



CITY COUNCIL AGENDA ITEM

Date: May 20, 2011

To: John Szerlag, City Manager

From: Gary Mayer, Chief of Police *GM*
 Captain Gerard Scherlinck *GS*
 Lieutenant Robert Redmond *RM*

Subject: Application for Transfer of Ownership for Sams Mayur Indian Cuisine, LLC

Background

Sams Mayur Indian Cuisine, LLC requests to Transfer Ownership of 2010 Class C Licensed Business with Official Permit (Food) & Outdoor Service (1 Area), located at 5113 Rochester Road, Troy, MI 48085, Oakland County, from Mayur Indian Cuisine, Inc.. {MLCC Req. #579652}.

The current owners of Mayur Indian Cuisine, Inc., Vijayalaxmi Kambhampati and Sujanasree Sunkara, request to transfer ownership from Mayur Indian Cuisine, Inc. to Sams Mayur Indian Cuisine, LLC. The applicants for Sams Mayur Indian Cuisine, LLC are Alias Varkey, Manojmon Daniel, Sabu Samuel, and Susil Skariah.

Mr. Susil Skariah was present to answer questions from the Liquor Advisory Committee on May 9, 2011. Mr. Skariah informed the Committee that he is one of four partners purchasing the restaurant. They are currently acting as the management company pending the liquor license transfer. Two of the four partners have past restaurant experience. All employees will be retained. TIPS/TAMS training will be done as needed.

The Police Department did not find any disqualifying factors for this request. In addition, the Liquor Advisory Committee unanimously approved their request.

The request complies with all applicable Troy City Ordinances and Michigan Liquor Control Commission Rules.

Recommendation

Recommend approval of the request from Sams Mayur Indian Cuisine to Transfer Ownership.

Prepared by: Jeff Oberski

A regular meeting of the Liquor Advisory Committee was held on Monday, May 9, 2011 in the Council Board Room of Troy City Hall, 500 West Big Beaver Road. Chairman Max K. Ehlert called the meeting to order at 7:00 p.m.

ROLL CALL:

PRESENT: Max K. Ehlert, Chairman
W. Stan Godlewski
Andrew Kaltsounis
David S. Ogg
Bohdan L. Ukraineec

ABSENT: Patrick C. Hall
Timothy P. Payne

ALSO PRESENT: Officer James Feld
Dane Lepola, student representative
Pat Gladysz

Resolution to Excuse Committee Members Hall, Payne

Resolution #LC2011-05-013
Moved by Ogg
Seconded by Kaltsounis

RESOLVED, That the absence of Committee members Hall and Payne at the Liquor Advisory Committee meeting of May 9, 2011 be **EXCUSED**.

Yes: 5
No: 0
Absent: Hall, Payne

Resolution to Approve Minutes of April 11, 2011 Meeting

Resolution #LC2011-05-014
Moved by Kaltsounis
Seconded by Ogg

RESOLVED, That the Minutes of the April 11, 2011 meeting of the Liquor Advisory Committee be **APPROVED**.

Yes: 5
No: 0
Absent: Hall, Payne

Agenda Items

1. **Sams Mayur Indian Cuisine, LLC** requests to Transfer Ownership of 2010 Class C Licensed Business with Official Permit (Food) & Outdoor Service (1 Area), located at 5113 Rochester Road, Troy, MI 48085, Oakland County, from Mayur Indian Cuisine, Inc. {MLCC Req. #579652}. *Mayur Indian Cuisine is on Rochester Rd., north of Long Lake, near Creston Drive*

Present to answer questions from the Committee was Susil Skariah.

Mr. Skariah informed the Committee that he is one of four partners purchasing the restaurant. They are currently acting as the management company pending the liquor license transfer. Two of the four partners have past restaurant experience. All employees will be retained. TIPS/TAMS training will be done as needed.

Resolution #LC2011-05-015
Moved by Godlewski
Seconded by Kaltsounis

RESOLVED, That the Liquor Advisory Committee recommends that the request of **Sams Mayur Indian Cuisine, LLC** to Transfer Ownership of 2010 Class C Licensed Business with Official Permit (Food) & Outdoor Service (1 Area), located at 5113 Rochester Road, Troy, MI 48085, Oakland County, from Mayur Indian Cuisine, Inc. be **APPROVED**.

