

2012-0047 Discussion regarding the procedure to be used for the review of applications for the additional quota license received from the Michigan Liquor Control Commission (MLCC)

**Attachments:** [Agenda Summary.pdf](#)  
[Ordinance.pdf](#)  
[Application.pdf](#)

**President Hooper** stated that as a result of the 2010 Census, the Michigan Liquor Control Commission has added an additional quota liquor license available to the City. Once it was acknowledged that an additional license would become available, a number of businesses in the City have come forward to request consideration for the award of this license. He noted that the Liquor License Technical Review Committee was disbanded several years ago as at that time there were no new licenses to review or award. He suggested Council consider forming a subcommittee of two or three Council members to review all applicants submitting applications by a certain date to determine which applicant Council would consider awarding the license to. He commented that establishing a formal Technical Review Committee with resident members would add at least two months to the process.

**Jane Leslie**, City Clerk, questioned whether Council desires to add additional criteria beyond what is set in the Ordinance for accepting applications.

**President Hooper** commented that applicants would be required to follow the City's Ordinance and submit application data for review by the subcommittee.

**Mr. Yalamanchi** questioned whether there was any possibility of additional licenses becoming available.

**Clerk Leslie** responded that only one additional license based on the Census data will be available for the next ten years. Any additional licenses coming into the City must be transfers from other locations.

**Mr. Yalamanchi** questioned how many requests have been received thus far.

**Clerk Leslie** responded that she has received a number of phone calls from individuals requesting an application.

**Mayor Barnett** noted that he has received phone inquiries as well.

**President Hooper** questioned what date Council preferred to set for an application deadline.

**Mr. Yalamanchi** questioned whether three months would be adequate.

**Clerk Leslie** responded that applicants can complete the process rather quickly. She explained that once applications are taken in, the information is distributed to the Building Department, Fire Department and Oakland County Sheriff's Office to complete the inspection process and determine whether the facility meets all code compliance requirements. She commented that this process takes approximately one month.

**President Hooper** suggested that a target date of the middle of May might be desirable. He suggested two or three Council members form the ad hoc committee.

**Mr. Webber** concurred with forming the committee for review of the applications.

**Mr. Rosen** questioned whether the additional license had a \$1,000 licensing fee and if the City could possibly auction the license for additional revenue.

**Clerk Leslie** responded that City Attorney John Staran would have to review Liquor Licensing Laws to determine whether an auction would be possible. She stated that the \$1,000 fee covers the inspection and paperwork costs for the license and she did not believe that there was any provision to allow for additional revenue. She commented that neither the City nor the State profits from issuing a liquor license.

**Mr. Rosen** commented that the price of the license could determine how serious an applicant is, noting that the City should look for success in a business.

**President Hooper** commented that while the City Attorney could weigh in on this possibility, it could lead to only well-heeled multiple chain restaurants being able to afford a license. He stated that it would prevent the locally-grown mom-and-pop single-store enterprises from having a chance at a license. He noted that the Hills Bar and Grille received the last new license in Rochester Hills, and noted that these applicants were three military Veterans who borrowed money from their parents to start the restaurant.

**Mr. Rosen** commented that if some of the applicants for the new license are part of large chains, they will essentially be paying below market price for the license.

**President Hooper** noted that this will be taken into consideration.

**Public Comment:**

**Theresa Mungoli**, 3435 Palm Aire Drive, representing the Rochester Auburn Hills Community Coalition (RAHCC), noted that the RAHCC strives toward substance abuse prevention. She encouraged the re-establishment of a Liquor Control Commission, noting that business must be regulated and watched. She stated that underage drinking, and drinking in general, has been escalating. She offered the RAHCC's assistance and guidance.

**President Hooper** noted that the City's Liquor Ordinance includes 27 factors as a starting point for applicant evaluation, along with a sole and complete determination of a decision by Council.

**Mr. Yalamanchi** questioned whether the RAHCC's concern is that businesses serve underage drinkers.

**Ms. Mungoli** responded that underage drinkers are gaining access to alcohol first from their parents' own refrigerators, and then from enticing adults to purchase

alcohol for them at party stores. She commented that the RAHCC is also seeing many more adults drinking to excess and stated that there is a push to provide additional training to restaurant employees so they can better recognize when people have been served too much and should have someone drive them home.

After discussion, Council determined that a subcommittee of up to three City Council members should be established for the evaluation of applicants for the additional quota license received from the Michigan Liquor Control Commission (MLCC). It was determined that the Committee will be mandated to consider all applicants that have submitted applications and have gone through the City's preliminary review process by May 15, 2012. Council Members **Rosen, Webber** and **Klomp** will comprise the review committee.

**A motion was made by Yalamanchi, seconded by Webber, that this matter be Adopted by Resolution. The motion carried by the following vote:**

**Aye** 7 - Hooper, Klomp, Kochenderfer, Rosen, Tisdell, Webber and Yalamanchi

Enactment No: RES0026-2012

**Resolved**, that a subcommittee of up to three City Council members be established for the evaluation of applicants for the additional quota license received from the Michigan Liquor Control Commission (MLCC). The Committee will consider all applicants that have submitted applications and have gone through the City's preliminary review process by May 15, 2012.

**~~COUNCIL COMMITTEE REPORTS~~**

**Older Persons Commission (OPC):**

*Mr. Webber reported that the OPC Board met approximately a week ago and stated that a subcommittee of the OPC Board has worked on drafting changes to the Inter-Local Agreement. The Board wants to gather the three participating communities together to review and discuss the proposed changes.*

*Mr. Rosen suggested that discussions from years ago when the OPC was first created should be reviewed to see the intent of the communities at the time. He requested Clerk Leslie research and assemble copies of the City's minutes from 1984 or 1985 when these discussions first took place for Council's review.*

**~~ANY OTHER BUSINESS~~**

*None.*

**~~NEXT MEETING DATE~~**

*Regular Meeting - Monday, March 5, 2012 - Cancelled; Regular Meeting - Monday, March 19, 2012 - 7:00 PM*

GODFATHER

CITY OF ROCHESTER HILLS

CLASS C LIQUOR LICENSE APPLICATION

APPLICANT'S CHECK LIST FOR SUBMISSION

- Completed Application
  - Listing of Corporation/Partners
  - Building/Site Plans
  - Financial Statement
  - Lease Agreement (if applicable)
  - Menu
  - Training Policy
  - Fingerprints
  - Dance/Entertainment Agreement (if applicable)
-

CITY OF ROCHESTER HILLS

CLASS C LIQUOR LICENSE APPLICATION

Date: 5/3/12

- New Class C License
- Transfer Class C License
- Dance Permit
- Entertainment Permit
- Dance Entertainment Permit

MAHER DADOU /

MARTINI LOUNGE, INC

Applicant's Name: THE GOD FATHER CIGAR & Phone No. 248-421-5000  
 Address: 6876 N. ROCHESTER RD. City ROCHESTER HILLS ST MI  
 Age: 48 Citizenship: U.S Date of Birth 3/14/64 Birthplace: IRAQ  
 If naturalized, year and place: 8/10/1987 DETROIT

If a partnership, please complete the following:

Partner's Name: MAHER H. DADOU Phone No. 248-421-5000  
 Address: 3653 SLEEPY FOX DR. City ROCHESTER HILLS ST MI  
 Age: 48 Citizenship: YES Date of Birth 3/14/64 Birthplace: IRAQ  
 If naturalized, year and place: 8/10/1987 DETROIT

Manager's Name: SAME Phone No. \_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_  
 Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

If a corporation, the names, addresses of the officers and directors, date of birth and age of each:

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Location of Proposed License: 6876 N ROCHESTER

Does applicant presently own the premises? NO  
If not, name of owner of premise: PAPA JOE OAKLAND, LLC.

Legal Description of Property (Sidwell #) 26 MONTHS

Length of time business has been in operation: \_\_\_\_\_

Has applicant ever been convicted of a felony? Yes \_\_\_ No   
If convicted of felony, explain: \_\_\_\_\_

Has applicant previously applied for liquor license? Year requested: 2008  
Location of business: 155 W. AUBURN RD ROCHESTER Hills, MI 48307  
Was liquor license granted: NO TOO CLOSE TO EXISTING LICENSE.

Have any of the applicants or persons listed above been convicted of a violation of federal or state law concerning the manufacture, possession or sale of alcoholic beverages? Yes \_\_\_ No   
Name of person \_\_\_\_\_

What is the applicant's current business? CIGAR LOUNGE

Length of time in named business? SINCE DEC., 2009

List all uses in addition to sale of alcoholic beverages: SALE OF CIGARS.

Does applicant presently operate a restaurant? Yes \_\_\_ No   
Name and address of restaurant: BUT CATER FROM PAPA JOE'S NEXT DOOR.

Does applicant presently hold a Class C liquor license? Yes \_\_\_ No   
Name and address of restaurant: BUT CURRENTLY HAVE CONCESSION FROM PAPA JOE'S

List record and history of any liquor license violations by the applicant for preceding ten (10) years  
NONE

Liquor License Application

Record history of any liquor license violations by the corporation or by a parent of subsidiary corporation of the applicant for the immediate preceding ten (10) years

<u>Proposed Liquor Establishment:</u>	<u>Existing Building</u>	<u>New Construction</u>
Size of Site:	<u>large shopping center</u>	_____
Size of <sup>space</sup> <del>Building</del> :	<u>2900 s.f.</u>	_____
Size of Kitchen:	<u>no on-site kitchen</u>	_____
Seating Capacity:	<u>~ <del>80</del> 89</u>	_____
Size of Dance Floor, if any:	<u>pending 10x10</u>	_____
Percentage of Floor Area for Dining:	<u>80%</u>	_____
Percentage of Floor Area for Bar:	<u>20%</u>	_____
Present Zoning:	<u>Class - C</u>	_____
Required Zoning:	<u>same</u>	_____
Cost of Remodeling:	<u>none</u>	_____
Cost of Construction:	<u>none</u>	_____
Estimated Dates of Construction	Start: <u>none</u>	Completion: <u>none</u>

Total cost to be expended by licensee for the licensed premises: No construction expenses

- ☐ Building Plans Submitted – 3 Sets Required:                      Number of Copies Enclosed: \_\_\_\_\_
  - ☐ Site Plans Submitted – 6 Sets Required:                              Number of Copies Enclosed: \_\_\_\_\_
- Do Site Plans show off-street parking and lighting?      Yes  No \_\_\_\_\_

Liquor License Application

Describe the proposed character/type of establishment (e.g. theme, entertainment, food)

CIGAR LOUNGE & ENTERTAINMENT

Describe the proposed full food menu: NONE

But full menu from Papa Joe's & Lucas Steakhouse next door.

Proposed menu attached: Yes \_\_\_\_\_ No

Describe the surrounding neighborhood and explain how the proposed establishment fits this location in Rochester Hills.

WITHIN A SHOPPING CENTER,  
Rochester Road & Tienken.  
Gourmet supermarket, banquet hall, steakhouse, Italian restaurants.  
Applicant is an upscale cigar & martini lounge, and draws its clientele from surrounding neighborhoods. Proprietor is a certified cigar judge.

Revenues: Provide a breakdown of the anticipated revenues from food, alcoholic beverages and other revenues (copy must be attached): \_\_\_\_\_

Evidence of Financial Responsibility:

Amount of Funds supplied by Principals: no new capital expenditure  
Amount of Funds to be Financed: \_\_\_\_\_  
Name of Financer/Phone Number: \_\_\_\_\_



Personal References/Phone Number:

SHAMIL S. HANABY, ATTORNEY

Business References/Phone Number:

248-521-1353

Has applicant completed a certified training program? Yes  No

Have employees completed a certified training program? Yes  No

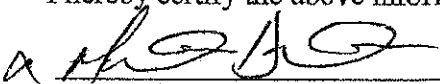
Names and addresses of those completing program

Applicant understands that should any of the above information prove to be inaccurate or untruthful, it will be grounds to deny applicant's request or revoke any approvals.

I (We) MAHER H. DADDOK

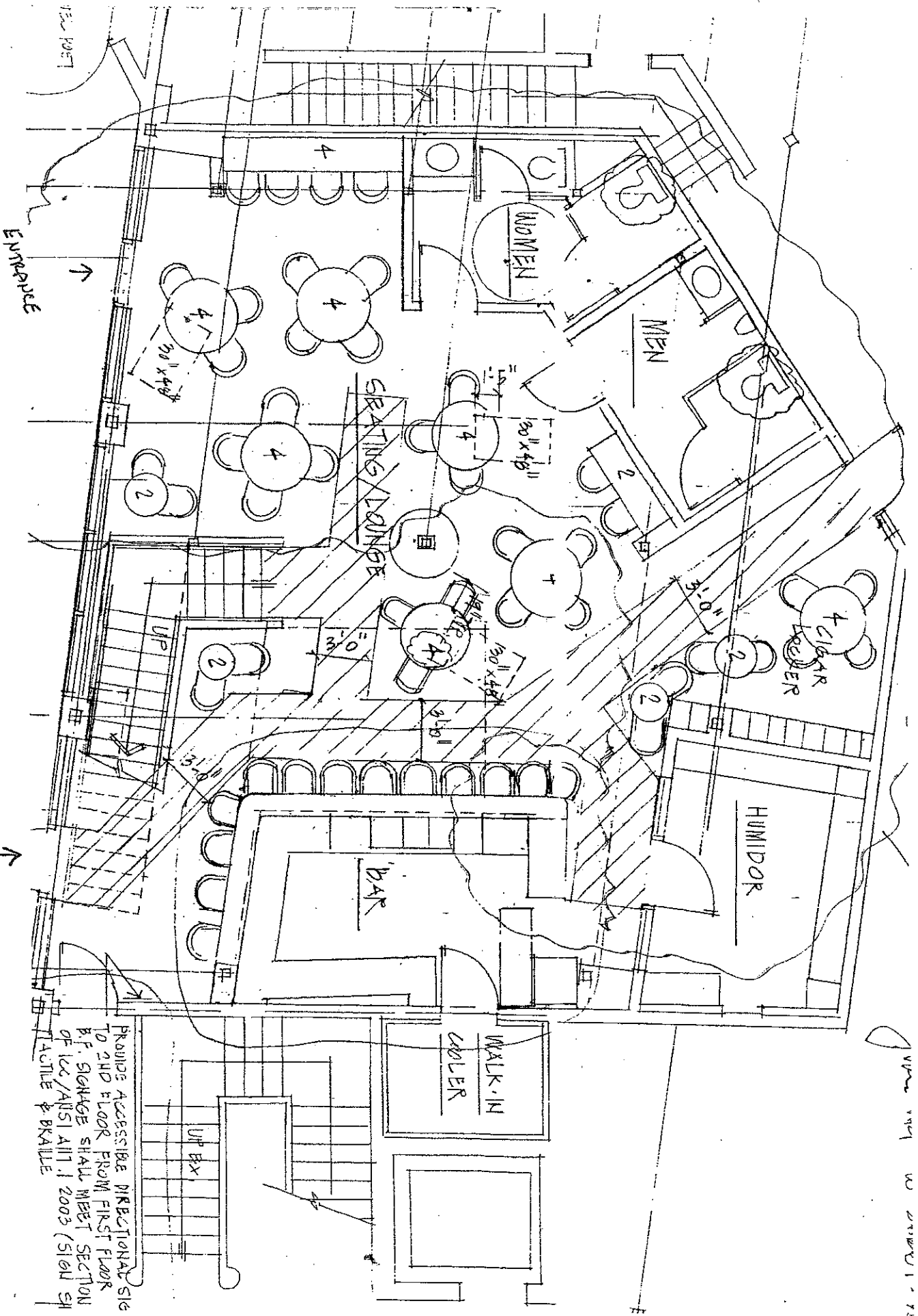
affirm I (We) will not violate any of the laws of the State of Michigan or of the United States or any ordinances of the City of Rochester Hills in the conduct of my (our) business, and acknowledge receipt of a copy of Chapter 6, Alcoholic Liquor of the Rochester Hills Code of Ordinances.

I hereby certify the above information to be true and accurate to the best of my (our) knowledge.

