#1

# OFFICE OF THE MAYOR

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

CITY HALL
P.O. BOX 5757
NORTH LITTLE ROCK, ARKANSAS 72119-5757
website: www.nlr.ar.gov

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

## MEMORANDUM

TO: Members of the North Little Rock City Council
FROM: Anita Paul AKP
DATE: October 29, 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 retail beer off-premises, and small farm winery retail and grocery store wine permit (Application #44034):

Katrina Young
Family Dollar Store #30531
715 East Broadway 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 A.M. 1:45 P.M.
BY Mayors office
DATE 10-29-24
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by K. Thomas

Received

OCT 2 9 2024

City of NLR Mayor
By:

NEWASSG0101

Printed On:10/23/2024

# ASSIGNMENT

Date Received: 10/16/2024

Date Assigned: 10/23/2024

Applicant: KATRINA YOUNG

D.O.B: 05/20/1971

Green Card Number (Permanent Resident Alien):

Home Address: 7510 INDIAN AVENUE UNIT 6, LITTLE ROCK, AR 72207

Home Phone: 5015039272

Business Phone:

Cell Phone: (501) 503-9272

Trade Name: FAMILY DOLLAR #30531

Former Trade Name:

Business Address: 715 EAST BROADWAY STREET, NORTH LITTLE ROCK, AR 72114, County 60 - PULASKI

is Business Address located within City Limits: Yes

Type Of Investigation: **New Retail Beer Off-Premises, Small Farm Winery-Retail, & Grocery Store Wine Application #44034**

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: KATRINA YOUNG

TYPE OF APPLICATION: GROCERY STORE WINE, RETAIL BEER OFF PREMISES, SMALL FARM WINERY - RETAIL

BUSINESS NAME: FAMILY DOLLAR #30531

BUSINESS ADDRESS: 715 EAST BROADWAY STREET, NORTH LITTLE ROCK, AR 72114, 60 - PULASKI

DATE OF APPLICATION: 10/16/2024

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: 10/23/2024

RW
Sent 10-18-24

**STATE OF ARKANSAS**
**ALCOHOLIC BEVERAGE CONTROL DIVISION**

# APPLICATION FOR RETAIL BEER PERMIT

**Check One:** ( ) ON PREMISES CONSUMPTION
(x) OFF PREMISES CONSUMPTION

New Application X
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:

Family Dollar Stores of Arkansas, LLC — FEIN# 56-1343356
Corporate /Partnership/LLC Name

NAME Katrina (First) M (Middle) Young (Last)

HOME ADDRESS 7510 Indian Avenue Condo # 6 (Street) Little Rock (City) 72207 (Zip) Pulaski (County)

BUSINESS NAME Family Dollar #30531 FORMER NAME N/A

BUSINESS ADDRESS 715 E Broadway Street (Street) North Little Rock (City) 72114 (Zip) Pulaski (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.) Discount Retail/ Convenience Store

(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 N/A

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

If leased, give name and address of owner Spirit Master Funding X, LLC 2727 N. Harwood Street, Ste 300 Dallas, TX 75201

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) N/A

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

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) N/A

RECEIVED
2024 OCT 16 A 10:58
ABC

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

N/A

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

Family Dollar Stores of Arkansas, LLC is 100% by Family Dollar Stores Holdings II, LLC, which is in turn 100% owned by Family Dollar Store Holdings, LLC, which is 100% owned by Family Dollar Stores, Inc., which is 100% owned by Family Dollar, Inc.

(B) Name and address of President and Secretary:

President - Peter Barnett - 500 Volvo Parkway, Chesapeake, Virginia 23320

Assistant Secretary - Harry Spencer - 500 Volvo Parkway, Chesapeake, Virginia 23320

**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 22 day of August, 2024.

Katrina M. Young
Signature of Applicant or Managing Agent

Subscribed and sworn to before me this 22 day of August 2024.

Vanessa Marie Scroggins
Notary Public

My Commission Expires: 5/16/2032

VANESSA MARIE SCROGGINS
PULASKI COUNTY
NOTARY PUBLIC -- ARKANSAS
My Commission Expires MAY 16,2032
Commission No. 12719515

## STATE OF ARKANSAS
## ALCOHOLIC BEVERAGE CONTROL DIVISION

New Application X
Replacement _____
Permit No. _____

**APPLICATION FOR:**

☒ Small Farm Winery - Retail ☐ Small Farm Winery - Wholesale ☐ Small Farm Winery - Manufacturer

I, or we, do hereby make application for the permit noted above and do hereby submit answers to the following questions under oath for your approval:

Family Dollar Stores of Arkansas, LLC (Corporate/Partnership/LLC Name) FEIN# 56-1343356

NAME Katrina (First) M (Middle) Young (Last)

HOME ADDRESS 7510 Indian Avenue Condo #6 (Street) Little Rock (City) AR (State) 72207 (Zip) Pulaski (County)

BUSINESS NAME Family Dollar # 30531 FORMER NAME N/A

BUSINESS ADDRESS 715 E Broadway Street (Street) North Little Rock (City) AR (State) 72114 (Zip) Pulaski (County)

Is proposed location inside or outside city limits? Yes

If application is for retail level, are you a grocery store, convenience store or liquor store? (x) Yes ( ) No

(Convenience stores must maintain a $7,500.00 inventory of human consumables.)