Yes: 5
No: 0
Absent: Hall, Payne

Officer Feld advised the Committee on the following:

Flats Distributing, LLC

This business is requesting Outstate licenses. Research is being conducted on this matter.

A & S Babi, Inc.

This is a stock transfer. Also, notice was received that the State of Michigan conducted a decoy operation. This business failed.

The St. Andrews Society of Detroit

This request for dance permit should appear on next month's Agenda. Research is being conducted on issuing a one-day license for a wedding to be held very soon.

Troy PD Decoy Operation

Our Directed Patrol Unit conducted decoy operations at all Troy licensed establishments. The following businesses failed and citations were issued:

Bahama Breeze; 539 East Big Beaver Road

E Mart Asian Food; 2963 East Big Beaver Road

Marinelli's; 4921 Rochester Road

The meeting adjourned at 7:20 p.m.

Max K. Ehlert, Chairman

Patricia A. Gladysz, Secretary II

AGREEMENT REGARDING LIQUOR LICENSE REQUEST

Re: Applicant: SAMS MAYOR INDIAN CUISINE
Address: 513 ROCHESTER LANE
City/State/Zip: Troy, MI 48068

Date: _____
Type of License/s: CLASS C
MLCC Request ID: 57-9652

This Agreement, made by and between the CITY OF TROY, MICHIGAN, a municipal corporation, with offices located at 500 W. Big Beaver Road, Troy, Michigan, 48084, hereinafter known as THE CITY, and the Applicant as indicated above, hereinafter known as APPLICANT.

1. The City Council of the City of Troy, for and in consideration of the following covenants and conditions, agrees to recommend to the Michigan Liquor Control Commission Approval of the requested Liquor License to be located as indicated above in Troy Michigan.
2. In consideration of the City of Troy's recommendation for approval of the request, the applicant hereby agrees that:
 - (a) It has read and is aware of the provisions of City of Troy Ordinances, Chapter No. 67, Chapter No. 68, Chapter No. 98 and Chapter No. 101, and agrees that it shall be deemed to have knowledge of any subsequent amendments to said Chapters which may become effective during the term of this agreement.
 - (b) It agrees to observe and comply with all laws, statutes, ordinances, rules, regulations or resolutions of the United States government, State of Michigan, and the City of Troy, or any department or agency of the governmental entities, as well as the rules and regulations of the Michigan Liquor Control Commission as they pertain to the operation of a liquor licensed business in the City of Troy.
 - (c) It agrees to immediately require all employees who serve/sell alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. The alcohol awareness program must either be recognized by the Troy Police Department (i.e. TIPS, TAMS), or the program must be reviewed by the Troy Police Department to insure that the program is comparable to the recognized programs.
3. Applicant agrees that the recommendation for Approval agreed upon by the City Council is not a property right and is approved upon the express and continuing condition that no violation as set forth in paragraph 2 of this agreement shall occur.
4. Applicant agrees that the recommendation for Approval agreed upon by the City Council is approved upon the express and continuing condition that the physical characteristics (including but not limited to the inside layout, building design and engineering, seating capacity, parking space allocations, fire exits, and other physical attributes), and also the nature and type of business intended to be conducted remain virtually the same.
5. Applicant agrees that upon such violation, after full investigation and an opportunity for said applicant to be heard, upon a finding by the City Council that a violation as set forth in paragraph 2 of this agreement has occurred, the City Council shall have just cause for revocation of said recommendation for approval.

LICENSEE AUTHORIZED REPRESENTATIVE

Witnesses: REENA VARMA
Reena

By: [Signature]

Subscribed and sworn to before me this 21 day of MARCH 2011
Notary Public, OAKLAND County, MI
Acting in the County of OAKLAND
My commission expires: 7-8-13

MICHAEL L. HARVILL
NOTARY PUBLIC, STATE OF MI
COUNTY OF OAKLAND
MY COMMISSION EXPIRES JUL 8, 2013
ACTING IN COUNTY OF OAKLAND

[Signature: Michael L. Harvill]

CITY OF TROY

Witnesses: _____

By: _____
Louise Schilling, Mayor

By: _____
Tonni Bartholomew, City Clerk

Subscribed and sworn to before me this _____ day of _____ 200____
Notary Public, _____ County, MI
Acting in the County of Oakland
My commission expires: _____

AGREEMENT REGARDING LIQUOR LICENSE REQUEST

Re: Applicant: SAMS MAYUR INDIAN CUISINE/ Date: _____
MANOJMON DANIEL
Address: 5113 ROCHESTER RD Type of License/s: CLASS - C
City/State/Zip: Troy, MI 48085 MLCC Request ID: 579652

This Agreement, made by and between the CITY OF TROY, MICHIGAN, a municipal corporation, with offices located at 500 W. Big Beaver Road, Troy, Michigan, 48084, hereinafter known as THE CITY, and the Applicant as indicated above, hereinafter known as APPLICANT.