  
Applicant Signature/Date 5/6/12

\_\_\_\_\_  
Applicant Signature/Date

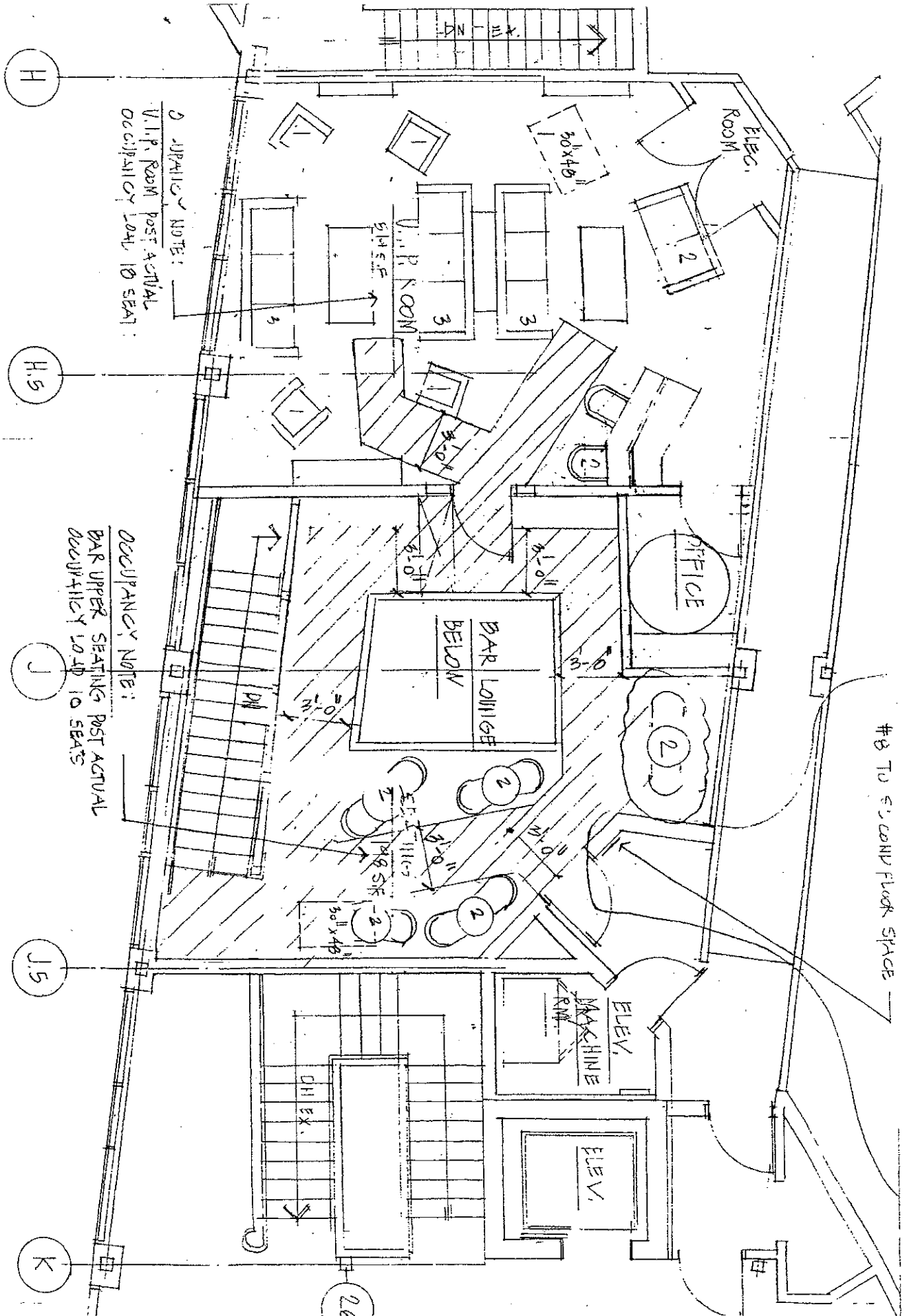
This application is not considered complete until applicant has made contact with the Rochester Hills Contingent of the Oakland County Sheriff's Department and complied with fingerprinting and any other necessary requirements of the Oakland County Sheriff's Department.



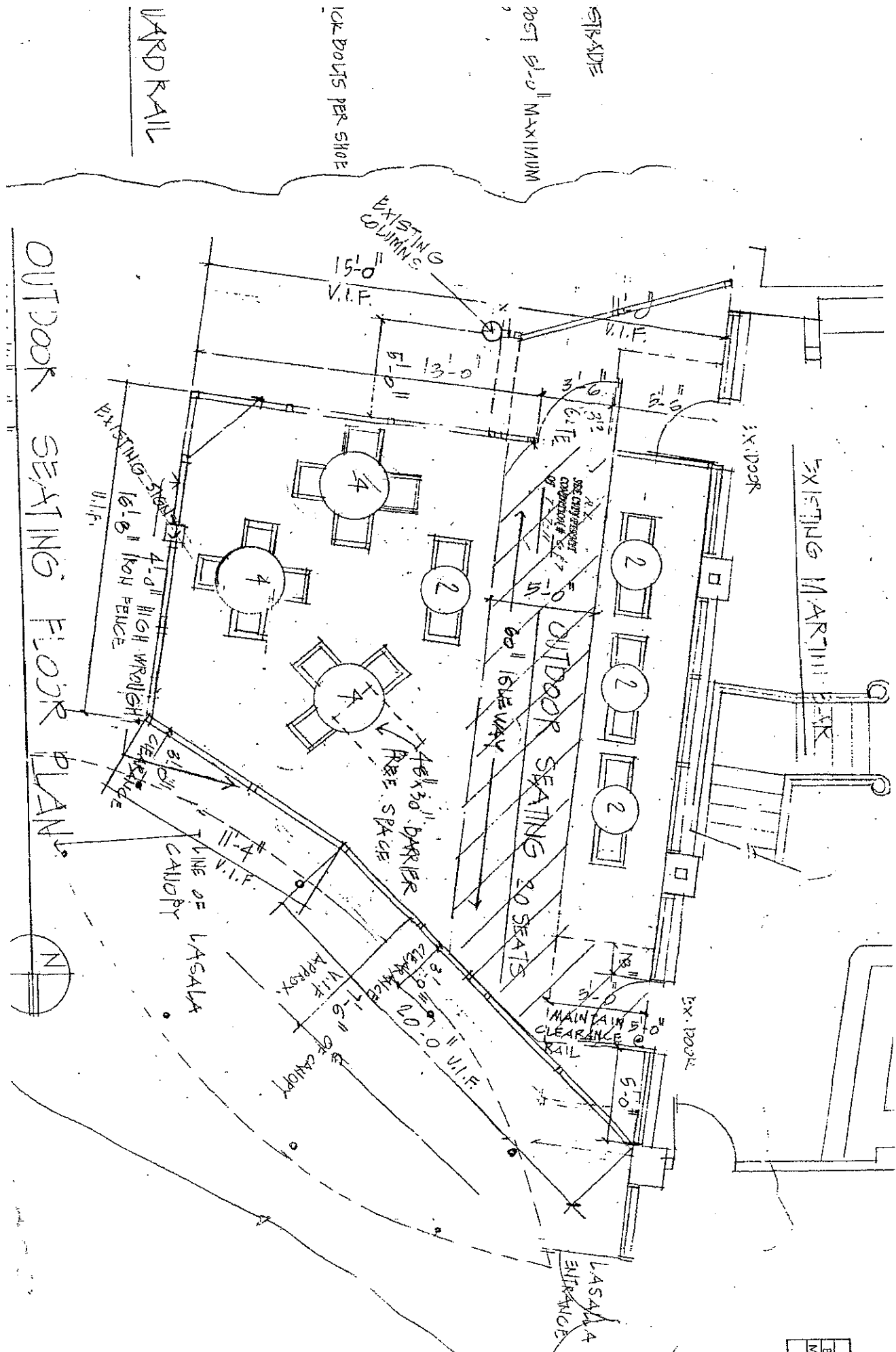
First Floor

Provide ACCESSIBLE DIRECTIONAL SIGN TO 2ND FLOOR FROM FIRST FLOOR B.F. STORAGE SHALL MEET SECTION OF ICC/ANSI A117.1 2003 (SIGN SHALL BE TACTILE & BRAILLE)

Drawn by [unclear] 10/1/12



Second Floor



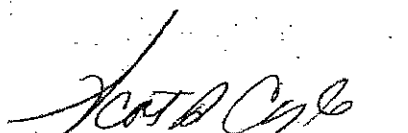
STRADIE  
 POST 5'-0" MAXIMUM  
 10K BOLTS PER SHOE  
 WARDRAIL

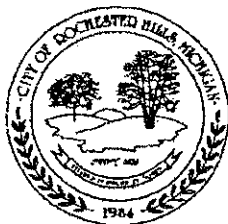
OUTDOOR SEATING FLOOR PLAN



**OCCUPANCY LOAD: 40**

The Godfather Martini Lounge  
6876 N. Rochester Rd.  
1<sup>st</sup> Floor

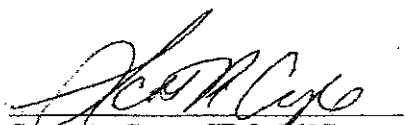
  
Scott A. Cope, CBO 3627  
Director of Building



City of  
**ROCHESTER HILLS**

**OCCUPANCY LOAD: 29**

The Godfather Martini Lounge  
6876 N. Rochester Rd.  
2<sup>nd</sup> Floor

  
Scott A. Cope, CBO 3627  
Director of Building



City of  
**ROCHESTER HILLS**



Jane Leslie <lesliej@rochesterhills.org>

**Liquor License Application**

2 messages

Jane Leslie <lesliej@rochesterhills.org> Wed, May 16, 2012 at 10:46 AM  
To: Scott Cope <copest@rochesterhills.org>, Kelly Winters <wintersk@rochesterhills.org>, Todd Gary <garyt@rochesterhills.org>, Judy DAlessandro <dalessandroj@rochesterhills.org>

Good Morning,

Attached is an application packet for your review for the Godfather Cigar & Martini Lounge at 6876 N. Rochester Rd. This is in the Papa Joe's Center. They are applying for the city's one quota license and their application will be reviewed by the City Council Committee prior to a recommendation to Council. Please advise if there are any problems. Thanks,

PS - Judy, please advise Lt. Jacobs. Thanks

--  
Jane Leslie, CMC  
City Clerk  
City of Rochester Hills  
1000 Rochester Hills Dr  
Rochester Hills, MI 48309  
248-841-2461  
lesliej@rochesterhills.org

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Godfather Cigar & Martini Lounge Application.pdf  
295K

DAlessandro, Judy <dalessandroj@oakgov.com>  
To: Leslie Jane <lesliej@rochesterhills.org>

Thu, May 17, 2012 at 12:39 PM

Per Lt. Jacobs no problems pending full review by OCSO-SIU

Judy

**From:** Judy DAlessandro [mailto:dalessandroj@rochesterhills.org]  
**Sent:** Thursday, May 17, 2012 10:13 AM  
**To:** dalessandroj  
**Subject:** Fwd: Liquor License Application

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#rbmail#



Fire Department  
Ronald Crowell, Fire Chief

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From: Todd Gary, Fire Marshall  
To: Jane Leslie, City Clerk  
Date: May 22, 2012  
Re: Liquor Inspection

Please be advised the Fire Department has no objections to the issuance of a Class C liquor license to Godfather Cigar & Martini Lounge located at 6876 N. Rochester Rd.

If you should have any questions, please feel free to contact me.

TMG/aj

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CITY OF ROCHESTER HILLS

1000 Rochester Hills DR. Rochester Hills, MI 48309

THE GODFATHER CIGAR & MARTINI LOUNG

DATE: 5/21/2012  
RECEIPT NO: 430544 TRY  
DEPOSIT NO:

<u>G/L NUMBER</u>	<u>DESCRIPTION</u>	<u>PERMIT</u>	<u>AMOUNT</u>
101 451008	Lic.& Pmts.-Clerks Dept.		1,000.00
	TOTAL AMOUNT:	1,000.00	
	CASH AMOUNT:	.00	
	CHECK AMOUNT:	1,000.00	
	CREDIT CARD:	.00	
	DEBIT CARD:	.00	
	TOTAL RECEIVED:	1,000.00	
	CHANGE TENDERED:	.00	

CHECK #: 1699

RECEIVED BY: TREASURER/LP

@@

CITY OF ROCHESTER HILLS

1000 Rochester Hills DR. Rochester Hills, MI 48309

THE GODFATHER CIGAR & MARTINI LOUNG

DATE: 5/21/2012  
RECEIPT NO: 430544 TRY  
DEPOSIT NO:

<u>G/L NUMBER</u>	<u>DESCRIPTION</u>	<u>PERMIT</u>	<u>AMOUNT</u>
101 451008	Lic.& Pmts.-Clerks Dept.		1,000.00
	TOTAL AMOUNT:	1,000.00	
	CASH AMOUNT:	.00	
	CHECK AMOUNT:	1,000.00	
	CREDIT CARD:	.00	
	DEBIT CARD:	.00	
	TOTAL RECEIVED:	1,000.00	
	CHANGE TENDERED:	.00	

CHECK #: 1699

RECEIVED BY: TREASURER/LP





Jane Leslie &lt;lesliej@rochesterhills.org&gt;

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**Liquor License Application**

3 messages

Jane Leslie &lt;lesliej@rochesterhills.org&gt;

Wed, May 16, 2012 at 10:46 AM

To: Scott Cope &lt;copec@rochesterhills.org&gt;, Kelly Winters &lt;wintersk@rochesterhills.org&gt;, Todd Gary &lt;garyt@rochesterhills.org&gt;, Judy DAlessandro &lt;dalessandroj@rochesterhills.org&gt;

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PS - Judy, please advise Lt. Jacobs. Thanks

-

Jane Leslie, CMC

City Clerk

City of Rochester Hills

1000 Rochester Hills Dr

Rochester Hills, MI 48309

248-841-2461

lesliej@rochesterhills.org

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**Godfather Cigar & Martini Lounge Application.pdf**

295K

DAlessandro, Judy &lt;dalessandroj@oakgov.com&gt;

Thu, May 17, 2012 at 12:39 PM

To: Leslie Jane &lt;lesliej@rochesterhills.org&gt;

Per Lt. Jacobs no problems pending full review by OCSO-SIU

Judy

**From:** Judy DAlessandro [mailto:dalessandroj@rochesterhills.org]**Sent:** Thursday, May 17, 2012 10:13 AM**To:** dalessandroj**Subject:** Fwd: Liquor License Application

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#rhmail#



Michigan Department of Licensing and Regulatory Affairs  
 Liquor Control Commission (MLCC)  
 7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
 Toll Free (866) 813-0011 - www.michigan.gov/lcc

Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
 (For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License**  
**(Retail License Applicants)**

**PLEASE READ!** A copy of this completed application should be submitted to the local legislative body and local law enforcement agency where the license is/will be held so your request can be processed correctly.

**Part 1 - Please answer both questions below (if you are requesting a license as a part of your application)**

Are you requesting a new license as a part of your application?  Yes  No (If yes, cashier is instructed to use fee code 4012)

Are you transferring an existing license as a part of your application?  Yes  No (If yes, cashier is instructed to use fee code 4034)

If you answer **yes** to **both** questions, which type of license is to be transferred? \_\_\_\_\_

**Part 2 - Definitions**

**Off-premise licenses** - Licenses that are issued for the type of business where alcoholic beverages are sold for consumption elsewhere, and where consumption on the premises is not allowed. There are two main types; SDD (spirits and mixed drink spirits) and SDM (beer and wine). Please check the appropriate box for your request. Note: Any additional transfer or license fees may be calculated and collected at a later date.

**On-premise licenses** - Licenses that are issued to allow alcoholic beverages to be sold, served and consumed on the premises. Note: Any additional transfer or license fees may be calculated and collected at a later date.

**Part 3 - Inspection Fees (Check box applicable to your application)**

Inspection fee - 1 license (4036) \$70.00  Inspection fee - 2 licenses (4036) \$140.00  Inspection fee - 3 licenses (4036) \$210.00

**Part 4 - Transaction Information (Check boxes applicable to your application)**

New license  Transfer stock/interest  Add/Drop space  Transfer location  Transfer classification  Change status (self incorporation)

New permit  Transfer ownership  Transfer limited partnership interest

Name(s) of current licensee: \_\_\_\_\_

Current licensed address: \_\_\_\_\_

**Part 5 - License Types and Permits (Check boxes applicable to your application)**

MCL 436.1525(1) provides that license fees shall be paid at the time of filing applications. (All checks/money orders should be made payable to the State of Michigan)

Off Premise License Type:	Base Fee:	Off Premise Permits:	Base Fee:
<input type="checkbox"/> SDM License	\$100.00	<input type="checkbox"/> Sunday Sales Permit (AM)	\$160.00
<input type="checkbox"/> SDD License	\$150.00	<input type="checkbox"/> Sunday Sales Permit (PM) (Held with SDD license)	\$22.50
<input type="checkbox"/> Resort SDD License	Upon Licensure	<input type="checkbox"/> Catering Permit	\$100.00
<input type="checkbox"/> Transfer Resort SDD license	\$150.00	<input type="checkbox"/> Beer and Wine Sampling	No charge *
		<input type="checkbox"/> Living Quarters	No charge *

\*Note: MCL 436.1529(5)(b) provides that an inspection fee shall not be required for the issuance of a new permit, or the transfer of an existing permit, if the permit is issued or transferred simultaneously with the issuance or transfer of a license or an interest in a license.

