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OFFICE OF THE MAYOR



JOE A. SMITH
MAYOR
mayor@nlr.ar.gov

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

CITY HALL
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 *GC*
DATE: October 25, 2017
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 off premises grocery store wine permit:

Kyle J. Krause
Kum & Go #152
3220 Spring Hill Drive
North Little Rock, AR

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

Thank you.

Attachments

FILED 9:23 A.M. _____ P.M.
BY Glinda Craigmyle-Admin
DATE 10-25-2017
Diana Whitby, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by Janna [Signature]

NEWASSG0101

ASSIGNMENT

D6J003-D6L013



Date Received: 10/02/2017

Date Assigned: 10/13/2017

Applicant: KYLE J. KRAUSE

D.O.B: 01/10/1963

Green Card Number (Permanent Resident Alien):

Home Address: 30375 Napa Ranch Road, Waukee, IA, 50263

Home Phone: 515-987-1313 **Business Phone :** 501-945-4495 **Cell Phone:** 515-457-6000

Trade Name: KUM & GO #152

Former Trade Name:

Business Address : 3220 Spring Hill Drive, North Little Rock **County** Pulaski

Type Of Investigation: Grocery Store 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
Members:**



ALCOHOLIC BEVERAGE CONTROL DIVISION
COMMENTS OF PUBLIC OFFICIALS

APPLICANT'S NAME: KYLE J. KRAUSE

TYPE OF APPLICATION: Grocery Store Wine - NEW

BUSINESS NAME: KUM & GO #152

BUSINESS ADDRESS: 3220 Spring Hill Drive, North Little Rock, AR, 72117

DATE OF APPLICATION: 10/02/2017

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)

If yes, please explain your objections below:

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.**

**STATE OF ARKANSAS
ALCOHOLIC BEVERAGE CONTROL DIVISION**

APPLICATION FOR GROCERY STORE WINE PERMIT

Permitted Building Size

- Check One:** Less than 35,001 sq.ft
 35,001 sq.ft - 50,000 sq.ft
 50,001 sq.ft - 75,000 sq.ft
 Greater than 75,000 sq.ft

New Application _____
 Replacement _____
 Permit No. 04653

I, or we, do hereby make application to the State of Arkansas for a permit to sell wine in a grocery store as authorized by Act 508 of 2017 and do hereby submit answers to the following questions under oath for your approval:

Kum & Go LC FEIN#: 421465780
 Corporate/Partnership/LLC Name

NAME	<u>Kyle</u>	<u>Joseph</u>	<u>Krause</u>
	First	Middle	Last
MAILING ADDRESS	<u>6400 Westown Parkway</u>	<u>West Des Moines, Iowa</u>	<u>50266</u>
	Street	City	Zip
			County

BUSINESS NAME Kum & Go # 152

BUSINESS ADDRESS	<u>3220 Springhill Dr</u>	<u>North Little Rock, AR</u>	<u>72117</u>	<u>Pulaski</u>
	Street	City	Zip	County
				Township

Does your store, or will your store, maintain an inventory of human consumables? Yes No

Provide the date your store opened for business: December 6, 2012

What percentage of your gross sales are derived, or will be derived, from the sale of alcoholic beverages? 17%

Does anyone now hold any type of permit at this location? Yes No

a. If "yes", give name, permit type, and permit number(s)

Kum & Go LC Retail Beer off Premises/Small Farm Winery-Retail 04653

b. Is one of the permits listed above a small farm wine retail permit? Yes No

c. Will the named permittee and floor plan of the permitted premises remain unchanged? Yes No

d. If you answered "Yes" to the above question, please complete the "Certification of Permit Status" form. You do not need to complete the remaining portion of this application; however, you must sign the application and have it notarized.

Is the proposed location inside or outside city limits? Inside

Are you the owner of the proposed premises? Do you have the premises leased?

If leased, give name and address of owner RI CS2, LLC 11995 El Camino Real San Diego, CA 92130

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 2011 OCT -2 A 11:53
 ABC

If applicant is a partnership, give names and addresses of all partners:

If applicant is a corporation/LLC, give (A) Name and address of stockholders and amount of stock held by each:

Kum & Go Lc is wholly owned subsidiary of Krause Holdings Inc., an Iowa Corporation. All of the Issued and

Outstanding shares of Krause Holdings Inc are Owned by Kyle J Krause

Kyle J Krause 30375 Napa Ranch Rd Waukee IA 50263

(B) Name and address of President and Secretary:

Kyle Krause 30375 Napa Ranch Rd Waukee IA 50263

Charles Campbell 3408 150th st Urbandale IA 50323

NOTE: A Schedule A form is to be completed by each party to this application and is to be considered a part of the application. Existing Small Farm Wine Retail Permittees need not complete a Schedule A form; however, they must complete a Certification of Permit Status form. Any false statements or concealment of fact may be grounds for refusal of application, or revocation of permit(s) if later disclosed.

Signed this 28 day of September, 2017.

Kyle J Krause
Signature of Applicant or Managing Agent

Subscribed and sworn to before me this 28 day of September, 2017.

Lori Miller
Notary Public

My Commission Expires: 4/05/2020

