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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 42

DATE:

March 3, 2015

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 restaurant mixed drink permit:

Nahri Kim Bar Louie 3929 McCain 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

Comica de

DATE Diane Whithey, City Clerk and Collector

North Little Rock, arkansas

ASSIGNMENT

D8J003 D8L013



Date Received: 02/13/2015

Date Assigned: 02/24/2015

Applicant: Nahri Kim

D.O.B: 09/01/1991

Green Card Number (Permanent Resident Alien):

Home Address: 26 Serenity Drive, Little Rock, AR, 72205

Home Phone:

Business Phone: 501-228-0444

Cell Phone: 501-920-7958

Trade Name: BAR LOUIE

Former Trade Name:

Business Address: 3929 McCain Blvd., North Little Rock

County Pulaski

Type Of Investigation: Restaurant Mixed Drink - 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: NAHRI KIM

TYPE OF APPLICATION: Restaurant Mixed Drink - NEW

BUSINESS NAME: BAR LOUIE

BUSINESS ADDRESS: 3929 McCain Blvd., North Little Rock, AR, 72116

DATE OF APPLICATION: 02/13/2015

NAME OF PUBLIC OFFICIAL:

TITLE OF OFFICIAL:

OFFICIAL MAILING ADDRESS:

PHONE:

SIGNATURE OF OFFICIAL:

DATE:

NAME OF AGENCY OR COURT:

(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.

Printed On: 02/24/2015

Do you have any objections to the issuance of this permit?

If yes, please explain your objections below:



DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES

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

NAME OF OUTLET BOY LOUIS NOVEM WITH ROUK
CITY North Little Rock County Polassici
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 much specified as to the type and description of that entertainment, i.e., live bands, dancers, etc.
Full restauraunt & bar, nospitality, take out, late night dining