



City of Woodland

ALCOHOLIC BEVERAGE CONTROL CHECKLIST

Name of Business Las Islitas Ostrioneria File No. 482635
 Physical Location 1527 East St. New Owner/Manager Francisco Lopez Robles
 Mailing Address Same
 Type of License Premise-to-Premise Transfer Transferor Name _____
 Received by City Clerk 9/22/09 Date Sent to Police Dept. 9/25/09



Application Reviewed by **Police Department** SGT CUCCHI
 Contact Name

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



Application Reviewed by **Community Development** [Signature]
 Contact Name

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



Upcoming Council Meeting Dates and Deadlines for Submission:

Submission Date 10/6/09 for inclusion at 10/20/09 Council Meeting
 Submission Date 10/20/09 for inclusion at 11/3/09 Council Meeting
 Submission Date 11/3/09 for inclusion at 11/17/09 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: **482635**
 Receipt Number: **1730203**
 Geographical Code: **5703**
 Copies Mailed Date: **September 3, 2009**
 Issued Date:

DISTRICT SERVING LOCATION: **SACRAMENTO**

First Owner: **ROBLES FRANCISCO LOPEZ**

Name of Business: **LAS ISLITAS OSTIONERIA**

Location of Business: **1527 EAST ST
 WOODLAND, CA 95776-6334**

County: **YOLO**

Is premise inside city limits? **Yes** Census Tract **0112.04**

Mailing Address:
 (If different from
 premises address)

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

Transferor's license/name: **461621 / ROBLES FRANCIS** Dropping Partner: Yes No

<u>License Type</u>	<u>Transaction Type</u>	<u>Fee Type</u>	<u>Master</u>	<u>Dup</u>	<u>Date</u>	<u>Fee</u>
41 ON-SALE BEER AND	PREMISE TO PREMISE TRANS	NA	Y	0	09/03/09	\$100.00
Total						\$100.00

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: **September 3, 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)

ROBLES FRANCISCO LOPEZ

See 211 Signature Page