

CITY COUNCIL

**Agenda-Special Meeting
Liquor Violation Hearings
February 26, 2003 – 7:30 P.M.
Council Chambers – City Hall
500 West Big Beaver
Troy, Michigan 48084
(248) 524-3317**

CALL TO ORDER	1
Invocation & Pledge Of Allegiance	1
ROLL CALL	1
OUTLINE OF PUBLIC HEARING PROCEDURE	1
PUBLIC HEARINGS	2
1.0 Liquor Violations (SDD &/or SDM): (a) Rite Aid Discount Pharmacy #4268 – 3986 John R; (b) Rite Aid Discount Pharmacy #2731 – 1981 W South Blvd.; (c) 7-Eleven – 1650 Crooks; (d) 7-Eleven - 5020 John R; and (e) Hungry Howies – 3615 Rochester	2
(a) Rite Aid Discount Pharmacy #4268 – 3986 John R	3
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(c) 7-Eleven – 1650 Crooks	5
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2.0 Liquor Violations (Class C): (a) Spectadium – 2511 Livernois; (b) Alibi Lounge – 6700 Rochester	9

NOTICE: People with disabilities needing accommodations for effective participation in this meeting should contact the City Clerk at (248) 524-3317 or via e-mail at clerk@ci.troy.mi.us at least two working days in advance of the meeting. An attempt will be made to make reasonable accommodations.

- (a) Spectadium – 2511 Livernois 9
- (b) Alibi Lounge – 6700 Rochester 10

CALL TO ORDER

Invocation & Pledge Of Allegiance

ROLL CALL

Mayor Matt Pryor
Robin Beltramini
Cristina Broomfield
David Eisenbacher
Martin F. Howrylak
David A. Lambert
Anthony N. Pallotta

OUTLINE OF PUBLIC HEARING PROCEDURE

The City Attorney suggests the following outline of procedure for consideration of liquor violations:

1. The Mayor calls the licensee whose case is to be heard.
2. The licensee and/or his attorney should be asked to the front of the Chamber to acknowledge their presence for the record and can be seated.
3. The Assistant City Attorney makes a very short opening statement regarding the violation(s), and presents proofs.
4. When witnesses are called, they should be sworn by the City Clerk to tell the truth.
5. Once the witness is sworn, the Assistant City Attorney will question the witness.
6. The police report and other documents may be offered into evidence as part of the case and should be kept by the City Clerk as part of the records.
7. At the conclusion of the City's case, the licensee or his attorney should be asked to offer an explanation for the violations if they choose, make a statement, offer evidence, or otherwise make their presentation.
8. If the licensee offers evidence from witnesses who have not been previously sworn, the City Clerk should swear those witnesses.
9. Once the licensee has concluded his presentation, the Assistant City Attorney should be given an opportunity for rebuttal, if any is desired.
10. City Council members may ask questions at any time, but it is suggested that this questioning by Council members be conducted after the parties conclude their presentations.
11. When the presentation of evidence is concluded, the matter returns to the City Council for discussion, deliberation, and resolution.

PUBLIC HEARINGS

The following named licensees have been given notice to appear for this series of Public Hearings regarding alleged violations:

1.0 Liquor Violations (SDD &/or SDM):

- a) Name: Rite Aid Discount Pharmacy #4268
Address: 3986 John R
License No.: SDD (11763-2002) SDM (4339-2002)
- b) Name: Rite Aid Discount Pharmacy #2731
Address: 1981 W. South Blvd.
License No.: SDM (78430-2002)
- c) Name: 7-Eleven
Address: 1650 Crooks.
License No.: SDD (18175-2002) SDM (14683-2002)
- d) Name: 7-Eleven
Address: 5020 John R
License No.: SDM (13474-2002)
- e) Name: Hungry Howies
Address: 3615 Rochester
License No.: SDM (11104-2002)

2.0 Liquor Violations (Class C):

- a) Name: Spectadium
Address: 2511 Livernois
License No.: Class C (3577-2002)
- b) Name: Alibi Lounge
Address: 6700 Rochester
License No.: Class C (858-2002)

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- 1.0 Liquor Violations (SDD &/or SDM): (a) Rite Aid Discount Pharmacy #4268 – 3986 John R; (b) Rite Aid Discount Pharmacy #2731 – 1981 W South Blvd.; (c) 7-Eleven – 1650 Crooks; (d) 7-Eleven - 5020 John R; and (e) Hungry Howies – 3615 Rochester**

(a) Rite Aid Discount Pharmacy #4268 – 3986 John RSuggested Resolution

Resolution #2003-02-

Moved by

Seconded by

(a) Proposed Resolution A

WHEREAS, The licensee has a Specially Designated Distributor/Specially Designated Merchant (SDD/SDM) Liquor License from the State of Michigan for an establishment located within the City of Troy; and

WHEREAS, The City of Troy is vested with the authority to make recommendations of revocation of a SDD/SDM Liquor License, to the State of Michigan Liquor Control Commission, when an establishment within the City repeatedly violates state, local, or federal laws: and

WHEREAS, The City Council of the City of Troy has reviewed the following alleged infractions of liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy, namely:

SALE TO MINOR (COMPLIANCE TEST) ON FEBRUARY 28, 2002

WHEREAS, This licensee has had prior violations dated April 24, 2001 – Sale to Minor (Compliance Test-DISMISSED); October 27, 1999 – Sale to Minor (Compliance Test); and October 28, 1998 - Sale to Minor (Compliance Test).

NOW, THEREFORE, BE IT RESOLVED, By the City Council of the City of Troy, that the above referenced licensed liquor establishment shall immediately require all employees who sell alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. Any employees of the licensee who have attended a recognized alcohol awareness program within the past year are exempt from this requirement. 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. The Troy Police Department shall be provided with the information within six months of today's date.

BE IT FURTHER RESOLVED, That the City of Troy shall continue to aggressively enforce the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy; and

BE IT FURTHER RESOLVED, That any further violations of the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy will result in more severe sanctions against the licensee, including the possibility of recommendations of revocation of the SDD/SDM liquor license.

AND/OR

(b) Proposed Resolution B

WHEREAS, The City Council of the City of Troy has reviewed the following infractions of liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy respectively; and

WHEREAS, The City Council has given public notice that it will deliberate and determine whether to adopt a resolution to recommend to the Michigan Liquor Control Commission that the license be revoked after Public Hearing on February 26, 2003, for the following licensed establishment:

Name:	Rite Aid Discount Pharmacy #4268
Address:	3986 John R
License No.:	11763-2002 (SDD) & 4339-2002 (SDM)

and, having found violation of the following codes and/or regulations: SALE TO MINOR (COMPLIANCE TEST) on February 28, 2002; and

WHEREAS, This licensee has had prior violations dated April 24, 2001 – Sale to Minor (Compliance Test-DISMISSED); October 27, 1999 – Sale to Minor (Compliance Test); and October 28, 1998 - Sale to Minor (Compliance Test).

WHEREAS, After due notice the licensee was given opportunity to review these cited infractions, and opportunity to confront witnesses and/or statements by accusers while in the presence of this City Council, sitting as a hearing body on February 26, 2003;

NOW, THEREFORE, BE IT RESOLVED, By the City Council of the City of Troy, that after due notice, appropriate hearing and deliberations, and having made findings, it is recommended to the Michigan Liquor Control Commission that License Number 11763-2002 (SDD) & 4339-2002 (SDM) in the name of Rite Aid of Michigan, Inc. in the City of Troy, be **RENEWED/NOT RENEWED** and that a certified copy of this resolution be sent to the Michigan Liquor Control Commission.

Yes:

No:

(b) Rite Aid Discount Pharmacy #2731 – 1981 W South BlvdSuggested Resolution

Resolution #2003-02-

Moved by

Seconded by

WHEREAS, The licensee has a Specially Designated Distributor/Specially Designated Merchant (SDD/SDM) Liquor License from the State of Michigan for an establishment located within the City of Troy; and

WHEREAS, The City of Troy is vested with the authority to make recommendations of revocation of a SDD/SDM Liquor License, to the State of Michigan Liquor Control Commission, when an establishment within the City repeatedly violates state, local, or federal laws: and

WHEREAS, The City Council of the City of Troy has reviewed the following alleged infractions of liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy, namely:

SALE TO MINOR (COMPLIANCE TEST) ON FEBRURARY 28, 2002

WHEREAS, In addition to the alleged violation, the City has also reviewed the past history of the licensee, and has determined that the licensee is in the first year of ownership and/or control, and has not received any other citations.

NOW, THEREFORE, BE IT RESOLVED, By the City Council of the City of Troy, that the above referenced licensed liquor establishment shall immediately require all employees who sell alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. Any employees of the licensee who have attended a recognized alcohol awareness program within the past year are exempt from this requirement. 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. The Troy Police Department shall be provided with the information within six months of today's date.

BE IT FURTHER RESOLVED, That the City of Troy shall continue to aggressively enforce the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy; and

BE IT FURTHER RESOLVED, That any further violations of the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy will result in more severe sanctions against the licensee, including the possibility of recommendations of revocation of the SDD/SDM liquor license.

Yes:

No:

(c) 7-Eleven – 1650 Crooks

Suggested Resolution

Resolution #2003-02-

Moved by

Seconded by

WHEREAS, The licensee has a Specially Designated Distributor/Specially Designated Merchant (SDD/SDM) Liquor License from the State of Michigan for an establishment located within the City of Troy; and

WHEREAS, The City of Troy is vested with the authority to make recommendations of revocation of a SDD/SDM Liquor License, to the State of Michigan Liquor Control Commission, when an establishment within the City repeatedly violates state, local, or federal laws: and

WHEREAS, The City Council of the City of Troy has reviewed the following alleged infractions of liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy, namely:

SALE TO MINOR (COMPLIANCE TEST) ON JUNE 25, 2002

WHEREAS, In addition to the alleged violation, the City has also reviewed the past history of the licensee, and has determined that the licensee is in the first year of ownership and/or control, and has not received any other citations.

NOW, THEREFORE, BE IT RESOLVED, By the City Council of the City of Troy, that the above referenced licensed liquor establishment shall immediately require all employees who sell alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. Any employees of the licensee who have attended a recognized alcohol awareness program within the past year are exempt from this requirement. 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. The Troy Police Department shall be provided with the information within six months of today's date.

BE IT FURTHER RESOLVED, That the City of Troy shall continue to aggressively enforce the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy; and

BE IT FURTHER RESOLVED, That any further violations of the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy will result in more severe sanctions against the licensee, including the possibility of recommendations of revocation of the SDD/SDM liquor license.

Yes:

No:

(d) 7-Eleven - 5020 John R

Suggested Resolution

Resolution #2003-02-

Moved by

Seconded by

(a) Proposed Resolution A

WHEREAS, The licensee has a Specially Designated Distributor/Specially Designated Merchant (SDD/SDM) Liquor License from the State of Michigan for an establishment located within the City of Troy; and

WHEREAS, The City of Troy is vested with the authority to make recommendations of revocation of a SDD/SDM Liquor License, to the State of Michigan Liquor Control Commission, when an establishment within the City repeatedly violates state, local, or federal laws: and

WHEREAS, The City Council of the City of Troy has reviewed the following alleged infractions of liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy, namely:

SALE TO MINOR (COMPLIANCE TEST) ON OCTOBER 16, 2002

WHEREAS, This licensee has had prior violations dated September 25, 2001 – Sale to Minor (Compliance Test-PENDING); March 10, 2000 – Sale to Minors (FOP-DPU); and October 28, 1998- Sale to Minor (Compliance Test).

NOW, THEREFORE, BE IT RESOLVED, By the City Council of the City of Troy, that the above referenced licensed liquor establishment shall immediately require all employees who sell alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. Any employees of the licensee who have attended a recognized alcohol awareness program within the past year are exempt from this requirement. 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. The Troy Police Department shall be provided with the information within six months of today’s date.

BE IT FURTHER RESOLVED, That the City of Troy shall continue to aggressively enforce the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy; and

BE IT FURTHER RESOLVED, That any further violations of the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy will result in more severe sanctions against the licensee, including the possibility of recommendations of revocation of the SDD/SDM liquor license.

AND/OR

(b) Proposed Resolution B

WHEREAS, The City Council of the City of Troy has reviewed the following infractions of liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy respectively; and

WHEREAS, The City Council has given public notice that it will deliberate and determine whether to adopt a resolution to recommend to the Michigan Liquor Control Commission that the license be revoked after Public Hearing on February 26, 2003, for the following licensed establishment:

Name:	7-Eleven
Address:	5020 John R
License No.:	13474-2002 (SDM)

and, having found violation of the following codes and/or regulations: SALE TO MINOR (COMPLIANCE TEST) on October 16, 2002; and

WHEREAS, This licensee has had prior violations dated September 25, 2001 – Sale to Minor (Compliance Test-PENDING); March 10, 2000 – Sale to Minors (FOP-DPU); and October 28, 1998- Sale to Minor (Compliance Test).

WHEREAS, After due notice the licensee was given opportunity to review these cited infractions, and opportunity to confront witnesses and/or statements by accusers while in the presence of this City Council, sitting as a hearing body on February 26, 2003;

NOW, THEREFORE, BE IT RESOLVED, By the City Council of the City of Troy, that after due notice, appropriate hearing and deliberations, and having made findings, it is recommended to the Michigan Liquor Control Commission that License Number 13474-2002 (SDM) in the name of Southland Corporation and Mizan Rahman. in the City of Troy, be **RENEWED/NOT RENEWED** and that a certified copy of this resolution be sent to the Michigan Liquor Control Commission.

Yes:

No:

(e) Hungry Howies – 3615 Rochester

Suggested Resolution

Resolution #2003-02-

Moved by

Seconded by

WHEREAS, The licensee has a Specially Designated Distributor/Specially Designated Merchant (SDD/SDM) Liquor License from the State of Michigan for an establishment located within the City of Troy; and

WHEREAS, The City of Troy is vested with the authority to make recommendations of revocation of a SDD/SDM Liquor License, to the State of Michigan Liquor Control Commission, when an establishment within the City repeatedly violates state, local, or federal laws: and

WHEREAS, The City Council of the City of Troy has reviewed the following alleged infractions of liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy, namely:

SALE TO MINOR (COMPLIANCE TEST) ON FEBRUARY 28, 2002

WHEREAS, In addition to the alleged violation, the City has also reviewed the past history of the licensee, and has determined that the licensee is in the first year of ownership and/or control, and has not received any other citations.

