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OFFICE OF THE MAYOR



JOE A. SMITH  
MAYOR  
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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: May 7, 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 Small Brewery – Tap Room (1) – 411 Main Street, NLR 72114:

Matthew J. Foster  
Flyway Brewing Company  
314 Maple Street  
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. 1:45 P.M.  
BY Anita Paul  
DATE 5-7-19  
Diane Whitbey, City Clerk and Collector  
North Little Rock, Arkansas  
RECEIVED by S. Hssey



**ASSIGNMENT**

D6J003-D6L013



Date Received: 04/24/2019

Date Assigned: 05/06/2019

Applicant: MATTHEW J. FOSTER

D.O.B: 09/25/1973

Green Card Number (Permanent Resident Alien):

Home Address: 2120 South Spring Street, Little Rock, AR, 72206

Home Phone: Business Phone : 501-350-8868 Cell Phone: 501-920-9291

Trade Name: FLYWAY BREWING COMPANY

Former Trade Name:

Business Address : 314 Maple Street, North Little Rock County Pulaski

Type Of Investigation: Small Brewery - Tap Room (1)- 411 Main Street, NLR 72114

Dancing, if requested:

Comments / Remarks :

Copies Of Assignment and Comment Form Mailed to: Mayor Joe Smith & City Council  
Michael Davis, Chief of Police  
Sheriff Eric S. Higgins  
Mr. Larry Jegley, Prosecuting Attorney

Assigned to Investigator: \_\_\_\_\_

Stockholders / Partners / LLC Members: Jess McMullen  
6 Morrison Court  
Little Rock, AR 72212  
11/26/1970  
501-350-8868

ALCOHOLIC BEVERAGE CONTROL DIVISION  
COMMENTS OF PUBLIC OFFICIALS



Form ABC 100-1

APPLICANT'S NAME: MATTHEW J. FOSTER

TYPE OF APPLICATION: Small Brewery - Tap Room (1)- 411 Main Street, NLR 72114

BUSINESS NAME: FLYWAY BREWING COMPANY

BUSINESS ADDRESS: 314 Maple Street, North Little Rock, AR, 72114

DATE OF APPLICATION: 04/24/2019

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.**

*Handwritten signature/initials*

STATE OF ARKANSAS  
ALCOHOLIC BEVERAGE CONTROL DIVISION  
APPLICATION FOR SMALL BREWERY TAP ROOM

Arkansas Small Brewery Permit Number 01135

I, or we, do hereby make application to the State of Arkansas to operate a small brewery tap room, and do hereby submit answers to the following questions under oath for your approval:

Flyway Brewing Company  
Name of Small Brewery

Matthew J. Foster  
Name of Individual on Existing Small Brewery Permit

NAME OF TAP ROOM MANAGING AGENT: (Managing Agent must either live in the same county as the proposed tap room's location or within thirty five miles of the proposed tap room's location.)

Jess Michael McMullen  
First Middle Last

ADDRESS OF MANAGING AGENT:  
6 Morrison Court Little Rock 72212 Pulaski  
Street City Zip County

DATE OF BIRTH OF MANAGING AGENT (Must be at least 21 years old): 11/26/1970

TELEPHONE NUMBER OF MANAGING AGENT: 501-350-8868

ADDRESS OF PROPOSED TAP ROOM:  
411 Main Street North Little Rock 72114 Pulaski North Little Rock  
Street City Zip County Township

Is proposed location inside or outside city limits? Inside North Little Rock

Are you the owner of the proposed premises? No Do you have the premises leased? Yes

If leased, give name and address of owner ~~Flyway~~ Old Silver City LLC

Does anyone now hold any other permit at this location? No If so, give name and permit number(s) \_\_\_\_\_

2018 APR 24 A 9:07



DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES

\*For all ON PREMISES permits - except private clubs\*

08J003-D01.014

NAME OF OUTLET Brood and Barrel - A Flyway Brewing Project  
CITY North 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.

Flyway Brewing Company would like to open a satellite taproom. In this taproom, Flyway Brewing would like to feature our specialty brews. We will also sell wine and a few Rocktown Distillery cocktails. We will also have a full food menu that pairs with our beers. We will not have any live entertainment.

This is the former Core Brewing North Little Rock, Argenta location.

Please call me with any questions  
Jess McMullen 501-350-8868