## #1

### OFFICE OF THE MAYOR

TERRY C. HARTWICK

MAYOR

mayor@nlr.ar.gov



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

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 ALP
DATE: May 30, 2024

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 microbrewery restaurant, microbrewery-restaurant wholesale permit – replacement/new owner #42957:

Matthew Foster Flyway Brewing Company 314 Maple Street North Little Rock, AR 72114

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

Thank you.

**Attachments** 

FILED\_\_\_AM\_3'00\_PM

DATE 5 30 24

Diane Whitbey, City Clerk and Collector North Little Lock, Arkansas

RECEIVED by

"An Equal Opportunity Employer"

NEWASSG0101

City of NLR Mayor's Office

Printed On:05/28/2024

### **ASSIGNMENT**

Date Received: 05/24/2024

Date Assigned: 05/28/2024

Applicant: MATTHEW FOSTER

D.O.B: 09/25/1973

Green Card Number (Permanent Resident Alien):

Home Address: 8 LONGLEA DRIVE, LITTLE ROCK, AR 72206

Home Phone: 5019209291

Business Phone:

Cell Phone: (501) 920-9291

Trade Name: FLYWAY BREWING COMPANY LLC

Former Trade Name: FLYWAY BREWING COMPANY

Business Address: 314 MAPLE STREET, NORTH LITTLE ROCK, AR 72114, County 60 - PULASKI

is Business Address located within City Limits: Yes

Type Of Investigation: Replacement/New Owner Microbrewery-Restaurant & Microbrewery-Restaurant Wholesale Application #42957

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: TIMOTHY BERKLEY

### **COMMENTS OF PUBLIC OFFICIALS**

APPLICANT'S NAME: MATTHEW FOSTER

TYPE OF APPLICATION: MICROBREWERY RESTAURANT, MICROBREWERY-RESTAURANT WHOLESALE
BUSINESS NAME: FLYWAY BREWING COMPANY LLC

BUSINESS ADDRESS: 314 MAPLE STREET, NORTH LITTLE ROCK, AR 72114, 60 - PULASKI

DATE OF APPLICATION: 05/24/2024

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

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: 05/28/2024

If yes, please explain your objections below:





# STATE OF ARKANSAS ALCOHOLIC BEVERAGE CONTROL DIVISION APPLICATION FOR MICROBREWERY-RESTAURANT PERMIT

I, or we, do hereby make application to the State of Arkansas for a Microbrewery-Restaurant Permit, and do hereby submit answers to the following questions under oath for your approval:

					2170327		
Corporate/Partnership/LLC Name							
NAME MATTHEV		JOHN Middle			FOSTER Last		
HOME ADDRESS 8	Street	ITTLE ROCK City	<b>72212</b> Zip	PULA Cou			
BUSINESS NAME _	FLYWAY BREWING	COMPANY LI	_C				
BUSINESS ADDRESS	314 MAPLE ST Street	N LITTLE ROCK City		ULASKI unty	HILL Township		
Is proposed location	inside or outside the c	ity limits?Y					
	Are you/applicant corporation the owner of the premises to be occupied? LEASED						
If not, give name and address of owner RUBY LU LLC- 321 MAIN ST, NLR, AR 72116							
Does anyone now ho	ld any alcoholic bever	age permit at thi	s location?	Y	2024		
If so, give name and permit number(s) of sameABC 01135-02						<u> 刀</u>	
						0	
Do you or any other person interested in this permit hold any state or federal permits for the manufacture, distribution, or retail sale of alcoholic beverages? N							
If held, give name, place and permit number(s)							
, , , , , , , , , , , , , , , , , , , ,		. , , , , , , , , , , , , , , , , , , ,					
If applicant is a partnership, give names and addresses of all partners:							
	D 2:09	H Z YAM PSOS 4		-	****	# + # * # * # * # * * # *	
	G3/	RECEN		4.1 6.1		3 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	
			-	10	<i>3</i> TJ		
	•				6/3	1117	

### STATE OF ARKANSAS

### ALCOHOLIC BEVERAGE CONTROL DIVISION

### APPLICATION FOR MICROBREWERY-RESTAURANT WHOLESALE PERMIT

I, or we, do hereby make application to the State of Arkansas for a Microbrewery-restaurant Wholesale permit, and do hereby submit answers to the following questions under oath for your approval:

FLYWAY BREWING COMPANY LLC			FEIN: 46-2170327				
	Corporate/Par	tnership/LLC N	lame		-		
NAME _	MATTHEW	JOHN		FOSTER			
	First	N	Middle		Last		
HOME A	E ADDRESS 8 LONGLEA DR Little Rock		72212		PULASKI		
	S	Street		City		Zip	County
BUSINE	SS NAME_FLY	/WAY BREWI	ING (	COMPAN	Y LLC		
BUSINE	SS ADDRESS		ST	NLR	72114	PULASKI	HILL
		Street		City	Zip	County	Township
If yes, pl	ease identify yo ease note you mu	ur Arkansas Mi ust submit this a t Permit.	crobr	ewery-rest	aurant Perm	nit Number completed app	Theer malt
thousand also auth to-drink off-prem wholesal microbre (5,000) b	e, ready-to-drink (45,000) barrel product or hard ises consumption to permit may se ewery-restaurant parrels per year.	product, or har s per year (barre tion of a restaur cider for on-pre on. Microbrewer ll and transport licensee to lice It is understood	d cide el = 3 rant tl emise ry-res beer, nsed	er in an aging a light part is the sistem of	gregate quar . The microbales outlet for tion or, in brolding a mic rage, or hard an amount	ortity not to except the content of	rant permit everage ready- packages for the current by the current



### DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES \*For all ON PREMISES permits - except private c lubs\*

D6J003-D6L014

NAME OF OUTLET FLY	WAY BREWING CC	MPANY LLC	
CITY NORTH LITTL	E ROCK	COUNTY	PULASKI
uses described in th	e original applicatio nan originally listed i	on. Any materio in this applicatio	issued by this agency is valid only for the all change in the outlet's operations or n, without prior approval of the Director, histrative penalties.
			cafe / restaurant, pool hall, dancing, etc.) to back of this form if necessary.
If live entertainment entertainment, i.e., live			fic as to the type and description of
Flyway Brewing Comp	any is located at 314	1 Maple Street in	North Little Rock, AR. This facility will
This facility will have li	ve music, dancing, a	rtistic venues, ka	araoke, trivia, bingo, and private events
inside the brewery tap	room and outside in	the seated area	S.
The outside area is us	sed for seating and o	ould be used for	an outside market for social events or
recreation, live musi	c, games and in acco	ordance with any	city or local ordinance.
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