NOW, THEREFORE, BE IT RESOLVED, By the City Council of the City of Troy, that the above referenced licensed liquor establishment shall immediately require all employees who sell

alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. Any employees of the licensee who have attended a recognized alcohol awareness program within the past year are exempt from this requirement. 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. The Troy Police Department shall be provided with the information within six months of today's date.

BE IT FURTHER RESOLVED, That the City of Troy shall continue to aggressively enforce the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy; and

BE IT FURTHER RESOLVED, That any further violations of the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy will result in more severe sanctions against the licensee, including the possibility of recommendations of revocation of the SDD/SDM liquor license.

Yes:
No:

2.0 Liquor Violations (Class C): (a) Spectadium – 2511 Livernois; (b) Alibi Lounge – 6700 Rochester

(a) Spectadium – 2511 Livernois

Suggested Resolution

Resolution #2003-02-

Moved by

Seconded by

WHEREAS, The licensee has a Class C On Premises Liquor License from the State of Michigan for a business located within the City of Troy; and

WHEREAS, the State of Michigan requires a favorable recommendation of the Troy City Council prior to granting or renewing a Class C On Premises Liquor License with the City of Troy. These recommendations are not property rights, but are approved upon the express and continuing condition that no violation of state, local, or federal laws shall occur; and

WHEREAS, The City Council of the City of Troy has reviewed the following alleged infractions of liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy, namely:

SALE TO MINOR (COMPLIANCE TEST) ON MARCH 23, 2002

WHEREAS, In addition to the alleged violation, the City has also reviewed the past history of the licensee, and has determined that the licensee has not had any additional violations within the past four years.

NOW, THEREFORE, BE IT RESOLVED, By the City Council of the City of Troy, that the above referenced licensed liquor establishment shall immediately require all employees who sell alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. Any employees of the licensee who have attended a recognized alcohol awareness program within the past year are exempt from this requirement. 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. The Troy Police Department shall be provided with the information within six months of today's date.

BE IT FURTHER RESOLVED, That the City of Troy shall continue to aggressively enforce the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy; and

BE IT FURTHER RESOLVED, That any further violations of the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy will result in more severe sanctions against the licensee, including the possibility of recommendations of revocation of the Class C liquor license.

Yes:

No:

(b) Alibi Lounge – 6700 Rochester

Suggested Resolution

Resolution #2003-02-

Moved by

Seconded by

WHEREAS, The licensee has a Class C On Premises Liquor License from the State of Michigan for a business located within the City of Troy; and

WHEREAS, the State of Michigan requires a favorable recommendation of the Troy City Council prior to granting or renewing a Class C On Premises Liquor License with the City of Troy. These recommendations are not property rights, but are approved upon the express and continuing condition that no violation of state, local, or federal laws shall occur; and

WHEREAS, The City Council of the City of Troy has reviewed the following alleged infractions of liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy, namely:

SALE TO MINOR (COMPLIANCE TEST) ON OCTOBER 11, 2002

WHEREAS, In addition to the alleged violation, the City has also reviewed the past history of the licensee, and has determined that the licensee has not had any additional violations within the past four years.

NOW, THEREFORE, BE IT RESOLVED, By the City Council of the City of Troy, that the above referenced licensed liquor establishment shall immediately require all employees who sell alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. Any employees of the licensee who have attended a recognized alcohol awareness program within the past year are exempt from this requirement. 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. The Troy Police Department shall be provided with the information within six months of today's date.

BE IT FURTHER RESOLVED, That the City of Troy shall continue to aggressively enforce the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy; and

BE IT FURTHER RESOLVED, That any further violations of the liquor control codes and regulations and/or ordinances of the State of Michigan and/or the City of Troy will result in more severe sanctions against the licensee, including the possibility of recommendations of revocation of the Class C liquor license.

Yes:

No:

Rite Aid Discount Pharmacy #4268
3986 John R
Troy MI 48084
SDD (11763-2002) SDM (4339-2002)
Sale to Minor (Compliance Test)

City Council Hearings for Liquor Violations

- X Current History file
- X Copy of original incident report
- X Copy of MLCC violation report
- / Copy of MLCC hearing disposition
- X Disposition of City Summons to server/seller

Rite Aid

3936 John R.

LCC Liquor Licensee History

Business name: **Rite Aid Discount Pharmacy #4268**
 Address: 3986 John R (313) 334-1300
 Licensee: Rite Aid of Michigan, Inc.
 License type: **SDD (11763-2002) SDM (4339-2002)**
 Permits: Sunday Sales
 Comments: Scott Reusze, Mgr. (5/99)

Date	Troy Incident #	Type	Disposition	Date
8/20/84		Council approved transfer of license to Paul Gabbara		
6/17/85		Council approved transfer of license to new building		
10/4/85	85-29395	Sale to minor	Dismissed	5/2/86
1/30/87	87-3181	Sale to minor	Dismissed	7/10/87
10/17/90	90-32241	Sale to minor (compliance test)	Fined \$200	10/21/91
5/23/91	91-14211	Sale to minor (compliance test)	Fined \$400	10/21/91
8/1/91		Request to transfer license to Sam Kilano	Withdrawn	3/20/92
11/4/92	92-33960	Sale to minor (compliance test)	Fined \$1000 & 3 day suspension	3/19/93
9/27/95	95-35601	Sale to minor (Compliance Insp)	Fined \$1000 & 3 day suspension	1/1/96
1/11/96		Request to transfer license to Rite Aid		
3/18/96	95-35601	Council hearing: No action, "Paul's Wine Cellar" closed, transfer to Rite Aid in process		
*****UNDER OWNERSHIP OF RITE AID OF MICHIGAN*****				
08/19/96		Council approves transfer to Rite Aid of Michigan		
12/9/96	96-45544	Sale to Minor (Compliance Insp.)	Fined \$400.	3/6/97
3/17/97	96-45544	Council hearing: Employee's not TIPS or TAM trained in last 90 days to be trained.		

10/28/98	98-43638	Sale to Minor (Compliance Insp.)	\$600	3/19/99
02/25/99	99-07624	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
03/08/99	99-08960	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
03/22/99		City Council recommends MLCC suspend license for 3 weeks and that all employees be TIPS/TAM trained BEFORE serving and proof be provided the Police Dept of same.		
05/??/99		Scott Reusze replaces Paul Gabarra as manager per Rite Aid Legal		
05/18/99	99-18438	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/22/99	99-23604	Compliance Test - PASSED		
08/11/99		Reminder letter sent for proof, deadline 09/01/99 Proof received 08/30/99		
10/27/99	99-41269	Sale to Minor (Compliance Test)	\$700	03/24/00
12/04/99	99-46310	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
07/25/00	none	Compliance Test	PASSED	
11/15/00	00-42336	Compliance Test	PASSED	
04/24/01	01-14106	Sale to Minor (Compliance Test)	DISMISSED Student Aide FTA	
08/14/01	01-29118	Compliance Test	PASSED	
09/25/01	01-34502	Compliance Test	PASSED	
10/17/01	01-37394	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
01/02/02	02-00112	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
02/19/02	02-05289	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
02/27/02	Council	Public Hearings for 2001 Violation(s)-Resolution requiring TIPS/TAM training for all employees who sell alcohol; proof to PD within 60 days; increased police surveillance; and this history file published in newspaper		
02/28/02	02-06351	Sale to Minor (Compliance Test)	\$900	7/3/02
04/19/02		Proof Received		
04/20/02	02-12147	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/13/02	02-18618	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/25/02	02-	Compliance Test	PASSED	
08/31/02	02-28780	Liquor Inspection (Road Patrol-Garcher)	NO VIOLATIONS	

10/16/02	02-34075	Compliance Test	PASSED
11/24/02	02-38173	Liquor Inspection (Road Patrol-Nastasi)	NO VIOLATIONS
01/03/03	03-281	Liquor Inspection (Road Patrol-Nastasi)	NO VIOLATIONS

INCIDENT REPORT

01	DATE 02.28.02	DAY THU	SHIFT 02	PLATOON 99	BADGE 1 042	BADGE 2 070	UCR STATUS E10 <input type="checkbox"/> DEATH OF OFFENDER E11 <input type="checkbox"/> PROSECUTION DECLINED	E12 <input type="checkbox"/> EXTRADITION DECLINED E13 <input type="checkbox"/> REFUSED TO COOPERATE E14 <input type="checkbox"/> JUVENILE NO CUSTODY	YEAR 02	INCIDENT NUMBER 6351	
02	RECEIVED 19.05	DISPATCHED 19.05	ARRIVED 19.05	COMPLETED 19.30	DATE(S) OCCURRED 02.28.02		TIMES(S) OCCURRED 1905		ASSIGNED HOUR / DAY 1917.H.4		
03	LOCATION 1 / ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER) 39.86 JOHN R.					LOCATION 2 (INTERSECTING STREET) WATTLES					
04	CITY TROY	STATE MI	ZIP 48084	CODE L	BUSINESS NAME RITE AID			BUSINESS PHONE 524-6480			
05	BUSINESS COMMENTS / ESTABLISHMENT DESCRIPTION CONVE. STORE				ESTAB CODE	ORIGIN <input type="checkbox"/> PHONE <input type="checkbox"/> PERSON <input type="checkbox"/> 911 <input checked="" type="checkbox"/> FOP <input type="checkbox"/> OTHER <input type="checkbox"/> MOT	HOW ACTIVATED <input checked="" type="checkbox"/> FOP <input type="checkbox"/> PERSON <input type="checkbox"/> MOT <input type="checkbox"/> DISP <input type="checkbox"/> OTHER		PATROL 05	GEOGRAPHIC	
06	NATURE OF OFFENSE #1 FURNISH ALCOHOL TO MINOR		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS	WEAPON	# PREM	ACTIVITY	ACTIVITY TYPES (Maximum 3 Per Offense) B BUYING / RECEIVING C CULTIVATING / MANUFACTURING / PUBLISHING D DISTRIBUTING / SELLING E EXPLOITING CHILDREN O OPERATING / PROMOTING / ASSISTING P POSSESSING / CONCEALING T TRANSPORTING / TRANSMITTING / IMPORTING U USING / CONSUMING	
07	NATURE OF OFFENSE #2		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS	WEAPON	# PREM	ACTIVITY		
08	NATURE OF OFFENSE #3		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS	WEAPON	# PREM	ACTIVITY		
09	NATURE OF OFFENSE #4		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS	WEAPON	# PREM	ACTIVITY	OFFENSE COMMENTS	

CODES (1) REPT'D BY (2) OWNER (3) VICT (4) PERS INTERV (5) ARREST (6) SUSPECT (7) MISSING (8) WITH (9) SECUR'D BY (C) JUV ARREST (D) DRIVER (F) PASSENGER (S) SUMMONED (R) RESPONSIBLE

V 10	CODE	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX) DPU	RAC	SEX	DOB	AGE
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I 11	ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY	STATE	ZIP
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C 12	HOME PHONE	BUSINESS PHONE	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D.
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T 13	VICTIM CONNECTED TO OFFENSE <input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04	VICTIM TYPE <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> BUSINESS <input type="checkbox"/> FINANCIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> RELIGIOUS <input type="checkbox"/> SOCIETY / PUBLIC <input type="checkbox"/> OTHER <input type="checkbox"/> POLICE OFFICER	VICTIM INJURY <input type="checkbox"/> NONE <input type="checkbox"/> BROKEN BONE <input type="checkbox"/> MINOR INJURY <input type="checkbox"/> MAJOR INJURY <input type="checkbox"/> POSS. INT. INJURIES <input type="checkbox"/> SEVERE LACERATION	<input type="checkbox"/> LOSS OF TEETH <input type="checkbox"/> UNCONSCIOUSNESS	<input type="checkbox"/> FATAL
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I 14	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY		OUTSIDE FAMILY, BUT KNOWN		NOT KNOWN	REL / OFF #	FELONIOUS ASSAULT CIRCUMSTANCES
M 15	01 SPOUSE	05 CHILD	06 STEPPARENT	20 ACQUAINTANCE	24 BOY / GIRL FRIEND	28 EMPLOYEE	
	02 C-L SPOUSE	08 GRANDPARENT	10 STEPCCHILD	21 FRIEND	25 CHILD OF "BG" ABOVE	29 EMPLOYER	
	03 PARENT	07 GRANDCHILD	11 STEPSIBLING	22 NEIGHBOR	26 HOMOSEXUAL REL.	30 OTHERWISE KNOWN	
	04 SIBLING	08 IN-LAW	12 OTHER FAMILY	23 BABYSITTEE (baby)	27 EX-SPOUSE	31 VICTIM WAS OFFENDER	

16	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX) DUBEY, AMRITA	RAC	SEX	DOB WF092879	AGE
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A 17	ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER) 174.0 LAKEWOOD	CITY TROY	STATE	ZIP MI48083
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R 18	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE	BUILD	SKIN TONE
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R 19	STATE	DRIVER'S LICENSE #	SOC. SEC. #	SI #	FBI #
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E 20	PERSON COMMENTS / CLOTHING	SUMMONS / CITATION NUMBER(S) 632132
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S 21	ARREST / SUMMONS DESCRIPTION FURN. ALCOHOL TO MINOR	ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1 042	BADGE 2 070	FM	DIS	DEPARTMENT ARREST NUMBER
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T 22	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER
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23	ARREST TYPE <input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST INDICATOR <input type="checkbox"/> MULTIPLE ARREST <input type="checkbox"/> COUNT 1 <input type="checkbox"/> N/A	CLEAR INDICATOR <input type="checkbox"/> CLEAR <input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST <input type="checkbox"/> ARMED WITH (ENTER "A" IF AUTO)	01 <input type="checkbox"/> UNARMED 11 <input type="checkbox"/> FIREARM 12 <input type="checkbox"/> HANDGUN	13 <input type="checkbox"/> RIFLE 14 <input type="checkbox"/> SHOTGUN 15 <input type="checkbox"/> OTHER FIREARM	20 <input type="checkbox"/> LETHAL CUT INSTRUMENT (e.g. Switchblade Knife, etc.) 30 <input type="checkbox"/> CLUB / BRASS KNUCKLES	ARREST ORIGIN <input type="checkbox"/> FOP <input type="checkbox"/> MOT <input type="checkbox"/> TEL	<input type="checkbox"/> DISP <input type="checkbox"/> PER <input type="checkbox"/> TEL
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CODES (H) HOLD (S) STOLEN (E) EVIDENCE (L) LOST (A) ATTACKED (R) RECOVERED (F) FOUND (C) CONFISCATED (I) IMPOUNDED (V) SUSPECT VEHICLE (B) BURNED (Y) FORGED / COUNTERFEIT

