City of Woodland

ALCOHOLIC BEVERAGE CONTROL CHECKLIST

Name of Business Woodland Gas Plaza File No. 489726

Physical Location 454 N. East Street 95776 New Owner/Manager James & Teresa Hesseltine

Mailing Address P.O. Box 961, Woodland 95776

Type of License On sale beer & wine, Person-to-Person transfer Transferor Name Hopefull, LLC

Received by City Clerk 5/14/2010 Date Sent to Police Dept. 5/17/2010

✧✧

Application Reviewed by ***Police Department*** ______________________
Contact Name

Recommend Approval: ❍//// Recommend Denial: ❍//// Comments on Attached Sheet(s): ❍////

Comments Included Here ⇨ ______________________

✧✧

Application Reviewed by ***Community Development*** ______________________
Contact Name

Recommend Approval: ❍//// Recommend Denial: ❍//// Comments on Attached Sheet(s): ❍////

Comments Included Here ⇨ ______________________

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Upcoming Council Meeting Dates and Deadlines for Submission:

Submission Date 5/18/10 for inclusion at 6/1/10 Council Meeting

Submission Date 6/1/10 for inclusion at 6/15/10 Council Meeting

Submission Date 6/22/10 for inclusion at 7/6/10 Council Meeting

Returned to City Clerk on ______________ Council Action Taken ______________

Department of Alcoholic Beverage Control

State of California

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: **489726**
Receipt Number: **1766000**
Geographical Code: **5703**
Copies Mailed Date: **May 13, 2010**
Issued Date:

DISTRICT SERVING LOCATION: **SACRAMENTO**

First Owner: **HESSELTINE JAMES DARWIN**

Name of Business: **WOODLAND GAS PLAZA**

Location of Business: **454 N EAST ST**
WOODLAND, CA 95776-6120

County: **YOLO**

Is premise inside city limits? **Yes** Census Tract **0108.**

Mailing Address: (If different from premises address) **PO BOX 961**
WOODLAND, CA 95776-0961

Type of license(s): **20**

Transferor's license/name: **457975 / HOPEFULL LLC** Dropping Partner: Yes_____ No _____

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
20 OFF-SALE BEER ANI	PERSON TO PERSON TRANSF	NA	Y	0	05/13/10	$50.00
20 OFF-SALE BEER ANI	ANNUAL FEE	NA	Y	0	05/13/10	$254.00
20 OFF-SALE BEER ANI	STATE FINGERPRINTS	NA	N	2	05/13/10	$78.00
20 OFF-SALE BEER ANI	FEDERAL FINGERPRINTS	NA	N	2	05/13/10	$48.00
					Total	$430.00

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: May 13, 2010

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)
HESSELTINE JAMES DARWIN	**See 211 Signature Page**
HESSELTINE TERESA ANN	