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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 *ANP*
DATE: August 3, 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 an on premises wine, retail beer on premises permit – new application #41012:

Vickie Nguyen
Glamour Nails & Lashes
3200 John F. Kennedy Boulevard
North Little Rock, AR 72116

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

Thank you.

Attachments

FILED 8:15 AM _____ PM
BY A. Paul
DATE 8-3-23
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by S. Ussey

Received

AUG 03 2023

NEWASSG0101

City of NLR Mayor's Office
By: _____

Printed On: 07/27/2023

ASSIGNMENT

Date Received: 07/20/2023

Date Assigned: 07/27/2023

Applicant: VICKIE NGUYEN

D.O.B: 07/10/1987

Green Card Number (Permanent Resident Alien):

Home Address: 62 OAKBROOKE DRIVE, SHERWOOD, AR 72120

Home Phone: 5015515322

Business Phone:

Cell Phone: (501) 551-5322

Trade Name: GLAMOUR NAILS & LASHES

Former Trade Name:

Business Address: 3200 JFK BOULEVARD, NORTH LITTLE ROCK, AR 72116, County 60 - PULASKI

is Business Address located within City Limits: Yes

Type Of Investigation: **New Application #41012**

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: VICKIE NGUYEN

TYPE OF APPLICATION: ON PREMISES WINE, RETAIL BEER ON PREMISES

BUSINESS NAME: GLAMOUR NAILS & LASHES

BUSINESS ADDRESS: 3200 JFK BOULEVARD, NORTH LITTLE ROCK, AR 72116, 60 - PULASKI

DATE OF APPLICATION: 07/20/2023

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: 07/27/2023



**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:

Glamour Nails & Lashes LLC FEIN# _____
 Corporate /Partnership/LLC Name

NAME Vickie Trang Nguyen
 First Middle Last

HOME ADDRESS 62 oakbrook Dr Sherwood AR 72120 Pulaski
 Street City Zip County

BUSINESS NAME Glamour Nails & Lashes FORMER NAME _____

BUSINESS ADDRESS 3200 JFK Blvd NLR AR 72116 Pulaski
 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? 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? no If so, give name and permit
 number(s) _____

Has anyone, to your knowledge, held a beer or any other permit at this location? no If so, give name
 and permit number(s) _____

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

If held, give name, place and permit number(s) _____



STATE OF ARKANSAS
ALCOHOLIC BEVERAGE CONTROL DIVISION

APPLICATION FOR ON PREMISES WINE PERMIT

New application _____
Replacement _____
Permit No. _____

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

IF CORPORATION, GIVE NAME Glamour Nails & Lashes FEIN# _____

NAME OF APPLICANT Vickie Nguyen

HOME ADDRESS OF APPLICANT 62 Oakbrooke Dr Sherwood AR 7420 Pulaski
Street Address City Zip County

TRADE NAME OF BUSINESS [REDACTED] FORMER NAME _____

ADDRESS OF BUSINESS 3200 JFK Blvd NLR AR 72116 Pulaski
Street Address City Zip County

Is proposed location inside or outside the city limits? inside

Are you the owner of the premises to be occupied? yes Do you have the premises leased? _____

If so, give name and address of owner _____

Do you have pool tables where wine will be sold? no If so, how many? _____

Does anyone now hold a beer, wine or liquor permit at this location? no

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

Do you or any other person interested in this permit hold a beer, wine or liquor permit? no

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

Give nearest distance, building to building, from:

CHURCH _____ SCHOOL _____

