Comm #2

OFFICE OF THE MAYOR

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

PHONE (501) 975-8601
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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: Anita Paul AKP
DATE: November 29, 2018
SUBJECT: Alcoholic Beverages Permit Request

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

The following applicant has applied for a new Retail Beer on Premises – Replacement from Amelia Hernandez 03181:

Ramon Hernandez
Taqueria Guadalajara
3811 Camp Robinson Road
North Little Rock, AR

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

Thank you.

Attachments

FILED 9:30 A.M. _____ P.M.
BY Interoffice Mail A. Paul
DATE 11-30-18
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by S. Lissey

REPASSG0101

ASSIGNMENT

D6J003-D6L013

Date Received: 11/15/2018

Date Assigned: 11/16/2018

NOV 27 2018

Applicant: RAMON HERNANDEZ

D.O.B: 06/23/1973

Green Card Number (Permanent Resident Alien):

Home Address: 5723 Kelly Road, North Little Rock, AR, 72118

Home Phone:

Business Phone :

Cell Phone: 501-838-9149

Trade Name: TAQUERIA GUADALAJARA

Former Trade Name: TAQUERIA GUADALAJARA

Business Address : 3811 Camp Robinson Road, North Little Rock **County** Pulaski

Type Of Investigation: Retail Beer on Premises - Replacement from Amelia Hernandez 03181

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: RAMON HERNANDEZ

TYPE OF APPLICATION: Retail Beer on Premises - Replacement from Amelia Hernandez

BUSINESS NAME: TAQUERIA GUADALAJARA

BUSINESS ADDRESS: 3811 Camp Robinson Road, North Little Rock, AR, 72118

DATE OF APPLICATION: 11/15/2018

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 ACIC□s request, do not run your own criminal history check through ACIC.**

Printed On: 11/16/2018

Revised 03/11/2016

STATE OF ARKANSAS
ALCOHOLIC BEVERAGE CONTROL DIVISION

APPLICATION FOR RETAIL BEER PERMIT

Check One: (✓) ON PREMISES CONSUMPTION
( ) OFF PREMISES CONSUMPTION

New Application _____
Replacement _____
Permit No. _____

I, or we, do hereby make application to the State of Arkansas for a permit to sell beer at retail, and do hereby submit answers to the following questions under oath for your approval:

_____ FEIN# _____
Corporate /Partnership/LLC Name

NAME Ramon Hernandez
First Middle Last

HOME ADDRESS 5723 Kelly Rd N.L.R AR 72118 Pulaski
Street City Zip County

BUSINESS NAME Taqueria Jovada Lopez FORMER NAME _____

BUSINESS ADDRESS 3811 Camp Robinson Rd N.L.R AR 72118 Pulaski
Street City Zip County Township

Is proposed location inside or outside city limits? Inside

Is the beer to be sold in connection with any other business? Convinian Sto (A) If so, state type of business

(café, drug store, pool hall, service station, convenience store, etc.) Convinience Store

_____ (B) If beer is to be sold in connection with a

motor fuel sales business give number of gasoline and/or diesel pumps at each location _____

Are you the owner of the proposed premises? N/o Do you have the premises leased? Yes

If leased, give name and address of owner _____

Will there be dancing on the premises? N/o Dance Space _____ x _____

Does anyone now hold a beer or any other permit at this location? Yes If so, give name and permit number(s) Amelia Hernandez

Has anyone, to your knowledge, held a beer or any other permit at this location? _____ If so, give name and permit number(s) 01508 And 03181

Do you or any other person interested in this permit hold any other type alcoholic beverage permit? N/o

If held, give name, place and permit number(s) _____

_____

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:

(B) Name and address of President and Secretary:

NOTE: Schedule A is to be completed by each party to this application and is to be considered a part of the application. Any mis-statements or concealment of fact will be grounds for refusal of application, or revocation of permit(s) if later disclosed.

Signed this 6 day of NOVEMBER, 2018.

Signature of Applicant or Managing Agent

Subscribed and sworn to before me this 6 day of November, 2018.

Notary Public

My Commission Expires: 11/12/2023

NOTARY PUBLIC ARKANSAS
MILTON IVAN QUIJANO
No. 12396205
PULASKI COUNTY
My Commission Expires 11-12-2023

REPETDSO101

DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES

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

NAME OF OUTLET Taqueria Guadalupe

CITY N. Little Rock COUNTY Pulaski

Under the Section 1.34 of the ABC Regulations, any permit issued by this agency is valid only for the uses described in the original application. Any material change in the outlet's operations or entertainment other than originally listed in this application, ***without prior approval of the Director***, shall be grounds for revocation of the permit or other administrative penalties.

Describe the types of business and entertainment activities (cafe / restaurant, pool hall, dancing, etc.) to occur on your permitted premises on the lines below. Use the back of this form if necessary.

If live entertainment is proposed, you must be specific as to the type and description of entertainment, i.e., live bands, dancers, etc.

Live Television