24	CODES A.E.	DESCRIPTION WINE	PROPERTY TYPE	QUANTITY	YEAR	MAKE WILD VINES	MODEL ZINFANDEL
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25	STYLE	COLOR(S) TOP / BOTTOM	MONTH	YEAR	STATE	LICENSE	SERIAL / VIN NUMBER / CONDITION / OTHER I.D.
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26	STOLEN \$	DAMAGED \$	RECOVERED \$	PROPERTY TAG # 116763	LOCATION PROPERTY EVID. Room.	LEIN / NOC REF #
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27	REC BADGE	REC BADGE 2	LEO	RECOVERY DATE	NOTIFY BADGE	NOTIFY DATE	NOTIFY TIME	PERSON / DEPARTMENT NOTIFIED
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28	COMMENTS - INSURANCE COMPANY / LIEN HOLDER / BANK	SEIZED DRUGS	TYPE	AMOUNT	MEAS
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INVESTIGATING OFFICER(S):

PERSON REPORT

SUPP

PAGE OF

01	DATE 022802	DAY TH	SHIFT 402	PLATOON 99	BADGE 1 042	BADGE 2 070	UCR STATUS E10 <input type="checkbox"/> DEATH OF OFFENDER E11 <input type="checkbox"/> PROSECUTION DECLINED	E12 <input type="checkbox"/> EXTRADITION DECLINED E13 <input type="checkbox"/> REFUSED TO COOPERATE E14 <input type="checkbox"/> JUVENILE, NO CUSTODY	YEAR 02	INCIDENT NUMBER 6351
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CODES (1) REPT'D BY (2) OWNER (3) VICT (4) PERS INTERV (5) ARREST (6) SUSPECT (7) MISSING (8) WITH (9) SECURED BY (10) JUV ARREST (11) DRIVER (12) PASSENGER (13) SUMMONED (14) RESPONSIBLE

V 02	CODE 8	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX) GOLDEN SHAYNA	RAC W	SEX F	DOB 032583	AGE
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I 03	ADDRESS 500	(DIRECTION, STREET, SUFFIX, QUALIFIER) W. BIG BEAVER	CITY TROY	STATE MI	ZIP 48084
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G 04	HOME PHONE	BUSINESS PHONE 524-3477	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D. STUDENT ENF AID
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T 05	VICTIM CONNECTED TO OFFENSE <input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	VICTIM TYPE <input type="checkbox"/> I INDIVIDUAL <input type="checkbox"/> B BUSINESS	F <input type="checkbox"/> FINANCIAL G <input type="checkbox"/> GOVERNMENT R <input type="checkbox"/> RELIGIOUS	S <input type="checkbox"/> SOCIETY / PUBLIC O <input type="checkbox"/> OTHER P <input type="checkbox"/> POLICE OFFICER	VICTIM INJURY N <input type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONE	M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES L <input type="checkbox"/> SEVERE LACERATION	T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS	F <input type="checkbox"/> FATAL
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RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY				OUTSIDE FAMILY, BUT KNOWN				NOT KNOWN		REL / OFF #		FELONIOUS ASSAULT CIRCUMSTANCES	
01 SPOUSE	05 CHILD	08 STEPPARENT	20 ACQUAINTANCE	24 BOY / GIRL FRIEND	28 EMPLOYEE	98 STRANGER	/	/					
02 C-L SPOUSE	06 GRANDPARENT	10 STEPCCHILD	21 FRIEND	25 CHILD OF "BO" ABOVE	29 EMPLOYER	99 UNKNOWN	/	/					
03 PARENT	07 GRANDCHILD	11 STEPSIBLING	22 NEIGHBOR	26 HOMOSEXUAL REL.	30 OTHERWISE KNOWN	REL / OFF #		/					
04 SIBLING	08 IN-LAW	12 OTHER FAMILY	23 BABYSITTEE (baby)	27 EX-SPOUSE	31 VICTIM WAS OFFENDER	/		/					

V 08	CODE 4	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX) KHARSA JOSEPH	RAC W	SEX M	DOB	AGE
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I 09	ADDRESS 3986	(DIRECTION, STREET, SUFFIX, QUALIFIER) JOHN R.	CITY TROY	STATE MI	ZIP 48084
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S 10	HOME PHONE	BUSINESS PHONE 248-524-6480	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D. ASSISTANT STORE MGR.
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T 11	VICTIM CONNECTED TO OFFENSE <input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	VICTIM TYPE <input type="checkbox"/> I INDIVIDUAL <input type="checkbox"/> B BUSINESS	F <input type="checkbox"/> FINANCIAL G <input type="checkbox"/> GOVERNMENT R <input type="checkbox"/> RELIGIOUS	S <input type="checkbox"/> SOCIETY / PUBLIC O <input type="checkbox"/> OTHER P <input type="checkbox"/> POLICE OFFICER	VICTIM INJURY N <input type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONE	M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES L <input type="checkbox"/> SEVERE LACERATION	T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS	F <input type="checkbox"/> FATAL
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RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY				OUTSIDE FAMILY, BUT KNOWN				NOT KNOWN		REL / OFF #		FELONIOUS ASSAULT CIRCUMSTANCES	
01 SPOUSE	05 CHILD	08 STEPPARENT	20 ACQUAINTANCE	24 BOY / GIRL FRIEND	28 EMPLOYEE	98 STRANGER	/	/					
02 C-L SPOUSE	06 GRANDPARENT	10 STEPCCHILD	21 FRIEND	25 CHILD OF "BO" ABOVE	29 EMPLOYER	99 UNKNOWN	/	/					
03 PARENT	07 GRANDCHILD	11 STEPSIBLING	22 NEIGHBOR	26 HOMOSEXUAL REL.	30 OTHERWISE KNOWN	REL / OFF #		/					
04 SIBLING	08 IN-LAW	12 OTHER FAMILY	23 BABYSITTEE (baby)	27 EX-SPOUSE	31 VICTIM WAS OFFENDER	/		/					

14	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE
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15	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY	STATE	ZIP
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16	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE	BUILD	SKIN TONE
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17	STATE	DRIVER'S LICENSE #	SOC. SEC. #	SID #	FBI #
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18	PERSON COMMENTS / CLOTHING	SUMMONS / CITATION NUMBER(S)
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19	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	DEPARTMENT ARREST NUMBER
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20	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER
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21	ARREST TYPE <input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST <input type="checkbox"/> COUNT 1 <input type="checkbox"/> INDICATOR	MULTIPLE ARREST <input type="checkbox"/> COUNT 1 <input type="checkbox"/> INDICATOR	CLEAR INDICATOR <input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST <input type="checkbox"/> ARMED WITH (ENTER "A" IF AUTO)	01 <input type="checkbox"/> UNARMED 11 <input type="checkbox"/> FIREARM 12 <input type="checkbox"/> HANDGUN	13 <input type="checkbox"/> RIFLE 14 <input type="checkbox"/> SHOTGUN 15 <input type="checkbox"/> OTHER FIREARM	20 <input type="checkbox"/> LETHAL CUT INSTRUMENT (e.g. Switchblade Knife, etc.) 30 <input type="checkbox"/> CLUB / BRASS KNUCKLES	ARREST ORIGIN <input type="checkbox"/> FOP <input type="checkbox"/> MDT	DISP <input type="checkbox"/> PER <input type="checkbox"/> TEL
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22	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE
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23	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY	STATE	ZIP
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24	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE	BUILD	SKIN TONE
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25	STATE	DRIVER'S LICENSE #	SOC. SEC. #	SID #	FBI #
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26	PERSON COMMENTS / CLOTHING	SUMMONS / CITATION NUMBER(S)
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27	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	DEPARTMENT ARREST NUMBER
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28	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER
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29	ARREST TYPE <input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST <input type="checkbox"/> COUNT 1 <input type="checkbox"/> INDICATOR	MULTIPLE ARREST <input type="checkbox"/> COUNT 1 <input type="checkbox"/> INDICATOR	CLEAR INDICATOR <input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST <input type="checkbox"/> ARMED WITH (ENTER "A" IF AUTO)	01 <input type="checkbox"/> UNARMED 11 <input type="checkbox"/> FIREARM 12 <input type="checkbox"/> HANDGUN	13 <input type="checkbox"/> RIFLE 14 <input type="checkbox"/> SHOTGUN 15 <input type="checkbox"/> OTHER FIREARM	20 <input type="checkbox"/> LETHAL CUT INSTRUMENT (e.g. Switchblade Knife, etc.) 30 <input type="checkbox"/> CLUB / BRASS KNUCKLES	ARREST ORIGIN <input type="checkbox"/> FOP <input type="checkbox"/> MDT	DISP <input type="checkbox"/> PER <input type="checkbox"/> TEL
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TROY POLICE DEPT.

500 W. Big Beaver, Troy, MI 48064

ORI #MI6378400

NARRATIVE REPORT SUPP CORR DELETEPAGE 1 OF 1

DATE	DAY	SHIFT	PLAT	BADGE 1	BADGE 2	INCIDENT STATUS	PRIM CLASS	YEAR	INCIDENT #
2/28/02	Thu	09	99	070		<input type="checkbox"/> CLR ARREST <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> UNF <input type="checkbox"/> INACT		02	6351

Directed Patrol Unit conducting liquor compliance test sent in student enforcement aid Shauna Lynn Golden 03-25-1983 (18 y/o) to the above location.

Golden selected the listed Wild Vines Wine – Strawberry White Zinfandel and went to the register to purchase it. The clerk did not ask for any identification or age and the sale was completed. The wine and receipt were later tagged and placed into evidence.

Officers spoke with the assistant store manager Joe Kharsa and the Clerk that completed the sale, Amrita Dubey. Dubey remembered the sale. She stated that our enforcement aid had presented “some sort of id, maybe a school ID.” She stated that her birthday was in 1977. I asked what kind of ID does the store accept, she stated that they only accept Michigan ID. I then asked again if a Michigan ID was presented. She stated no. I asked why she would accept something other than what the store requires. She did not have an answer. Golden’s identification was taken from her prior to leaving the station and she did not take a purse or wallet into the store with her. The assistant manager stated that only an age has to be input into the register in order for a sale to be made. A birth date does not. The register only keeps the age that is input in its memory according to Kharsa. Dubey was issued a citation for furnishing/sell alcohol to minor. The store was issued a liquor violation, which will be filed with the Liquor Control Commission.

This is the second violation in year.

INVESTIGATING OFFICER(S)

C. Barton/A. Cascioli

REVIEWED BY

ASSIGNED TO/BADGE

ATTENTION TO

NARRATIVE REPORT
WITNESS STATEMENT

01	DATE 02/28/02	DAY THU	SHIFT 02	PLAT 99	BADGE 1 042	BADGE 2 070	INCIDENT STATUS <input type="checkbox"/> CLR ARREST <input type="checkbox"/> UNF <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> INACT	PRIM CLASS	YEAR 02	INCIDENT # 6351
----	------------------	------------	-------------	------------	----------------	----------------	---	------------	------------	--------------------

02 Statement of: Shauna Golden Home Phone: N/A
03 Address: 500 Big Beaver Rd. Business Phone: 248-524-3477
04 City: Troy State: MI Zip: 48084

06 I Shauna Golden, entered Rite Aid 3986
07 John R. Rd February 28th at precisely 7:01pm.
08 I picked out a bottle of wild vines wine and
09 proceeded up to the counter. There was a
10 man standing at the counter as I approached.
11 I asked him if this was where I could pay
12 and he pointed me to a young girl standing
13 at the register next to him. She rang the
14 bottle and asked me if that was all I
15 needed. I told her that was all and she
16 gave me the total. I paid her the total
17 of the wine and she gave me my change.
18 She put the wine in a paper bag and
19 said "have a good night!" I was never
20 asked for ID or if I was over 21. The
21 girl had a dark complexion (almost like
22 she was asian), and dark black hair. I
23 left the store wine in hand.

x: Shauna Golden
(SIGNATURE)

3 Taken By: (SIGNATURE)
Place: Date: 2-28-02 Time:
INVESTIGATING OFFICER(S) REVIEWED BY ASSIGNED TO / BADGE ATTENTION TO

State of Michigan
Uniform Law Citation

Ticket # **NO 632132**

Victim Involved

US DOT #

Incident No. **02-6351**

Dept. No. **164**

The People of: the State of Michigan
 Township City Village County

Local Use/Arrest No.

Detection Device

OF: **TROY TAV**

BAC

1 of 1

THE UNDERSIGNED SAYS THAT ON: **2 28 02** At approximately **7:05 P.M.** Date Month Day Year

State Driver's License Number **MI D 100 066 018 749**

Social Security No.

Race Sex Height Weight Hair Eyes Occupation/Employer
W F 5-3 100 BK BRD CLERK

Name (First, Middle, Last)
AMRITA DUBEY

Street
1740 LAKE WOOD

City **TROY** State **MI** Zip Code **48063**

Vehicle Plate No. Year State Vehicle Description (Year, Make, Color) Type

THE PERSON NAMED ABOVE, in violation of Local Ordinance State Law Administrative Rule

UPON **3986 JOHN R**

AT OR NEAR **WATILES.**

WITHIN CITY VILLAGE TOWNSHIP OF **TROY**

COUNTY OF **OAKLAND** DID THE FOLLOWING:

Type	MCL Cite/PACC Code/Ordinance	Description (include any bond amount collected on each charge)	Charge No.
<input checked="" type="checkbox"/> Misd	92-9.7.7.3	FURN. ALTHO. TO MINOR w/o IN QUIRY	1
<input type="checkbox"/> Fel			
<input type="checkbox"/> Misd			
<input type="checkbox"/> Fel			
<input type="checkbox"/> Misd			
<input type="checkbox"/> Fel			

TO THE COURT: Do not arraign on a felony charge until an authorized complaint is filed.

