

City of Woodland

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FEB 12 2009
BY: *efc*

ALCOHOLIC BEVERAGE CONTROL CHECKLIST

Name of Business Cenaduria El Portal File No. 475519
 Physical Location 825 East St., Ste. 116 New Owner/Manager Jose Rafael Carrazes Murillo
 Mailing Address 840 Bourn Dr., Space 122, Woodland 95776
 Type of License Original - On Sale beer & wine Transferor Name _____
 Received by City Clerk 2/11/09 Date Sent to Police Dept. 2/12/09



Application Reviewed by **Police Department** Ede Pacheco #837
 Contact Name

Recommend Approval: ////Recommend Denial: ////Comments on Attached Sheet(s): ////
 Comments Included Here ⇨ 2-17-09 Drove by unable to see into establishment due to the 2 large windows covered completely with paint listing menu items - Remove paint for clear visibility for patrol officers



Application Reviewed by **Community Development** Andre Dehaan
 Contact Name

Recommend Approval: ////Recommend Denial: ////Comments on Attached Sheet(s): ////
 Comments Included Here ⇨ _____



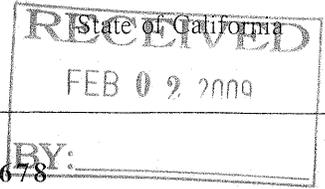
Upcoming Council Meeting Dates and Deadlines for Submission:

Submission Date 2/12/09 for inclusion at 3/3/09 Council Meeting
 Submission Date 3/3/09 for inclusion at 3/17/09 Council Meeting
 Submission Date 3/24/09 for inclusion at 4/7/09 Council Meeting

Returned to City Clerk on _____ Council Action Taken _____

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

ABC 211 (6/99)



TO: Department of Alcoholic Beverage Control
3321 Power Inn Rd.
Ste. 230
Sacramento, CA 95826
(916)227-2002

File Number: **475519**
Receipt Number: **1699678**
Geographical Code: **5703**
Copies Mailed Date: **January 30, 2009**
Issued Date:

DISTRICT SERVING LOCATION: **SACRAMENTO**

First Owner: **CAZARESMURILLO JOSE RAFAEL**
Name of Business: **CENADURIA EL PORTAL**

Location of Business: **825 EAST ST
STE 116
WOODLAND, CA 95776**

County: **YOLO**

Is premise inside city limits? **Census Tract 0111.02**

Mailing Address: **840 BOURN DR
SPC 122
WOODLAND, CA 95776**
(If different from premises address)

Type of license(s): **41**

Transferor's license/name: / Dropping Partner: Yes No

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
41 ON-SALE BEER AND	ORIGINAL FEES	NA	Y	0	01/29/09	\$300.00
41 ON-SALE BEER AND	ANNUAL FEE	NA	Y	0	01/29/09	\$339.00
41 ON-SALE BEER AND	FEDERAL FINGERPRINTS	NA	N	2	01/29/09	\$48.00
41 ON-SALE BEER AND	STATE FINGERPRINTS	NA	N	2	01/29/09	\$78.00
Total						\$765.00

Have you ever been convicted of a felony? **No**
Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the Department pertaining to the Act? **No**
Explain any "Yes" answer to the above questions on an attachment which shall be deemed part of this application.

Applicant agrees (a) that any manager employed in an on-sale licensed premise will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

STATE OF CALIFORNIA County of **YOLO** Date: **January 30, 2009**

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is an applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing and knows the contents thereof and that each of the above statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant or applicant's business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor or transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

Applicant Name(s)

Applicant Signature(s)

CAZARESMURILLO JOSE RAFAEL

See 211 Signature Page

BRAVO ALEJANDRA ARIAS