*

OFFICE OF THE MAYOR



PHONE (501) 975-8601 FAX (501) 975-8633

P.O. BOX 5757 NORTH LITTLE ROCK, ARKANSAS 72119-5757

website: www.nlr.ar.gov

MEMORANDUM

TO:

Members of the North Little Rock City Council

FROM:

Glinda Craigmyle

DATE:

January 19, 2018

SUBJECT:

Alcoholic Beverages Permit Request

For your information, I have enclosed a copy of the *Assignment* and *Comments of Officials* form from the State of Arkansas, Alcoholic Beverage Control Division.

The following applicant has applied for a new restaurant beer and wine permit:

Travis A. Hester EATMYCATFISH of NLR, Inc. 4220 McCain Blvd. Suite 60 North Little Rock, AR

Please note the 15 day comment period referred to in the final paragraph of the *Comment* page.

Thank you.

Attachments

BY Glinda Craigmyle-Mayors office

DATE 1-19-18

Diane Whitbey, City Clerk and Collector

North Little Rock, Arkansas

RECEIVED by

ASSIGNMENT

D6J003-D6L013



Date Received: 01/11/2018

Date Assigned: 01/12/2018

Applicant: TRAVIS A. HESTER

D.O.B: 12/01/1983

Green Card Number (Permanent Resident Alien):

Home Address: 2204 Sawgrass Dr, Little Rock, AR, 72122

Home Phone:

Business Phone: 501-235-8805

Cell Phone: 501-786-0341

Trade Name: EATMYCATFISH OF NLR, INC

Former Trade Name:

Business Address: 4220 McCain Blvd. Suite 60, North Little Rock County Pulaski

Type Of Investigation: Restaurant Beer & Wine - NEW

Dancing, if requested:

Comments / Remarks:

Copies Of Assignment and Comment Form Mailed to:

Mayor Joe Smith & City Council

Michael Davis, Chief of Police

Doc Holladay, Sheriff

Larry Jegley, Prosecuting Attorney

Assigned to Investigator:

Stockholders / Partners / LLC Jessica Hester, 2204 Sawgrass Drive, Little Rock, AR, 72212

Members: DOB: 4

DOB: 4/26/1983

ALCOHOLIC BEVERAGE CONTROL DIVISION COMMENTS OF PUBLIC OFFICIALS



APPLICANT'S NAME: TRAVIS A. HESTER

TYPE OF APPLICATION: Restaurant Beer & Wine - NEW

BUSINESS NAME: EATMYCATFISH OF NLR, INC

BUSINESS ADDRESS: 4220 McCain Blvd. Suite 60, North Little Rock, AR, 72112

DATE OF APPLICATION: 01/11/2018

If yes, please explain your objections below:

NAME OF PUBLIC OFFICIAL:	
TITLE OF OFFICIAL:	
OFFICIAL MAILING ADDRESS:	
PHONE :	
SIGNATURE OF OFFICIAL:	DATE:
NAME OF AGENCY OR COURT:	
Do you have any objections to the issuance of this permit?	
	(Yes or No)

To ensure your comments are available at the time this application is considered by the Director, please complete and return this form to ABC Administration, 1515 West 7th Street, Suite 503, Little Rock, AR 72201, within fifteen (15) days of receipt. In compliance with the Freedom of Information Act, this Comment Form will become a matter of public record. **Pursuant to ACA 3-2-103**, a national fingerprint based background check will be, or has been, conducted. At ACICs request, do not run your own criminal history check through ACIC.

Printed On: 01/12/2018





New

Replacement Permit No. _{

STATE OF ARKANSAS ALCOHOLIC BEVERAGE CONTROL DIVISION

APPLICATION TO SELL RESTAURANT BEER AND WINE (ON PREMISES ONLY)

premises of a restaurant an						n the
IF CORPORATION/LLC, G	IVE NAME <u>EA</u>	mycalfis	L & NI	T, INL F	EIN#_ 82-3	3501987
NAME OF APPLICANT	1.					
HOME ADDRESS 2204					72212	Pulaski
		at My Catfie			Zip	County
TRADE NAME OF BUSINE	· - -			R NAME	rone	
ADDRESS OF BUSINESS	Arro Mccai	in Blus	Ste 60	NLR	72112	Pulaski
	Street Address	•	City	. 1 . 3	Zip	County
Is proposed location inside	or outside the ci	ty limits?	nside	NLR		
Is your establishment prima	rily engaged in t	he business	of serving f	ood to the pu	blic prepared fo	r consumption
on the premises? No	:					
Are you the owner of the pro	oposed premise:	s? No	Do you	have the prei	nises leased? _	yes
If so, give name and addres	s of owner	PP303	NLR	- LLC		
	× 20361			TX	75320	
Does anyone now hold a pe	rmit at this locat	tion? No	lf so, g	jive name, ty	pe and permit n	umber(s) of
same				-		
Do you or any other person	interested in this	s permit hold	any other t	ype of alcoho	lic beverage pe	rmit? YeS
If so, give name, place and	permit number(s	i) Eutry CAH	nsh of Cu	الم	L # 00A48	,
Eatry catfish of Ber						
Will there be dancing on the	premises? (ND	. Dance	Space	X	•



DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES

*For all **ON PREMISES** permits - except private c lubs*

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NAME	OF OUTLET	- Ka	tmy cathish	ot	Nuc.	,	
CITY	North	Little	Rock		COUNTY _	Pulaski	
uses enter	described tainment o	in the ther thar	original applica originally listed	ition. A	ny material s application	change in the o	y is valid only for the utlet's operations or oval af the Director,
						afe / restaurant, poo back of this form if r	ol hall, dancing, etc.) to necessary.
			s proposed, yo bands, dancers		t be specif	ic as to the type	and description of
Fair	it Casua	1 Re	stourant				
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