**Off Premise Permission(s):** **Base Fee:**

Off-premise Storage No charge

Direct Connection(s) No charge

Gas Pumps No charge



Michigan Department of Licensing and Regulatory Affairs  
Liquor Control Commission (MLCC)  
7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
Toll Free (866) 813-0011 • www.michigan.gov/lcc

Business ID: \_\_\_\_\_  
Request ID: \_\_\_\_\_  
(For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License**  
**(Retail License Applicants)**

**Part 5 Continued - License Types and Permits (Check boxes applicable to your application)**

On Premise License Type:	Base Fee:	On Premise Permits:	Base Fee:
<input type="checkbox"/> B-Hotel License	\$600.00	<input type="checkbox"/> New Banquet Facility Permit	\$600.00
<input type="checkbox"/> A-Hotel License	\$250.00	<input type="checkbox"/> Sunday Sales Permit (AM)	\$160.00
<input type="checkbox"/> Brewpub license	\$100.00	<input checked="" type="checkbox"/> Sunday Sales Permit (PM)	15% of license fee
<input checked="" type="checkbox"/> Class C License	\$600.00	<input type="checkbox"/> Catering Permit	\$100.00
<input type="checkbox"/> Club License	\$300.00	<input type="checkbox"/> Outdoor Service	No charge *
<input type="checkbox"/> Resort License	Upon Licensure	<input checked="" type="checkbox"/> Entertainment Permit	No charge *
<input type="checkbox"/> Redevelopment License	Upon Licensure	<input checked="" type="checkbox"/> Dance Permit	No charge *
<input type="checkbox"/> Tavern License	\$250.00	<input type="checkbox"/> Topless Activity Permit	No charge *
<input type="checkbox"/> G-1 License	\$1,000.00	<input type="checkbox"/> Banquet Facility Permit	No charge *
<input type="checkbox"/> G-2 License	\$500.00	<input type="checkbox"/> Living Quarters	No charge*
<input type="checkbox"/> Aircraft License	\$600.00	<input type="checkbox"/> Specific Purpose Permit (list activity below):	No charge *
<input type="checkbox"/> Watercraft License	\$100.00	Hours requested: <u>9-11 PM.</u>	
<input type="checkbox"/> Train	\$100.00	<input type="checkbox"/> Extended Hours Permit (check type below):	No charge *
<input type="checkbox"/> Continuing Care License	\$600.00	<input type="radio"/> Dance <input type="radio"/> Entertainment	
		Hours requested: _____	
		<input type="checkbox"/> New Additional Bar Permit (s)** Indicate #: _____	\$350.00
<b>On Premise Permission(s):</b>	<b>Base Fee:</b>	*Note: MCL 436.1529(5)(b) provides that an inspection fee shall not be required for the issuance of a new permit, or the transfer of an existing permit, if the permit is issued or transferred simultaneously with the issuance or transfer of a license or an interest in a license.	
<input type="checkbox"/> Off-premise Storage	No charge	**Note: \$350.00 is due for each additional bar requested. This fee must also be included when calculating the total amount due for Sunday Sales Permit (PM).	
<input type="checkbox"/> Direct Connection(s)	No charge		
<input type="checkbox"/> Gas Pumps	No charge		

**Part 6 - Applicant Information**

Name of entity/person that will hold the license: THE GODFATHER CIGAR & MARTINI LOUNGE, INC.

- Corporations/Limited Liability Company(s) - State the name as it is filed with the State of Michigan Corporation Division and provide a copy of your articles.
- Corporations/Limited Liability Company(s) must provide a list of stockholders/members in Part 8 of this form.
- If your company has not filed with the State of Michigan, you must submit a copy of a filed certificate of authority to transact business in Michigan along with your application.

Street address of proposed licensed establishment: 6876 6000 N. ROCHESTER Zip Code: 48306

City, Village: ROCHESTER HILLS Township: \_\_\_\_\_ County: OAKLAND

Contact person for your company: MAHER H. DADOU

Business Phone: 248-652-1400 Cell Phone: 248-421-5000 E-mail address: marty@tgcigar.com

Do you have an attorney that you would like us to contact?  Yes - See below  No

Attorney name and address: SHAMIL E. HALABU 415 W. 11 MILE ROAD, MADISON HEIGHTS, MI 48071

Office Phone: 248-652-1400 Cell Phone: 248-421-5000 E-mail address: shamil@shamilhalabu.com



Michigan Department of Licensing and Regulatory Affairs  
 Liquor Control Commission (MLCC)  
 7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
 Toll Free (866) 813-0011 • www.michigan.gov/lcc

Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
 (For MLCC use only)

**Application for New License, Permits, or Transfer of Ownership or Interest in License  
 (Retail License Applicants)**

**Part 7a - Name and Address**

- Each stockholder/member/partner must complete Part 7b of the application.  
 (For companies with multiple stockholders/members/partners, please make copies of this section for each individual to complete)
- Administrative rule R 436.1115 provides that an applicant for a license shall submit fingerprints and undergo investigation by the Commission. Fingerprints are not required for an applicant previously fingerprinted for a license with the Commission. If your local police agency does not have paper fingerprint cards, please contact the MLCC today at (866) 813-0011 and we will send them to you right away.
- Please attach the the fingerprint card and \$30.00 fee payable (for each card) to the State of Michigan and return them to the Lansing office of the Michigan Liquor Control Commission.

Name: MAHER H. DADOU  
 Home address: 3653 Steeply Saw Dr, Roch. Hls. MI 48309  
 Business Phone: 248-652-1400 Cell Phone: 248-421-5000 E-mail address: ~~maher.dadou@mlcc.com~~  
 see above

**Part 7b - Personal Information (Individuals)**

Date of Birth: [redacted] - 64 Social Security Number: [redacted]

Are you a citizen of the United States of America?  Yes  No (If you answered "no", you will be asked to provide documentation to verify citizenship)  
 Have you ever legally changed your name?  Yes  No If you are/were married remember to list your prior name(s) or during naturalization or court process.

If you answered yes, please state your prior name(s) (including maiden): \_\_\_\_\_

Have you ever been arrested?  Yes  No If yes, list below (attach additional pages if necessary)

Date	City/State	Charge	Disposition
------	------------	--------	-------------

If you are currently married, what is your spouse's full name? AMANY H. DADOU  
 Spouse's date of birth: [redacted] - 68 (first, middle, last)

Is your spouse a citizen of the United States of America?  Yes  No (If you answered "no", you will be asked to provide documentation to verify your spouse's citizenship)

Has your spouse ever been arrested?  Yes  No If yes, list below (attach additional pages if necessary)

Date	City/State	Charge	Disposition
------	------------	--------	-------------

Do you or your spouse hold any position, either by appointment or election, which involves the duty to enforce any penal law of the United States of America, or the penal laws of the State of Michigan, or any penal ordinance or resolution of any municipal subdivisions of the State of Michigan (civil defense volunteer policeman, mayors, village presidents, and members of city councils are not considered to be law enforcement officers).

Yes  No

Do you or your spouse hold any class of license for the manufacture or sale of alcoholic beverages at wholesale in Michigan?

Yes  No

I certify that the information contained in this form is true and accurate to the best of my knowledge and belief. I agree to comply with all requirements of the Michigan Liquor Control Code and Administrative Rules. I also understand that providing false or fraudulent information is a violation of the Liquor Control Code pursuant to MCL 436.2003.

5/4/2012

MAHER H. DADOU

Date

Individual, print name

Individual signature



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 Liquor Control Commission (MLCC)  
 7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
 Toll Free (866) 813-0011 • www.michigan.gov/lcc

Business ID: \_\_\_\_\_

Request ID: \_\_\_\_\_

(For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License**  
**(Retail License Applicants)**

<b>Part 8 - Report of Stockholders/Members/Limited Partners</b>	
<b>Corporations - Please complete this section and attach more copies of this page if more room is needed.</b>	
Name and Address of all Stockholders:	Total Number of Shares Held:
MAHER H. DADOU	1,000
Name and address of Corporate Officers and Directors, pursuant to administrative rule R 436.1109	
MAHER H. DADOU, PRESIDENT	
MAHER H. DADOU, SECRETARY	
MAHER H. DADOU, TREASURER	
What is the total number of shares that the corporation has issued to its stockholders? 1,000	

<b>Limited Liability Companies - Please complete this section and attach more copies of this page if more room is needed.</b>	
Name and address of all members:	Total Percent (%) of interest held
Name and address of Managers and Assignees, pursuant to administrative rule R 436.1110	





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 Liquor Control Commission (MLCC)  
 7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
 Toll Free (866) 813-0011 - www.michigan.gov/lcc

Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
 (For MLCC use only)

**Police Investigation Recommendation**  
 [Authorized by MCL 436.1217 and R 436.1105; MAC]

**Instructions for Applicants:**

- Provide a copy of your Application for New Licenses, Permits, or Transfer of Ownership or Interest in License (form LCC-3011 for Retail or form LCC-3015 for Manufacturers and Wholesalers) to the local law enforcement agency.
- Sign consent below.
- Administrative rule R 436.1115 provides that an applicant for a license shall submit fingerprints and undergo investigation by the Commission. Fingerprints are not required for an applicant previously fingerprinted for a license with the Commission. If your local police agency does not have paper fingerprint cards, please contact the MLCC today at (866) 813-0011 and we will send them to you right away.

**Instructions for Law Enforcement Agency:**

- Under the Michigan Liquor Control Code, local police agency approval is required only for permanent or temporary dance permits, entertainment permits, or topless activity permits; local police approval is also required for extended hours of dance permits and entertainment permits. However, administrative rule R 436.1105 requires the Commission to consider an opinion of the local police agency in regard to an application for a license or a permit if the opinion is submitted in writing.
- If applicant states they have never held a license, please attach the fingerprint card and \$30.00 fee payable (for each card) to the State of Michigan and return them to the Lansing office of the Michigan Liquor Control Commission. If your local police agency does not have paper fingerprint cards, please contact the MLCC today at (866) 813-0011 and we will send them to you right away.
- Fingerprint all individuals who hold 10% or more of the total stock or interest issued as stated in Part 8 of the Application for New Licenses, Permits, or Transfer of Ownership or Interest in License (form LCC-3011 for Retail or Part 9 in form LCC-3015 for Manufacturers and Wholesalers).
- Applicant will be required to advise you if they have been previously fingerprinted by the Commission for a license.

**Part 1 - Consent for Investigation:**

I hereby consent to an investigation by the local law enforcement.

5/6/12                      Maheer Dadon                      [Signature]  
 Date                                      Print name of applicant                                      Signature of applicant

**Part 2 - Applicant Investigation:**

The application from THE GODFATHER CIGAR & MARTINI LOUNGE, INC.  
 (name of applicant)

for the following license(s): CLASS "C"  
 (e.g. Class C, Tavern, B-Hotel, Micro Brewer)

to be located at 6876 ~~6900~~ N. ROCHESTER, ROCHESTER HILLS, MICHIGAN 48306

with the following permits, if applied for:     Dance Permit     Entertainment Permit     Topless Activity Permit

Extended Hours Dance Permit                      Hours Required: \_\_\_\_\_

Extended Hours Entertainment Permit                      Hours Required: \_\_\_\_\_

Administrative rule R 436.1105(2) provides that the Commission shall consider all of the following factors in determining whether an applicant may be issued a license or permit:

- (a) The applicant's management experience in the alcoholic liquor business.
- (b) The applicant's general management experience.
- (c) The applicant's general business reputation.

- (d) The opinions of the local residents, local legislative body, or local law enforcement agency with regard to the proposed business.
- (e) The applicant's moral character.
- (f) The order in which the competing initial application forms are submitted to the commission; however, this subdivision shall not apply to an application for a resort license authorized by section 531 of 1998 PA 58, MCL 436.1531.
- (g) Past convictions of the applicant for any of the following:
  - (i) A felony.
  - (ii) A crime involving the excessive use of alcoholic liquor.
  - (iii) A crime involving any of the following:
    - (a) Gambling.
    - (b) Prostitution.
    - (c) Weapons.
    - (d) Violence.
    - (e) Tax evasion.
    - (g) Fraudulent activity.
    - (h) Controlled substances
  - (iv) A misdemeanor of such a nature that it may impair the ability of the applicant to operate a licensed business in a safe and competent manner.
  - (v) Sentencing for any of the offenses specified in this subrule after a plea of nolo contendere.
- (h) The applicant's excessive use of alcoholic liquor.
- (i) The effects that the issuance of a license would have on the economic development of the area.
- (j) The effects that the issuance of a license would have on the health, welfare, and safety of the general public.

Do you have any concerns about the applicant, under this rule, at this time?  Yes  No

If you answered yes, please provide an explanation on this form, or attach a separate explanation if more space is needed.

**Part 4 - Recommendation**

Are the permits requested by the applicant recommended by your department at this time?  Yes  No

If you answered no, please provide an explanation as to why your department does not recommend this application.  
(List your reasons on this form, or attach a separate sheet if more space is needed.)

Name of law enforcement agency: \_\_\_\_\_

Name and title of approving officer (please print): \_\_\_\_\_

Signature and date of approving officer: \_\_\_\_\_

Phone number and e-mail of approving officer: \_\_\_\_\_



GOLD STAR  
CITY OF ROCHESTER HILLS

CLASS C LIQUOR LICENSE APPLICATION

APPLICANT'S CHECK LIST FOR SUBMISSION

- Completed Application
  - Listing of Corporation/Partners
  - ~~NA~~ Building/Site Plans - existing - on file
  - Financial Statement
  - Lease Agreement (if applicable)
  - Menu
  - ~~TBA~~ Training Policy will be completed and all trained upon receipt
  - Fingerprints
  - ~~NA~~ Dance/Entertainment Agreement (if applicable)
-

CITY OF ROCHESTER HILLS

CLASS C LIQUOR LICENSE APPLICATION

Date: 2/06/2012

- New Class C License
- Transfer Class C License
- Dance Permit
- Entertainment Permit
- Dance Entertainment Permit

Applicant's Name: Uncle Sam's, Inc. Phone No. (248) 652-2478  
 Address: 650 S. Rochester Rd. City Rochester Hills ST MI  
 Age: \_\_\_\_\_ Citizenship: \_\_\_\_\_ Date of Birth 1996 Birthplace: \_\_\_\_\_  
 If naturalized, year and place: \_\_\_\_\_

If a partnership, please complete the following:

Partner's Name: NA Phone No. \_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_  
 Age: \_\_\_\_\_ Citizenship: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Birthplace: \_\_\_\_\_  
 If naturalized, year and place: \_\_\_\_\_

Manager's Name: PAUL HARRIS Phone No. (248) 652-2478  
 Address: 318 Ridgewood Rd City Rochester ST MI  
 Age: 46 Date of Birth: 02/08/1966

If a corporation, the names, addresses of the officers and directors, date of birth and age of each:

PAUL HARRIS DOB: 2/08/1966 318 Ridgewood Rd  
 - PRESIDENT - Rochester, MI 48306  
 - SECRETARY  
 - TREASURER Age: 46

Location of Proposed License: GOLD STAR Family Restaurant, 6505 Rochester Rd.

Does applicant presently own the premises? NO  
If not, name of owner of premise: SAM HARRIS, (SINCE 1976)

Legal Description of Property (Sidwell #) 70-15-15-429-037

Length of time business has been in operation: 15 years, July 1 1996

Has applicant ever been convicted of a felony? Yes  No

If convicted of felony, explain: \_\_\_\_\_

Has applicant previously applied for liquor license? Year requested: NO

Location of business: \_\_\_\_\_

Was liquor license granted: \_\_\_\_\_

Have any of the applicants or persons listed above been convicted of a violation of federal or state law concerning the manufacture, possession or sale of alcoholic beverages? Yes  No

Name of person \_\_\_\_\_

What is the applicant's current business? GOLD STAR Family Restaurant, Sit down dinner

Length of time in named business? 15 years, July 1 1996

List all uses in addition to sale of alcoholic beverages: Sit down & Carry Out dinner.  
FULL SERVICE FAMILY RESTAURANT

Does applicant presently operate a restaurant? Yes  No   
Name and address of restaurant: GOLD STAR Family Restaurant 6505 Rochester Rd.

Does applicant presently hold a Class C liquor license? Yes  No   
Name and address of restaurant: \_\_\_\_\_

List record and history of any liquor license violations by the applicant for preceding ten (10) years  
NA, NO history of violations.

Record history of any liquor license violations by the corporation or by a parent of subsidiary corporation of the applicant for the immediate preceding ten (10) years

NA, NO HISTORY OF VIOLATIONS.

<u>Proposed Liquor Establishment:</u>	<u>Existing Building</u>	<u>New Construction</u> / <u>DUA</u>
Size of Site:	<u>.64 acres / 126x250</u>	_____
Size of Building:	<u>2100 sq. ft.</u>	_____
Size of Kitchen:	<u>≈ 1000 sq. ft.</u>	_____
Seating Capacity:	<u>85</u>	_____
Size of Dance Floor, if any:	<u>- NA -</u>	_____
Percentage of Floor Area for Dining:	<u>≈ 52%</u>	_____
Percentage of Floor Area for Bar:	<u>0%</u>	_____
Present Zoning:	<u>B2</u>	_____
Required Zoning:	_____	_____
Cost of Remodeling:	<u>- 0 -</u>	_____
Cost of Construction:	<u>- 0 -</u>	_____
Estimated Dates of Construction	Start: <u>NA</u>	Completion: <u>NA</u>

Total cost to be expended by licensee for the licensed premises: EXISTING NO ADDITIONAL COST.

Building Plans Submitted - 1 Sets Required:      Number of Copies Enclosed: \_\_\_\_\_

Site Plans Submitted - 6 Sets Required:      Number of Copies Enclosed: \_\_\_\_\_

Do Site Plans show off-street parking and lighting?      Yes \_\_\_\_\_ No \_\_\_\_\_

Please Note building department could not locate copy of original site plan. Letter stating this included in packet.

Describe the proposed character/type of establishment (e.g. theme, entertainment, food)

The existing theme is as a full service sit down diner specializing in the preparation and serving Greek and American cuisine. Currently open for breakfast, lunch, and dinner from 7:00am until 9:00pm. Should we be granted liquor license it will be used to supplement and enhance the current theme.

Describe the proposed full food menu:

Continued use of existing menu (enclosed in packet). Full menu offering breakfast, lunch, and dinner. Specializing in Greek and traditional home-cooked meals.

Proposed menu attached:

Yes  No

Describe the surrounding neighborhood and explain how the proposed establishment fits this location in Rochester Hills.

Existing restaurant operating in Rochester Hills since 1976. Property/building has been owned by father (Sam Harris) continuously since July 1976. Located on Rochester Road surrounded by mostly commercial property including auto dealers, retail, fast food operations, as well as bars and other full service restaurants.

