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### OFFICE OF THE MAYOR



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

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 W

DATE:

June 22, 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 on and off premises native beer and malt beverages permit: (Addition to two existing beer permits.)

James R. Jackson Rockwater Marina 1600 Rockwater Blvd. North Little Rock, AR

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

Thank you.

Attachments

PILED YOS A.M. P.M.

BY CUINA C. MOUNT Office

DATE 0-25-18

Diane Whitbey, City Clerk and Collector

North Little Rock, Arkansas

RECEIVED by

"An Equal Opportunity Employer"

**ASSIGNMENT** 

D6J003-D6L013



Date Received: 06/13/2018

Date Assigned: 06/19/2018

Applicant: JAMES R. JACKSON

D.O.B: 03/20/1967

Green Card Number (Permanent Resident Alien):

Home Address: 58 Carmel Drive, Little Rock, AR, 72212

Home Phone: 501-823-3610 Business Phone:

Cell Phone: 501-944-8634

Trade Name: ROCKWATER MARINA

Former Trade Name:

Type Of Investigation: Native Beer & Malt Beverages - 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 Scott M Fitzpatrick, 118 Skyline Drive, Cassville, MO, 65625

Members:

DOB: 9/28/1987

Lisa Ferrell, 53 Carmel Drive, Little Rock, AR, 72212

DOB: 7/16/1963



## ALCOHOLIC BEVERAGE CONTROL DIVISION COMMENTS OF PUBLIC OFFICIALS

Deagon per per

APPLICANT'S NAME: JAMES R. JACKSON

TYPE OF APPLICATION: Native Beer & Malt Beverages - NEW

BUSINESS NAME: ROCKWATER MARINA

BUSINESS ADDRESS: 1600 Rockwater Boulevard, North Little Rock, AR, 72114

DATE OF APPLICATION: 06/13/2018

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

Printed On: 06/19/2018





# STATE OF ARKANSAS ALCOHOLIC BEVERAGE CONTROL DIVISION APPLICATION FOR ARKANSAS NATIVE BEER AND MALT BEVERAGES PERMIT

| Circle One: ON           | PREMISES   |                      | Ne                | w Application   | 1                     |
|--------------------------|--|----------------------|-------------------|-----------------|-----------------------|
|                          |  |                      |                   | olacement       | X                     |
| OF                       | F PREMISES)  |                      | Per               | mit No.         | 34848-80084c          |
|                          | make application to the St<br>hereby submit answers to |                      |                   |                 |                       |
| LAD LI                   | LC dba Rockwater Marina                                | -                    | FEIN#             | 20-09           | 989861                |
| Corpora                  | te/partnership/LLC Name                                |                      |                   |                 |                       |
|                          |  |                      |                   |                 |                       |
| NAME James               |  | R.                   |                   |                 | Jackson               |
| First                    |  | Middle               |                   |                 | Last                  |
| HOME ADDRESS             | 58 Carmel Drive  | Little Rock          | Arkansas          | 72212           | Pulaski               |
| ·                        | Street   | City                 |                   | Zip             | County                |
| BUSINESS NAME            | Rockwater Marina                                       |                      | FORMER NA         | ME N/A          |                       |
| 20011200 17.4112         | 1/- 2 /  | 7 70 1 1 1           |                   | 77 L            | D /                   |
| BUSINESS ADDRE           | ss <u>1600 Rockwał</u><br>Street                       | er 15/vol ; 10       | orth Little       | <u>Kock</u>     | rulaskit              |
|                          | Street   | City                 | ΖIÞ               | County          | lownship              |
| Is proposed location     | n inside or outside city limit                         | s? Inside            |                   |                 |                       |
|                          | 4.4 .4 .44   |                      | Voc               |                 |                       |
| is the peer to be sol    | d in connection with any o                             | ther business?       | (A)               | It so, state ty | pe of business        |
| (café, drug store, po    | ol hall, service station, cor                          | nvenience store, e   | etc.) Marina      |                 |                       |
|                          |  |                      | ,                 |                 |                       |
|                          |  |                      | _(B) If beer is t | to be sold in   | connection with a     |
| motor fuel sales bus     | iness give number of gasc                              | oline and/or diese   | pumps at eac      | h location      | 1 gas, 1 diesel       |
|                          |  |                      |                   |                 | •                     |
| Are you the owner o      | f the proposed premises?                               | <u> </u>             | you have the      | premises lea    | sed? <u>no</u>        |
| f leased, give name      | and address of owner                                   |                      |                   |                 |                       |
| To you parmit donair     | ng uhara baar will ba sald                             | 2 no 5-              | .naa Snaas        |                 |                       |
| o you permit darion      | ng where beer will be sold                             | , De                 | ince Space        |                 | X                     |
| Does anyone now ho       | old a beer or any other per                            | mit at this location | n? <u>yes</u>     | _ If so, give i | name and permit       |
| number(s) James R. i     | Jackson (myself) currently                             | v holds two, one c   | on premise and    | l on off prem   | nise. Both are called |
|                          | r Marina. Permit Nanibê                                |                      |                   |                 |                       |
|                          | knowledge, held a beer or                              |                      |                   |                 |                       |
| and managed to construct | S1:2 d L-  | NOC 8107             |                   |                 | -                     |



