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OFFICE OF THE MAYOR



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CITY HALL
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website: www.nlr.ar.gov

MEMORANDUM

TO: Members of the North Little Rock City Council
FROM: Anita Paul *AKP*
DATE: May 10, 2019
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 grocery store wine permit:

John A. Moore
Murphy Express #8797
111 West Pershing Blvd.
North Little Rock, AR 72114

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

Thank you.

Attachments

FILED _____ A.M. *2:30* P.M.
BY *Anita Paul Mayors Office*
DATE *5-10-19*
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by _____

ASSIGNMENT

D6J003-D6L013



Date Received: 04/03/2019

Date Assigned: 04/26/2019

Applicant: JOHN A. MOORE

D.O.B: 07/07/1967

Green Card Number (Permanent Resident Alien):

Home Address: 2316 Ridgewood, El Dorado, AR, 71730

Home Phone:

Business Phone : 870-875-7680

Cell Phone: 870-875-7517

Trade Name: MURPHY EXPRESS #8797

Former Trade Name:

Business Address : 111 West Pershing Blvd., 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

Eric S. Higgins, Sheriff

Larry Jegley, Prosecuting Attorney

Assigned to Investigator: _____

**Stockholders / Partners / LLC
Members:**

ALCOHOLIC BEVERAGE CONTROL DIVISION
COMMENTS OF PUBLIC OFFICIALS



D6J003-D6L012

APPLICANT'S NAME: JOHN A. MOORE

TYPE OF APPLICATION: Grocery Store Wine - NEW

BUSINESS NAME: MURPHY EXPRESS #8797

BUSINESS ADDRESS: 111 West Pershing Blvd., North Little Rock, AR, 72114

DATE OF APPLICATION: 04/03/2019

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.**



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. 04850

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:

Murphy Oil USA, Inc. FEIN#: 71-0727492
 Corporate/Partnership/LLC Name

NAME John A Moore
 First Middle Last

MAILING ADDRESS PO Box 7300 El Dorado, AR 71731
 Street City Zip County

BUSINESS NAME Murphy Express #8797

BUSINESS ADDRESS 111 West Pershing Blvd N Little Rock, AR 72114 Pulaski County
 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: 10/05/2016

What percentage of your gross sales are derived, or will be derived, from the sale of alcoholic beverages? 0.4 %

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

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

See full list attached

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.

2019 APR -3 A

Is the proposed location inside or outside city limits? _____

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

If leased, give name and address of owner _____