Revenues: Provide a breakdown of the anticipated revenues from food, alcoholic beverages and other revenues (copy must be attached): anticipate 85-90% food / 10-15% alcohol

Evidence of Financial Responsibility:

Amount of Funds supplied by Principals: cost of license/training 100%  
Amount of Funds to be Financed: 0 / NA  
Name of Financer/Phone Number: NA

Liquor License Application

Personal References/Phone Number:

Linda Kaye Davis - Kirksey (248) 425-1960  
Dave Semrau (Covages Dairy School) 800-256-9339  
Randy Secorline (248) 318-0287

Business References/Phone Number:

Russ Shelton (248) 651-5500  
John Fox (248) 651-7000  
John Dumas (Dumas Foods) (313) 567-4740

Has applicant completed a certified training program? Yes \_\_\_ No

Have employees completed a certified training program? Yes \_\_\_ No

Names and addresses of those completing program

All necessary training to be completed; should approval for license be granted.

Applicant understands that should any of the above information prove to be inaccurate or untruthful, it will be grounds to deny applicant's request or revoke any approvals.

I (We) Paul Harris  
affirm I (We) will not violate any of the laws of the State of Michigan or of the United States or any ordinances of the City of Rochester Hills in the conduct of my (our) business, and acknowledge receipt of a copy of Chapter 6, Alcoholic Liquor of the Rochester Hills Code of Ordinances.

I hereby certify the above information to be true and accurate to the best of my (our) knowledge.

Paul Harris  
Applicant Signature/Date

\_\_\_\_\_  
Applicant Signature/Date

This application is not considered complete until applicant has made contact with the Rochester Hills Contingent of the Oakland County Sheriff's Department and complied with fingerprinting and any other necessary requirements of the Oakland County Sheriff's Department.



**KALLAS**  
C O M P A N Y

1500 Penobscot Bldg.  
Detroit, MI 48226  
(313)962.6000  
FAX 963.8379

First in

Professional Services

~~For the Restaurant~~

And Bar Owner

Complete Bookkeeping

Computer Payroll

June 2, 2004

Re: Uncle Sam's, Inc.

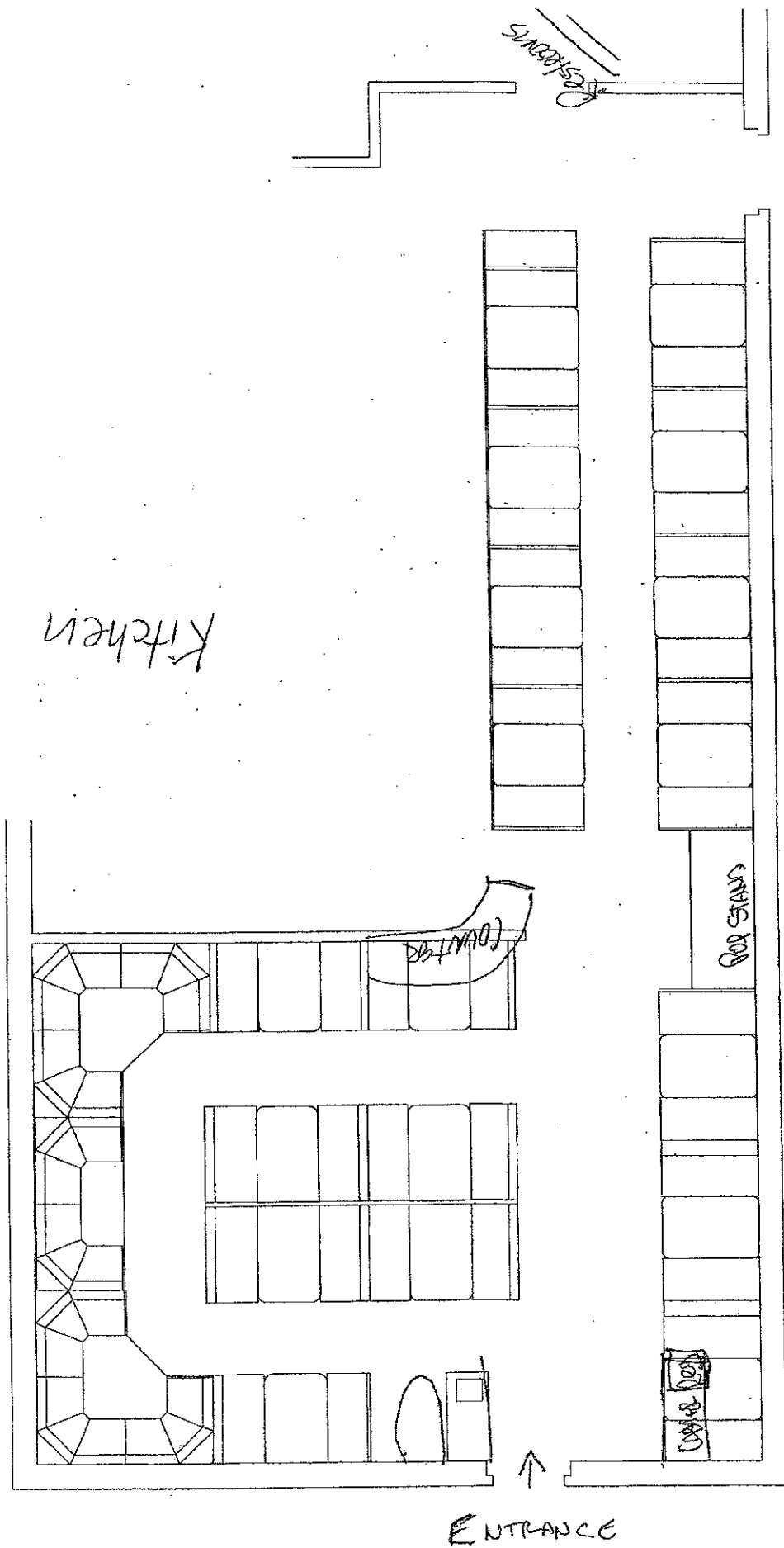
To Whom It May Concern:

Let it be known that Paul Harris is the President, Secretary, and Treasurer. Paul Harris has held these positions since 1/1/98. He has filed all corporate tax returns to reflect this status since that date.

James Humenik, Jr.

*James Humenik, Jr.*

Corporate Tax Manager  
Kallas Company







innovative by nature

Bryan K. Barnett  
Mayor

February 9, 2012

City Council

Ravi Yalamanchi  
District 1

Adam Kochenderfer  
District 2

Greg Hooper  
District 3

Nathan Klomp  
District 4

James Rosen  
At-Large

Mark Tisdell  
At-Large

Michael Webber  
At-Large

Gold Star Family Restaurant  
650 S. Rochester Rd.  
Rochester Hills, MI 48307

Re: Site Plan  
Project Address: 650 S. Rochester Rd

Dear Mr. Harris:

The City of Rochester Hills Building Department has received your request for a copy of your site plan. We regret to inform you that after searching our records one could not be located.

If you have any other questions regarding this matter please contact our office at (248) 656-4615. Office hours are 8:00 am to 5:00 p.m., Monday through Friday.

Sincerely,

BUILDING DEPARTMENT

Kelly M. Winters, C.B.O.  
Deputy Director



Fire Department  
Ronald Crowell, Fire Chief

RECORDED

From: Todd Gary, Fire Marshall  
To: Jane Leslie, City Clerk  
Date: May 10, 2012  
Re: Liquor Inspection

MAY 10 2012

RECORDED  
MAY 10 2012

Please be advised the Fire Department has no objections to the issuance of a Class C liquor license to Gold Star Restaurant at 650 S. Rochester Rd.

If you should have any questions, please feel free to contact me.

TMG/aj



Jane Leslie <lesliej@rochesterhills.org>

**Gold Star Restaurant - Class C Inspections**

3 messages

Jane Leslie <lesliej@rochesterhills.org>  
To: Scott Cope <cofes@rochesterhills.org>, Kelly Winters <wintersk@rochesterhills.org>

Thu, Jun 14, 2012 at 3:03 PM

Good Afternoon,

I sent the application packet up for Gold Star on about 5/1 regarding liquor license inspections and review. I haven't had a response and wondered if those inspections had been conducted? The Liquor License Technical Review Committee is meeting with applicants on 6/25 and I was hoping to have an updated report for them. Please advise.

Thanks very much,

--  
Jane Leslie, CMC  
City Clerk  
City of Rochester Hills  
1000 Rochester Hills Dr  
Rochester Hills, MI 48309  
248-841-2461  
lesliej@rochesterhills.org

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Scott Cope <cofes@rochesterhills.org>  
To: Jane Leslie <lesliej@rochesterhills.org>  
Cc: Kelly Winters <wintersk@rochesterhills.org>

Thu, Jun 14, 2012 at 3:25 PM

Hi Janie,

The liquor inspection was approved on May 17th. We are all set on the Building Department end of things.

Scott:)

[Quoted text hidden]

[Quoted text hidden]

-----  
This email and any files transmitted with it are confidential and intended solely for the use of the individual or entity to whom they are addressed. If you have received this email in error please notify the originator of the message.  
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#xhmail#

--  
Scott A. Cope C.B.O.  
Director of Building/Ordinance Compliance/Facilities  
City of Rochester Hills  
1000 Rochester Hills Dr.  
Rochester Hills, MI 48309  
Phone: 248.841.2445  
Fax: 248.656.4623

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#rhtml#

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Jane Leslie <lesliej@rochesterhills.org>  
To: Scott Cope <cofes@rochesterhills.org>

Thu, Jun 14, 2012 at 5:42 PM

Thanks, Scott  
[Quoted text hidden]



Michigan Department of Licensing and Regulatory Affairs  
 Liquor Control Commission (MLCC)  
 7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
 Toll Free (866) 813-0011 • www.michigan.gov/lcc

Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
 (For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License**  
**(Retail License Applicants)**

**Part 1 - Please answer both questions below (if you are requesting a license as a part of your application)**

Are you requesting a new license as a part of your application?  Yes  No (If yes, cashier is instructed to use fee code 4012)  
 Are you transferring an existing license as a part of your application?  Yes  No (If yes, cashier is instructed to use fee code 4034)  
 If you answer **yes** to **both** questions, which type of license is to be transferred? \_\_\_\_\_

**Part 2 - Definitions**

**Off-premise licenses** - Licenses that are issued for the type of business where alcoholic beverages are sold for consumption elsewhere, and where consumption on the premises is not allowed. There are two main types; SDD (spirits and mixed drink spirits) and SDM (beer and wine). Please check the appropriate box for your request. Note: Any additional transfer or license fees may be calculated and collected at a later date.

**On-premise licenses** - Licenses that are issued to allow alcoholic beverages to be sold, served and consumed on the premises. Note: Any additional transfer or license fees may be calculated and collected at a later date.

**Part 3 - Inspection Fees (Check box applicable to your application)**

Inspection fee - 1 license (4036) \$70.00  Inspection fee - 2 licenses (4036) \$140.00  Inspection fee - 3 licenses (4036) \$210.00

**Part 4 - Transaction Information (Check boxes applicable to your application)**

New license  Transfer stock/interest  Add/Drop space  Transfer location  Transfer classification  Change status (self incorporation)  
 New permit  Transfer ownership  Transfer limited partnership interest  Other \_\_\_\_\_

Name(s) of current licensee: \_\_\_\_\_  
 Current licensed address: \_\_\_\_\_

**Part 5 - License Types and Permits (Check boxes applicable to your application)**

MCL 436.1525(1) provides that license fees shall be paid at the time of filing applications. (All checks/money orders should be made payable to the State of Michigan)

Off Premise License Type:	Base Fee:	Off Premise Permits:	Base Fee:
<input type="checkbox"/> SDM License	\$100.00	<input type="checkbox"/> Sunday Sales Permit (AM)	\$160.00
<input type="checkbox"/> SDD License	\$150.00	<input type="checkbox"/> Sunday Sales Permit (PM) (Held with SDD license)	\$22.50
<input type="checkbox"/> Resort SDD License	Upon Licensure	<input type="checkbox"/> Catering Permit	\$100.00
<input type="checkbox"/> Transfer Resort SDD license	\$150.00	<input type="checkbox"/> Beer and Wine Sampling	No charge *
		<input type="checkbox"/> Living Quarters	No charge *

\*Note: MCL 436.1529(5)(b) provides that an inspection fee shall not be required for the issuance of a new permit, or the transfer of an existing permit, if the permit is issued or transferred simultaneously with the issuance or transfer of a license or an interest in a license.

Off Premise Permission(s):	Base Fee:
<input type="checkbox"/> Off-premise Storage	No charge
<input type="checkbox"/> Direct Connection(s)	No charge
<input type="checkbox"/> Gas Pumps	No charge



**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License**  
**(Retail License Applicants)**

**Part 5 Continued - License Types and Permits (Check boxes applicable to your application)**

On Premise License Type:	Base Fee:	On Premise Permits:	Base Fee:
<input type="checkbox"/> B-Hotel License	\$600.00	<input type="checkbox"/> New Banquet Facility Permit	\$600.00
<input type="checkbox"/> A-Hotel License	\$250.00	<input checked="" type="checkbox"/> Sunday Sales Permit (AM)	\$160.00
<input type="checkbox"/> Brewpub license	\$100.00	<input type="checkbox"/> Sunday Sales Permit (PM)	15% of license fee
<input checked="" type="checkbox"/> Class C License	\$600.00	<input type="checkbox"/> Catering Permit	\$100.00
<input type="checkbox"/> Club License	\$300.00	<input type="checkbox"/> Outdoor Service	No charge *
<input type="checkbox"/> Resort License	Upon Licensure	<input type="checkbox"/> Entertainment Permit	No charge *
<input type="checkbox"/> Redevelopment License	Upon Licensure	<input type="checkbox"/> Dance Permit	No charge *
<input type="checkbox"/> Tavern License	\$250.00	<input type="checkbox"/> Topless Activity Permit	No charge *
<input type="checkbox"/> G-1 License	\$1,000.00	<input type="checkbox"/> Banquet Facility Permit	No charge *
<input type="checkbox"/> G-2 License	\$500.00	<input type="checkbox"/> Living Quarters	No charge*
<input type="checkbox"/> Aircraft License	\$600.00	<input type="checkbox"/> Specific Purpose Permit (list activity below):	No charge *
<input type="checkbox"/> Watercraft License	\$100.00	Activity: _____	
<input type="checkbox"/> Train	\$100.00	<input type="checkbox"/> Extended Hours Permit (check type below):	No charge *
<input type="checkbox"/> Other (state below):	Upon Licensure	<input type="radio"/> Dance <input type="radio"/> Entertainment <input type="radio"/> Topless	
		<input type="checkbox"/> New Additional Bar Permit (s)** Indicate #: _____	\$350.00

On Premise Permission(s):	Base Fee:
<input type="checkbox"/> Off-premise Storage	No charge
<input type="checkbox"/> Direct Connection(s)	No charge
<input type="checkbox"/> Gas Pumps	No charge

\*Note: MCL 436.1529(5)(b) provides that an inspection fee shall not be required for the issuance of a new permit, or the transfer of an existing permit, if the permit is issued or transferred simultaneously with the issuance or transfer of a license or an interest in a license.

\*\*Note: \$350.00 is due for each additional bar requested. This fee must also be included when calculating the total amount due for Sunday Sales Permit (PM).

**Part 6 - Applicant Information**

Name of entity/person that will hold the license: UNCLE SAM'S, INC dba GOLD STAR Family Restaurant.

- Corporations/Limited Liability Company(s) - State the name as it is filed with the State of Michigan Corporation Division and provide a copy of your articles.
- Corporations/Limited Liability Company(s) must provide a list of stockholders/members in Part 8 of this form.
- If your company has not filed with the State of Michigan, you must submit a copy of a filed certificate of authority to transact business in Michigan along with your application.

Street address of proposed licensed establishment: 650 S. ROCHESTER RD. Zip Code: 48307

City, Village: ROCHESTER HILLS Township: \_\_\_\_\_ County: OAKLAND

Contact person for your company: PAUL HARRIS

Business Phone: (248) 652-2478 Cell Phone: (248) 891-4866 E-mail address: goldstar650@att.net

Do you have an attorney that you would like us to contact?  Yes - See below  No

Attorney name and address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_



**Application for New License, Permits, or Transfer of Ownership or Interest in License  
 (Retail License Applicants)**

**Part 7a - Name and Address**

- Each stockholder/member/partner must complete Part 7b of the application.  
 (For companies with multiple stockholders/members/partners, please make copies of this section for each individual to complete)
- Administrative rule R 436.1115 provides that an applicant for a license shall submit fingerprints and undergo investigation by the Commission. Fingerprints are not required for an applicant previously fingerprinted for a license with the Commission.
- Please attach the the fingerprint card and \$30.00 fee payable (for each card) to the State of Michigan and return them to the Lansing office of the Michigan Liquor Control Commission.

Name: PAUL SAM HARRIS  
 Home address: 318 RIDGEWOOD RD.  
 Business Phone: (248) 652-2478 Cell Phone: (248) 891-4866 E-mail address: goldstar650@att.net

**Part 7b - Personal Information (Individuals)**

Date of Birth: [REDACTED] - 1966 Social Security Number: [REDACTED]

Are you a citizen of the United States of America?  Yes  No (If you answered "no", you will be asked to provide documentation to verify citizenship)  
 Have you ever legally changed your name?  Yes  No (If you are/were married remember to list your prior name(s) or during naturalization or court process.)