Offense Code(s)

Key for Type: C/I = Civil Infraction Misd = Misdemeanor Fel = Felony Warn = Warning Fug = Fugitive
Waiv = Violation for Which Fines/Costs May be Waived Authorization pend. = Authorization pending

Remarks

NO 632132

CHECK IF APPROPRIATE Damage to Property Local Court Bond \$
 Vehicle Impounded Injury License Posted in Lieu of Bond
 Traffic Crash Death Appearance Certificate

Person in Active Military Service Yes No

SEE DATE BELOW SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS

Appearance Date on or before **MARCH 27 2002**

Hearing Date (if applicable) on **0630** Contact Court

Juvenile Traffic Misd (Court will Notify) Formal Hearing Required (Court will Notify)

In the **52-4 DISTRICT** Court of **OAKLAND COUNTY**

Court Address & Phone Number

**520 W. BIG BEAVER RD., TROY, MICHIGAN 48084
PHONE: (248) 528-0400**

I served a copy of the civil infraction complaint upon the defendant (or owner/occupant by posting if applicable). I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.

Complainant's Signature and Title (if applicable) **[Signature]** Month **2** Day **28** Year **02**

Officer's Name (printed) **CASANOVA / BARETT** Officer's ID No. **42/70**

Agency ORI **MI-6378400** Agency Name **TROY POLICE DEPARTMENT**

UC-01a (rev. 11/95) Court Copy 1

PRESS - YOU ARE MAKING FIVE COPIES
ORDER BY FORM NO. M76 (Revised 11/95)
FIDLAR DOUBLEDAY KALAMAZOO, MI



Michigan Department of Consumer & Industry Services

LIQUOR CONTROL COMMISSION (C)

7150 Harris Drive

P.O. Box 30005

Lansing, Michigan 48909-7505

Phone (517) 322-1390 ~ FAX (517) 322-6347

VIOLATION REPORT

(Authorized by P.A.58 of 1998)

Officers Please Obtain This Information From The Licensee
License No. 11763-2001 SS/4389-20 Business ID 9794 File #
THIS INFORMATION IS AVAILABLE ON LICENSES IN THE 1999

1. Name of Licensee Rite Aid of Michigan 2. Doing Business As Rite Aid

3. Mailing Address (street, city, zip code) 3986 John R

4. Township Troy 5. County Oakland

6. Type of License(s) & Permit(s) SSD / SDM / SS

7. Date of Violation: Thursday 2/28/03 7:05 AM or PM
(DAY) (DATE) (HOUR)

8. Violation Type:
XX Minor
Intoxicated Person After hours sales/consumption Gambling
Fighting (must be inside licensed premises) Controlled Substances
Failure to Cooperate Prohibited Conduct OTHER:

if MINOR: Birth date 3/25/83 Was this a DECOY Yes/No If no, you MUST answer below:

IF above minor violation was not a decoy describe Enforcement Action Taken:

COPY OF APPEARANCE TICKET MUST BE ATTACHED

9. Submit Report Below or Indicate Attached Report # 02-6351

Officer Signature [Signature] Name and Title (print) Antonio Cascioli Police Officer

Officer Signature [Signature] Name and Title (print) Carl Barton Police Officer

Department Name Troy Police Department Phone # 248-524-3477
LC-600 Rev. 4/99 4880-2362

WITNESSES

1. Name Joseph Kharsa A. 1st Mgr. Address 3986 John , Troy

Will testify to: Being advised of LCC Violation

2. Name Amrita Dubey Address 1740 Lakewood, Troy, 48083

Will testify to: Selling the wine to the decoy without inquiring her age or I.D.

3. Name Shauna Golden Address 500 W. Big Beaver, Troy, MI 48084

Will testify to: Being sold the bottle of wine without being asked how old she was or for an I.D.

4. Name _____ Address _____

Will testify to: _____

5. Name _____ Address _____

Will testify to: _____

EVIDENCE

Location Held: Troy Police Department Property Lock-up. One bottle of wine (Wild Vines Zinf.



STATE OF MICHIGAN
 LIQUOR CONTROL COMMISSION
 DEPARTMENT OF CONSUMER & INDUSTRY SERVICES
 KATHLEEN M. WILBUR, DIRECTOR

JOHN ENGLER
 GOVERNOR

DAN GUSTAFSON
 CHAIRPERSON

July 18, 2002

REC'D 7/22/02
 Date

RITE AID OF MICHIGAN, INC.
 D/B/A RITE AID DISCOUNT PHARMACY #4268
 3986 JOHN R
 TROY, MI 48083

FINE \$900 7/3/02

RE: Complaint No. 2-68499

Dear Licensee:

Enclosed is a copy of the Commissioner's Order issued as the result of the above Complaint.

If you elect to pay the fine, a bank or postal money order, certified check, or authorized credit card payable to the STATE OF MICHIGAN must be received in this office no later than August 19, 2002 as indicated on your Invoice No. 79699. Failure to submit the fine will result in confiscation of your license for the alternative penalty.

If there are any questions regarding this Order, please contact Hearings and Appeals at (517) 322-1390. Our office hours are from 8:00 a.m. to 5:00 p.m.

Sincerely,

MICHIGAN LIQUOR CONTROL COMMISSION

Susan K. Conklin

Susan K. Conklin, Supervisor
 Hearings and Appeals

SKC:wls

Enclosures

cc: Atty. John Doyle
 Home Office
 ✓ Troy PD

STATE OF MICHIGAN

DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES
LIQUOR CONTROL COMMISSION

IN RE: RITE AID OF MICHIGAN, INC.
D/B/A RITE AID DISCOUNT PHARMACY #4268
3986 JOHN R
TROY, MI 48083

HEARING: JUNE 3, 2002
PLACE: FARMINGTON
COMPLAINT NO: 2-68499
BUSINESS ID NO. 9794
SDD SDM SS

CHARGES - FEBRUARY 28, 2002

- (1) Sold or furnished alcoholic liquor to Shauna L. Golden, date of birth March 25, 1983, who was less than twenty-one (21) years old, contrary to Const 1963, art 4, § 40 and contrary to Section 801(2) and/or Section 701(1) of the Michigan Liquor Control Code, MCL 436.1801(2) and/or MCL 436.1701(1).

NEGOTIATED SETTLEMENT

This matter comes before the Commission as a proposed negotiated settlement, the state being represented by J. Courtney Smith, Assistant Attorney General, and the Licensed Corporation being represented by Attorney John Doyle, who is also an Officer of the Licensed Corporation. Pursuant to Section 903 of the Michigan Liquor Control Code, MCL 436.1903, and Rule 436.1909 of the Michigan Liquor Control Commission (MLCC), the parties stipulated and agreed that:

- (1) the Licensed Corporation would acknowledge responsibility to the charge in the Complaint;
- (2) the Administrative Law Judge will enter the Violation Report of the case and attachments thereto into the record as substantive evidence without objection and will further

take notice of the prior record of this Licensed Corporation since being licensed by the MLCC at the above location under current ownership;

(3) the Licensed Corporation would pay a maximum fine of \$900, with no suspension or revocation as a penalty;

(4) there would be no appeal of this decision to the Appeal Board or to any court of law, and if not approved, the hearing officer would not recuse himself upon a contested hearing of the matter.

ORDER

The Licensed Corporation has been licensed at this location since October 4, 1996, and after reviewing the Licensed Corporation's past record and the Violation Report setting forth the facts of this case, the Administrative Law Judge accepts the terms of the Negotiated Settlement and orders as follows:

(1) the plea acknowledging the charge in this case be accepted;

(2) the Violation Report and attachments are accepted as substantive evidence;

(3) based upon the Violation Report and statements at the hearing, the Administrative Law Judge finds that the Licensed Corporation did violate Section 801(2) of the Michigan Liquor Control Code, MCL 436.1801(2), as alleged in the charge of the Complaint;

(4) for the charge for which a violation was found, the Licensed Corporation is fined \$900;

(5) a suspension of 45 continuous days be imposed if the total fine of \$900 is not paid, with this suspension to be served consecutively and not concurrently with any other suspensions ordered by the MLCC for the Licensed Corporation;

(6) this Negotiated Settlement is a full and final disposition of the matter before the MLCC, recognizing that as to the Complaint, there is no further right of administrative or judicial appeal, either to the MLCC or a court of law and that there are no promises, stipulations, understandings or agreements other than those stated in the record, and this Order represents the final agreed settlement.

MICHIGAN LIQUOR CONTROL COMMISSION



Dennis Flesland, Administrative Law Judge

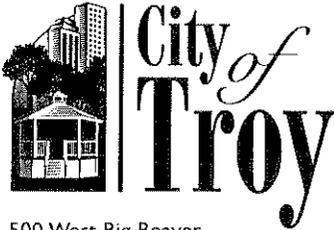
Dated: July 3, 2002

J. Courtney Smith
Assistant Attorney General
24155 Drake Road
Farmington, MI 48335

John J. Doyle
Attorney at Law
2400 Science Parkway
Okemos, MI 48864

DF: 2-68499

TRUE COPY



500 West Big Beaver
Troy, Michigan 48084
Fax: (248) 524-0851
www.ci.troy.mi.us

Area code (248)

Assessing
524-3311

Bldg. Inspections
524-3344

Bldg. Operations
524-3368

City Clerk
524-3316

City Manager
524-3330

Community Affairs
524-1147

Engineering
524-3383

Finance
524-3411

Fire-Administration
524-3419

Human Resources
524-3339

Information Technology
619-7279

Law
524-3320

Library
524-3545

Parks & Recreation
524-3484

Planning
524-3364

Police-Administration
524-3443

Public Works
524-3370

Purchasing
524-3338

Real Estate & Development
524-3498

Treasurer
524-3334

General Information
524-3300

February 7, 2003

Rite Aid Discount Pharmacy #4268
3986 John R
Troy, Michigan 48083

Re: Liquor License: Rite Aid Discount Pharmacy #4268
3986 John R
Troy, Michigan 48083

A Public Hearing will be held by and before the Council of the City of Troy at City Hall, 500 W Big Beaver, Troy, Michigan on Wednesday, February 26, 2003 at 7:30 PM, or as soon thereafter as the agenda will permit, to determine whether the City Council should recommend to the Michigan Liquor Control Commission, the revocation of licenses allowed for the sale and/or consumption of alcoholic beverage, for the following reasons:

License Type: SDD (11763-2002) & SDM (4339-2002)
Violation Name: SALE TO MINOR (COMPLIANCE TEST)
Violation Date(s): February 28, 2002

You will be given an opportunity to be heard and present evidence at the public hearing and legal counsel may represent you. If you have questions regarding the procedure or the facts and circumstances surrounding your violation(s), you may contact the City Attorney's office at 248-524-3320.

Sincerely,

Barbara A. Holmes, CMC
Deputy City Clerk

C: John Doyle
Attorney at Law
2400 Science Parkway
Okemos, Michigan 48864

CERTIFIED MAIL



7001 2510 0005 5488 3238
7001 2510 0005 5488 3238

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Way
48864

[Empty box for return address]

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark
Here

Sent **John Doyle**
Attorney at Law
2400 Science Parkway
Okemos, Michigan 48864
 City: **RA 4268**

PS Form 3800, January 2001 See Reverse for Instructions



500 West Big Beaver
Troy, Michigan 48084

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Pharmacy #4268.

83

[Empty box for return address]

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	



7000 0520 0020 0628 8466
7000 0520 0020 0628 8466

To: **Rite Aid Discount Pharmacy**
Re #4268
Rite Aid of Michigan, Inc
3986 John R
 City: **Troy, Michigan 48083**

PS Form 3800, February 2000



500 West Big Beaver
Troy, Michigan 48084

Rite Aid Discount Pharmacy #2731
1981 W. South Blvd.
Troy MI 48098
SDM (78430-2002)
Sale to Minor (Compliance Test)

City Council Hearings for Liquor Violations

- X Current History file
- X Copy of original incident report
- X Copy of MLCC violation report
- X Copy of MLCC hearing disposition
- X Disposition of City Summons to server/seller

Rite Aid

1981 W. South Blvd.

LCC

Liquor Licensee History

Business name: **Rite-Aid Pharmacy**

Address: 1981 W. South Blvd. (248) 813-9581

Licensee: Rite Aid of Michigan, Inc.