1. The City Council of the City of Troy, for and in consideration of the following covenants and conditions, agrees to recommend to the Michigan Liquor Control Commission Approval of the requested Liquor License to be located as indicated above in Troy Michigan.
2. In consideration of the City of Troy's recommendation for approval of the request, the applicant hereby agrees that:
 - (a) It has read and is aware of the provisions of City of Troy Ordinances, Chapter No. 67, Chapter No. 68, Chapter No. 98 and Chapter No. 101, and agrees that it shall be deemed to have knowledge of any subsequent amendments to said Chapters which may become effective during the term of this agreement.
 - (b) It agrees to observe and comply with all laws, statutes, ordinances, rules, regulations or resolutions of the United States government, State of Michigan, and the City of Troy, or any department or agency of the governmental entities, as well as the rules and regulations of the Michigan Liquor Control Commission as they pertain to the operation of a liquor licensed business in the City of Troy.
 - (c) It agrees to immediately require all employees who serve/sell alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. The alcohol awareness program must either be recognized by the Troy Police Department (i.e. TIPS, TAMS), or the program must be reviewed by the Troy Police Department to insure that the program is comparable to the recognized programs.
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LICENSEE AUTHORIZED REPRESENTATIVE

Witnesses: [Signature] By: [Signature]
SHARON M. ROBAND / Marcus Fabiano MANOJMON DANIEL

Subscribed and sworn to before me this 12 day of March 2011
Notary Public, Macomb County, MI
Acting in the County of Macomb
My commission expires: 6-13-2014

RICHARD W. PELLETIER
NOTARY PUBLIC - MICHIGAN
MACOMB COUNTY
ACTING IN THE COUNTY OF
Macomb
MY COMMISSION EXPIRES 06-13-2014

CITY OF TROY

Witnesses: _____ By: _____
_____ Louise Schilling, Mayor
By: _____
_____ Tonni Bartholomew, City Clerk

Subscribed and sworn to before me this _____ day of _____ 200____
Notary Public, _____ County, MI
Acting in the County of Oakland
My commission expires: _____

AGREEMENT REGARDING LIQUOR LICENSE REQUEST

Re: Applicant: SAMS MAYUR INDIAN CUISINE/SABU SAMUEL Date: MARCH 09, 2011
Address: 5113 ROCHESTER RD. Type of License/s: CLASS-C
City/State/Zip: Troy, MI 48065 MLCC Request ID: 579652

This Agreement, made by and between the CITY OF TROY, MICHIGAN, a municipal corporation, with offices located at 500 W. Big Beaver Road, Troy, Michigan, 48064, hereinafter known as THE CITY, and the Applicant as indicated above, hereinafter known as APPLICANT.

1. The City Council of the City of Troy, for and in consideration of the following covenants and conditions, agrees to recommend to the Michigan Liquor Control Commission Approval of the requested Liquor License to be located as indicated above in Troy Michigan.
2. In consideration of the City of Troy's recommendation for approval of the request, the applicant hereby agrees that:
 - (a) It has read and is aware of the provisions of City of Troy Ordinances, Chapter No. 67, Chapter No. 68, Chapter No. 98 and Chapter No. 101, and agrees that it shall be deemed to have knowledge of any subsequent amendments to said Chapters which may become effective during the term of this agreement.
 - (b) It agrees to observe and comply with all laws, statutes, ordinances, rules, regulations or resolutions of the United States government, State of Michigan, and the City of Troy, or any department or agency of the governmental entities, as well as the rules and regulations of the Michigan Liquor Control Commission as they pertain to the operation of a liquor licensed business in the City of Troy.
 - (c) It agrees to immediately require all employees who serve/sell alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. The alcohol awareness program must either be recognized by the Troy Police Department (i.e. TIPS, TAMS), or the program must be reviewed by the Troy Police Department to insure that the program is comparable to the recognized programs.
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LICENSEE AUTHORIZED REPRESENTATIVE