If you answered yes, please state your prior name(s) (including maiden): \_\_\_\_\_

Have you ever been arrested?  Yes  No If yes, list below (attach additional pages if necessary)

Date	City/State	Charge	Disposition

If you are currently married, what is your spouse's full name? DONNA MARIE HARRIS

Spouse's date of birth: [REDACTED] - 1969 (first, middle, last)

Is your spouse a citizen of the United States of America?  Yes  No (If you answered "no", you will be asked to provide documentation to verify your spouse's citizenship)

Has your spouse ever been arrested?  Yes  No If yes, list below (attach additional pages if necessary)

Date	City/State	Charge	Disposition

Do you or your spouse hold any position, either by appointment or election, which involves the duty to enforce any penal law of the United States of America, or the penal laws of the State of Michigan, or any penal ordinance or resolution of any municipal subdivisions of the State of Michigan (civil defense volunteer policeman, mayors, village presidents, and members of city councils are not considered to be law enforcement officers).

Yes  No

Do you or your spouse hold any class of license for the manufacture or sale of alcoholic beverages at wholesale in Michigan?

Yes  No

I certify that the information contained in this form is true and accurate to the best of my knowledge and belief. I agree to comply with all requirements of the Michigan Liquor Control Code and Administrative Rules. I also understand that providing false or fraudulent information is a violation of the Liquor Control Code pursuant to MCL 436.2003.

5/28/12  
Date

PAUL HARRIS  
Individual, print name

[Signature]  
Individual signature



Michigan Department of Licensing and Regulatory Affairs  
 Liquor Control Commission (MLCC)  
 7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
 Toll Free (866) 813-0011 • www.michigan.gov/lcc

Business ID: \_\_\_\_\_

Request ID: \_\_\_\_\_

(For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License**  
**(Retail License Applicants)**

**Part 8 - Report of Stockholders/Members/Limited Partners**

**Corporations - Please complete this section and attach more copies of this page if more room is needed.**

Name and Address of all Stockholders:	Total Number of Shares Held:
PAUL SAM HARRIS 318 RIDGEWOOD RD. ROCHESTER, MI 48306	1,000

Name and address of Corporate Officers and Directors, pursuant to administrative rule R 436.1109		
PAUL SAM HARRIS	318 RIDGEWOOD RD. ROCHESTER, MI 48306	PRESIDENT
PAUL SAM HARRIS		SECRETARY
PAUL SAM HARRIS		TREASURER

What is the total number of shares that the corporation has issued to its stockholders? 1,000

**Limited Liability Companies - Please complete this section and attach more copies of this page if more room is needed.**

Name and address of all members:	Total Percent (%) of interest held

Name and address of Managers and Assignees, pursuant to administrative rule R 436.1109	





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Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
 (For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License  
 (Retail License Applicants)**

**Part 8 Continued - Report of Stockholders/Members/Limited Partners**

**Limited Partnerships - Please complete this section and attach more copies of this page if more room is needed.**

Name and address of all partners:	Total Percent (%) of interest held

Name and address of Managers, pursuant to administrative rule R 436.1109


**Signature of Applicant:**

I certify that the information contained in this form is true and accurate to the best of my knowledge and belief. I agree to comply with all requirements of the Michigan Liquor Control Code and Administrative Rules. I also understand that providing **false or fraudulent** information is a violation of the Liquor Control Code pursuant to MCL 436.2003.

5/28/12
PAUL HARRIS, PRES

Date
Print name of applicant/licensee and title
Signature of applicant/licensee

To check the status of your request, visit [www.michigan.gov/lcc](http://www.michigan.gov/lcc) and click on "Online Services." Scroll down to Liquor Control Commission and click on "Online Status Check." Enter your request id number (RID) to check on your application 24 hours a day.



Michigan Department of Licensing and Regulatory Affairs  
 Liquor Control Commission (MLCC)  
 7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
 Toll Free (866) 813-0011 • www.michigan.gov/lcc

Business ID: \_\_\_\_\_

Request ID: \_\_\_\_\_

(For MLCC use only)

**Local Government Approval**

(Authorized by MCL 436.1501)

**Instructions for Applicants:**

- Provide a copy of your Application for New Licenses, Permits, or Transfer of Ownership or Interest in License (form LCC-3011 for Retail or form LCC-3015 for Manufacturers and Wholesalers) to the local unit of government.

**Instructions for Local Legislative Body:**

- Complete this resolution, or provide a resolution, a letter of certification from the clerk, or minutes from the meeting at which this request was considered.

At a \_\_\_\_\_ meeting of the \_\_\_\_\_ council/board  
(regular or special) (township, city, village)  
 called to order by \_\_\_\_\_ on \_\_\_\_\_ at \_\_\_\_\_  
(date) (time)  
 the following resolution was offered:

Moved by \_\_\_\_\_ and supported by \_\_\_\_\_  
 that the application from Uncle Sam's, Inc. dba Gold Star Family Restaurant  
(name of applicant)  
 for the following license(s): CLASS C  
(e.g. Class C, Tavern, B-Hotel, Micro Brewer)

and the following permits, if applied for:  Dance Permit  Entertainment Permit  Topless Activity Permit  
 Extended Hours Dance Permit Hours Required: \_\_\_\_\_  
 Extended Hours Entertainment Permit Hours Required: \_\_\_\_\_

to be located at 650 S. Rochester Rd. Rochester Hills, MI 48067  
 be considered for \_\_\_\_\_  
(approval or disapproval)

<b>Approval</b>	<b>Disapproval</b>
Yeas: _____	Yeas: _____
Nays: _____	Nays: _____
Absent: _____	Absent: _____

It is the consensus of this body that it \_\_\_\_\_ this application be considered for  
(recommends/does not recommend)  
 approval by the Michigan Liquor Control Commission.

I hereby certify that the foregoing is true and is a complete copy of the resolution offered and adopted by the \_\_\_\_\_  
 council/board at a \_\_\_\_\_ meeting held on \_\_\_\_\_  
(regular or special) (date) (township, city, village)

Name and title of authorized officer (please print): PAUL HARRIS, Pres.  
 Signature and date of authorized clerk: \_\_\_\_\_  
 Phone number and e-mail of authorized officer: (248) 652-2478 / goldstar650@att.net



Michigan Department of Licensing and Regulatory Affairs  
 Liquor Control Commission (MLCC)  
 27150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
 Toll Free (866) 813-0011 • www.michigan.gov/lcc

Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
 (For MLCC use only)

**Police Investigation Recommendation**

[Authorized by MCL 436.1217 and R 436.1105; MAC]

**Instructions for Applicants:**

- Provide a copy of your Application for New Licenses, Permits, or Transfer of Ownership or Interest in License (form LCC-3011 for Retail or form LCC-3015 for Manufacturers and Wholesalers) to the local law enforcement agency.
- Sign consent below.
- Administrative rule R 436.1115 provides that an applicant for a license shall submit fingerprints and undergo investigation by the Commission. Fingerprints are not required for an applicant previously fingerprinted for a license with the Commission. If your local police agency does not have paper fingerprint cards, please contact the MLCC today at (866) 813-0011 and we will send them to you right away.
- **Send your completed application, the police recommendation and local approval to the address listed at the top of this form. Do not mail separately as it may delay the processing of your application.**

**Instructions for Law Enforcement Agency:**

- Under the Michigan Liquor Control Code, local police agency approval is required only for permanent or temporary dance permits, entertainment permits, or topless activity permits; local police approval is also required for extended hours of dance permits and entertainment permits. However, administrative rule R 436.1105 requires the Commission to consider an opinion of the local police agency in regard to an application for a license or a permit if the opinion is submitted in writing.
- If applicant states they have never held a license, please attach the fingerprint card and \$30.00 fee payable (for each card) to the State of Michigan and return them to the Lansing office of the Michigan Liquor Control Commission. If your local police agency does not have paper fingerprint cards, please contact the MLCC today at (866) 813-0011 and we will send them to you right away.
- Fingerprint all individuals who hold 10% or more of the total stock or interest issued as stated in Part 8 of the Application for New Licenses, Permits, or Transfer of Ownership or Interest in License (form LCC-3011 for Retail or Part 9 in form LCC-3015 for Manufacturers and Wholesalers).
- Applicant will be required to advise you if they have been previously fingerprinted by the Commission for a license.

**Part 1 - Consent for Investigation:**

I hereby consent to an investigation by the local law enforcement.

5/28/12 Date      PAUL SAM HARRIS Print name of applicant      Paul H Signature of applicant  
 Business Phone: 248-652-2478 Cell Phone: (248) 891-4866 E-mail address: goldstar650@att.net

**Part 2 - Applicant Investigation:**

The application from Uncle Sam's Inc dba Gold Star Family Restaurant (name of applicant)  
 for the following license(s): CLASS C (e.g. Class C, Tavern, B-Hotel, Micro Brewer)  
 to be located at 650 S. Rochester Rd. Rochester Hills MI 48307  
 with the following permits, if applied for:     Dance Permit     Entertainment Permit     Topless Activity Permit  
 Extended Hours Dance Permit    Hours Required: \_\_\_\_\_  
 Extended Hours Entertainment Permit    Hours Required: \_\_\_\_\_

Administrative rule R 436.1105(2) provides that the Commission shall consider all of the following factors in determining whether an applicant may be issued a license or permit:

- (a) The applicant's management experience in the alcoholic liquor business.
- (b) The applicant's general management experience.
- (c) The applicant's general business reputation.
- (d) The opinions of the local residents, local legislative body, or local law enforcement agency with regard to the proposed business.
- (e) The applicant's moral character.
- (f) The order in which the competing initial application forms are submitted to the commission; however, this subdivision shall not apply to an application for a resort license authorized by section 531 of 1998 PA 58, MCL 436.1531.
- (g) Past convictions of the applicant for any of the following:
  - (i) A felony.
  - (ii) A crime involving the excessive use of alcoholic liquor.
  - (iii) A crime involving any of the following:
    - (a) Gambling.
    - (b) Prostitution.
    - (c) Weapons.
    - (d) Violence.
    - (e) Tax evasion.
    - (f) Fraudulent activity.
    - (g) Controlled substances
  - (iv) A misdemeanor of such a nature that it may impair the ability of the applicant to operate a licensed business in a safe and competent manner.
  - (v) Sentencing for any of the offenses specified in this subrule after a plea of nolo contendere.
- (h) The applicant's excessive use of alcoholic liquor.
- (i) The effects that the issuance of a license would have on the economic development of the area.
- (j) The effects that the issuance of a license would have on the health, welfare, and safety of the general public.

**Part 3 - Recommendation**

Do you have any concerns about the applicant, under this rule, at this time?  Yes  No

If you answered yes, please provide an explanation on this form, or attach a separate page if more space is needed.

Are the permits requested by the applicant recommended by your department at this time?  Yes  No

If you answered no, please provide an explanation as to why your department does not recommend this application.

(List your reasons on this form, or attach a separate sheet if more space is needed.)

Name of law enforcement agency: \_\_\_\_\_

Name and title of approving officer (please print): \_\_\_\_\_

Signature and date of approving officer: \_\_\_\_\_

Phone number and e-mail of approving officer: \_\_\_\_\_

Tavern in the Hills  
CITY OF ROCHESTER HILLS

CLASS C LIQUOR LICENSE APPLICATION

APPLICANT'S CHECK LIST FOR SUBMISSION

- Completed Application
  - Listing of Corporation/Partners
  - Building/Site Plans
  - Financial Statement
  - Lease Agreement (if applicable)
  - Menu
  - Training Policy
  - Fingerprints *ON FILE IN LANSING*
  - Dance/Entertainment Agreement (if applicable)
-

Fax -

# CITY OF ROCHESTER HILLS

## CLASS C LIQUOR LICENSE APPLICATION

Date: 5-15-2012

- New Class C License
- Transfer Class C License
- Dance Permit
- Entertainment Permit
- Dance Entertainment Permit

Applicant's Name: Matthew Moore Phone No. 586-291-1384  
 Address: 3536 Tremonte City Rochester Hills ST MI  
 Age: 30 Citizenship: US Date of Birth 3/30/82 Birthplace: Rochester  
 If naturalized, year and place: \_\_\_\_\_

If a partnership, please complete the following:

Partner's Name: Robert Moore Phone No. 586-291-1384  
 Address: 14010 Goldwater City Sterling Heights ST MI  
 Age: 65 Citizenship: ~~MI~~ US Date of Birth 5/2/47 Birthplace: Detroit  
 If naturalized, year and place: \_\_\_\_\_

Manager's Name: Deni Bozinowski Phone No. 586-344-9289  
 Address: 5592 Murray, Macomb twp City Macomb twp ST MI  
 Age: 29 Date of Birth: 11/16/82

If a corporation, the names, addresses of the officers and directors, date of birth and age of each:  
Robert Moore - ~~14010~~ 14010 Goldwater, Sterling Heights, MI 5-2-1947 65 yrs old  
Matthew Moore - 3436 Tremonte, Rochester Hills, MI 3-30-1982 30 yrs old

Location of Proposed License: 1711 E Auburn Road, Rochester Hills, MI.

Does applicant presently own the premises? yes  
If not, name of owner of premise: \_\_\_\_\_

Legal Description of Property (Sidwell #) 15-25-458-031

Length of time business has been in operation: Closed

Has applicant ever been convicted of a felony? Yes \_\_\_ No X  
If convicted of felony, explain: \_\_\_\_\_

Has applicant previously applied for liquor license? Year requested: 1997 + 2010  
Location of business: Lake Orion + Harrison Twp  
Was liquor license granted: yes

Have any of the applicants or persons listed above been convicted of a violation of federal or state law concerning the manufacture, possession or sale of alcoholic beverages? Yes \_\_\_ No X  
Name of person \_\_\_\_\_

What is the applicant's current business? Bar/Restaurant

Length of time in named business? 15 years

List all uses in addition to sale of alcoholic beverages: Food - Billiards - Entertainment

Does applicant presently operate a restaurant? Yes X No \_\_\_  
Name and address of restaurant: 1172 Lapeer Road, Lake Orion, MI - Orion Sports Bar  
37030 Jefferson, Harrison Twp. MI - SandBar & Grille

Does applicant presently hold a Class C liquor license? Yes X No \_\_\_  
Name and address of restaurant: 1172 Lapeer Road, Lake Orion, MI - Orion Sports Bar & Grill  
37030 Jefferson, Harrison Twp. MI - SandBar + Sports Grill

List record and history of any liquor license violations by the applicant for preceding ten (10) years  
No liquor license violations in the 15 years we have been in business.

Record history of any liquor license violations by the corporation or by a parent of subsidiary corporation of the applicant for the immediate preceding ten (10) years

No Liquor License Violations in the 15 years we have been in business

<u>Proposed Liquor Establishment:</u>	<u>Existing Building</u>	<u>New Construction</u>
Size of Site:	<u>.41 acres</u>	_____
Size of Building:	<u>4,950</u>	_____
Size of Kitchen:	<u>1,600</u>	_____
Seating Capacity:	<u>99 up to 175</u>	_____
Size of Dance Floor, if any:	<u>10 x 12 ft</u>	_____
Percentage of Floor Area for Dining:	<u>30%</u>	_____
Percentage of Floor Area for Bar:	<u>12%</u>	_____
Present Zoning:	<u>Commercial</u>	_____
Required Zoning:	<u>Commercial</u>	_____
Cost of Remodeling:	<u>\$50,000</u>	_____
Cost of Construction:	<u>—</u>	_____
Estimated Dates of Construction	Start: <u>4/20/2012</u>	Completion: <u>8/20/2012</u>
Total cost to be expended by licensee for the licensed premises:	<u>\$250,000</u>	
Building Plans Submitted – 3 Sets Required:	Number of Copies Enclosed:	<u>3</u>
Site Plans Submitted – 6 Sets Required:	Number of Copies Enclosed:	_____
Do Site Plans show off-street parking and lighting?	Yes _____	No _____



Liquor License Application

Describe the proposed character/type of establishment (e.g. theme, entertainment, food)

The theme of the TAVERN in the Hills will be that of a clean, Fun, Family friendly Bar & Grill. A place where a Lawyer, Auto worker or a garbage man can come in and feel equally comfortable. We strive to provide a place where "Everyone has your name" and our customers can enjoy classic american bar fare with a unique twist, at an affordable price in a relaxed atmosphere. Nightly entertainment will consist of Duo acoustic musicians, for our customers who choose to relax and enjoy conversation & Disc Jockeys for our customers who prefer to dance & get loose.

Describe the proposed full food menu:

At the Tavern our menu will be geared towards classic American Bar fare, with a unique and creative spin. Consisting of starters, signature salads, over sized sandwiches, fresh fish and pastas, along with char-grilled steaks and hand tossed pizzas. A childrens menu will be available to help promote family dining and a few desert options will be available ex: (Deep fried twinkie) SEE copy of Sandbar menu, our Harrison Twp location.

Proposed menu attached: Yes  No

Describe the surrounding neighborhood and explain how the proposed establishment fits this location in Rochester Hills.

With the tremendous success and longevity of our Lake Orion and Harrison Township locations, we believe 1711 Auburn Road, Rochester Hills is a perfect fit for our business. With the densely populated neighborhoods and the blue collar mentality the TAVERN will be a great spot for the community to enjoy. As a Rochester resident I feel that this area in Rochester Hills along Auburn road is lacking a nice neighborhood TAVERN.

