

241

**OFFICE OF THE MAYOR**



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website: www.nlr.ar.gov

**MEMORANDUM**

TO: Members of the North Little Rock City Council  
FROM: Anita Paul *AKP*  
DATE: October 17, 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 new restaurant mixed drink maximum application #43997:

Jess McMullen  
Pizza Pub Corporation  
4000 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

# Received

OCT 17 2024

NEWASSG0101

City of NLR Mayor's Office  
By: \_\_\_\_\_

Printed On: 10/16/2024

## ASSIGNMENT

Date Received: 10/15/2024

Date Assigned: 10/16/2024

Applicant: JESS MCMULLEN

D.O.B: 11/26/1970

Green Card Number (Permanent Resident Alien):

Home Address: 6 MORRISON COURT, NORTH LITTLE ROCK, AR 72116

Home Phone: 5013508868

Business Phone:

Cell Phone: (501) 350-8868

Trade Name: PIZZA PUB CORPORATION

Former Trade Name:

Business Address: 4000 JFK BOULEVARD, NORTH LITTLE ROCK, AR 72116, County 60 - PULASKI

is Business Address located within City Limits: Yes

Type Of Investigation: **New Restaurant Mixed Drink Application #43997**

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 : WILLIAM ROBINSON

# COMMENTS OF PUBLIC OFFICIALS

APPLICANT'S NAME: JESS MCMULLEN

TYPE OF APPLICATION: RESTAURANT MIXED DRINK MINIMUM

BUSINESS NAME: PIZZA PUB CORPORATION

BUSINESS ADDRESS: 4000 JFK BOULEVARD, NORTH LITTLE ROCK, AR 72116, 60 - PULASKI

DATE OF APPLICATION: 10/15/2024

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

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: 10/16/2024

Livescan  
PIN  
GIVEN  
10/15/14



STATE OF ARKANSAS  
ALCOHOLIC BEVERAGE CONTROL DIVISION

APPLICATION FOR PERMIT TO SELL ALCOHOLIC BEVERAGES FOR  
CONSUMPTION ON THE PREMISES

Check One: ( ) Hotel-Motel

(☒) Restaurant Only

New Application ☒  
Replacement ☐  
Permit No. ☐

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.

Pizza Pub Corporation FEIN# 99-4876580  
Corporate/Partnership/LLC Name

NAME Jess Michael McMullen  
First Middle Last

HOME ADDRESS 6 Morrison Ct Little Rock AR 72212 Pulaski  
Street City Zip County

BUSINESS NAME Pizza Pub Corporation FORMER NAME Old Mill Pizza

BUSINESS ADDRESS 4000 JFK Blvd North Little Rock 72116 Pulaski  
Street City Zip County

Is proposed location inside or outside city limits? Inside North Little Rock City Limits

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? No If leased, give name and address of owner  
Matthew's Properties LLC, 5601 JFK Blvd NLR, AR 72116 Does

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

Do you or any other person interested in this permit hold any other type of alcoholic beverage permit? Y  
If so, give name, place and permit number(s) 4 Quaker Bar / William Robinson / 02994-01

Number of sleeping rooms in hotel \_\_\_\_\_ Seating capacity of restaurant 80  
(NOTE: Seating capacity should also include any lounge or outside seating areas)

(CHECK MEALS SERVED: Breakfast \_\_\_\_\_ Lunch ☒ Dinner ☒ 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 \_\_\_\_\_

RECEIVED

RECEIVED  
OCT 17 11:54



## DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES

\*For all ON PREMISES permits - except private clubs\*

D6J003-D6L014

NAME OF OUTLET The Pizza Pub  
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.

The pizza pub is a full service bar and restaurant. We will serve pizza, wings, salads, and sandwiches. We will have 10 beer taps and a few bottles of wine. We plan to carry a small inventory of spirits for basic cocktails. We may occasionally have a musician, but only a night or two each week. That part is undecided. We plan to focus on a family friendly atmosphere.