Comm #7

OFFICE OF THE 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: August 3, 2020
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 restaurant mixed drink permit – Minimum – New #34299:

Stanley Fraser
My Friend's Place
5501 Mac Arthur Dr
North Little Rock, AR 72118

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

Thank you.

Attachments

FILED ____ A.M. 3:10 P.M.
BY A. Paul
DATE 8.3.20
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by: S. Lissard

NEWASSG0101 Printed On:07/30/2020

ASSIGNMENT

Date Received: 07/17/2020 Received Date Assigned: 07/30/2020

Applicant: STANLEY FRASER AUG 03 2020 D.O.B: 01/07/1947

Green Card Number (Permanent Resident Alien): City of NLR Mayor's Office By:_____

Home Address: 2105 VIRGINIA DRIVE, NORTH LITTLE ROCK, AR 72118

Home Phone: 5017731006 Business Phone: Cell Phone: (501) 904-2150

Trade Name: MY FRIEND'S PLACE

Former Trade Name:

Business Address: 5501 MAC ARTHUR DRIVE, NORTH LITTLE ROCK, AR 72118, County 60 - PULASKI

is Business Address located within City Limits: Yes

Type Of Investigation: **New Application #34299**

Dancing, if requested: No

Comments / Remarks:

Copies Of Assignment and Comment Form Mailed to: ABC-ATC.AssignmentSheet@dfa.arkansas.gov;

Assigned to Investigator: _____

Stockholders / Partners / LLC Members :

COMMENTS OF PUBLIC OFFICIALS

APPLICANT'S NAME: STANLEY FRASER

TYPE OF APPLICATION: RESTAURANT MIXED DRINK MINIMUM

BUSINESS NAME: MY FRIEND'S PLACE

BUSINESS ADDRESS: 5501 MAC ARTHUR DRIVE, NORTH LITTLE ROCK, AR 72118, 60 - PULASKI

DATE OF APPLICATION: 07/17/2020

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.

Printed On: 07/30/2020

P&N Sent 7/22/20

STATE OF ARKANSAS
ALCOHOLIC BEVERAGE CONTROL DIVISION

APPLICATION FOR PERMIT TO SELL ALCOHOLIC BEVERAGES FOR CONSUMPTION ON THE PREMISES

Check One: ( ) Hotel-Motel
(✓) Restaurant Only

New Application ✓ Sole prop.
Replacement
Permit No.

I, or we, do hereby make application to the State of Arkansas for a permit to sell alcoholic beverages for consumption on the premises, and do hereby submit answers to the following questions under oath for your approval.

My Friend's Place — FEIN# 85-1951182
Corporate/Partnership/LLC Name

NAME Stanley (First) P. (Middle) Fraser (Last)

HOME ADDRESS 2105 Virginia Dr. (Street) N.L.R. (City) 72118 (Zip) Pulaski (County)

BUSINESS NAME My Friend's Place Grill FORMER NAME

BUSINESS ADDRESS 5501 Mac Arthur Dr. (Street) N.L.R. (City) AR. (Zip) 72118 (County) Pulaski

Is proposed location inside or outside city limits? Inside

Are the beverages to be sold in connection with any other business? No If so, state type of business

Are you the owner of the proposed premises? No If leased, give name and address of owner Bill Yeates 3424 N. Maple St. AR. 72118 Does anyone now hold a permit at this location? No If so, give name, type and permit number(s) of same

Do you or any other person interested in this permit hold any other type of alcoholic beverage permit? No

If so, give name, place and permit number(s)

Number of sleeping rooms in hotel — Seating capacity of restaurant 50
(NOTE: Seating capacity should also include any lounge or outside seating areas)

(CHECK MEALS SERVED: Breakfast ____ Lunch ✓ Dinner ✓ Number of days open per week ____

Has there ever been a beer, wine or liquor permit revoked at this location? No If so, give name and date revoked

2020 JUL 30 AM 8:40

2020 JUL 30 AM 8:47

My Friend's Place Bar & Grill is approximately 2400 square feet, seating roughly 60, with more than enough room for social distancing. We have a full bar, able to serve all kinds of different alcoholic and non-alcoholic beverages, ranging from top-shelf hard liquor, mixed drinks, fine wine, and your choice of kraft beers, foreign and domestic, and over a half dozen popular draft beer products; not to mention tea, coffee and your favorite soda brand choices. Accompanying our varied beverage selections is a menu of healthy choices and guilty pleasures. Red meat, chicken, seafood, burgers, and sandwiches that are sure to tempt your tummy. Equipped with the support of a spacious walk-in cooler and freezer, our kitchen's layout includes: a commercial grade oven, complete with six gas burners and a sizzling hot flat grill. Also supported by gas are our two heavy duty deep fryers, complete with its own filtration system. Within our kitchen space there are also coffee and tea makers along with a Cornelius Ice machine.