

Check One: Class C _V Tavern Fransfer		
Class C - Allows the sale of beer, wine and liquor for on site consumption by customers Tavern - Allows the sale of beer and wine only for on site consumption by customers		
FEES: Class C\Tavern\Transfers - \$1,000.00		
GENERAL INFORMATION:		
Applicant's Name: Joseph Qoja Title: Owner		
Business Name: Smoker's Outlet of Rochestic Hills, Inc		
Address: 1416 Walter Blud Unit 3		
Phone: (248) 650-8026 Fax: (248) 650-8126 Email: (20chaster & w.ldb.11) Hobeuco.co		
SUBJECT PROPERTY:		
Location for License: Rochester Hills Plaza, North side of Walton, East of Re		
Parcel(s) Tax ID Number (s): Park of: 15-09-476-033		
Legal Description:		

Request for Transfer of Ownership of an Existing License: Please provide a copy of the following material at time of application for a transfer of ownership of an existing license:
Evidence of financial responsibility
Floor plan, including seating layout/bar and total occupant capacity
Request for Class C or Tavern Licenses: In conformance with the attached Procedure For Review of All Liquor License Requests, please provide a signed and completed Site Plan Application Form and a copy of the following material at time of application for a Class C or Tavern license:
Evidence of financial responsibility
Floor plan, including seating and bar layout and total occupant capacity

All Class C or Tavern license requests require review and approval by the Planning Commission prior to the issuance of a liquor license. Please contact the Planning Division at 248-656-4660 to schedule a site plan review before the Planning Commission.

Has the applicant ever applied for a liquo $\mathbb{N}_{\mathcal{O}}$	or license previously?	
Has this applicant ever been denied a liq		
Have there been any recent liquor license $N_{\rm p}$		
Signatures:		
By signing this application, the property of that all information contained in this applicate are complete and accurate to the best of unless signed by the property owner. A reaccordance with the fee schedule as ado	ication, all accompanying p his or her knowledge. This eview fee is required at tim	olans and all attachments s application is not valid
Signature(s) of Property Owner	Name	7 - 2\. 15
Signature of Applicant:	Name	7 / 21 15 Date
Signature of Contact Person:	Name	Date
OFFICE USE ONLY:		
Date Filed:	Application accepted	by:
Fee Paid:	Receipt Number:	
Decision on Application: Approved		



Check One: Class C _ X _ Tavern Transier			
Class C - Allows the sale of beer, wine and liquor for on site consumption by customers Tavern - Allows the sale of beer and wine only for on site consumption by customers			
FEES: Class C\Tavern\Transfers - \$1,000.00			
GENERAL INFORMATION:			
Applicant's Name: Mazin Samona Title: Owner			
Business Name: Smoker's Outlet of Rochester Hills, Inc.			
Smoker's Outlet of Nochester Hills, Inc.			
Address:			
1416 Walton Blvd Unit B			
Phone; <u>(248)650-8026</u> Fax; <u>(248)650-8126</u> Email: <u>rochester@wildbillstobacco.com</u>			
SUBJECT PROPERTY:			
_ocation for License:			
Rochester Hills Plaza, North Side of Walton, East of Rochester			
Parcel(s) Tax ID Number (s):			
Part of: 15-09-476-033			
_egal Description:			

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X Floor plan, including seating and bar layout and total occupant capacity

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Has the applicant ever applied for	a liquor license previously?	
No	1.114	and Court of the C
Has this applicant ever been denie	ed a liquor license?	
No		
Have there been any recent liquor	licenses at this location?	
No		
Signatures:		
that all information contained in this are complete and accurate to the l	perty owner, applicant, and contact p is application, all accompanying plans pest of his or her knowledge. This app er. A review fee is required at time of as adopted by the City Council.	and all attachments Dication is not valid
Signature(s) of Property Owner	Name	Date
Signature of Applicant:		7/21/15
	Name	Date
Signature of Contact Person:	Name	Date
OFFICE USE ONLY:		
Date Filed:	Application accepted by:	
Fee Paid:	Receipt Number:	
Decision on Application: Approved	Denied	



Check One: Class CX Tavern Transfer
Class C - Allows the sale of beer, wine and liquor for on site consumption by customers Tavern - Allows the sale of beer and wine only for on site consumption by customers
FEES: Class C\Tavern\Transfers - \$1,000.00
GENERAL INFORMATION:
Applicant's Name: John Samona Title: Owner
Business Name:
Smoker's Outlet of Rochester Hills, Inc.
Address: 1416 Walton Blvd Unit B
Phone: <u>(248)650-8026</u> Fax: <u>(248)650-8126</u> Email: <u>rochester@wildbillstobacco.com</u>
SUBJECT PROPERTY:
Location for License: Rochester Hills Plaza, North Side of Walton, East of Rochester
Parcel(s) Tax ID Number (s):
Part of: 15-09-476-033
Legal Description:

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X Floor plan, including seating and bar layout and total occupant capacity

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Has the applicant ever applied for a	a liquor license previously?	
Ye,s		
Has this applicant ever been denie	d a liquor license?	
No		
Have there been any recent liquor	licenses at this location?	
No		
Signatures:		
By signing this application, the property are complete and accurate to the bunless signed by the property owner accordance with the fee schedule as	s application, all accompanying p est of his or her knowledge. This er. A review fee is required at time	lans and all attachments application is not valid
Signature(s) of Property Owner	Name	Date
Signature of Applicant:	· Jahn Samme	7/21/15
	Name	Date ·
Signature of Contact Person:	Name	Date
OFFICE USE ONLY:		
Date Filed:	Application accepted b	y:
Fee Pald:		
Decision on Application: Approved	Denied	



Check One: Class C X Tavern Transfer
Class C - Allows the sale of beer, wine and liquor for on site consumption by customers Tavern - Allows the sale of beer and wine only for on site consumption by customers
FEES: Class C\Tavern\Transfers - \$1,000.00
GENERAL INFORMATION:
Applicant's Name: Luke SamonaTitle: Owner
Business Name: Smoker's Outlet of Rochester Hills, Inc.
Address: 1416 Walton Blvd Unit B
Phone: <u>(248)650-8026</u> Fax: <u>(248)650-8126</u> Email: <u>rochester@wildbillstobacco.com</u>
SUBJECT PROPERTY:
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Part of: 15-09-476-033
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Has the applicant ever applied for a liq	uor license previously?	
Yes		A STATE OF THE STA
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No		
Have there been any recent liquor licer	nses at this location?	
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Signatures:		
By signing this application, the property that all information contained in this ap- are complete and accurate to the best unless signed by the property owner. A accordance with the fee schedule as ac	plication, all accompanying pl of his or her knowledge. This review fee is required at time	lans and all attachments application is not valid
Signature(s) of Property Owner		D (
	Name	Date
Signature of Applicant:	Name	7/21/IS Date
Signature of Contact Person:	Name	Date
OFFICE USE ONLY:		
Date Filed:	Application accepted b	y:
Fee Paid:		*
Decision on Application: Approved	Denied	