| Do you or any other person interested in this permit hold any   | other type alcoh                         | nolic beverage p  | permit? <u>no</u>                 |
|---|--|---|-----------------------------------|
| If held, give name, place and permit number(s)  |  |   |                                   |
| Give nearest distance, building to building, from CHURCH  | 0.5 miles                                | SCHOOL_   | 0.6 miles                         |
| If applicant is a partnership, give names and addresses of all  | partners:                                |   |                                   |
|   |  |   |                                   |
| . ,   |  |   |                                   |
| If applicant is a corporation, give (A) Name and address of sto   | ockholders and a                         | mount of stock  | held by each:                     |
| We are an LLC. The stockholders are James Jackson, Lisa Fe Little Rock, Arkansas 72212), and Scott Fitzpatrick (27882M  |  |   |                                   |
|   |  | W. A. Company of the |                                   |
| (B) Name and address of President and Secretary:  |  |   |                                   |
| President: Lisa Ferrell. Secretary: Jim Jackson. Both share add   | dress of 58 Carn                         | nel Drive, Little   | Rock, AR 72212                    |
| NOTE: Schedule "A" is to be completed by each party to this a application. Any mis-statements or concealment of fac revocation of permit(s) if later disclosed. | application and is<br>at will be grounds | s to be consider<br>s for refusal or a  | red a part of the application, or |
| Signed this 8th day of June   |  | 2018  |                                   |
|   | C)An                                     | i. Gat.   | Ser .                             |
| subscribed and sworn to before me this day of   | June                                     | pplicant's Signa  |                                   |
|   | HOBINKS                                  | OS Public   |                                   |
| ly Commission Expires: 9-26-2023  | AND A                                    | ROBIN ROS   |                                   |



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

D6J003-D6t014

| NAME OF OUTLET Rockwater Marina   |   |
|---|---|
| CITY North Little Rock  | COUNTY Pulaski  |
| uses described in the original app<br>entertainment other than originally lis     | egulations, any permit issued by this agency is valid only for the<br>lication. Any material change in the outlet's operations or<br>sted in this application, without prior approval of the Director,<br>permit or other administrative penalties. |
| Describe the types of business and ente<br>occur on your permitted premises on th | ertainment activities (cafe / restaurant, pool hall, dancing, etc.) to e lines below. Use the back of this form if necessary.   |
| If live entertainment is proposed, entertainment, i.e., live bands, dance         | you must be specific as to the type and description of  |
| Marina boat slip rental, sale of boat fuel  |   |
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