License type: **SDM (78430-2002)**

Permits:

Comments:

Date	Troy Incident #	Type	Disposition	Date
11/15/00	00-42346	Compliance Test	PASSED	
04/24/01		Compliance Test	PASSED	
08/14/01	01-29142	Compliance Test	PASSED	
09/25/01	01-34511	Compliance Test	PASSED	
10/31/01	01-39295	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
01/05/02	02-00498	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
02/28/02	02-06347	Sale to Minor (Compliance Test)	\$500	7/17/02
03/02/02	02-06596	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
04/08/02	02-10621	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/25/02	02-	Compliance Test	PASSED	
07/06/02	02-21815	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
08/24/02	02-27882	Liquor Inspection (Road Patrol-MLivingston)	NO VIOLATIONS	
10/16/02	02-34065	Compliance Test	PASSED	
11/23/02	02-38039	Liquor Inspection (Road Patrol-Lepola)	NO VIOLATIONS	
12/21/02	02-41154	Liquor Inspection (Road Patrol-Lepola)	NO VIOLATIONS	

INCIDENT REPORT

01	DATE	DAY	SHIFT	PLATOON	BADGE 1	BADGE 2	UCR STATUS	E12 <input type="checkbox"/> EXTRACTION DECLINED	YEAR	INCIDENT NUMBER	
01	022802	THU	09	99	105	006	E10 <input type="checkbox"/> DEATH OF OFFENDER E11 <input type="checkbox"/> PROSECUTION DECLINED	E13 <input type="checkbox"/> REFUSED TO COOPERATE E14 <input type="checkbox"/> AVERE / NO CRIMINAL C	021	6347	
02	RECEIVED	DISPATCHED	ARRIVED	COMPLETED	DATES OCCURRED		TIMES OCCURRED	ASSIGNED HOUR / DAY			
02	1805	1805	1805	1830	022802		18081	181T.H.U			
03	LOCATION 1 / ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER)						LOCATION 2 (INTERSECTING STREET)				
03	1981 W. SOUTH BLVD.										
04	CITY	STATE	ZIP	CODE	BUSINESS NAME		BUSINESS PHONE				
04	TROY	MI	48098	L	RITE-AID		(248) 813-9581				
05	BUSINESS COMMENTS / ESTABLISHMENT DESCRIPTION						ESTAB CODE	ORIGIN	HOW ACTIVATED	PATROL	SECURITY
05	DRUG STORE						0204	<input type="checkbox"/> PHONE <input type="checkbox"/> PERSON <input type="checkbox"/> 911 <input type="checkbox"/> POP <input type="checkbox"/> OTHER <input type="checkbox"/> MOT	<input checked="" type="checkbox"/> FOP <input type="checkbox"/> PERSON <input type="checkbox"/> MOT <input type="checkbox"/> DISP <input type="checkbox"/> OTHER	06	
06	NATURE OF OFFENSE #1			ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL	BIAS	WEAPON	# PREM	ACTIVITY	ACTIVITY TYPES (Maximum 3 Per Offense)
06	FURNISH ALCOHOL TO A MINOR					<input type="checkbox"/>					B BUYING / RECEIVING C CULTIVATING / MANUFACTURING / PUBLISHING D DISTRIBUTING / SELLING E EXPLOITING CHILDREN O OPERATING / PROMOTING / ASSISTING P POSSESSING / CONCEALING T TRANSPORTING / TRANSMITTING / IMPORTING U USING / CONSUMING
07	NATURE OF OFFENSE #2			ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL	BIAS	WEAPON	# PREM	ACTIVITY	
07	LCC VIOLATION					<input type="checkbox"/>					
08	NATURE OF OFFENSE #3			ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL	BIAS	WEAPON	# PREM	ACTIVITY	
08						<input type="checkbox"/>					
09	NATURE OF OFFENSE #4			ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL	BIAS	WEAPON	# PREM	ACTIVITY	OFFENSE COMMENTS
09						<input type="checkbox"/>					

CODES (1) REPT'D BY (2) OWNER (3) VICT (4) PERS INTERV (5) ARREST (6) SUSPECT (7) MISSING (8) WITHN (9) SECUR'D BY (10) JUN ARREST (11) DRIVER (12) PASSENGER (13) SUMMONED (14) RESPONSE:	V 10	CODE	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX)			RAC	SEX	DOB	AGE			
	V 10	148		MCDONALD, PAMELA			W	F	030282	1			
	I 11	ADDRESS	DIRECTION, STREET, SUFFIX, QUALIFIER			CITY	STATE	ZIP					
	I 11	500	W. BIG BEAVER			TROY	MI	48084					
	G 12	HOME PHONE	BUSINESS PHONE	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D.							
	G 12		504-3431	MI		STUDENT ENFORCEMENT AID							
	T 13	VICTIM CONNECTED TO OFFENSE	VICTIM TYPE	F <input type="checkbox"/> FINANCIAL G <input type="checkbox"/> GOVERNMENT R <input type="checkbox"/> RELIGIOUS	S <input type="checkbox"/> SOCIETY / PUBLIC O <input type="checkbox"/> OTHER P <input type="checkbox"/> POLICE OFFICER	VICTIM INJURY	N <input type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONE M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES L <input type="checkbox"/> SEVERE LACERATION	T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS	F <input type="checkbox"/> FATAL			
	T 13	01 <input type="checkbox"/> 03 <input type="checkbox"/>	01 <input type="checkbox"/> INDIVIDUAL 02 <input type="checkbox"/> BUSINESS			N <input type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONE	M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES L <input type="checkbox"/> SEVERE LACERATION	T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS	F <input type="checkbox"/> FATAL			
	I 14	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY			OUTSIDE FAMILY, BUT KNOWN			NOT KNOWN 00 STRANGER 09 UNKNOWN	REL / OFF #	FELONIOUS ASSAULT CIRCUMSTANCES			
	I 14	01 SPOUSE 02 CL SPOUSE 03 PARENT 04 SIBLING	05 CHILD 06 GRANDPARENT 07 GRANDCHILD 08 IN-LAW	09 STEPPARENT 10 STEPCHILD 11 STEPSIBLING 12 OTHER FAMILY	20 ACQUAINTANCE 21 FRIEND 22 NEIGHBOR 23 BABYSITTEE (baby)	24 BOY / GIRL FRIEND 25 CHILD OF "BG" ABOVE 26 HOMOSEXUAL REL. 27 EX-SPOUSE	28 EMPLOYEE 29 EMPLOYER 30 OTHERWISE KNOWN 31 VICTIM WAS OFFENDER						
	M 15	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)			RAC	SEX	DOB	AGE			
	M 15	4601		POP VIRGILIUS FLAVIUS			W	M	042970	31			
	A 17	ADDRESS	DIRECTION, STREET, SUFFIX, QUALIFIER			CITY	STATE	ZIP					
	A 17	3071	GREENWOOD			ROCHESTER HILLS	MI	48309					
	R 18	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE	BUILD	SKIN TONE				
	R 18	(810) 416-1702											
	R 19	STATE	DRIVER'S LICENSE #	SOC. SEC. #	SID #	FIN #							
	R 19	MI	P100847255328										
	E 20	PERSON COMMENTS / CLOTHING						SUMMONS / CITATION NUMBER(S)					
	E 20	RITE-AID EMPLOYEE						624961					
	S 21	ARREST / SUMMONS DESCRIPTION		ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	DEPARTMENT ARREST NUMBER		
	S 21	FURNISH ALCOHOL TO A MINOR			022802	99	105	006	M				
	T 22	ARREST / SUMMONS DESCRIPTION		ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER		
	T 22												
	23	ARREST TYPE	<input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE <input type="checkbox"/> MULTIPLE <input type="checkbox"/> COUNT 1 <input type="checkbox"/> N/A	CLEAR <input type="checkbox"/> INDICATOR <input type="checkbox"/> N/A	UPON ARREST <input type="checkbox"/> Y ARMED WITH <input type="checkbox"/> N	01 <input type="checkbox"/> UNARMED 11 <input type="checkbox"/> FIREARM 12 <input type="checkbox"/> HANDGUN	13 <input type="checkbox"/> RIFLE 14 <input type="checkbox"/> SHOTGUN 15 <input type="checkbox"/> OTHER FIREARM	30 <input type="checkbox"/> LETHAL CUT INSTRUMENT (e.g. Switchblade Knife, etc.) 30 <input type="checkbox"/> CLUB / BRASS KNUCKLES	ARREST ORIGIN <input type="checkbox"/> FOP <input type="checkbox"/> MOT <input type="checkbox"/> TEL			
	23												
	24	CODES	DESCRIPTION	PROPERTY TYPE	QUANTITY	YEAR	MAKE	MODEL					
	24		E 4 PK. SEAGRAM'S WINE COOLERS		4		SEAGRAMS	FUZZY NAVAL					
	25	STYLE	COLOR(S) TOP / BOTTOM	MONTH	YEAR	STATE	LICENSE	SERIAL / VIN NUMBER / CONDITION / OTHER I.D.					
	25												
	26	STOLEN	DAMAGED	RECOVERED	PROPERTY TAG #	LOCATION PROPERTY	LEIN / NCC REF #						
	26				116762	PROP. ROOM							
	27	REC BADGE	REC BADGE 2	LEO	RECOVERY DATE	NOTIFY BADGE	NOTIFY DATE	NOTIFY TIME	PERSON / DEPARTMENT NOTIFIED				
	27												
	28	COMMENTS - INSURANCE COMPANY / LIEN HOLDER / BANK								SEIZED	TYPE	AMOUNT	MEAS
	28									DRUGS			
	29	INVESTIGATING OFFICER(S):						REVIEWED BY:	ATTENTION TO:				
	29												

TROY POLICE DEPT.

500 W. Big Beaver, Troy, MI 48064
ORI #M16378400

1 NARRATIVE REPORT

__ SUPP __ CORR __ DELETE

01	DATE 2/28/02	DAY Thu	SHIFT 09	PLAT 99	BADGE 1 105	BADGE 2	INCIDENT STATUS __ CLR ARREST __ UNF __ CLR EXCEPT __ INACT	PRIM CLASS	YEAR 02	INCIDENT # **6347
----	-----------------	------------	-------------	------------	----------------	---------	---	------------	------------	----------------------

Directed Patrol Unit working Liquor Compliance Checks with Student Enforcement Aide Pamela McDonald (19).

Aide McDonald entered Rite Aide, at 1981 W. South Blvd, selected a 4 pack of Seagrams Wine Coolers and presented it at the counter for purchase. Clerk Virgilius Pop made no inquiry as to Aide McDonald's age and completed the transaction.

Officer's spoke with Clerk Pop who first explained that he recognized Aide McDonald as she comes in on a regular basis. I explained that Aide McDonald does not shop at this store, as she doesn't even live in this county. Clerk Pop then proclaimed that he wasn't even sure if the beverage that she purchased was alcoholic. I reminded him that their computerized registers require that he enter a D.O.B upon scanning an alcoholic beverage. Clerk Pop then stated that he knew it was alcoholic and that he always asks for I.D. but had forgotten this time. Clerk Pop has been working at Rite Aide for 1 year and 3 months and he is not TIPS/TAMS trained.

There was not a manager on duty and it was explained that the store usually does not have managers working the afternoon shift. Citation issued for Furnishing Alcohol to Minor. 4 pack of Seagrams Cooler and receipt was tagged and placed into property. LCC violation form completed.

INVESTIGATING OFFICER(S) WOLFE #105	REVIEWED BY	ASSIGNED TO/BADGE	ATTENTION TO
--	-------------	-------------------	--------------

NARRATIVE REPORT
WITNESS STATEMENT

01	DATE 022802	DAY THU	SHIFT 09	PLAT 89	BADGE 1 165	BADGE 2 06	INCIDENT STATUS <input type="checkbox"/> CLR ARREST <input type="checkbox"/> UNF <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> INACT	PRIM CLASS 	YEAR 02	INCIDENT # 6347
----	----------------	------------	-------------	------------	----------------	---------------	---	----------------	------------	--------------------

02 Statement of: Pamela McDonald Home Phone:
03 Address: 500 W. Big Beaver Rd. Business Phone: 524-3477
04 City: Troy State: mi Zip: 48084

06 I Pamela McDonald, entered Rite Aid on
07 1981 W. South Blvd 2-28-02 at about
08 6:10 pm. I picked out a 4 pack of
09 Seagram's Wild Fuzzy Navel Flavored Cooler.
10 and took it to the register closest
11 to the door. A white male with black
12 hair cashed me out. The Cashier
13 did not ask me for any I.D. or my age.

28 Taken By: *Woyce* (SIGNATURE)
X: Pamela McDonald (SIGNATURE)

29 Place: *Station*
INVESTIGATING OFFICER(S)
Date: 2-28-02 Time: 2030
REVIEWED BY | ASSIGNED TO / BADGE | ATTENTION TO

Uniform Law Citation IN 704200 (Involved)

US DOT # Incident No. 6347 Dept. No. 789

The People of: the State of Michigan
 Township City Village County

OF: TROY

THE UNDERSIGNED Month Day Year At approximately A.M. P.M. Date Month Day Year
 SAYS THAT ON: 2 28 02 6:10 XDM Birth 4 29 70

State Driver's License Number Social Security No.
 MI P 100 847 255 328

Race Sex Height Weight Hair Eyes Occupation/Employer
 W M

Name (First, Middle, Last) VIRGILIUS FLAVIUS POP
 Street 3071 GREENWOOD ST
 City ROCHASTER HILLS State MI Zip Code 48309

Vehicle Plate No. Year State Vehicle Description (Year, Make, Color) Type

THE PERSON NAMED ABOVE, in violation of Local Ordinance State Law Administrative Rule
 UPON RITE AID
 AT OR NEAR 1981 W. S. BLVD
 WITHIN CITY VILLAGE TOWNSHIP OF TROY
 COUNTY OF OAKLAND DID THE FOLLOWING:

Type	MCL Cite/PACC Code/Ordinance	Description (include any bond amount collected on each charge)	Charge No.
<input checked="" type="checkbox"/> Misd	9.77.3	FURNISH ALCOHOL TO MINOR	1
<input type="checkbox"/> Fel			
<input type="checkbox"/> Wam			
<input type="checkbox"/> Wav			
<input type="checkbox"/> C/I			
<input type="checkbox"/> Fug			
<input type="checkbox"/> Authz pend.			

TO THE COURT: Do not arraign on a felony charge until an authorized complaint is filed.

Offense Code(s)
 1 2 3

Key for Type C/I = Civil Infraction Misd = Misdemeanor Fel = Felony Wam = Warning Fug = Fugitive
 Wav = Violation for Which Fines/Costs May be Waived Authorization pend. = Authorization pending

Remarks 810-416-1702

1 yr 3 months

CHECK IF APPROPRIATE Damage to Property Local Court Bond \$
 Vehicle Impounded Injury License Posted in Lieu of Bond
 Traffic Crash Death Appearance Certificate
 Person in Active Military Service Yes No None

SEE DATE BELOW SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS
 2 28 02

In the 52-4 DISTRICT Court of OAKLAND COUNTY
 Court Address & Phone Number
 520 W. BIG BEAVER RD., TROY, MICHIGAN 48084
 PHONE: (248) 528-0400

I served a copy of the civil infraction complaint upon the defendant (or owner/occupant by posting if applicable).
 I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.