Revenues: Provide a breakdown of the anticipated revenues from food, alcoholic beverages and other revenues (copy must be attached):

Food - \$360,000 Beverage - \$600,000  
Gaming - \$60,000

Evidence of Financial Responsibility:

Amount of Funds supplied by Principals: \$250,000  
Amount of Funds to be Financed: Zero  
Name of Financer/Phone Number: \_\_\_\_\_

Personal References/Phone Number:

DANA Stark 586-491-3826  
Francis Cordero 248-877-0701  
Boris Bozinski 586-530-2755

Business References/Phone Number:

Senator Matthew Dumas Kiss  
Mayor Bryan Barnett 248-656-4664  
Paul Swanson 313-~~300-4750~~  
300-4230

Has applicant completed a certified training program? Yes  No

Have employees completed a certified training program? Yes  No

Names and addresses of those completing program

Deni Bozinski - 50592 Murray, Macomb twp  
Janis Rizzo - 22320 10 mile Road, Saint Clair Shores

Applicant understands that should any of the above information prove to be inaccurate or untruthful, it will be grounds to deny applicant's request or revoke any approvals.

I (We) Robert Moore & Matthew Moore  
affirm I (We) will not violate any of the laws of the State of Michigan or of the United States or any ordinances of the City of Rochester Hills in the conduct of my (our) business, and acknowledge receipt of a copy of Chapter 6, Alcoholic Liquor of the Rochester Hills Code of Ordinances.

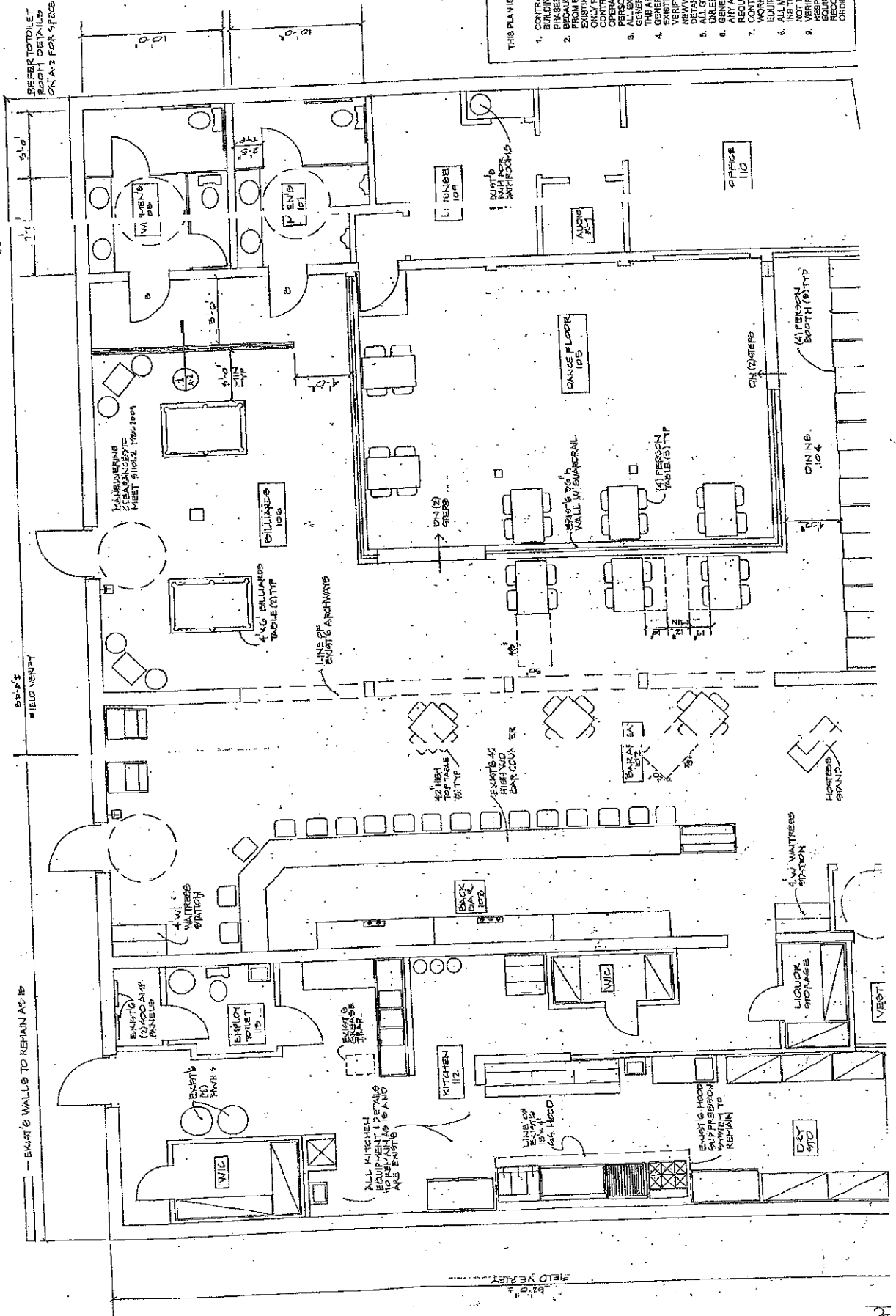
I hereby certify the above information to be true and accurate to the best of my (our) knowledge.

[Signature] 5-15-12  
Applicant Signature/Date

[Signature] 5-15-12  
Applicant Signature/Date

This application is not considered complete until applicant has made contact with the Rochester Hills Contingent of the Oakland County Sheriff's Department and complied with fingerprinting and any other necessary requirements of the Oakland County Sheriff's Department.

REFER TO DETAIL  
EACH ROOM DETAILS  
ON A-2 FOR 9/2/68



THIS PLAN IS SUBJECT TO ALL  
PROVIDED

1. CONTRACTOR IS SOLELY RESPONSIBLE FOR THE BUILDING, KEEPING COORDINATION WITH ALL PHASES OF CONSTRUCTION.
2. CONTRACTOR SHALL VERIFY ALL DIMENSIONS AND CONDITIONS BEFORE BEGINNING WORK.
3. CONTRACTOR SHALL VERIFY THE EXISTING CONDITIONS AND CONDITIONS BEFORE BEGINNING WORK.
4. CONTRACTOR SHALL VERIFY THE EXISTING CONDITIONS AND CONDITIONS BEFORE BEGINNING WORK.
5. CONTRACTOR SHALL VERIFY THE EXISTING CONDITIONS AND CONDITIONS BEFORE BEGINNING WORK.
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9. CONTRACTOR SHALL VERIFY THE EXISTING CONDITIONS AND CONDITIONS BEFORE BEGINNING WORK.
10. CONTRACTOR SHALL VERIFY THE EXISTING CONDITIONS AND CONDITIONS BEFORE BEGINNING WORK.

DANCE ENTERTAINMENT PERMIT AGREEMENT

BETWEEN

THE CITY OF ROCHESTER HILLS

AND

THIS AGREEMENT, is entered into this 17<sup>th</sup> day of May, 2012 by and between the CITY OF ROCHESTER HILLS, a Municipal Corporation, 1000 Rochester Hills Drive, Rochester Hills, Oakland County, Michigan 48309 and Matthew Moore herein after called the Licensee.

WHEREAS, the Licensee is the owner and operator of a certain retail establishment known as Tavern in the Hills located at in the City of Rochester Hills and has applied for a Class C Liquor License with a Dance/Entertainment Permit (or a Dance Permit and/or Entertainment Permit) from the City and the Liquor Control Commission of the State of Michigan; and

WHEREAS, the Licensee intends to allow dancing by customers and entertainment for the enjoyment of its patrons and to increase its customers and thereby the profitability of its business; and

WHEREAS, the City is desirous of protecting the public health, safety and welfare by avoiding the creation of sites of disorderly conduct or potential public nuisances and by maintaining good morals within the municipality of the City of Rochester Hills; and

WHEREAS, the City recognizes that increased traffic and police services may be generated by the increased business such a permit may create if the requested permit is approved for Licensee's establishment; and

WHEREAS, the City is desirous of maintaining a standard of entertainment consistent with good morals within the community,

NOW THEREFORE, for and in consideration of the City of Rochester Hills' approval of Licensee's application for the requested Class C Liquor License with Dance/Entertainment Permit in connection with the retail establishment operated by the Licensee described herein in the City of Rochester Hills, Michigan, the Licensee agrees:

1. Licensee shall provide dancing by customers only as described herein and entertainment that is consistent and in keeping with community standards of common decency and good morals at its retail business described herein.
2. Such dancing/entertainment shall not include nude or nearly nude activity, topless or bottomless dancers, exotic dancers, strippers, male or female impersonators, or similar entertainers.
3. Licensee shall not offer in the conduct of its business, the services of models, waiters or other employees who are nude, nearly nude, topless or bottomless when performing their service.
4. For purposes of this Agreement, "nude or nearly nude activity" shall mean when a person or persons appears on the licensed premises in such a manner as to expose to view any portion of the pubic area, anus, vulva, or genitals, or any simulation thereof, or when a female appears on the licensed premises in such a manner or attire

as to expose to view the portion of the breast referred to as the areola, nipple, or simulation thereof. A person has "exposed to view" such portions of the anatomy if such portions are naked, uncovered or less than opaquely covered.

5. In the event of a breach or a threatening breach of the terms of this Agreement, the City shall request Licensee to terminate the offending activity and then shall be entitled, in addition to all other remedies, to the issuance of an ex parte injunction from the Oakland County Circuit Court without showing or providing any actual damage sustained by the City, restraining the Licensee who has committed a breach of any of the terms of this Agreement or who has threatened to do so, from providing dancing and/or entertainment contrary to the terms of this Agreement.

6. This Agreement in all respects hereto shall be binding upon the parties hereto, their assigns, personal representatives and successors and shall remain in full force and effect so long as the restaurant and bar business is located at the premises.

IN WITNESS WHEREOF, the parties hereto have set their names and seals this day and year first above written.

IN THE PRESENCE OF:

Witness: James Carter By: [Signature]  
Owner

Witness: James Carter By: [Signature]  
Owner

THE CITY OF ROCHESTER HILLS, a  
Michigan Municipal Corporation

Witness: \_\_\_\_\_

By: \_\_\_\_\_

Bryan K. Barnett, Mayor

Witness: \_\_\_\_\_

By: \_\_\_\_\_

Jane Leslie, Clerk



Michigan Department of Licensing and Regulatory Affairs  
 Liquor Control Commission (MLCC)  
 7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
 Toll Free (866) 813-0011 • www.michigan.gov/lcc

Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
 (For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License**  
**(Retail License Applicants)**

**PLEASE READ!** A copy of this completed application should be submitted to the local legislative body and local law enforcement agency where the license is/will be held so your request can be processed correctly.

**Part 1 - Please answer both questions below (if you are requesting a license as a part of your application)**

Are you requesting a new license as a part of your application?  Yes  No (If yes, cashier is instructed to use fee code 4012)

Are you transferring an existing license as a part of your application?  Yes  No (If yes, cashier is instructed to use fee code 4034)

If you answer **yes** to **both** questions, which type of license is to be transferred? \_\_\_\_\_

**Part 2 - Definitions**

**Off-premise licenses** - Licenses that are issued for the type of business where alcoholic beverages are sold for consumption elsewhere, and where consumption on the premises is not allowed. There are two main types; SDD (spirits and mixed drink spirits) and SDM (beer and wine). Please check the appropriate box for your request. Note: Any additional transfer or license fees may be calculated and collected at a later date.

**On-premise licenses** - Licenses that are issued to allow alcoholic beverages to be sold, served and consumed on the premises. Note: Any additional transfer or license fees may be calculated and collected at a later date.

**Part 3 - Inspection Fees (Check box applicable to your application)**

Inspection fee - 1 license (4036) \$70.00  Inspection fee - 2 licenses (4036) \$140.00  Inspection fee - 3 licenses (4036) \$210.00

**Part 4 - Transaction Information (Check boxes applicable to your application)**

New license  Transfer stock/interest  Add/Drop space  Transfer location  Transfer classification  Change status (self incorporation)

New permit  Transfer ownership  Transfer limited partnership interest

Name(s) of current licensee: \_\_\_\_\_

Current licensed address: \_\_\_\_\_

**Part 5 - License Types and Permits (Check boxes applicable to your application)**

MCL 436.1525(1) provides that license fees shall be paid at the time of filing applications. (All checks/money orders should be made payable to the State of Michigan)

Off Premise License Type:	Base Fee:	Off Premise Permits:	Base Fee:
<input checked="" type="checkbox"/> SDM License	\$100.00	<input checked="" type="checkbox"/> Sunday Sales Permit (AM)	\$160.00
<input type="checkbox"/> SDD License	\$150.00	<input checked="" type="checkbox"/> Sunday Sales Permit (PM) (Held with SDD license)	\$22.50
<input type="checkbox"/> Resort SDD License	Upon Licensure	<input type="checkbox"/> Catering Permit	\$100.00
<input type="checkbox"/> Transfer Resort SDD license	\$150.00	<input type="checkbox"/> Beer and Wine Sampling	No charge *
		<input type="checkbox"/> Living Quarters	No charge *

\*Note: MCL 436.1529(5)(b) provides that an inspection fee shall not be required for the issuance of a new permit, or the transfer of an existing permit, if the permit is issued or transferred simultaneously with the issuance or transfer of a license or an interest in a license.

Off Premise Permission(s):	Base Fee:
<input type="checkbox"/> Off-premise Storage	No charge
<input type="checkbox"/> Direct Connection(s)	No charge
<input type="checkbox"/> Gas Pumps	No charge





Michigan Department of Licensing and Regulatory Affairs  
Liquor Control Commission (MLCC)  
7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
Toll Free (866) 813-0011 • www.michigan.gov/lcc

Business ID: \_\_\_\_\_  
Request ID: \_\_\_\_\_  
(For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License**  
**(Retail License Applicants)**

Part 5 Continued - License Types and Permits (Check boxes applicable to your application)			
On Premise License Type:	Base Fee:	On Premise Permits:	Base Fee:
<input type="checkbox"/> B-Hotel License	\$600.00	<input type="checkbox"/> New Banquet Facility Permit	\$600.00
<input type="checkbox"/> A-Hotel License	\$250.00	<input type="checkbox"/> Sunday Sales Permit (AM)	\$160.00
<input type="checkbox"/> Brewpub license	\$100.00	<input checked="" type="checkbox"/> Sunday Sales Permit (PM)	15% of license fee
<input checked="" type="checkbox"/> Class C License	\$600.00	<input type="checkbox"/> Catering Permit	\$100.00
<input type="checkbox"/> Club License	\$300.00	<input type="checkbox"/> Outdoor Service	No charge *
<input type="checkbox"/> Resort License	Upon Licensure	<input checked="" type="checkbox"/> Entertainment Permit	No charge *
<input type="checkbox"/> Redevelopment License	Upon Licensure	<input checked="" type="checkbox"/> Dance Permit	No charge *
<input type="checkbox"/> Tavern License	\$250.00	<input type="checkbox"/> Topless Activity Permit	No charge *
<input type="checkbox"/> G-1 License	\$1,000.00	<input type="checkbox"/> Banquet Facility Permit	No charge *
<input type="checkbox"/> G-2 License	\$500.00	<input type="checkbox"/> Living Quarters	No charge *
<input type="checkbox"/> Aircraft License	\$600.00	<input type="checkbox"/> Specific Purpose Permit (list activity below):	No charge *
<input type="checkbox"/> Watercraft License	\$100.00	Hours requested: _____	
<input type="checkbox"/> Train	\$100.00	<input type="checkbox"/> Extended Hours Permit (check type below):	No charge *
<input type="checkbox"/> Continuing Care License	\$600.00	<input type="radio"/> Dance <input type="radio"/> Entertainment	
		Hours requested: _____	
		<input type="checkbox"/> New Additional Bar Permit (s)** Indicate #: _____	\$350.00
<b>On Premise Permission(s):</b>	<b>Base Fee:</b>	*Note: MCL 436.1529(5)(b) provides that an inspection fee shall not be required for the issuance of a new permit, or the transfer of an existing permit, if the permit is issued or transferred simultaneously with the issuance or transfer of a license or an interest in a license.	
<input type="checkbox"/> Off-premise Storage	No charge	**Note: \$350.00 is due for each additional bar requested. This fee must also be included when calculating the total amount due for Sunday Sales Permit (PM).	
<input type="checkbox"/> Direct Connection(s)	No charge		
<input type="checkbox"/> Gas Pumps	No charge		

**Part 6 - Applicant Information**

Name of entity/person that will hold the license: Harrison Tap, Inc

- Corporations/Limited Liability Company(s) - State the name as it is filed with the State of Michigan Corporation Division and provide a copy of your articles.
- Corporations/Limited Liability Company(s) must provide a list of stockholders/members in Part 8 of this form.
- If your company has not filed with the State of Michigan, you must submit a copy of a filed certificate of authority to transact business in Michigan along with your application.

