

OFFICE OF THE MAYOR

#4

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



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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: June 20, 2023
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, retail liquor permit -- replacement/new owner #40748:

Rajinderpal Singh Chahal
Red Devil Liquor
6012 Crystal Hill Road
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. 2:50 P.M.
BY A. Paul
DATE 6-20-23
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by [Signature]

JUN 20 2023

City of NLR Mayor's Office

By: _____

Printed On:06/15/2023

NEWASSG0101

ASSIGNMENT

Date Received: 06/07/2023

Date Assigned: 06/15/2023

Applicant: RAJINDERPAL SINGH CHAHAL

D.O.B: 12/19/1994

Green Card Number (Permanent Resident Alien):

Home Address: 1810 ROYAL DRIVE, CONWAY, AR 72034

Home Phone: 5014105809

Business Phone: (501) 615-8868

Cell Phone: (501) 410-5809

Trade Name: I-40 LIQUOR & WINE

Former Trade Name: RED DEVIL LIQUOR

Business Address: 6012 CRYSTAL HILL ROAD, NORTH LITTLE ROCK, AR 72118, County 60 - PULASKI

is Business Address located within City Limits: Yes

Type Of Investigation: **Replacement/New Owner #40748**

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 : SATVIR DHANOA

COMMENTS OF PUBLIC OFFICIALS

APPLICANT'S NAME: RAJINDERPAL SINGH CHAHAL

TYPE OF APPLICATION: RETAIL BEER OFF PREMISES, RETAIL LIQUOR

BUSINESS NAME: I-40 LIQUOR & WINE

BUSINESS ADDRESS: 6012 CRYSTAL HILL ROAD, NORTH LITTLE ROCK, AR 72118, 60 - PULASKI

DATE OF APPLICATION: 06/07/2023

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: 06/15/2023

Livescan



STATE OF ARKANSAS
ALCOHOLIC BEVERAGE CONTROL DIVISION

APPLICATION FOR LIQUOR PERMIT

Check One: (X) RETAIL
() WHOLESALE

New Application _____
Replacement _____
Permit No. 00827-02
Renewed

I, or we, do hereby make application to the State of Arkansas for a permit to sell vinous, spirituous and malt liquors at WHOLESALE/RETAIL and do hereby submit answers to the following questions under oath for your approval:

I-40 Liquor & Wine LLC FEIN# 87-3790109
Corporate/ Partnership/LLC Name

NAME Rajinderpal Singh Chahal
First Middle Last

HOME ADDRESS 1810 Royal Drive Conway AR 72034 Faulkner
Street City Zip County

BUSINESS NAME I-40 Liquor & Wine LLC FORMER NAME _____

BUSINESS ADDRESS 6012 Crystal Hill Road NLR 72118 Pulaski North Little Rock
Street City Zip County Township

Is proposed location inside or outside city limits? yes

Will this liquor outlet be operated in connection with any other business? _____ If so, state type of business

Are you the owner of the proposed premises? yes Do you have the premises leased? ownership

If leased, give name and address of owner _____

What portion of the above described premises will apply to this permit? _____

APPLICANTS FOR RETAIL PERMITS ONLY: Is applicant (or any party to this application) now interested or expected to become interested, directly, or indirectly, in the manufacture, blending, rectifying or wholesaling of alcoholic beverages, or beer? _____ If so, state name of party or parties: _____

APPLICANTS FOR WHOLESALE, RECTIFIER, OR MANUFACTURERS PERMITS ONLY: Is applicant (or any party to this application) now interested or expected to become interested, directly or indirectly, in the dispensing at retail of alcoholic beverages, or beer? _____ If so, state name of party or parties: _____

Does anyone now hold any type of permit at this location? yes If so, give name and permit number(s)
00827-02

Give nearest distance, building to building, from CHURCH _____ SCHOOL _____
Rec'd 6/17/22



If applicant is a partnership, give names and addresses of all partners:

If applicant is a corporation/LLC, give (A) Name and address of stockholders and amount of stock held by each:

1810 Royal Drive Conway, AR 72034
Rajinderpat Singh Chahal 50% owner
Satvir S. Dhanoo 50% owner
11414 W 164th Ter Overland Park KS 66221

(B) Name and address of President and Secretary:

Rajinderpat Singh Chahal 1810 Royal Drive Conway, AR 72034
1810 Royal Drive Conway, AR 72034
~~11414 W 164th Ter Overland Park~~

NOTE: Schedule A is to be completed by each party to this application and is to be considered a part of the application. Any mis-statements or concealment of fact will be grounds for refusal of application, or revocation of permit(s) if later disclosed.

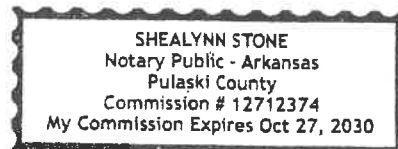
Signed this 7 day of June, 2023

Rajinderpat Singh Chahal
Signature of Applicant or Managing Agent

Subscribed and sworn to before me this 7 day of June, 2023

Shealynn Stone
Notary Public

My Commission Expires: Oct 27, 2030





**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. _____

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:

I-40 Liquor & Wine LLC FEIN# 87-3790109
Corporate /Partnership/LLC Name

NAME Rajinderpal Singh Chahal
First Middle Last

HOME ADDRESS 1810 Royal Drive Conway 72034 Faulkner
Street City Zip County

BUSINESS NAME I-40 Liquor & Wine LLC FORMER NAME Red Devil Liquor

BUSINESS ADDRESS 6012 Crystal Hill Rd NLR 72118 Polaski NLR
Street City Zip County Township

Is proposed location inside or outside city limits? Yes - outside

Is the beer to be sold in connection with any other business? NO (A) If so, state type of business (café, drug store, pool hall, service station, convenience store, etc.) _____

_____ (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 _____

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

If leased, give name and address of owner _____

Will there be dancing on the premises? NO Dance Space _____ x _____

Does anyone now hold a beer or any other permit at this location? Yes If so, give name and permit number(s) Red Devil Liquor # 00827-02

Has anyone, to your knowledge, held a beer or any other permit at this location? Yes If so, give name and permit number(s) Red Devil Liquor # 00827-02

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) Red Devil Liquor # 00827-02



If applicant is a partnership, give names and addresses of all partners:

If applicant is a corporation/LLC, give (A) Name and address of stockholders and amount of stock held by each:

Satvir S. Dhanoa 50% owner
11414 W 164th Ter Overland Park, KS 66221
Rajinderpal Singh Chahal 50%
1810 Royal Drive Conway, AR 72034

(B) Name and address of President and Secretary:

Rajinderpal Chahal
1810 Royal Drive Conway, AR 72034

NOTE: Schedule A is to be completed by each party to this application and is to be considered a part of the application. Any mis-statements or concealment of fact will be grounds for refusal of application, or revocation of permit(s) if later disclosed.

Signed this 9th day of June, 2023.

Rajinderpal Chahal
Signature of Applicant or Managing Agent

Subscribed and sworn to before me this 9th day of June, 2023.

Mason Mitchell
Notary Public

My Commission Expires: 12-23-2030