Complainant's Signature and receipt if applicable
 WOLFE / BRABB 2 28 02

Officer's Name (printed) WOLFE / BRABB Officer's ID No. 105-106

Agency ORI MI-6378400 Agency Name TROY POLICE DEPARTMENT

UC-01a (rev. 11/95) Court Copy 1

Ticket No. 624961
 Name

Case No.

PRESS - YOU ARE MAKING FIVE COPIES
 ORDER BY FORM NO. M76 (Revised 11/95)
 Doubleday Bros. & Co., Kalamazoo, MI (616) 381-1040, (800) 632-2259



LIQUOR CONTROL COMMISSION (LCC)
 7150 Harris Drive
 P.O. Box 30005
 Lansing, Michigan 48909-7505
 Phone (517) 322-1390 ~ FAX (517) 322-6347

VIOLATION REPORT

(Authorized by P.A.58 of 1998)

Officers Please Obtain This Information From The Licensee

License No. SDM 78430-2001 Business ID: 132003 File # _____

THIS INFORMATION NOT AVAILABLE ON LICENSE UNTIL 7/99

1. Name of Licensee Rite Aid of Michigan, Inc. 2. Doing Business As Rite Aid #2731
3. Mailing Address (street, city, zip code) 1981 W. South Blvd., Troy, MI 48098
4. Township _____ 5. County Oakland
6. Type of License(s) & Permit(s) SDM
7. Date of Violation: Thursday 2/28/02 6:10 AM or PM
 (DAY) (DATE) (HOUR)
8. Violation Type: XX Minor
 _____ Intoxicated Person _____ After hours sales/consumption _____ Gambling
 _____ Fighting (must be inside licensed premises) _____ Controlled Substances
 _____ Failure to Cooperate _____ Prohibited Conduct OTHER: _____

if MINOR: Birth date 3/2/82 Was this a DECOY? Yes / No If no, you MUST answer below:

IF above minor violation was not a decoy describe Enforcement Action Taken: _____

COPY OF APPEARANCE TICKET MUST BE ATTACHED

9. Submit Report Below or Indicate Attached Report # 02-6347

Officer Signature [Signature] Name and Title (print) Police Officer R. Bragg

Officer Signature [Signature] Name and Title (print) Police Officer Wolfe

Department Name Troy Police Department Phone # 248-524-3477
 LC-600 Rev. 4/99 4880-2362

1. Name Pamela McDonald Address 500 W. Big Beaver, Troy, MI 48084

Will testify to: Student Enforcement Aide

2. Name Virgilius Flavius Pop Address 3071 Greenwood St., Rochester Hills, MI

Will testify to: Sold alcoholic beverage to decoy

3. Name Frances Lee McMillen Address 850 Hartland Dr., Troy, MI 48083

Will testify to: Register Supervisor

4. Name Officers Bragg & Wolfe Address 500 W. Big Beaver, Troy, MI 48084

Will testify to: Issuing Officers

5. Name _____ Address _____

Will testify to: _____

EVIDENCE

Location Held: 4 Pkg. Seagrams Wine Collers

1 Receipt

Placed into Property - TAg #116762



STATE OF MICHIGAN
 LIQUOR CONTROL COMMISSION
 DEPARTMENT OF CONSUMER & INDUSTRY SERVICES
 KATHLEEN M. WILBUR, DIRECTOR

JOHN ENGLER
 GOVERNOR

DAN GUSTAFSON
 CHAIRPERSON

July 18, 2002

RITE AID OF MICHIGAN, INC.
 D/B/A RITE AID #2731
 1981 W SOUTH
 TROY, MI 48098

REC'D 7/22/02
 Date

#500. 7/17/02

RE: Complaint No. 2-68497

Dear Licensee:

Enclosed is a copy of the Commissioner's Order issued as the result of the above Complaint.

If you elect to pay the fine, a bank or postal money order, certified check, or authorized credit card payable to the STATE OF MICHIGAN must be received in this office no later than August 19, 2002 as indicated on your Invoice No. 79698. Failure to submit the fine will result in confiscation of your license for the alternative penalty.

If there are any questions regarding this Order, please contact Hearings and Appeals at (517) 322-1390. Our office hours are from 8:00 a.m. to 5:00 p.m.

Sincerely,

MICHIGAN LIQUOR CONTROL COMMISSION

Susan K. Conklin

Susan K. Conklin, Supervisor
 Hearings and Appeals

SKC:wls

Enclosures

cc: Atty. John Doyle
 Home Office
 ✓ Troy PD

STATE OF MICHIGAN
DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES
LIQUOR CONTROL COMMISSION

IN RE: RITE AID OF MICHIGAN, INC.
D/B/A RITE AID #2731
1981 W. SOUTH
TROY, MI 48098

HEARING: JUNE 3, 2002
PLACE: FARMINGTON
COMPLAINT NO: 2-68497
BUSINESS ID NO. 132003
SDM

CHARGES - FEBRUARY 28, 2002

- (1) Sold or furnished alcoholic liquor to Aide Pamela McDonald, date of birth March 2, 1982, who was less than twenty-one (21) years old, contrary to Const 1963, art 4, § 40 and contrary to Section 801(2) and/or Section 701(1) of the Michigan Liquor Control Code, MCL 436.1801(2) and/or MCL 436.1701(1).

NEGOTIATED SETTLEMENT

This matter comes before the Commission as a proposed negotiated settlement, the state being represented by J. Courtney Smith, Assistant Attorney General, and the Licensed Corporation being represented by Attorney John Doyle, who is also an Officer of the Licensed Corporation. Pursuant to Section 903 of the Michigan Liquor Control Code, MCL 436.1903, and Rule 436.1909 of the Michigan Liquor Control Commission (MLCC), the parties stipulated and agreed that:

- (1) the Licensed Corporation would acknowledge responsibility to the charge in the Complaint;

- (2) the Administrative Law Judge will enter the Violation Report of the case and attachments thereto into the record as substantive evidence without objection and will further

take notice of the prior record of this Licensed Corporation since being licensed by the MLCC at the above location under current ownership;

(3) the Licensed Corporation would pay a maximum fine of \$500, with no suspension or revocation as a penalty;

(4) there would be no appeal of this decision to the Appeal Board or to any court of law, and if not approved, the hearing officer would not recuse himself upon a contested hearing of the matter.

ORDER

The Licensed Corporation has been licensed at this location since December 5, 2000, and after reviewing the Licensed Corporation's past record and the Violation Report setting forth the facts of this case, the Administrative Law Judge accepts the terms of the Negotiated Settlement and orders as follows:

- (1) the plea acknowledging the charge in this case be accepted;
- (2) the Violation Report and attachments are accepted as substantive evidence;
- (3) based upon the Violation Report and statements at the hearing, the Administrative Law Judge finds that the Licensed Corporation did violate Section 801(2) of the Michigan Liquor Control Code, MCL 436.1801(2), as alleged in the charge of the Complaint;
- (4) for the charge for which a violation was found, the Licensed Corporation is fined \$500;
- (5) a suspension of 25 continuous days be imposed if the total fine of \$500 is not paid, with this suspension to be served consecutively and not concurrently with any other suspensions ordered by the MLCC for the Licensed Corporation;

(6) this Negotiated Settlement is a full and final disposition of the matter before the MLCC, recognizing that as to the Complaint, there is no further right of administrative or judicial appeal, either to the MLCC or a court of law and that there are no promises, stipulations, understandings or agreements other than those stated in the record, and this Order represents the final agreed settlement.

MICHIGAN LIQUOR CONTROL COMMISSION

Dennis Flesland kw
Dennis Flesland, Administrative Law Judge

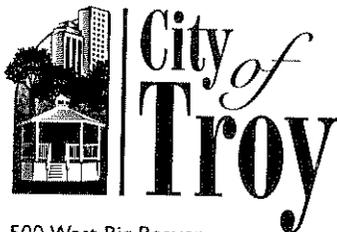
Dated: July 17, 2002

J. Courtney Smith
Assistant Attorney General
24155 Drake Road
Farmington, MI 48335

John J. Doyle
Attorney at Law
2400 Science Parkway
Okemos, MI 48864

TRUE COPY

DF: 2-68497



500 West Big Beaver
Troy, Michigan 48084
Fax: (248) 524-0851
www.ci.troy.mi.us

February 7, 2003

Area code (248)

Assessing
524-3311

Bldg. Inspections
524-3344

Bldg. Operations
524-3368

City Clerk
524-3316

City Manager
524-3330

Community Affairs
524-1147

Engineering
524-3383

Finance
524-3411

Fire-Administration
524-3419

Human Resources
524-3339

Information Technology
619-7279

Law
524-3320

Library
524-3545

Parks & Recreation
524-3484

Planning
524-3364

Police-Administration
524-3443

Public Works
524-3370

Purchasing
524-3338

Real Estate & Development
524-3498

Treasurer
524-3334

General Information
524-3300

Rite Aid Discount Pharmacy #2731
1981 W South Blvd
Troy, Michigan 48083

Re: Liquor License: Rite Aid Discount Pharmacy #2731
1981 W South Blvd
Troy, Michigan 48083

A Public Hearing will be held by and before the Council of the City of Troy at City Hall, 500 W Big Beaver, Troy, Michigan on Wednesday, February 26, 2003 at 7:30 PM, or as soon thereafter as the agenda will permit, to determine whether the City Council should recommend to the Michigan Liquor Control Commission, the revocation of licenses allowed for the sale and/or consumption of alcoholic beverage, for the following reasons:

License Type: SDM (78430-2002)
Violation Name: SALE TO MINOR (COMPLIANCE TEST)
Violation Date(s): February 28, 2002

You will be given an opportunity to be heard and present evidence at the public hearing and legal counsel may represent you. If you have questions regarding the procedure or the facts and circumstances surrounding your violation(s), you may contact the City Attorney's office at 248-524-3320.

Sincerely,

Barbara A. Holmes, CMC
Deputy City Clerk

C: John Doyle
Attorney at Law
2400 Science Parkway
Okemos, Michigan 48864

CERTIFIED MAIL



7000 0520 0020 0628 8404
7000 0520 0020 0628 8404

**U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)**

Postage		\$	Postmark Here
Certified Fee			
Return Receipt Fee (Endorsement Required)			
Restricted Delivery Fee (Endorsement Required)			
Total Postage & Fees		\$	
Re John Doyle			
Attorney at Law			
Str 2400 Science Parkway			
Okemos, Michigan 48864			
City RA 2731			
PS Instructions			

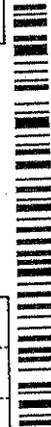
way
48864



500 West Big Beaver
Troy, Michigan 48084



500 West Big Beaver
Troy, Michigan 48084



7000 0520 0020 0628 8473
7000 0520 0020 0628 8473

**U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)**

Postage		\$	Postmark Here
Certified Fee			
Return Receipt Fee (Endorsement Required)			
Restricted Delivery Fee (Endorsement Required)			
Total Postage & Fees		\$	
Re Rite Aid Discount Pharm			
#2731			
Str Rite Aid of Michigan, Inc			
1981 W South Blvd			
City Troy, Michigan 48083			
PS Instructions			

armacy #2731

7-Eleven
1650 Crooks
Troy MI 48084
SDD (18175-2002) SDM (14683-2002)
Sale to Minor (Compliance Test)

City Council Hearings for Liquor Violations

- X Current History file
- X Copy of original incident report
- X Copy of MLCC violation report
- X Copy of MLCC hearing disposition
- X Disposition of City Summons to server/seller

7-11

1650 Crooks

LCC Liquor Licensee History

Business name: **7-Eleven**
 Address: 1650 Crooks (248) 362-4390
 Licensee: Southland Corporation & Noor Enterprises, Inc.
 License type: **SDD (18175-2002) SDM (14683-2002)**
 Permits: Sunday Sales
 Comments:

Date	Troy Incident #	Type	Disposition	Date
12/22/80	80-30020	Sale to Minor	Fined \$150.	6/3/82
4/17/81	81-8857	Sale to Minor	Dismissed	6/3/82
9/26/81	81-23388	Sale to Minor	Fined \$150.	6/3/82
2/26/83	83-4346	Sale after hours	Taken under advisement 1/25/84	
11/24/85	85-34735	Sale to intoxicated person	Fined \$300. 3 Day Susp.	6/6/86
10/23/87	87-33797	Sale to Minor (Compliance Insp.)	Fined \$300	12/15/88
05/13/98		David & Karen Drapinski dropped as Co-Licensees.		
10/23/98		Req to add Teresa Higginbotham as co-licensee		
02/03/99		Southland Corp terminates agreement with Teresa Higginbotham before L. A. B. appearance.		
02/24/99	99-07397	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
05/13/99	99-17668	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/23/99	99-23650	Compliance Test	PASSED	
07/29/99	99-28831	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
09/10/99	99-34863	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
10/27/99	none	Compliance Test	PASSED	
11/24/99	99-45008	Liquor Inspection (Road Patrol)	NO VIOLATIONS	

05/01/00		Council approves add co-licensee Ahmad Raza		
07/25/00	none	Compliance Test	PASSED	
11/15/00	00-42353	Compliance Test	PASSED	

03/12/01	MLCC	Drops Ahmad Raza, adds Noor Enterprises, Inc.		
04/24/01		Compliance Test	PASSED	
08/14/01	01-29101	Compliance Test	PASSED	
09/25/01	01-34482	Compliance Test	PASSED	
11/06/01	01-39642	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
01/05/02	02-00487	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
02/28/02	02-06373	Compliance Test	PASSED	
03/01/02	02-06430	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
04/22/02	02-?????	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/17/02	02-19115	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/25/02	02-20247	Sale to Minor (Compliance Test)	Fined \$500	9/17/02
08/29/02	02-28512	Liquor Inspection (Road Patrol-Owczarzak)	NO VIOLATIONS	
10/16/02	02-34087	Compliance Test	PASSED	
12/18/02	02-40811	Liquor Inspection (Road Patrol-Beekman)	NO VIOLATIONS	

