

Item# 13B

**City of Carson City  
Agenda Report**

**Date Submitted:** July 28, 2009

**Agenda Date Requested:** August 6, 2009

**Time Requested:** 10 minutes

**To:** Liquor Board

**From:** Business License, Development Services

**Subject Title:** Action to approve Etna Hazel Mary Ann Skinner as the liquor manager for the Glastine Pub full bar liquor license (Liquor License #10-26607) located at 1914 N. Carson St., Carson City. (Jennifer Pruitt)

**Staff Summary:** Per CCMC 4.13, all liquor license requests are to be reviewed by the Liquor Board.

**Type of Action Requested:**

Resolution

Ordinance

Formal Action/Motion

Other (Specify)

**Does This Action Require A Business Impact Statement:**  Yes  No

**Recommended Board Action:** I move to approve Etna Hazel Mary Ann Skinner as the liquor manager for the Glastine Pub full bar liquor license (Liquor License #10-26607) located at 1914 N. Carson St., Carson City.

**Explanation for Recommended Board Action:** The Liquor Board has the authority to approve all liquor licenses pursuant to CCMC 4.13(1).

**Applicable Statute, Code, Policy, Rule or Regulation:** CCMC 4.13

**Fiscal Impact:** N/A

**Explanation of Impact:** N/A

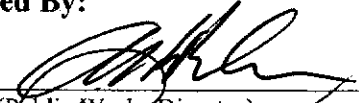
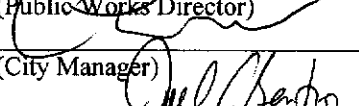
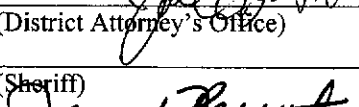
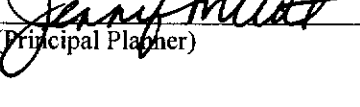

**Funding Source:** N/A

**Alternatives:** 1) Refer back to the Business License Division, or  
2) Deny

**Supporting Material:** 1) Background check from Sheriff's Office  
2) Carson City Liquor License Application

**Prepared By:** Lena Tripp, Senior Permit Technician

**Reviewed By:**

  
\_\_\_\_\_  
(Public Works Director)  
  
\_\_\_\_\_  
(City Manager)  
  
\_\_\_\_\_  
(District Attorney's Office)  
  
\_\_\_\_\_  
(Sheriff)  
  
\_\_\_\_\_  
(Principal Planner)

Date: 7-28-09  
Date: 7/28/09  
Date: 7-28-09  
Date: \_\_\_\_\_  
Date: 7-28-09

**Board Action Taken:**

Motion: \_\_\_\_\_

1) \_\_\_\_\_ Aye/Nay  
2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Vote Recorded By)

# CITY OF CARSON CITY LIQUOR LICENSE APPLICATION

2621 Northgate Lane, Suite 6 Carson City, NV 89703  
(775)887-2105 fax (775)887-2202

Full Name of Applicant(s) Etna Hazel Mary Ann Skinner Liq. Lic# 10 9-26607  
 Corporate Name Majestic Serenity LLC  
 Fictitious Firm Name The Glestine Pub Date Filed 6-1-09  
 Business Location 1914 W. Carson St. Carson City NV 89701 Business Phone 775-342-9494 9649  
 Mailing Address 1914 W. Carson St Carson City NV 89701 Home Phone 775-342-9494 9649  
 e-mail Address the.glestine.pub@yahoo.com  
 Date Liquor Sales will start? July 2009 Management Agreement on File? No

Type of Liquor Sales: (check all that apply)  
 Full bar liquor sales  
 Packaged Liquor  
 Dining room w/full liquor  
 Packaged beer & wine  
 Dining room w/beer & wine  
 Wholesaler  
 Manufacturer  
 Additional Bar(s) @ location (#\_\_\_\_)  
 Combo Packaged & on-premise liquor license

List ALL owners, partners or corporate officers below:

<u>Renith Causey</u>	<u>1992 Marie Dr Carson City NV 89706</u>	<u>775-342-9649</u>
Name & Title	Address	Phone #
<u>Nicole Lindsay</u>	<u>1992 Marie Dr Carson City NV 89706</u>	<u>775-200-3351</u>
Name & Title	Address	Phone #
<u>Jessica Singleton</u>	<u>1992 Marie Dr Carson City NV 89706</u>	<u>775-342-8196</u>
Name & Title <u>Removed</u>	Address	Phone #

Are you familiar with Nevada Liquor Laws?  yes  no  
 Have you ever obtained a liquor license before?  yes  no If yes, where?

Non-Refundable Investigation Fee \$ 500.00 Date Paid \_\_\_\_\_  
 Original New Application Fee \$ 1000.00 Date Paid \_\_\_\_\_  
 Liquor License Per Quarter \$ \* 800.00 Date Paid \* Due Upon  
Year Liquor License Approval

**CERTIFICATION:** I hereby certify that the above information is correct to the best of my knowledge and belief. I understand that this liquor license, if approved, may not be transferred to any other person or to any other location, without prior approval by the Liquor Board. I further understand the investigation period may be forty-five (45) days or longer for processing.

Signature Etna Skinner Date 6-1-09  
 Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

PAID

Witnessed by: \_\_\_\_\_ Date \_\_\_\_\_ CK. NO. 1001 \$ 1500.00  
 DATE 6-1-09

===== FOR SHERIFF'S DEPARTMENT USE ONLY =====  
 901 E Musser St. Carson City, NV 89701  
 (775)887-2020 x.1400

Date Applicant Fingerprinted _____	By _____	File # _____
Date Applicant Fingerprinted _____	By _____	File # _____
Date Applicant Fingerprinted _____	By _____	File # _____