Street address of proposed licensed establishment: 1171 Auburn Rd. Zip Code: 48307

City, Village: Rochester Hills Township: \_\_\_\_\_ County: Oakland

Contact person for your company: Matt Meire

Business Phone: 586-291-1381 Cell Phone: 586-291-1371 E-mail address: ottospotsbar@yahoo.com

Do you have an attorney that you would like us to contact?  Yes - See below  No

Attorney name and address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_



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Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
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**Application for New License, Permits, or Transfer of Ownership or Interest in License**  
**(Retail License Applicants)**

**Part 7a - Name and Address**

- Each stockholder/member/partner must complete Part 7b of the application.  
 (For companies with multiple stockholders/members/partners, please make copies of this section for each individual to complete)
- Administrative rule R 436.1115 provides that an applicant for a license shall submit fingerprints and undergo investigation by the Commission. Fingerprints are not required for an applicant previously fingerprinted for a license with the Commission. If your local police agency does not have paper fingerprint cards, please contact the MLCC today at (866) 813-0011 and we will send them to you right away.
- Please attach the the fingerprint card and \$30.00 fee payable (for each card) to the State of Michigan and return them to the Lansing office of the Michigan Liquor Control Commission.

Name: Matt Moore  
 Home address: 3436 Tremont, Rochester Hills, MI  
 Business Phone: 586-291-1381 Cell Phone: 586-291-1381 E-mail address: orangeportsbar@yahoo.com

**Part 7b - Personal Information (Individuals)**

Date of Birth: [redacted] / [redacted] / [redacted] Social Security Number: [redacted]

Are you a citizen of the United States of America?  Yes  No (if you answered "no", you will be asked to provide documentation to verify citizenship)

Have you ever legally changed your name?  Yes  No (if you are/were married remember to list your prior name(s) or during naturalization or court process.)

If you answered yes, please state your prior name(s) (including maiden): \_\_\_\_\_

Have you ever been arrested?  Yes  No If yes, list below (attach additional pages if necessary)

Date	City/State	Charge	Disposition

If you are currently married, what is your spouse's full name? \_\_\_\_\_

(first, middle, last)

Spouse's date of birth: \_\_\_\_\_

Is your spouse a citizen of the United States of America?  Yes  No (if you answered "no", you will be asked to provide documentation to verify your spouse's citizenship)

Has your spouse ever been arrested?  Yes  No If yes, list below (attach additional pages if necessary)

Date	City/State	Charge	Disposition

Do you or your spouse hold any position, either by appointment or election, which involves the duty to enforce any penal law of the United States of America, or the penal laws of the State of Michigan, or any penal ordinance or resolution of any municipal subdivisions of the State of Michigan (civil defense volunteer policeman, mayors, village presidents, and members of city councils are not considered to be law enforcement officers).

Yes  No

Do you or your spouse hold any class of license for the manufacture or sale of alcoholic beverages at wholesale in Michigan?

Yes  No

I certify that the information contained in this form is true and accurate to the best of my knowledge and belief. I agree to comply with all requirements of the Michigan Liquor Control Code and Administrative Rules. I also understand that providing false or fraudulent information is a violation of the Liquor Control Code pursuant to MCL 436.2003.

5-17-12

Date

Matt Moore

Individual, print name

[Signature]  
 Individual signature



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Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
 (For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License**  
**(Retail License Applicants)**

**Part 8 - Report of Stockholders/Members/Limited Partners**

**Corporations - Please complete this section and attach more copies of this page if more room is needed.**

Name and Address of all Stockholders: Total Number of Shares Held:

Matthew Meorc 50%  
 3436 Fremonte, Rochester Hills, MI

Robert Meorc 50%  
 1400 Coburnton, Sterling Hgts MI

Name and address of Corporate Officers and Directors, pursuant to administrative rule R 436.1109

What is the total number of shares that the corporation has issued to its stockholders? \_\_\_\_\_

**Limited Liability Companies - Please complete this section and attach more copies of this page if more room is needed.**

Name and address of all members: Total Percent (%) of interest held

Name and address of Managers and Assignees, pursuant to administrative rule R 436.1110



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Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
 (For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License  
 (Retail License Applicants)**

**Part 8 Continued - Report of Stockholders/Members/Limited Partners**

**Limited Partnerships - Please complete this section and attach more copies of this page if more room is needed.**

Name and address of all partners:	Total Percent (%) of interest held

Name and address of Managers, pursuant to administrative rule R 436.1111

**Signature of Applicant:**

I certify that the information contained in this form is true and accurate to the best of my knowledge and belief. I agree to comply with all requirements of the Michigan Liquor Control Code and Administrative Rules. I also understand that providing false or fraudulent information is a violation of the Liquor Control Code pursuant to MCL 436.2003.

5-17-12      Matt Mexre / President      *[Signature]*  
 Date      Print name of applicant/licensee and title      Signature of applicant/licensee

To check the status of your request, visit [www.michigan.gov/lcc](http://www.michigan.gov/lcc) and click on "Online Services." Scroll down to Liquor Control Commission and click on "Online Status Check." Enter your request id number (RID) to check on your application 24 hours a day.



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Business ID: \_\_\_\_\_  
 Request ID: \_\_\_\_\_  
 (For MLCC use only)

**Police Investigation Recommendation**  
 [Authorized by MCL 436.1217 and R 436.1105; MAC]

**Instructions for Applicants:**

- Provide a copy of your Application for New Licenses, Permits, or Transfer of Ownership or Interest in License (form LCC-3011 for Retail or form LCC-3015 for Manufacturers and Wholesalers) to the local law enforcement agency.
- Sign consent below.
- Administrative rule R 436.1115 provides that an applicant for a license shall submit fingerprints and undergo investigation by the Commission. Fingerprints are not required for an applicant previously fingerprinted for a license with the Commission. If your local police agency does not have paper fingerprint cards, please contact the MLCC today at (866) 813-0011 and we will send them to you right away.
- **Send your completed application, the police recommendation and local approval to the address listed at the top of this form. Do not mail separately as it may delay the processing of your application.**

**Instructions for Law Enforcement Agency:**

- Under the Michigan Liquor Control Code, local police agency approval is required only for permanent or temporary dance permits, entertainment permits, or topless activity permits; local police approval is also required for extended hours of dance permits and entertainment permits. However, administrative rule R 436.1105 requires the Commission to consider an opinion of the local police agency in regard to an application for a license or a permit if the opinion is submitted in writing.
- If applicant states they have never held a license, please attach the fingerprint card and \$30.00 fee payable (for each card) to the State of Michigan and return them to the Lansing office of the Michigan Liquor Control Commission. If your local police agency does not have paper fingerprint cards, please contact the MLCC today at (866) 813-0011 and we will send them to you right away.
- Fingerprint all individuals who hold 10% or more of the total stock or interest issued as stated in Part 8 of the Application for New Licenses, Permits, or Transfer of Ownership or Interest in License (form LCC-3011 for Retail or Part 9 in form LCC-3015 for Manufacturers and Wholesalers).
- Applicant will be required to advise you if they have been previously fingerprinted by the Commission for a license.

**Part 1 - Consent for Investigation:**

I hereby consent to an investigation by the local law enforcement.

5-17-12      Matthew Moore      [Signature]  
 Date                      Print name of applicant                      Signature of applicant

Business Phone: 586-291-1381 Cell Phone: 586-291-1381 E-mail address: orangeportsbar@yahoo.com

**Part 2 - Applicant Investigation:**

The application from Matthew Moore  
 (name of applicant)

for the following license(s): Class C  
 (e.g. Class C, Tavern, B-Hotel, Micro Brewer)

to be located at 1711 Auburn, Rochester Hills, MI

with the following permits, if applied for:  Dance Permit     Entertainment Permit     Topless Activity Permit

Extended Hours Dance Permit      Hours Required: \_\_\_\_\_

Extended Hours Entertainment Permit      Hours Required: \_\_\_\_\_

Administrative rule R 436.1105(2) provides that the Commission shall consider all of the following factors in determining whether an applicant may be issued a license or permit:

- (a) The applicant's management experience in the alcoholic liquor business.
- (b) The applicant's general management experience.
- (c) The applicant's general business reputation.
- (d) The opinions of the local residents, local legislative body, or local law enforcement agency with regard to the proposed business.
- (e) The applicant's moral character.
- (f) The order in which the competing initial application forms are submitted to the commission; however, this subdivision shall not apply to an application for a resort license authorized by section 531 of 1998 PA 58, MCL 436.1531.
- (g) Past convictions of the applicant for any of the following:
  - (i) A felony.
  - (ii) A crime involving the excessive use of alcoholic liquor.
  - (iii) A crime involving any of the following:
    - (a) Gambling.
    - (b) Prostitution.
    - (c) Weapons.
    - (d) Violence.
    - (e) Tax evasion.
    - (f) Fraudulent activity.
    - (g) Controlled substances
  - (iv) A misdemeanor of such a nature that it may impair the ability of the applicant to operate a licensed business in a safe and competent manner.
  - (v) Sentencing for any of the offenses specified in this subrule after a plea of nolo contendere.
- (h) The applicant's excessive use of alcoholic liquor.
- (i) The effects that the issuance of a license would have on the economic development of the area.
- (j) The effects that the issuance of a license would have on the health, welfare, and safety of the general public.

**Part 3 - Recommendation**

Do you have any concerns about the applicant, under this rule, at this time?  Yes  No

If you answered yes, please provide an explanation on this form, or attach a separate page if more space is needed.

Are the permits requested by the applicant recommended by your department at this time?  Yes  No

If you answered no, please provide an explanation as to why your department does not recommend this application.  
(List your reasons on this form, or attach a separate sheet if more space is needed.)

Name of law enforcement agency: \_\_\_\_\_

Name and title of approving officer (please print): \_\_\_\_\_

Signature and date of approving officer: \_\_\_\_\_

Phone number and e-mail of approving officer: \_\_\_\_\_



Fire Department  
Ronald Crowell, Fire Chief

---

From: Todd Gary, Fire Marshall  
To: Jane Leslie, City Clerk  
Date: May 22, 2012  
Re: Liquor Inspection

Please be advised the Fire Department has no objections to the issuance of a Class C liquor license to Tavern N' the Hills located at 1711 E. Auburn Rd.

If you should have any questions, please feel free to contact me.

TMG/aj



Jane Leslie &lt;lesliej@rochesterhills.org&gt;

**Tavern N' the Hills**

3 messages

Jane Leslie &lt;lesliej@rochesterhills.org&gt;

Wed, May 16, 2012 at 3:23 PM

To: Scott Cope <copest@rochesterhills.org>, Kelly Winters <wintersk@rochesterhills.org>, Todd Gary <garyt@rochesterhills.org>, Judy DAlessandro <dalessandroj@rochesterhills.org>

Good Afternoon,

We have another applicant for the city's quota license. The establishment is located at 1711 E. Auburn Rd. (formerly Bourbon Jake's). The applicants currently have their applications/plans in for permits from the Building Department. They are estimating their construction/completion to be about 2-3 months.

The applicants are also applying for a Dance-Entertainment Permit (dance floor is identified on the plans) and will provide a signed copy of the city's Agreement. Please review and advise of any concerns. Thank you,

PS - Judy, please forward to Lt. Jacobs. Thanks,

Jane Leslie, CMC  
City Clerk  
City of Rochester Hills  
1000 Rochester Hills Dr  
Rochester Hills, MI 48309  
248-841-2461  
lesliej@rochesterhills.org

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**2 attachments**

**Taven N' the Hills Application.pdf**  
205K

**Tavern N' the Hills Floor Plan.pdf**  
56K

Kelly Winters &lt;wintersk@rochesterhills.org&gt;

Thu, May 17, 2012 at 9:35 AM

To: Jane Leslie &lt;lesliej@rochesterhills.org&gt;

Cc: Scott Cope &lt;copest@rochesterhills.org&gt;

Jane,

As you mentioned, this address is currently undergoing renovations. We will be issuing a Certificate of Occupancy, as this is a new business. I have no reason to think that the construction will be approved and that we will issue the CofO when they are complete.

Therefore, the Building Department has no objections to this request.

Kelly

[Quoted text hidden]

[Quoted text hidden]

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Kelly M. Winters  
Deputy Director  
City of Rochester Hills Building Department  
(248)841-2444

[www.rochesterhills.org](http://www.rochesterhills.org)

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DAlessandro, Judy <dalessandroj@oakgov.com>  
To: Leslie Jane <lesliej@rochesterhills.org>

Thu, May 17, 2012 at 12:38 PM

Per Lt. Jacobs, no problems pending the full review by OCSO-SIU

Judy

**From:** Judy DAlessandro [mailto:dalessandroj@rochesterhills.org]  
**Sent:** Thursday, May 17, 2012 10:07 AM  
**To:** dalessandroj  
**Subject:** Fwd: Tavern N' the Hills

[Quoted text hidden]

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Judy D'Alessandro  
Administrative Coordinator  
Oakland County Sheriff's Office  
Rochester Hills Substation  
750 Barclay Cir  
Rochester Hills, MI 48307  
(248) 537-3510  
dalessandroj@rochesterhills.org  
dalessandroj@oakgov.com

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WASABI  
CITY OF ROCHESTER HILLS

CLASS C LIQUOR LICENSE APPLICATION

APPLICANT'S CHECK LIST FOR SUBMISSION

- Completed Application
  - Listing of Corporation/Partners
  - Building/Site Plans
  - Financial Statement
  - Lease Agreement (if applicable)
  - Menu
  - Training Policy
  - Fingerprints → *It's already In state File*
  - Dance/Entertainment Agreement (if applicable)
-

CITY OF ROCHESTER HILLS

CLASS C LIQUOR LICENSE APPLICATION

Date: 5/17/2012

- New Class C License
- Transfer Class C License
- Dance Permit
- Entertainment Permit
- Dance Entertainment Permit

Applicant's Name: SEONG HUN KIM. Phone No. (586) 219-8858  
 Address: 1483 Raleigh place. City Troy ST   
 Age: 44 Citizenship: Yes Date of Birth 8/1/43 Birthplace: South Korea  
 If naturalized, year and place: 2010 Michigan.

If a partnership, please complete the following:

Partner's Name: \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_  
 Age: \_\_\_\_\_ Citizenship: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Birthplace: \_\_\_\_\_  
 If naturalized, year and place: \_\_\_\_\_

Manager's Name: Chul Woong Kang Phone No. 734-657-3311  
 Address: 2304 Spring ridge dr. City Ann Arbor ST   
 Age: 43 Date of Birth: 02/07/1969

If a corporation, the names, addresses of the officers and directors, date of birth and age of each:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Location of Proposed License: 2945A South Rochester Rd. MI 48307

Does applicant presently own the premises? YES  
If not, name of owner of premise: \_\_\_\_\_

Legal Description of Property (Sidwell #) Restaurant

Length of time business has been in operation: NONE; Construction

Has applicant ever been convicted of a felony? Yes \_\_\_ No

If convicted of felony, explain: \_\_\_\_\_

Has applicant previously applied for liquor license? Year requested: \_\_\_\_\_

Location of business: \_\_\_\_\_

Was liquor license granted: \_\_\_\_\_

Have any of the applicants or persons listed above been convicted of a violation of federal or state law concerning the manufacture, possession or sale of alcoholic beverages? Yes \_\_\_ No \_\_\_

Name of person \_\_\_\_\_

What is the applicant's current business? Wasabi Korean & Japanese

Length of time in named business? 4 years

List all uses in addition to sale of alcoholic beverages: providing Japanese ~~Kaem~~ food

Does applicant presently operate a restaurant? Yes  No \_\_\_

Name and address of restaurant: Wasabi, Korean & Japanese 15 E. Kirby Detroit MI

Does applicant presently hold a Class C liquor license? Yes  No \_\_\_

Name and address of restaurant: Wasabi, Korean & Japanese 15 E. Kirby Detroit MI 48202

List record and history of any liquor license violations by the applicant for preceding ten (10) years  
NONE

Record history of any liquor license violations by the corporation or by a parent of subsidiary corporation of the applicant for the immediate preceding ten (10) years

NONE

<u>Proposed Liquor Establishment:</u>	<u>Existing Building</u>	<u>New Construction</u>
Size of Site:	<u>454.7475<del>8</del> sq</u>	_____
Size of Building:	<u>3.183.54</u>	_____
Size of Kitchen:	<u>1.200 sq</u>	_____
Seating Capacity:	<u>100</u>	_____
Size of Dance Floor, if any:	<u>N/A</u>	_____
Percentage of Floor Area for Dining:	<u>40%</u>	_____
Percentage of Floor Area for Bar:	<u>10%</u>	_____
Present Zoning:	<u>B3</u>	_____
Required Zoning:	<u>B3</u>	_____
Cost of Remodeling:	<u>\$150,000.<sup>00</sup></u>	_____
Cost of Construction:	<u>\$150,000.</u>	_____
Estimated Dates of Construction	Start: <u>5/25/12</u>	Completion: <u>9/15/12</u>
Total cost to be expended by licensee for the licensed premises:	<u>\$ 300,000</u>	
Building Plans (8 1/2" x 11") – 1 Set Required:	Enclosed: <u>Yes</u>	
Site Plans (8 1/2" x 11") – 1 Set Required:	Enclosed: <u>Yes</u>	
Do Site Plans show off-street parking and lighting?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Describe the proposed character/type of establishment (e.g. theme, entertainment, food)

Japanese/Korean/Sushi  
Sitdown middle scale to up scale done in restaurant

Describe the proposed full food menu:

Vegetarian dishes, Japanese dishes, Korean dishes  
We will be providing breakfast, lunch specials  
Dinner, entrees, Sushi.  
The menu includes rice noddle, Beef, chicken, Sea food  
We also provide deep fried entrees

Proposed menu attached: Yes  No

Describe the surrounding neighborhood and explain how the proposed establishment fits this location in Rochester Hills.

See the Attached.

Revenues: Provide a breakdown of the anticipated revenues from food, alcoholic beverages and other revenues (copy must be attached): See the Attached.