TROY POLICE DEPARTMENT

50 W. Big Beaver - Troy, MI 48084-5285
ORI # M1637B400

INCIDENT REPORT

SUPP
PAGE 1 OF 1

01	DATE 062502 TUE	DAY	SHIFT 09	PLATOON 99	BADGE 1 070	BADGE 2 006	UCR STATUS E10 <input type="checkbox"/> DEATH OF OFFENDER E11 <input type="checkbox"/> PROSECUTION DECLINED	E12 <input type="checkbox"/> EXTRADITION DECLINED E13 <input type="checkbox"/> REFUSED TO COOPERATE E14 <input type="checkbox"/> JUVENILE, NO CUSTODY	YEAR 02	INCIDENT NUMBER 20247	
02	RECEIVED 1745	DISPATCHED	ARRIVED	COMPLETED	DATE(S) OCCURRED 062502	TIMES(S) OCCURRED 1745	ASSIGNED HOUR / DAY 17.1 T.V.				
03	LOCATION / ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER) 1.630 CROOKS				LOCATION 2 (INTERSECTING STREET) MAPLE RD						
04	CITY TROY	STATE MI	ZIP 48084	CODE	BUSINESS NAME 7-11	BUSINESS PHONE 248 362-4391					
05	BUSINESS COMMENTS / ESTABLISHMENT DESCRIPTION CONVENIENCE STORE				ESTAB CODE 4200	ORIGIN <input type="checkbox"/> PHONE <input type="checkbox"/> PERSON <input type="checkbox"/> #11 <input type="checkbox"/> FOP <input type="checkbox"/> PERSON <input type="checkbox"/> MDT	HOW ACTIVATED <input type="checkbox"/> FOP <input type="checkbox"/> PERSON <input type="checkbox"/> MDT <input checked="" type="checkbox"/> DISP <input type="checkbox"/> OTHER	PATROL 07	GEOGRAPHIC		
06	NATURE OF OFFENSE #1 FURNISH ALCOHOL TO A MINOR		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL DRUGS <input checked="" type="checkbox"/> COMP <input type="checkbox"/>	BIAS	WEAPON	# PREM	ACTIVITY	ACTIVITY TYPES (Maximum 3 Per Offense)	
07	NATURE OF OFFENSE #2		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS	WEAPON	# PREM	ACTIVITY	B BUYING / RECEIVING C CULTIVATING / MANUFACTURING / PUBLIC D DISTRIBUTING / SELLING E EXPLOITING CHILDREN O OPERATING / PROMOTING / ASSISTING P POSSESSING / CONCEALING T TRANSPORTING / TRANSMITTING / IMPORT U USING / CONSUMING	
08	NATURE OF OFFENSE #3		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS	WEAPON	# PREM	ACTIVITY		
09	NATURE OF OFFENSE #4		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS	WEAPON	# PREM	ACTIVITY	OFFENSE COMMENTS	

CODES (1) REPT'D BY (2) OWNER (3) VICT (4) PERS INTERV (5) ARREST (6) SUSPECT (7) MISSING (8) WITH (9) SECUR'D BY (C) JUV ARREST (D) DRIVER (P) PASSENGER (S) SUMMONED (R) RESPON:

V 10	CODE 48	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX) GOLDEN, SHAUNA LYNN	RAC / SEX / DOB WF / 0325831	AGE
I 11	ADDRESS 500	DIRECTION, STREET, SUFFIX, QUALIFIER W. BIG BEAVER		CITY TROY	STATE / ZIP MI / 4808
G 12	HOME PHONE	BUSINESS PHONE 524-3431	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D. STUDENT ENFORCEMENT AID
T 13	VICTIM CONNECTED TO OFFENSE <input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04	VICTIM TYPE <input type="checkbox"/> I INDIVIDUAL <input type="checkbox"/> B BUSINESS	F <input type="checkbox"/> FINANCIAL <input type="checkbox"/> R RELIGIOUS	S <input type="checkbox"/> SOCIETY / PUBLIC <input type="checkbox"/> OTHER	P <input type="checkbox"/> POLICE OFFICER
I 14	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY		OUTSIDE FAMILY, BUT KNOWN		WITNESS
M 15	01 SPOUSE 02 C-L SPOUSE 03 PARENT 04 SIBLING	05 CHILD 06 GRANDPARENT 07 GRANDCHILD 08 IN-LAW	09 STEPPARENT 10 STEPCHILD 11 STEPSIBLING 12 OTHER FAMILY	20 ACQUAINTANCE 21 FRIEND 22 NEIGHBOR 23 BABYSITTE (baby)	24 BOY / GIRL FRIEND 25 CHILD OF "BO" ABOVE 26 HOMOSEXUAL REL. 27 EX-SPOUSE

16	CODE 45R01	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX) AHMAD, RAFI	RAC / SEX / DOB WM / 0325683	AGE
A 17	ADDRESS 12217	DIRECTION, STREET, SUFFIX, QUALIFIER ELDORADO		CITY STERLING HEIGHTS	STATE / ZIP MI / 4831
R 18	HOME PHONE 586-268-0872	BUSINESS PHONE	HEIGHT 506	WEIGHT 170	EYES BRN
R 19	STATE MI	DRIVER'S LICENSE # 11A530730	SOC. SEC. # 006239380	DOB 236914	SKIN TONE MED

E 20	PERSON COMMENTS / CLOTHING CASHIER	SUMMONS / CITATION NUMBER(S) 632146							
S 21	ARREST / SUMMONS DESCRIPTION FURNISH ALC. TO A MINOR	ARREST CHARGE 1	ARREST DATE 062502	PLATOON 99	BADGE 1 070	BADGE 2 006	FM MS	DIS	DEPARTMENT ARREST NUMBER
T 22	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER
23	ARREST TYPE <input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST INDICATOR <input type="checkbox"/> MULTIPLE <input type="checkbox"/> COUNT 1 <input type="checkbox"/> N/A	CLEAR INDICATOR <input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST ARMED WITH (ENTER "A" IF AUTO)	01 <input type="checkbox"/> UNARMED 11 <input type="checkbox"/> FIREARM	13 <input type="checkbox"/> RIFLE 14 <input type="checkbox"/> SHOTGUN	20 <input type="checkbox"/> LETHAL CUT INSTRUMENT (e.g. Switchblade Knives, etc.)	ARREST ORIGIN <input type="checkbox"/> FOP <input type="checkbox"/> MDT	

24	CODES E	DESCRIPTION ALCOHOLIC BEVERAGES	PROPERTY TYPE	QUANTITY	YEAR	MAKE MIKE'S	MODEL HARD CRANBERRY			
25	STYLE RED BLK	COLOR(S) TOP / BOTTOM	MONTH YEAR STATE LICENSE	SERIAL / VIN NUMBER / CONDITION / OTHER I.D. # 8.47						
26	STOLEN	DAMAGED	RECOVERED	PROPERTY TAG # 118352	LOCATION PROPERTY PROPERTY ROOM	LEIN / NCR REF #				
27	REC BADGE	REC BADGE 2	LEO	RECOVERY DATE	NOTIFY BADGE	NOTIFY DATE	NOTIFY TIME			
28	COMMENTS - INSURANCE COMPANY / LIEN HOLDER / BANK						SEIZED DRUGS	TYPE	AMOUNT	MEAS
29	INVESTIGATING OFFICER(S): BRAGG / BARTON				REVIEWED BY: WLA# 224	ATTENTION TO:				

TROY POLICE DEPT.

500 W. Big Beaver, Troy, MI 48064

ORI #MI6378400

NARRATIVE REPORT **SUF** **CORR** **DELETE**PAGE 2 OF 3

DATE	DAY	SHIFT	PLAT	BADGE 1	BADGE 2	INCIDENT STATUS	PRIM CLASS	YEAR	INCIDENT #
6/25/02	Tue	09	99	070	006	<input type="checkbox"/> CLR ARREST <input type="checkbox"/> UNF <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> INACT		02	20247

Directed Patrol Unit conducting liquor compliance test sent in student enforcement aid Shauna Lynn Golden 03-25-1983 (19 y/o) to the above location.

Golden selected the listed Mike's Hard Cranberry Lemonade (5.2% alcohol) and went to the register to purchase it. The clerk did not ask for any identification or age and the sale was completed. The Lemonade was later tagged and placed into evidence.

Officers spoke with the clerk that completed the sale, Rafi Ahmad. Ahmad remembered the sale. When asked about the sale and if the Student enforcement aide presented any I.D., he did not have an answer. Ahmad stated that he been been distracted by some of the days earlier events. He stated that he always asked for I.D. but had forgotten just this one time. Golden's identification was taken from her prior to leaving the station. Ahmad was issued a citation for furnishing/sell alcohol to minor. The store was issued a liquor violation, which will be filed with the Liquor Control Commission.

Ahmad stated that he has never had any formal TIPS/TAMS or any alcohol training other than from the store manager.

INVESTIGATING OFFICER(S) C. Barton/R. Bragg <i>B20</i>	REVIEWED BY	ASSIGNED TO/BADGE	ATTENTION TO
--	-------------	-------------------	--------------

NARRATIVE REPORT
WITNESS STATEMENT

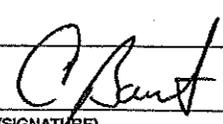
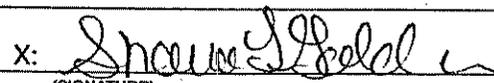
01	DATE 06/25/02	DAY TUE	SHIFT 0955	PLAT 070	BADGE 1 070	BADGE 2 006	INCIDENT STATUS <input type="checkbox"/> CLR ARREST <input type="checkbox"/> UNF <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> INACT	PRIM CLASS 	YEAR 02	INCIDENT # 20247
----	------------------	------------	---------------	-------------	----------------	----------------	---	----------------	------------	---------------------

02 Statement of: Shauna Golden (PLEASE PRINT) Home Phone: (248) 814-83

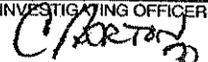
03 Address: 184 Dogwood Business Phone:

04 City: Oakland State: MI Zip: 48363

05 I Shauna Golden entered the 7-11 at
 06 Crooks & maple at approximately 5:45pm. I
 07 walked to the back of the store and
 08 picked up a 6 pack of mikes Cranberry
 09 Lemonade. I approached the man at the
 10 counter with my purchase. He said he didn't
 11 know the price then proceeded to ask
 12 the female clerk next to him for the price
 13 of the item. She told him \$7.99 and he
 14 immediately rang up the item and told me
 15 it ~~was~~ was \$8.47. He didn't ask for any
 16 identification at all. I didn't hear him
 17 when he told me the price so I asked
 18 "How much?" Again he repeated the price
 19 and I gave him my money. He gave me
 20 my change and I asked him for a
 21 bag for my purchase. I took the bag
 22 and walked out the door. Besides not
 23 asking for identification, ~~they~~ he never asked
 24 how old I was or the date of my
 25 birth.

27 Taken By:  (SIGNATURE) x:  (SIGNATURE)

29 Place: 500 W. Big Beaver Date: 6-25-02 Time: 7:46

INVESTIGATING OFFICER(S) 	REVIEWED BY	ASSIGNED TO / BADGE	ATTENTION TO
---	-------------	---------------------	--------------

US DOT # _____ Incident No. 02-20247 Dept. No. _____
 The People of: State of Michigan Local Use/Arrest No. _____ Detect. No. _____
 Township Village County BAC _____
 OF: TROY
 THE UNDERSIGNED Month 6 Day 25 Year 02 At approximately A.M. P.M. Date of Birth 3
 SAYS THAT ON: 545
 State Driver's License Number Mi A530730006239 Social Security No. 3802316
 Race W Sex M Height 506 Weight BL Hair BR Eyes BR Occupation/Employer CASHIER/7-11
 Name (First, Middle, Last) RAF. AHMAD
 Street 12217 ELDORADO
 City STERLING State MI Zip 4831

Vehicle Plate No. _____ Year _____ State _____ Vehicle Description (Year, Make, Color) _____
 THE PERSON NAMED ABOVE, in violation of Local Ordinance State Law Adminis
 UPON 1650 CROOKS
 AT OR NEAR 7-11
 WITHIN CITY VILLAGE TOWNSHIP OF TROY
 COUNTY OF OAKLAND DID THE FC _____

Type	MCL Cite/PACC Code/ Ordinance	Description (include any bond amount collected on each)
<input type="checkbox"/> C/I <input type="checkbox"/> Warn <input type="checkbox"/> Authorization pend.		<u>SALE TO MINOR W/O</u>
<input checked="" type="checkbox"/> Misd <input type="checkbox"/> Fug	<u>9.7713</u>	<u>D.I. BENT INBUKY</u>
<input type="checkbox"/> Fel <input type="checkbox"/> Waiv		
<input type="checkbox"/> C/I <input type="checkbox"/> Warn <input type="checkbox"/> Authorization pend.		
<input type="checkbox"/> Misd <input type="checkbox"/> Fug		
<input type="checkbox"/> Fel <input type="checkbox"/> Waiv		
<input type="checkbox"/> C/I <input type="checkbox"/> Warn <input type="checkbox"/> Authorization pend.		
<input type="checkbox"/> Misd <input type="checkbox"/> Fug		
<input type="checkbox"/> Fel <input type="checkbox"/> Waiv		

TO THE COURT: Do not arraign on a felony charge until an authorized complaint is
 Offense Code(s)
 1 _____ 2 _____ 3 _____
 Key for Type C/I = Civil Infraction Misd = Misdemeanor Fel = Felony Warn = Warning Fu
 Waiv = Violation for Which Fines/Costs May be Waived Authorization pend. = Authorization p
 Remarks _____

CHECK IF APPROPRIATE Damage to Property Local Court Bond \$ _____
 Vehicle Impounded Injury License Posted In Lieu of Bond
 Traffic Crash Death Appearance Certificate
 Person in Active Military Service Yes No None
 SEE DATE BELOW. SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS
 Appearance Date on or before 7-17-02 830AM
 Hearing Date (if applicable) on _____ Contact Cour
 Juvenile Traffic Misd. (Court will Notify) Formal Hearing Required (Court will Notify)

In the 52-4 DISTRICT Court of OAKLAND COUNTY
 Court Address & Phone Number
520 W. BIG BEAVER RD., TROY, MICHIGAN 48034
PHONE: (248) 528-0400