Witnesses: ANU MATHAN By: [Signature]

Subscribed and sworn to before me this 21st day of March 2002011
Notary Public, Macomb County, MI

Acting in the County of Macomb
My commission expires: EDWARD D. JONES
NOTARY PUBLIC - MICHIGAN
MACOMB COUNTY
MY COMMISSION EXPIRES 3-08-2012

CITY OF TROY

Witnesses: _____ By: _____
Louise Schilling, Mayor
By: _____
Tonni Bartholomew, City Clerk

Subscribed and sworn to before me this _____ day of _____ 200____
Notary Public, _____ County, MI
Acting in the County of Oakland
My commission expires: _____

AGREEMENT REGARDING LIQUOR LICENSE REQUEST

Re: Applicant: SAMSMAYUR INDIAN CUISINE / SUSIL SKARIAH Date: 03/01/2011
Address: 5113, ROCHESTER RD, Type of License/s: CLASS - C
City/State/Zip: Troy, MI 480 MLCC Request ID: 579652

This Agreement, made by and between the CITY OF TROY, MICHIGAN, a municipal corporation, with offices located at 500 W. Big Beaver Road, Troy, Michigan, 48084, hereinafter known as THE CITY, and the Applicant as indicated above, hereinafter known as APPLICANT.

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2. In consideration of the City of Troy's recommendation for approval of the request, the applicant hereby agrees that:
 - (a) It has read and is aware of the provisions of City of Troy Ordinances, Chapter No. 67, Chapter No. 68, Chapter No. 98 and Chapter No. 101, and agrees that it shall be deemed to have knowledge of any subsequent amendments to said Chapters which may become effective during the term of this agreement.
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LICENSEE AUTHORIZED REPRESENTATIVE

Witnesses: Sibi Varghese
Shanmugan

By: [Signature]

Subscribed and sworn to before me this 21 day of MARCH 2011
Notary Public, OAKLAND County, MI
Acting in the County of OAKLAND
My commission expires: 7-8-13
Michael L. Harvill

MICHAEL L. HARVILL
NOTARY PUBLIC, STATE OF MI
COUNTY OF OAKLAND
MY COMMISSION EXPIRES Jul 8, 2013
ACTING IN COUNTY OF OAKLAND

CITY OF TROY

Witnesses: _____

By: _____
Louise Schilling, Mayor
By: _____
Tonni Bartholomew, City Clerk

Subscribed and sworn to before me this _____ day of _____ 200 ____
Notary Public, _____ County, MI
Acting in the County of Oakland
My commission expires: _____



Michigan Department of Energy, Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION
 (MLCC)
 7150 Harris Drive, P.O. Box 30005
 Lansing, Michigan 48909-7505

FOR MLCC USE ONLY
 Request ID # 579652
 Business ID # 225554

POLICE INVESTIGATION REPORT
 [Authorized by MCL 436.1217 and R 436.1105; MAC]

Please conduct your investigation as soon as possible, complete all four sections of this report and return the completed report and fingerprint cards to the MLCC.

LICENSEE/APPLICANT NAME, BUSINESS ADDRESS AND LICENSING REQUEST:

SAMS MAYUR INDIAN CUISINE, LLC REQUESTS TRANSFER OWNERSHIP 2010 CLASS C LICENSED BUSINESS WITH OFFICIAL PERMIT (FOOD) & OUTDOOR SERVICE (1 AREA), LOCATED AT 5113 ROCHESTER, TROY, MI 48085, OAKLAND COUNTY, FROM MAYUR INDIAN CUISINE, INC.

Section 1. APPLICANT INFORMATION

APPLICANT #1: ALIAS VARKEY 6228 SMITHFIELD DRIVE TROY, MI 48085 (248) 879-1948H (248) 457-1914B	APPLICANT #2: MANOJMON DANIEL 6749 TWICKERHAM SHELBY TOWNSHIP, MI 48317 (586) 797-1955H (248) 457-1914B
DATE FINGERPRINTED**:	DATE FINGERPRINTED**:
DATE OF BIRTH: Is the applicant a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have permanent Resident Alien status? <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have a Visa? Enter status:	DATE OF BIRTH: Is the applicant a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have permanent Resident Alien status? <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have a Visa? Enter status:

Attach the fingerprint card and \$30.00 for each card and mail to the Michigan Liquor Control Commission

