#2

OFFICE OF THE MAYOR

TERRY C. HARTWICK
MAYOR
mayor@nlr.ar.gov

CITY HALL
P.O. BOX 5757
NORTH LITTLE ROCK, ARKANSAS 72119-5757
website: www.nlr.ar.gov

PHONE (501) 975-8601
FAX (501) 975-8633

MEMORANDUM

TO: Members of the North Little Rock City Council
FROM: Anita Paul AKP
DATE: May 17, 2021
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 Private Club Class A – wet county, retail beer on premises permit – change of manager application:

Levy Memorial V.F.W. Post 11474
Robert Peak
4400 Lynn Lane
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. 4:15 P.M.
BY Windy Anita
DATE 5/17/21
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by _____

"An Equal Opportunity Employer"

NEWASSG0101

Printed On:04/30/2021

ASSIGNMENT

Received

MAY 17 2021

City of NLR Mayor's Office

Date Received: 04/06/2021

Date Assigned: 04/30/2021

Applicant: ROBERT PEAK

D.O.B: 12/29/1965

Green Card Number (Permanent Resident Alien): _____

Home Address: 3823 NORTH MAGNOLIA STREET, NORTH LITTLE ROCK, AR 72116

Home Phone: 8177394953 Business Phone: Cell Phone: (501) 753-5538

Trade Name: LEVY MEMORIAL V.F.W. POST 11474

Former Trade Name: LEVY MEMORIAL V.F.W. POST 11474

Business Address: 4400 LYNN LANE, NORTH LITTLE ROCK, AR 72118, County 60 - PULASKI

is Business Address located within City Limits: N/P

Type Of Investigation: **Change of Manager Application**

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: ROBERT PEAK

TYPE OF APPLICATION: PRIVATE CLUB CLASS A - WET COUNTY, RETAIL BEER ON PREMISES

BUSINESS NAME: LEVY MEMORIAL V.F.W. POST 11474

BUSINESS ADDRESS: 4400 LYNN LANE, NORTH LITTLE ROCK, AR 72118, 60 - PULASKI

DATE OF APPLICATION: 04/06/2021

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, 101 East Capitol, Suite 401, 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: 04/30/2021

C0M00000101

Change Of Manager / Additional Stockholder(s) / Partner(s) Application

35655

Permit Holder: **Louis Gonyea**

Permit No	Trade Name of Business and Address	Business Phone	Contact Phone
02022	**LEVY MEMORIAL V.F.W. POST 11474** **4400 Lynn Lane, North Little Rock, AR, 72118**	501-753-5538	

	Current Address	If new address change here
Home Address	215 Taylor Road Jacksonville, AR, 72076	
Mailing Address	4400 Lynn Lane North Little Rock, AR, 72118	
Email Address		

Please check the appropriate (Requested Change) :

- [x] Change Of Manager
- [ ] Additional Stockholder(s)
- [ ] Additional Partner(s)

Please check applicable permits :

Select	Permit Description	Fee	
[x]	Retail Beer On Premises	$50.00	
[x]	Private Club Class A	$50.00	**NO CASH**
	Total Amount :		

I do hereby acknowledge the receipt of Instructions for Change Of Manager/Additional Stockholder(s) / Partner(s) and make a request for the above mentioned change(s).

3-11-21
Date

Michael McAllister
Signature

RECEIVED
2021 APR -6 P 2:09
ABC

NE&LT&SQ1&2

DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES

FOR PRIVATE CLUB PERMIT

NAME OF OUTLET Lucy Memorial VFW Post 1474

CITY Maumelle COUNTY Pulaski

Arkansas Law requires that a private club must exist for some reason other than the consumption of alcoholic beverages. On this sheet of paper, which is a part of your verified application, you are to describe, in complete detail, what entertainment (live bands, dancers, food service, etc.), social functions, or other recreational events will be available at the club for the members. If you are in doubt about whether to list an item, you are urged to include it.

Under Section 1.34 of the ABC regulations, any permit issued by this agency is only valid for the uses described in the original application. Any material change in the club's operation or entertainment, other than originally listed in this application, ***without prior approval of the director***, shall be grounds or revocation of your permit.

On your floor plan, which is a separate attachment, please mark the entrance to the private club, noting the location of the guest book, and mark any major features of the private club area, including where specific entertainment items will be located.

PLEASE PRINT OR TYPE YOUR RESPONSES BELOW. USE THE BACK OF FORM, OR ADDDITIONAL SHEETS, IF NECESSARY.

- LIVE BAND ONCE EACH MONTH
- DINNERS APPROX. ONCE PER MONTH; FISH, BBQ, ETC.
- POOL & SHUFFLEBOARD DAILY
- VFW MEMBER MEETINGS MONTHLY