carson City to be informed as to my personal history and finances to help in determining my suitability for a liquor license.

For this specific purpose I hereby authorize the release and full disclosure of any and all information that you may have concerning me, including information of a confidential or privileged nature. Such information is to be released to any duly authorized agent of Carson City, upon presentation of this waiver or a photocopy of this waiver, whether in person or by mail, fax, or other method of conveyance.

This waiver is valid for a period of eighteen (18) months from the date of my signature. A photocopy of this waiver is to be considered as valid as an original, even though it does not contain an original of my signature.

Examples of types of information I am requesting that you provide include, but are not limited to:

Arrests, detentions, field contacts, field interview cards, officer's records, jail/custody booking records, traffic citations, traffic accident information, district attorney's records, court records and reports, probation and parole reports and records, laboratory reports and results, any other criminal justice records, reports or information source, employment history, including: dates of employment, rate of pay, job title, dependability, honesty, attitude towards the job, attitude towards fellow employees, and reasons for leaving; education history and records and any other such information you may have concerning my criminal justice history, employment history, medical history and educational history, or any personal knowledge you may have concerning my qualifications and suitability.

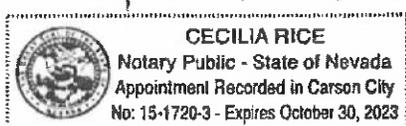
I hereby release you as the custodian of such records, and any law enforcement agency, criminal justice agency, school, college, university, or other educational institution, military organization, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, or retail business establishment, including all officers, agents, employees, related personnel, both individually and collectively, from any and all liability for damage of whatever kind which may at any time result to me, my heirs, family, or associates, because of compliance with this authorization and request to release information or any attempt to comply with it.

Full Name (Print): William Daniel White  
 Address (Print): 2021 Lennie Ln Dayton NV 89403  
 Telephone: (W) (775) 885-9922 (H) (775) 720-3437  
 Signature: [Signature] Date: 8-10-2023

State of Nevada  
 County of Carson

This instrument was acknowledged before me on August 10, 2023 by William Daniel White

[Signature]  
 Signature of Notarial Officer





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I hereby release you as the custodian of such records, and any law enforcement agency, criminal justice agency, school, college, university, or other educational institution, military organization, hospital, or other repository of medical records, credit bureau, lending institution, consumer reporting agency, or retail business establishment, including all officers, agents, employees, related personnel, both individually and collectively, from any and all liability for damage of whatever kind which may at any time result to me, my heirs, family, or associates, because of compliance with this authorization and request to release information or any attempt to comply with it.

Full Name (Print): William Daniel White  
 Address (Print): 2021 Lannic Ln Dayton NV 89403  
 Telephone: (W) (775) 885-9922 (H) (775) 720-3437  
 Signature: [Signature] Date: 8-7-2023

State of NV  
 County of Cyon

This instrument was acknowledged before me on 8-7-2023 by [Signature]

\_\_\_\_\_  
 Signature of Notarial Officer

# CARSON CITY LIQUOR LICENSE

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## CHILD SUPPORT STATEMENT

Per Carson City Municipal Code 4.13.125 2(d), a person who is in arrears in child support payments may not be suitable for a liquor license. Please check the appropriate box below and complete the remainder of the form.

Failure to mark one of the three and completion of the form may result in denial of the application.

- I am not subject to a court order for the support of a child.
- I am subject to a court order for the support of one or more children and am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order;
- or
- I am subject to a court order for the support of one or more children and am not in compliance with the order or plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

Applicant Name (please print) William White

Signature of Applicant 

Date 8-7-2023



Ken Furlong  
Sheriff

911 E. Musser St.  
Carson City, NV 89701

775-887-2500  
Fax: 775-887-2026

To: Business License Division

From: Carson City Sheriff's Office

Re: Liquor Manager Application  
Smiths Food & Drug  
White, William Daniel

The Sheriff's Office has conducted a background investigation on the above applicant as the liquor manager for Smiths Food & Drug.

- Background of premises: Smiths Food & Drug is located at 599 E William St. and is an established business at this address. Incidents and calls for service to this location are typically for larceny, fraud, and unwanted subjects.
- Financial arrangements: There are no financial arrangements as Mr. White is employed by Smiths Food & Drug.
- Method of operation: Smith's operates as grocery market and pharmacy selling a variety of household items, food, and packaged beer, wine, and hard liquor. The market is open daily and employs approximately ninety-six persons. Ms. White is employed as the store manager and works full time at this location.
- Results of backgrounds: The background for Mr. White did not find any disqualifying factors based on 4.13.125.

By: Elizabeth Martin  
Elizabeth Martin  
Administrative Assistant  
Investigations Division

Date Sept 29 2023

Recommend Approval

Do Not Recommend Approval

Ken Furlong  
Ken Furlong  
Sheriff

Date 9/25/23