Evidence of Financial Responsibility:

Amount of Funds supplied by Principals: \$ 200,000. <sup>00</sup>/<sub>100</sub>  
Amount of Funds to be Financed: None  
Name of Financer/Phone Number: N/A

\$ 105,000. <sup>00</sup>/<sub>100</sub> will be supplied by the landlord  
please see the Lease Contract.

Liquor License Application

Personal References/Phone Number:

(248) 390-3134  
(248) 420-8481  
(248) 345-6767

Business References/Phone Number:

"NUS Wine 313-728-5693  
"SSCO" 734-748-8209  
"Martinez, Ted 773-826-2840

Has applicant completed a certified training program? Yes \_\_\_ No

Have employees completed a certified training program? Yes  No \_\_\_

Names and addresses of those completing program

Chul Wonyong Kang TAM # 41821, ServSafe # 7026706  
Techniques of Alcohol Management, ServSafe please see the attached Resume

Applicant understands that should any of the above information prove to be inaccurate or untruthful, it will be grounds to deny applicant's request or revoke any approvals.

I (We) SEONG HUN KIM

affirm I (We) will not violate any of the laws of the State of Michigan or of the United States or any ordinances of the City of Rochester Hills in the conduct of my (our) business, and acknowledge receipt of a copy of Chapter 6, Alcoholic Liquor of the Rochester Hills Code of Ordinances.

I hereby certify the above information to be true and accurate to the best of my (our) knowledge.

Seong Hun Kim 5/17/2012  
Applicant Signature/Date

\_\_\_\_\_  
Applicant Signature/Date

This application is not considered complete until applicant has made contact with the Rochester Hills Contingent of the Oakland County Sheriff's Department and complied with fingerprinting and any other necessary requirements of the Oakland County Sheriff's Department.



Jane Leslie &lt;lesliej@rochesterhills.org&gt;

**Liquor License Application - Wasabi**

2 messages

Jane Leslie &lt;lesliej@rochesterhills.org&gt;

Fri, May 18, 2012 at 6:53 PM

To: Scott Cope &lt;copec@rochesterhills.org&gt;, Kelly Winters &lt;wintersk@rochesterhills.org&gt;, Todd Gary &lt;garyt@rochesterhills.org&gt;, Judy DAlessandro &lt;dlalessandroj@rochesterhills.org&gt;

Good Afternoon,

We received another request for the Class C license available from City Council. This application is for Wasabi Korean & Japanese Cuisine, Inc. located next to Famous Dave's. They have provided all materials required but I wasn't here when they dropped the application off. I do not know if they have applied for permits/inspections but they do indicate renovations in their application. The fees have been paid.

Please advise. I will be forwarding this to the Council's committee for consideration. Thanks,

PS - Judy, please forward to Lt. Jacobs. Thank you

-

Jane Leslie, CMC  
City Clerk  
City of Rochester Hills  
1000 Rochester Hills Dr  
Rochester Hills, MI 48309  
248-841-2461  
lesliej@rochesterhills.org

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Wasabi Korean & Japanese Cuisine.pdf  
604K

Kelly Winters &lt;wintersk@rochesterhills.org&gt;

Mon, May 21, 2012 at 8:19 AM

To: Jane Leslie <lesliej@rochesterhills.org>  
Cc: Scott Cope <copec@rochesterhills.org>

Jane,

We have assigned an address of 2943 S. Rochester Rd. for this new Business.

Plans were submitted on 5/14/12 for the build-out, and a Preliminary Plan Review Letter was sent to the Architect requesting additional information.

The Building Department anticipates the project will be completed successfully and a Certificate of Occupancy issued once all work has been permitted, inspected and approved. Therefore, we have no objection to the Liquor License request.

Kelly

----- Forwarded message -----

From: Kelly Winters <wintersk@rochesterhills.org>  
Date: Mon, May 21, 2012 at 8:15 AM  
Subject: Re: Liquor License Application - Wasabi  
To: Cherry Nystrom <nystromc@rochesterhills.org>

Thanks!

On Mon, May 21, 2012 at 8:06 AM, Cherry Nystrom <nystromc@rochesterhills.org> wrote:

2943 S. Rochester Rd.

On Mon, May 21, 2012 at 7:53 AM, Kelly Winters <wintersk@rochesterhills.org> wrote:

Cherry,

Have we assigned an address to the is project yet?

Looks like it is at the end of Famous Dave's.

They use an address of 2945A in their Liquor License application, but that doesn't show up in EQ.

Thanks,  
Kelly

[Quoted text hidden]

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This email and any files transmitted with it are confidential and intended solely for the use of the individual or entity to whom they are addressed. If you have received this email in error please notify the originator of the message.  
Any views expressed in this message are those of the individual sender.  
#rhmail#



**Describe the surrounding neighborhood and explain how proposed established fits this location in Rochester Hills.**

Soho restaurant is centrally located in the Rochester Hills shopping district, Hampton Village. Hampton Village Center is the place to shop & dine in Rochester Market. Currently there is no Korean or Japanese restaurant in this mega shopping malls.

Japanese & Korean food has started getting popular in America since the 1970's for its noted health and nutritional value, as well as its taste. Nowadays, Japanese and Korean food is considered one of the healthiest, and is enjoyed by broad ethnic groups of all ages. Even among non-Asians, Asian food has been growing in popularity across the States, with the majority of customers at these restaurants being non-Asian. SOHO is bound to be a much anticipated and warmly welcomed addition that will aid the city of Rochester Hills in continuing to provide well-balanced, nutritional meals at an affordable rate.

Unlike many Asian restaurant managers, the manager of SOHO comes from a rich background of various culinary experiences with professional skills that he has refined over the years. Please see the attached resume. SOHO will offer a variety of top quality Asian foods such as Korean Bibimbap, hot Udon noodle soup, Japanese bento boxes, and sushi rolls to suit various Asian cravings. Much of the menu has been carefully crafted by highly experienced professional chefs and has been tested and tried at the owner's first Korean & Japanese restaurant in Mid town Detroit, Wasabi. In addition, for each major food item, brown rice and vegetarian options will also be available for those customers trying to avoid the pitfalls of the typical fast food.

We believe SOHO Japanese & Korean restaurant will be great asset to the Rochester Community. Through a carefully planned structure, a commitment to consistency and excellence in preparation, cooking, and packaging, and thorough training of all employees, SOHO aspires to successfully accommodate the needs and cravings of the city of the Rochester Hills population. SOHO envisions a trendy and upscale look and a menu that will so delight every taste bud that apart from the quick service.

In the city of Mid-Town Detroit community, We have been successfully serving Wayne State & CCS students for three years and have received countless reviews and compliments about our current. We like to transfer our experiences to the city of Rochester Hills. We are well-aware of the needs and lifestyle of customers in town. Therefore, because of our personal experience and personal investment, We believe in preparing only the highest quality meals made with the best ingredients. We have been a valuable active member in this community, and We hope to do our part in enriching it. We have also volunteered in providing many donations to the community such as Detroit Independent Film Festival and many school fundraising programs. These 5 organizations get the most (\$5000.00); University Cultural Association, Detroit Public School, Detroiters Working for Environmental Justice, Mariners Inn and Detroit Institute of Arts. Please see the attached.



Michigan Department of Licensing and Regulatory Affairs  
 Liquor Control Commission (MLCC)  
 7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505  
 Toll Free (866) 813-0011 - www.michigan.gov/lcc

Business ID: \_\_\_\_\_

Request ID: \_\_\_\_\_

(For MLCC use only)

**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License**

**(Retail License Applicants)**

**PLEASE READ!** A copy of this completed application should be submitted to the local legislative body and local law enforcement agency where the license is/will be held so your request can be processed correctly.

**Part 1 - Please answer both questions below (if you are requesting a license as a part of your application)**

Are you requesting a new license as a part of your application?  Yes  No (If yes, cashier is instructed to use fee code 4012)

Are you transferring an existing license as a part of your application?  Yes  No (If yes, cashier is instructed to use fee code 4034)

If you answer **yes** to **both** questions, which type of license is to be transferred? \_\_\_\_\_

**Part 2 - Definitions**

**Off-premise licenses** - Licenses that are issued for the type of business where alcoholic beverages are sold for consumption elsewhere, and where consumption on the premises is not allowed. There are two main types; SDD (spirits and mixed drink spirits) and SDM (beer and wine). Please check the appropriate box for your request. Note: Any additional transfer or license fees may be calculated and collected at a later date.

**On-premise licenses** - Licenses that are issued to allow alcoholic beverages to be sold, served and consumed on the premises. Note: Any additional transfer or license fees may be calculated and collected at a later date.

**Part 3 - Inspection Fees (Check box applicable to your application)**

Inspection fee - 1 license (4036) \$70.00  Inspection fee - 2 licenses (4036) \$140.00  Inspection fee - 3 licenses (4036) \$210.00

**Part 4 - Transaction Information (Check boxes applicable to your application)**

New license  Transfer stock/interest  Add/Drop space  Transfer location  Transfer classification  Change status (self incorporation)

New permit  Transfer ownership  Transfer limited partnership interest

Name(s) of current licensee: \_\_\_\_\_

Current licensed address: \_\_\_\_\_

**Part 5 - License Types and Permits (Check boxes applicable to your application)**

MCL 436.1525(1) provides that license fees shall be paid at the time of filing applications. (All checks/money orders should be made payable to the State of Michigan)

Off Premise License Type:	Base Fee:	Off Premise Permits:	Base Fee:
<input type="checkbox"/> SDM License	\$100.00	<input type="checkbox"/> Sunday Sales Permit (AM)	\$160.00
<input type="checkbox"/> SDD License	\$150.00	<input type="checkbox"/> Sunday Sales Permit (PM)	\$22.50
<input type="checkbox"/> Resort SDD License	Upon Licensure	<input type="checkbox"/> (Held with SDD license)	
<input type="checkbox"/> Transfer Resort SDD license	\$150.00	<input type="checkbox"/> Catering Permit	\$100.00
		<input type="checkbox"/> Beer and Wine Sampling	No charge *
		<input type="checkbox"/> Living Quarters	No charge *

\*Note: MCL 436.1529(5)(b) provides that an inspection fee shall not be required for the issuance of a new permit, or the transfer of an existing permit, if the permit is issued or transferred simultaneously with the issuance or transfer of a license or an interest in a license.

Off Premise Permission(s):	Base Fee:
<input type="checkbox"/> Off-premise Storage	No charge
<input type="checkbox"/> Direct Connection(s)	No charge
<input type="checkbox"/> Gas Pumps	No charge



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**Part 5 Continued - License Types and Permits (Check boxes applicable to your application)**

On Premise License Type:	Base Fee:	On Premise Permits:	Base Fee:
<input type="checkbox"/> B-Hotel License	\$600.00	<input type="checkbox"/> New Banquet Facility Permit	\$600.00
<input type="checkbox"/> A-Hotel License	\$250.00	<input checked="" type="checkbox"/> Sunday Sales Permit (AM)	\$160.00
<input type="checkbox"/> Brewpub license	\$100.00	<input checked="" type="checkbox"/> Sunday Sales Permit (PM)	15% of license fee
<input checked="" type="checkbox"/> Class C License	\$600.00	<input type="checkbox"/> Catering Permit	\$100.00
<input type="checkbox"/> Club License	\$300.00	<input checked="" type="checkbox"/> Outdoor Service	No charge *
<input type="checkbox"/> Resort License	Upon Licensure	<input type="checkbox"/> Entertainment Permit	No charge *
<input type="checkbox"/> Redevelopment License	Upon Licensure	<input type="checkbox"/> Dance Permit	No charge *
<input type="checkbox"/> Tavern License	\$250.00	<input type="checkbox"/> Topless Activity Permit	No charge *
<input type="checkbox"/> G-1 License	\$1,000.00	<input type="checkbox"/> Banquet Facility Permit	No charge *
<input type="checkbox"/> G-2 License	\$500.00	<input type="checkbox"/> Living Quarters	No charge *
<input type="checkbox"/> Aircraft License	\$600.00	<input type="checkbox"/> Specific Purpose Permit (list activity below):	No charge *
<input type="checkbox"/> Watercraft License	\$100.00	Hours requested: _____	
<input type="checkbox"/> Train	\$100.00	<input type="checkbox"/> Extended Hours Permit (check type below):	No charge *
<input type="checkbox"/> Continuing Care License	\$600.00	<input type="radio"/> Dance <input type="radio"/> Entertainment	
		Hours requested: _____	
		<input type="checkbox"/> New Additional Bar Permit (s)** Indicate #: _____	\$350.00
<b>On Premise Permission(s):</b>	<b>Base Fee:</b>	*Note: MCL 436.1529(5)(b) provides that an inspection fee shall not be required for the issuance of a new permit, or the transfer of an existing permit, if the permit is issued or transferred simultaneously with the issuance or transfer of a license or an interest in a license.	
<input type="checkbox"/> Off-premise Storage	No charge	**Note: \$350.00 is due for each additional bar requested. This fee must also be included when calculating the total amount due for Sunday Sales Permit (PM).	
<input type="checkbox"/> Direct Connection(s)	No charge		
<input type="checkbox"/> Gas Pumps	No charge		

**Part 6 - Applicant Information**

Name of entity/person that will hold the license: Sotto Michigan, Inc.

- Corporations/Limited Liability Company(s) - State the name as it is filed with the State of Michigan Corporation Division and provide a copy of your articles.
- Corporations/Limited Liability Company(s) must provide a list of stockholders/members in Part 8 of this form.
- If your company has not filed with the State of Michigan, you must submit a copy of a filed certificate of authority to transact business in Michigan along with your application.

Street address of proposed licensed establishment: 2945A South Rochester Rd Zip Code: 48307

City, Village: Rochester Hill Township: \_\_\_\_\_ County: OKland

Contact person for your company: Chul woong Kang

Business Phone: (313) 638-1272 Cell Phone: 734-657-3111 E-mail address: WasabiDetroit@hotmail

Do you have an attorney that you would like us to contact?  Yes - See below  No

Attorney name and address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_



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**Part 7a - Name and Address**

- Each stockholder/member/partner must complete Part 7b of the application.  
(For companies with multiple stockholders/members/partners, please make copies of this section for each individual to complete)
- Administrative rule R 436.1115 provides that an applicant for a license shall submit fingerprints and undergo investigation by the Commission. Fingerprints are not required for an applicant previously fingerprinted for a license with the Commission. If your local police agency does not have paper fingerprint cards, please contact the MLCC today at (866) 813-0011 and we will send them to you right away.
- Please attach the the fingerprint card and \$30.00 fee payable (for each card) to the State of Michigan and return them to the Lansing office of the Michigan Liquor Control Commission.

Name: SEONG HUN KIM  
Home address: 1483 Raleigh place Troy, MI. 48064  
Business Phone: (313) 688-1772 Cell Phone: (586) 219-0858 E-mail address: wasabidetrait@hotmail.com

**Part 7b - Personal Information (Individuals)**

Date of Birth: [redacted] 1/1968 Social Security Number: [redacted]

Are you a citizen of the United States of America?  Yes  No (If you answered "no", you will be asked to provide documentation to verify citizenship)  
Have you ever legally changed your name?  Yes  No (If you are/were married remember to list your prior name(s) or during naturalization or court process.)

If you answered yes, please state your prior name(s) (including maiden): SEONG HUN KIM.

Have you ever been arrested?  Yes  No If yes, list below (attach additional pages if necessary)

Date	City/State	Charge	Disposition

If you are currently married, what is your spouse's full name? Sun Young KIM.  
(first, middle, last)

Spouse's date of birth: [redacted] 1973  
Is your spouse a citizen of the United States of America?  Yes  No (If you answered "no", you will be asked to provide documentation to verify your spouse's citizenship)

Has your spouse ever been arrested?  Yes  No If yes, list below (attach additional pages if necessary)

Date	City/State	Charge	Disposition

Do you or your spouse hold any position, either by appointment or election, which involves the duty to enforce any penal law of the United States of America, or the penal laws of the State of Michigan, or any penal ordinance or resolution of any municipal subdivisions of the State of Michigan (civil defense volunteer policeman, mayors, village presidents, and members of city councils are not considered to be law enforcement officers).  
 Yes  No

Do you or your spouse hold any class of license for the manufacture or sale of alcoholic beverages at wholesale in Michigan?  
 Yes  No class 'C'

I certify that the information contained in this form is true and accurate to the best of my knowledge and belief. I agree to comply with all requirements of the Michigan Liquor Control Code and Administrative Rules. I also understand that providing false or fraudulent information is a violation of the Liquor Control Code pursuant to MCL 436.2003.

5/17/2012 Date SEONG HUN KIM Individual, print name Seong Hun Kim Individual signature



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**Application for New Licenses, Permits, or Transfer of Ownership or Interest in License  
 (Retail License Applicants)**

**Part 8 - Report of Stockholders/Members/Limited Partners**

**Corporations - Please complete this section and attach more copies of this page if more room is needed.**

Name and Address of all Stockholders:	Total Number of Shares Held:
SEONG HUN KIM. 1483. Raleigh place Troy MI 48064	60,000

Name and address of Corporate Officers and Directors, pursuant to administrative rule R 436.1109

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What is the total number of shares that the corporation has issued to its stockholders? \_\_\_\_\_

**Limited Liability Companies - Please complete this section and attach more copies of this page if more room is needed.**

Name and address of all members:	Total Percent (%) of interest held

Name and address of Managers and Assignees, pursuant to administrative rule R 436.1110

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