ARREST RECORD: <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Enter record of all arrests and convictions (Attach a signed and dated sheet if more space is needed)	ARREST RECORD: <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Enter record of all arrests and convictions (Attach a signed and dated sheet if more space is needed)
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Section 2. INVESTIGATION OF BUSINESS AND ADDRESS TO BE LICENSED

Does applicant intend to have dancing, entertainment, topless activity, or extended hours permit?
 No Yes, complete LC-1636

Are motor vehicle fuel pumps at or directly adjacent to the establishment? No Yes, explain relationship:

Section 3. LOCAL AND STATE CODES AND ORDINANCES, AND GENERAL RECOMMENDATIONS

Will the applicant's proposed location meet all appropriate state and local building, plumbing, zoning, fire, sanitation and health laws and ordinances, if this license is granted? Yes No **If No, indicate which state and local ordinances the location does not meet:**
 Building Plumbing Zoning Fire Sanitation Health

Section 4. RECOMMENDATION

- Is this applicant qualified to conduct this business if licensed? Yes No*
 - Should the MLCC grant this request? Yes No*
- *If any of the above questions were answered No, you must state your reasons for MLCC consideration of this recommendation on the back of this form or on an attached signed and dated sheet.
- Is this recommendation subject to final inspection to determine that the proposed location meets all building, plumbing, zoning, fire, sanitation and health laws and ordinances? Yes No
 - Is this recommendation subject to any other conditions? Yes No
- If Yes, list the conditions below or on an attached signed and dated sheet if more space is needed

Signature (Sheriff or Chief of Police)

Date

TROY POLICE DEPARTMENT



Michigan Department of Energy, Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION
 (MLCC)

7150 Harris Drive, P.O. Box 30005
 Lansing, Michigan 48909-7505

FOR MLCC USE ONLY	
Request ID #	579652
Business ID #	225554

POLICE INVESTIGATION REPORT

[Authorized by MCL 436.1217 and R 436.1105; MAC]

Please conduct your investigation as soon as possible, complete all four sections of this report and return the completed report and fingerprint cards to the MLCC.

LICENSEE/APPLICANT NAME, BUSINESS ADDRESS AND LICENSING REQUEST:

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Section 1. APPLICANT INFORMATION

APPLICANT #3: SABU SAMUEL 49409 W. CENTRAL PARK SHELBY TOWNSHIP, MI 48317 (586) 731-7875H (248) 457-1914B	APPLICANT #4: SUSIL SKARIAH 6507 SHORELINE DRIVE TROY, MI 48085 (313) 657-2378H (248) 457-1914B
--	--

DATE FINGERPRINTED**:	DATE FINGERPRINTED**:
-----------------------	-----------------------

DATE OF BIRTH: Is the applicant a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have permanent Resident Alien status? <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have a Visa? Enter status:	DATE OF BIRTH: Is the applicant a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have permanent Resident Alien status? <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have a Visa? Enter status:
--	--

Attach the fingerprint card and \$30.00 for each card and mail to the Michigan Liquor Control Commission

ARREST RECORD: <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Enter record of all arrests and convictions (Attach a signed and dated sheet if more space is needed)	ARREST RECORD: <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Enter record of all arrests and convictions (Attach a signed and dated sheet if more space is needed)
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Does applicant intend to have dancing, entertainment, topless activity, or extended hours permit?
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Are motor vehicle fuel pumps at or directly adjacent to the establishment? No Yes, explain relationship:

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Will the applicant's proposed location meet all appropriate state and local building, plumbing, zoning, fire, sanitation and health laws and ordinances, if this license is granted? Yes No If No, indicate which state and local ordinances the location does not meet:
 Building Plumbing Zoning Fire Sanitation Health

Section 4. RECOMMENDATION

- Is this applicant qualified to conduct this business if licensed? Yes No*
 - Should the MLCC grant this request? Yes No*
- *If any of the above questions were answered No, you must state your reasons for MLCC consideration of this recommendation on the back of this form or on an attached signed and dated sheet.
- Is this recommendation subject to final inspection to determine that the proposed location meets all building, plumbing, zoning, fire, sanitation and health laws and ordinances? Yes No
 - Is this recommendation subject to any other conditions? Yes No
- If Yes, list the conditions below or on an attached signed and dated sheet if more space is needed

Signature (Sheriff or Chief of Police) _____ Date _____

TROY POLICE DEPARTMENT