Comm
Le

OFFICE OF THE MAYOR

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

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

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: September 2, 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 restaurant mixed drink minimum permit – Additional permits #36550:

James Barnes
Northshore Golf Range
5401 Northshore Cove
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. 3:15 P.M.
BY A. Paul
DATE 9-2-21
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by

NEWASSG0101 Printed On:08/30/2021

ASSIGNMENT

Received
SEP 02 2021
City of NLR Mayor's Office
By

Date Received: 08/03/2021 Date Assigned: 08/30/2021

Applicant: JAMES BARNES D.O.B: 08/11/1970

Green Card Number (Permanent Resident Alien): _____

Home Address: 14 SOLOGNE CIRCLE, LITTLE ROCK, AR 72223

Home Phone: 5019407206 Business Phone: (501) 771-4747 Cell Phone: (501) 940-7206

Trade Name: NORTHSHORE GOLF RANGE

Former Trade Name: NORTHSHORE GOLF RANGE

Business Address: 5401 NORTHSHORE COVE, NORTH LITTLE ROCK, AR 72118, County 60 - PULASKI

is Business Address located within City Limits: Yes

Type Of Investigation: **Additional Permits #36550**

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 : TERRY BARNES

COMMENTS OF PUBLIC OFFICIALS

APPLICANT'S NAME: JAMES BARNES

TYPE OF APPLICATION: RESTAURANT MIXED DRINK MINIMUM

BUSINESS NAME: NORTHSHORE GOLF RANGE

BUSINESS ADDRESS: 5401 NORTHSHORE COVE, NORTH LITTLE ROCK, AR 72118, 60 - PULASKI

DATE OF APPLICATION: 08/03/2021

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: 08/30/2021

current PN given 4/3/21

STATE OF ARKANSAS
ALCOHOLIC BEVERAGE CONTROL DIVISION

APPLICATION FOR PERMIT TO SELL ALCOHOLIC BEVERAGES FOR

CONSUMPTION ON THE PREMISES

Check One: ( ) Hotel-Motel

(X) Restaurant Only

New Application ✓
Replacement
Permit No. 04445-02

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.

NS Golf Range, LLC — FEIN# 81-2233636
Corporate/Partnership/LLC Name

NAME James (First) Vasey (Middle) Barnes (Last)

HOME ADDRESS 14 Sologne Cir. (Street) LR (City) 72223 (Zip) Pulaski (County)

BUSINESS NAME Northshore Golf Range FORMER NAME

BUSINESS ADDRESS 5401 Northshore Cove (Street), NLR (City) 72118 (Zip) Pulaski (County)

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? yes If leased, give name and address of owner

—

Does anyone now hold a permit at this location? yes If so, give name, type and permit number(s) of same

Beer Permit Env Health Permit AP Retail 1159140

Do you or any other person interested in this permit hold any other type of alcoholic beverage permit? 04445-0

If so, give name, place and permit number(s) James Barnes, Northshore Golf Range, beer perm

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 X Dinner X Number of days open per week 7

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

NEWETDS0101

DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES

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

NAME OF OUTLET Northshore Golf Range

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.

Restaurant will be located at Northshore Golf Range. Northshore is a driving range but we are wanting to provide alcohol at the restuarant on location. There are special events occasionally where there will be live entertain, such as a band/singer. Seating is outside on patio/deck.