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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
DATE: May 8, 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 retail beer off premises permit replacement for Jawed Arab #05796:

Young Chun
IGA Food Mart
124 Eureka Garden Road
North Little Rock, AR 72117

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

Thank you.

Attachments

FILED _____ A.M. 3:00 P.M.
BY Anita Paul
DATE 5-8-19
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by J. H. Hesser

REPASSG0101

05/06/2019

ASSIGNMENT

D6J003-D6L013



Date Received: 05/01/2019



Date Assigned: 05/06/2019

Applicant: YOUNG CHUN

D.O.B: 01/24/1963

Green Card Number (Permanent Resident Alien):

Home Address: 1310 Medinah Blvd., Bryant, AR, 72022

Home Phone:

Business Phone :

Cell Phone: 213-507-8502

Trade Name: IGA FOOD MART

Former Trade Name: EUREKA GARDEN FOOD MART

Business Address : 124 Eureka Garden Road, North Little Rock County Pulaski

Type Of Investigation: Retail Beer off Premises - Replacement for Jawed Arab #05796

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: Sabira Merchant, 12312 Cherryside Drive, Little Rock, AR, 72211
DOB: 12/3/1984

ALCOHOLIC BEVERAGE CONTROL DIVISION
COMMENTS OF PUBLIC OFFICIALS



148980-007-3

APPLICANT'S NAME: YOUNG CHUN

TYPE OF APPLICATION: Retail Beer off Premises - Replacement for Jawed Arab

BUSINESS NAME: IGA FOOD MART

BUSINESS ADDRESS: 124 Eureka Garden Road, North Little Rock, AR, 72117

DATE OF APPLICATION: 05/01/2019

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.**

Bob
Foster
5/19

effective 7-1-19



STATE OF ARKANSAS
ALCOHOLIC BEVERAGE CONTROL DIVISION
APPLICATION FOR RETAIL BEER PERMIT

Check One: () ON PREMISES CONSUMPTION
() OFF PREMISES CONSUMPTION

New Application _____
Replacement _____
Permit No. ~~05296~~ 05296

Replacing ~~Bob Foster~~
Jawed Arab

I, or we, do hereby make application to the State of Arkansas for a permit to sell beer at retail, and do hereby submit answers to the following questions under oath for your approval:

786 K&H, LLC
Corporate /Partnership/LLC Name FEIN# 83-0912247

NAME Young S. Chun
First Middle Last

HOME ADDRESS 1310 Medinah Blvd, Bryant, AR 72022 Saline Co.
Street City Zip County

BUSINESS NAME IGA Food Mart FORMER NAME Eureka Garden Food Mart

BUSINESS ADDRESS 124 Eureka Garden Rd. N. Little Rock, AR 72117 Pulaski Co
Street City Zip County Township

Is proposed location inside or outside city limits? Inside

Is the beer to be sold in connection with any other business? yes (A) If so, state type of business
(café, drug store, pool hall, service station, convenience store, etc.) _____

Grocery Store (B) If beer is to be sold in connection with a
motor fuel sales business give number of gasoline and/or diesel pumps at each location N/A

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

If leased, give name and address of owner _____

Will there be dancing on the premises? No Dance Space -*

Does anyone now hold a beer or any other permit at this location? yes If so, give name and permit
number(s) Jawed Arab 05296

Has anyone, to your knowledge, held a beer or any other permit at this location? yes If so, give name
and permit number(s) Jawed Arab

Do you or any other person interested in this permit hold any other type alcoholic beverage permit? yes

If held, give name, place and permit number(s) Aden 786, LLC / #00713
Mabelude / #03168 Tom & Jean