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

#### OFFICE OF THE MAYOR



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 ARR

DATE:

July 11, 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 large meeting/attendance facility permit replacement/new owner application #43299:

Joshua Donnelly Dickey-Stephens Park 400 West Broadway 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** 

Diane Whitbey, City Clerk and Collecto

North Little Rock

# Received

### JUL 1 1 2024

NEWASSG0101

City of NLR Mayor's Office By:

Printed On:07/09/2024

### **ASSIGNMENT**

Date Received: 07/03/2024

Date Assigned: 07/09/2024

Applicant: JOSHUA DONNELLY

D.O.B: 02/01/1985

Green Card Number (Permanent Resident Alien):

Home Address: 228 HUNTER RUN DRIVE, BENTON, AR 72015

Home Phone: 5018608528

Business Phone:

Cell Phone: (501) 860-8528

Trade Name: OVG HOSPITALITY

Former Trade Name: DICKEY-STEPHENS PARK

Business Address: 400 WEST BROADWAY, NORTH LITTLE ROCK, AR 72114, County 60 - PULASKI

is Business Address located within City Limits: Yes

Type Of Investigation: Replacement/New Owner Large Meeting/Attendance Facility

Application #43299

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: JOSHUA DONNELLY

TYPE OF APPLICATION: LARGE ATTENDANCE FACILITY

BUSINESS NAME: OVG HOSPITALITY

BUSINESS ADDRESS: 400 WEST BROADWAY, NORTH LITTLE ROCK, AR 72114, 60 - PULASKI

DATE OF APPLICATION: 07/03/2024

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: 07/09/2024

If yes, please explain your objections below:





#### STATE OF ARKANSAS ALCOHOLIC BEVERAGE CONTROL DIVISION

# APPLICATION FOR PERMIT TO SELL ALCOHOLIC BEVERAGES FOR CONSUMPTION ON THE PREMISES IN LARGE MEETING OR ATTENDANCE FACILITY

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.

2	FEIN# 23-3035	417
	8	
Benton	72015	Saline
City	∠ıp	County
North Little Rock	72114	Pulaski
City	Zip	County
de city limits		
business? No.		
Do	you have the prer	nises leased?
e and address of ov	vner:	
		of same:
)		
	-hum.	
	2024	カ
Tourism Activity		C C
v and/or Product Dis	play Large Meet	ngs
	7	m
	~~~	O.
	North Little Rock City ide city limits business?No Do y ae and address of over If so, give name and abeer, wine, or liquo	Renton 72015 City Zip  North Little Rock 72114 City Zip  Ide city limits  business? No  Do you have the prer  are and address of owner:  If so, give name and permit number  a beer, wine, or liquor permit? No  Tourism Activity



Has there ever, been a beer, wine or liquor permit revoked at this location? $\_\_\_^{ m No}$ If so, give name
and date revoked
Distance, building to building, to CHURCH2 miles SCHOOL9 miles
If applicant is a partnership, give names and addresses of all partners:see attached rider
If applicant is a corporation, (A) Give names and addresses of stockholders and amount of stock held by each:
(B) Give names and addresses of President and Secretary
NOTE: Schedule "A" is to be completed by each party to this application and is to be considered a part of this application. Any mis-statements or concealment of fact will be grounds for refusal of application, or revocation of permits or permits if later disclosed.
Signed this 22nd day of June
Subscribed and sworn to before me this 22rd day of June , 2024.
Patti & Clark Notary Public
My Commission Expires: August 24, 2033
PATTI E CLARK MY COMMISSION # 12394465 EXPIRES: August 24, 2033 Pulaski County



## DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES

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

DELING SOFTE	ì

CITY NOVTVY LITTLE	LOCK COUNTY -	Themsel	
Under the Section 1.34 of the Auses described in the original entertainment other than original shall be grounds for revocation of	l application. Any material ally listed in this application	l change in the oi n, without prior app	utlet's operations or
Describe the types of business are occur on your permitted premises	nd entertainment activities (c on the lines below. Use the l	afe / restaurant, po back of this form if r	ol hall, dancing, etc.) to necessary.
If live entertainment is properties entertainment, i.e., live bands,		fic as to the type	e and description of
Baseball Stadium, beer, canned and to Tovo grab and go canned seltzers Our Suites and p conned seltzers, We have a box	stations that sell stations that sell s, conned mixed sichic areas se conned mixed Coc	connect settle connect both cocktails, a Il connect be ktails, and	ws. We have to de tear wine. boxed wine.
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