If application is for manufacturing, (1) how many gallons do you contemplate manufacturing? No

(2) What was your total production for the last calendar year? N/A

Are you the owner of the proposed premises? No If leased, give name and address of owner Spirit Master Funding X, LLC 2727 N. Harwood Street, Ste 300 Dallas, TX 75201

Does anyone now hold any other permit(s) at this location? No If so, give name, type and permit number(s) N/A

Has anyone, to your knowledge, held any other type permit(s) at this location? No If so, give name and permit number(s) N/A

RECEIVED
2021 OCT 16 A 10:58
ABC

Give nearest distance, building to building, from CHURCH 897 ft SCHOOL 1719 ft

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

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

Family Dollar Stores of Arkansas, LLC is 100% owned by Family Dollar Stores Holding II, LLC, which is 100% owned by Family Dollar Stores Holding, LLC, which is 100% owned by Family Dollar Stores, Inc., which is 100% owned by Family Dollar, Inc.

(B) Name and address of President and Secretary:

President - Peter Barnett - 500 Volvo Parkway, Chesapeake, Virginia 23320

Assistant Secretary - Harry Spencer - 500 Volvo Parkway, Chesapeake, Virginia 23320

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

If making application for a ***Small Farm Winery-Manufacturer, I*** certify that I meet the criteria as described in ACA 3-5-1602(c)(1) and enclose a copy of my Federal Basic Permit **and** proof of my annual production from the calendar year previous to my application **(form/s TTB F 5120.17)**.

Signed this 22nd day of August, 2024

Katrina M. Young
Applicant's Signature

Subscribed and sworn to before me this 22 day of August 2024

Vanessa Marie Scroggins
Notary Public

My Commission Expires: 5/16/2032

VANESSA MARIE SCROGGINS
PULASKI COUNTY
NOTARY PUBLIC -- ARKANSAS
My Commission Expires MAY 16,2032
Commission No. 12719515

**STATE OF ARKANSAS**
**ALCOHOLIC BEVERAGE CONTROL DIVISION**

# APPLICATION FOR GROCERY STORE WINE PERMIT

**Permitted Building Size**
**Check One:** (x) Less than 35,001 sq.ft
( ) 35,001 sq.ft – 50,000 sq.ft
( ) 50,001 sq.ft – 75,000 sq.ft
( ) Greater than 75,000 sq.ft

New Application X
Replacement _____
Permit No. _____

I, or we, do hereby make application to the State of Arkansas for a permit to sell wine in a grocery store as authorized by Act 508 of 2017 and do hereby submit answers to the following questions under oath for your approval:

FAMILY DOLLAR STORES OF ARKANSAS, LLC — Corporate/Partnership/LLC Name
FEIN#: 56-1343356

NAME Katrina (First) M (Middle) Young (Last)

MAILING ADDRESS 500 VOLVO PKWY, 8TH FLOOR, CHESAPEAKE, VA 23320 CHESAPEAKE
Street City Zip County

BUSINESS NAME FAMILY DOLLAR #30531

BUSINESS ADDRESS 715 E Broadway Street North Little Rock 72114 AR Pulaski
Street City Zip County Township

Does your store, or will your store, maintain an inventory of human consumables? X Yes _____ No

Provide the date your store opened for business: 12/22/2021

What percentage of your gross sales are derived, or will be derived, from the sale of alcoholic beverages? 2 %

Does anyone now hold any type of permit at this location? _____ Yes X No

a. If "yes", give name, permit type, and permit number(s)

b. Is one of the permits listed above a small farm wine retail permit? _____ Yes _____ No

c. Will the named permittee and floor plan of the permitted premises remain unchanged? ____Yes____No

d. If you answered "Yes" to the above question, please complete the "Certification of Permit Status" form. You do not need to complete the remaining portion of this application; however, you must sign the application and have it notarized.

Is the proposed location inside or outside city limits? INSIDE

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

If leased, give name and address of owner Spirit Master Funding X, 2727 N. Harwood St., Ste 300 Dallas, TX 75201

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

N/A

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

FAMILY DOLLAR STORES HOLDINGS, LLC 100% SHAREHOLDER

(B) Name and address of President and Secretary:

PETER BARNETT - 329 CAVALIER DRIVE, VIRGINIA BEACH, VA 23451 (PRESIDENT)

HARRY SPENCER - 509 WOODARDS FORD ROAD, CHESAPEAKE, VA 23320 (ASSISTANT SECRETARY)

NOTE: A Schedule A form is to be completed by each party to this application and is to be considered a part of the application. Existing Small Farm Wine Retail Permittees need not complete a Schedule A form; however, they must complete a Certification of Permit Status form. Any false statements or concealment of fact may be grounds for refusal of application, or revocation of permit(s) if later disclosed.

Signed this 28 day of March, 2024.

Signature of Applicant or Managing Agent

Subscribed and sworn to before me this 28 day of March, 2024.

Notary Public

My Commission Expires: 12/31/27

TREASURE DIAMOND FLETCHER
NOTARY PUBLIC
REGISTRATION # 7841267
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES
DECEMBER 31, 2027