I served a copy of the civil infraction complaint upon the defendant (or owner/occupant by posting if applicable)
 I declare under the penalties of perjury that the statements above are true to the best
 of my information, knowledge, and belief.
 Complainant's Signature (and receipt if applicable) C. Brown R. Seab Month 6 Day 25 Year 02
 Officer's Name (printed) C. Brown R. Seab Officer's ID No. 079046
 Agency ORI MI-6378400 Agency Name TROY POLICE DEPARTMENT
 UC-01a (rev. 11/95) Court Copy 1

PRESS - YOU ARE MAKING FIVE COPIES
 ORDER BY FORM NO. M76 (Revised 11/95)
 FIDLAR DOUBLEDAY KALAMAZOO, MI

Reviewed By: _____

TROY POLICE DEPARTMENT PROPERTY RECORD

TAG 118352

COMPLAINT # 02-20247

FOR PROPERTY SECTION USE ONLY - BIN# _____

EVIDENCE PERSONAL FOUND RECOVERED CONFISCATED LOCKER # _____

CHARGE/INCIDENT TYPE SALE TO MINOR DESCRIPTION 3 PK of MIKE'S HAND CRANBERRY
LEMOJADE

SERIAL # _____ DRUG WEIGHT _____

REPORTING OFFICER Benton / Bragg DATE 6-25-02 TIME _____

DEFENDANT: AHMAD RAFI NMN 3-25-68 W/M
LAST FIRST MIDDLE DOB RACE/SEX

DEFENDANT: _____
LAST FIRST MIDDLE DOB RACE/SEX

DEFENDANT: _____
LAST FIRST MIDDLE DOB RACE/SEX

INSTRUCTIONS TO PROPERTY SECTION: HOLD TIL FINAL DISPO- DESTROY

OWNER: NAME 7800 PHONE _____

ADDRESS _____ CITY _____ ZIP _____

CLAIMED BY: _____ DATE _____

FOR PROPERTY SECTION USE ONLY

ENTERED IN SYSTEM _____

DISPOSITION: AUCTIONED DESTROYED PHOTO LAB OTHER DATE _____



LIQUOR CONTROL COMMISSION (LCC)

7150 Harris Drive

P.O. Box 30005

Lansing, Michigan 48909-7505

Phone (517) 322-1390 ~ FAX (517) 322-6347

VIOLATION REPORT

(Authorized by P.A.58 of 1998)

* Officers Please Obtain This Information From The License *

License No. 18175-200255
14683-2002

Business ID 12499

File #

(THIS INFORMATION NOT AVAILABLE ON LICENSE UNTIL 5/1/99)

1. Name of Licensee 7 - 11 Inc. 2. Doing Business As 7 - 11

3. Mailing Address (street, city, zip code) 1650 Crooks, Troy, MI 48084

4. Township 5. County Oakland

6. Type of License(s) & Permit(s) DSS, SDM Sunday Sales

7. Date of Violation: Tuesday June 25, 2002 5:45 AM or PM
(DAY) (DATE) (HOUR)

8. Violation Type: XXMinor
Intoxicated Person After hours sales/consumption Gambling
Fighting (must be inside licensed premises) Controlled Substances
Failure to Cooperate Prohibited Conduct OTHER:

if MINOR: Birth date 3/25/82 Was this a DECOY ? Yes / No If no, you MUST answer below:

IF above minor violation was not a decoy describe Enforcement Action Taken:

COPY OF APPEARANCE TICKET MUST BE ATTACHED

9. Submit Report Below or Indicate Attached Report # 02-20247

Officer Signature [Signature] Name and Title (print) Barton Police Officer

Officer Signature [Signature] Name and Title (print) Bragg Police Officer

Department Name Troy Police Department Phone # 248-524-3477

WITNESSES

1. Name Shauna Golden Address 500 W. Big Beaver, Troy, MI 48084

Will testify to: purchasing alcohol

2. Name RAfi Ahmad Address 12217 Eldorado, Sterling Hgts., MI 48312

Will testify to: selling alcohol to a minor

3. Name _____ Address _____

Will testify to: _____

4. Name _____ Address _____

Will testify to: _____

5. Name _____ Address _____

Will testify to: _____

EVIDENCE

Location Held: Mike's Hard Cranberry Lemonade (6Pack) held at Troy Police Department



JOHN ENGLER
GOVERNOR

STATE OF MICHIGAN
LIQUOR CONTROL COMMISSION
DEPARTMENT OF CONSUMER & INDUSTRY SERVICES

NOELLE A. CLARK
DIRECTOR

October 25, 2002

7-ELEVEN, INC.
D/B/A 7-ELEVEN
1650 CROOKS
TROY, MI 48084

RE: Complaint No. 2-70215

Dear Licensee:

Enclosed is a copy of the Commissioner's Order issued as the result of the above Complaint.

If you elect to pay the fine, a bank or postal money order, certified check, or authorized credit card payable to the STATE OF MICHIGAN must be received in this office no later than December 2, 2002 as indicated on your Invoice No. 80451. Failure to submit the fine will result in confiscation of your license for the alternative penalty. In any event, costs assessed must be paid, as only fines assessed are alternative to a suspension.

If there are any questions regarding this Order, please contact Hearings and Appeals at (517) 322-1390. Our office hours are from 8:00 a.m. to 5:00 p.m.

Sincerely,

MICHIGAN LIQUOR CONTROL COMMISSION

Susan K. Conklin, Supervisor
Hearings and Appeals

SKC:tmn

Enclosures

cc: Home Office
Elaine Murphy, Attorney
✓ Troy PD

STATE OF MICHIGAN
DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES
LIQUOR CONTROL COMMISSION

IN RE: 7-ELEVEN, INC. & NOOR ENTERPRISES, INC.
D/B/A 7-ELEVEN
1650 CROOKS
TROY, MI 48084

HEARING: SEPTEMBER 17, 2002
PLACE: FARMINGTON
COMPLAINT NO: 2-70215
BUSINESS ID NO. 12499
SDD SDM SS

CHARGES - JUNE 25, 2002

- (1) Sold or furnished alcoholic liquor to decoy Shauna Golden, date of birth March 25, 1983, who was less than twenty-one (21) years old, contrary to Const 1963, art 4, § 40 and contrary to Section 801(2) and/or Section 701(1) of the Michigan Liquor Control Code, MCL 436.1801(2) and/or MCL 436.1701(1).

NEGOTIATED SETTLEMENT

Ahmad Raza, President of the above-named Licensed Franchise, appeared before this Commissioner and was represented by Elaine Murphy, Attorney, who with Charles Donahue, Assistant Attorney General, representing all law enforcement agencies involved in this matter, proposed the following Negotiated Settlement for the Commissioner to consider in Case No. 2-70215, pursuant to Section 903 of the Michigan Liquor Control Code, MCL 436.1903, and Rule 436.1909 of the Michigan Liquor Control Commission (MLCC):

PROPOSED NEGOTIATED SETTLEMENT

- (1) The Licensee will fully acknowledge the one charge as cited;
- (2) The Commissioner will enter the Violation Report of this case and attachments

thereto into the record as substantive evidence without objection; the Commissioner further will take notice of the prior record of this Licensee, since being licensed by the Michigan Liquor Control Commission at the above-named location under the current ownership;

(3) The Licensee will agree to the sanction of a fine of \$500 for the acknowledged charge;

(4) Both parties hereto will agree that there shall be no appeals on this matter to the Appeal Board of the Commission or any court of law;

(5) The parties hereto further agree that the Licensee will pay costs in the amount of \$14.00 for witness fees involved in connection with the hearing.

ORDER

In determining whether to approve the Negotiated Settlement as proposed above, the Commissioner considered the statement of support for the aforementioned settlement by Officer Russell Bragg on behalf of the Troy Police Department.

In determining whether to approve the Negotiated Settlement as proposed above, the Commissioner considered the Licensee's total record, which shows seven (7) previous violations since being licensed on August 30, 1978, at the above-named location under the current ownership.

In determining whether to approve the Negotiated Settlement as proposed above, the Commissioner further took into consideration for mitigative circumstances statements made by Attorney Murphy.

In consideration of the aforementioned circumstances and statements, the Commissioner hereby accepts the terms and conditions of the proposed Negotiated

Settlement and Orders as follows:

The Commissioner accepts the Licensee's plea of acknowledgment to the one charge in Case No. 2-70215.

The Commissioner hereby accepts the Violation Report of this case and attachments thereto as substantive evidence without objection, further, the Commissioner hereby accepts a true copy of this Licensee's record since being licensed by the Michigan Liquor Control Commission at the above-named location under the current ownership.

Based upon the aforementioned plea by the Licensee and a review of the Violation Report and attachments thereto, the Commissioner finds that the Licensee in Case No. 2-70215 did violate MCL 436.1801(2) as cited in the one charge of the Complaint in this matter.

The Commissioner further finds that the employee of said Licensee in this case did not demand, nor was shown, proper proof of age and did not make a diligent inquiry to determine the proper true age of the purchaser.

As penalty, the Commissioner Orders a fine of \$500 for the acknowledged charge and, in addition, the Commissioner Orders that a suspension of twenty-five (25) continuous days be imposed if the total fine of \$500 is not paid with this suspension, to be served consecutively and not concurrently with any other suspensions Ordered by the Michigan Liquor Control Commission for this Licensed Licensee;

Said Licensee agrees this Negotiated Settlement was a full and final disposition of this matter before the Michigan Liquor Control Commission recognizing that as to the Complaint, there is no further right of administrative or judicial appeal, either to the Michigan Liquor Control Commission or a court of law, and also agrees that the plea in this case has been entered voluntarily and with the full understanding of all consequences, and furthermore,

all parties hereto agree that there are no promises, stipulations, understandings or agreements other than those stated as part of the official record herein, and this document represents the final agreed settlement.

The Commissioner also Orders the Licensed Corporation to pay total costs of \$14.00 for witness fees involved in connection with the hearing.

MICHIGAN LIQUOR CONTROL COMMISSION



Ena Weathers, Commissioner

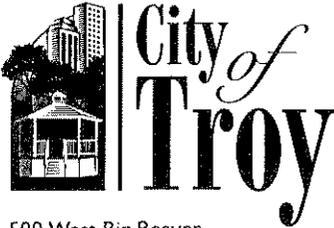
Dated: October 17, 2002

Charles Donahue
Assistant Attorney General
24155 Drake Road
Farmington, MI 48335

Elaine Murphy
Attorney
25800 Northwestern Hwy., #950
Southfield, MI 48075

EW: 2-70215

TRUE COPY



500 West Big Beaver
Troy, Michigan 48084
Fax: (248) 524-0851
www.ci.troy.mi.us

Area code (248)

Assessing
524-3311

Bldg. Inspections
524-3344

Bldg. Operations
524-3368

City Clerk
524-3316

City Manager
524-3330

Community Affairs
524-1147

Engineering
524-3383

Finance
524-3411

Fire-Administration
524-3419

Human Resources
524-3339

Information Technology
619-7279

Law
524-3320

Library
524-3545

Parks & Recreation
524-3484

Planning
524-3364

Police-Administration
524-3443

Public Works
524-3370

Purchasing
524-3338

Real Estate & Development
524-3498

Treasurer
524-3334

General Information
524-3300

February 7, 2003

7-Eleven
1650 Crooks
Troy, Michigan 48084

Re: Liquor License: 7-Eleven
1650 Crooks
Troy, Michigan 48084

A Public Hearing will be held by and before the Council of the City of Troy at City Hall, 500 W Big Beaver, Troy, Michigan on Wednesday, February 26, 2003 at 7:30 PM, or as soon thereafter as the agenda will permit, to determine whether the City Council should recommend to the Michigan Liquor Control Commission, the revocation of licenses allowed for the sale and/or consumption of alcoholic beverage, for the following reasons:

License Type: SDD (18175-2002) & SDM (14683-2002)
Violation Name: SALE TO MINOR (COMPLIANCE TEST)
Violation Date(s): June 25, 2002

You will be given an opportunity to be heard and present evidence at the public hearing and legal counsel may represent you. If you have questions regarding the procedure or the facts and circumstances surrounding your violation(s), you may contact the City Attorney's office at 248-524-3320.

Sincerely,

Barbara A. Holmes, CMC
Deputy City Clerk

C: Elaine Murphy
Attorney at Law
25800 Northwestern Hwy., #950
Southfield, Michigan 48075

Hwy., #950
48075

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)



7000 0520 0020 0628 8411
7000 0520 0020 0628 8411



Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark
Here

Elaine Murphy
Attorney at Law
25800 Northwestern Hwy., #950
Southfield, Michigan 48075
7-11 1650 Crooks

(mailer)

PS Form 3800, February 2000 See Reverse for Instructions



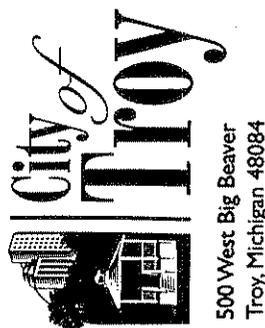
7000 0520 0020 0628 8480
7000 0520 0020 0628 8480

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

Postmark
Here

7-Eleven
Southland Corporation & Noor
Enterprises, Inc
1650 Crooks
Troy, Michigan 48084

PS Form 3800, February 2000 See Reverse for Instructions



7-Eleven
5020 John R
Troy MI 48098
SDM (13474-2002)
Sale to Minor (Compliance Test)

City Council Hearings for Liquor Violations

- X Current History file
- X Copy of original incident report
- X Copy of MLCC violation report
- X Copy of MLCC hearing disposition (pending)
- X Disposition of City Summons to server/seller

7-11, Inc.

5020 John R

45 days for final MLCC
disposition

LCC

Liquor Licensee History

Business name: **7-Eleven**

Address: 5020 John R.

Licensee: Southland Corporation & Mizan Rahman.

License type: **SDM (13474-2002)**

Permits: none

Comments:

Date	Troy Incident #	Type	Disposition	Date
8/14/82	82-19585	Sale to minor Compliance Insp	Fined \$200	11/8/83
5/27/88	88-15777	Sale to minor Compliance Insp	Fined \$300	10-25-88
12/10/88	88-39042	Sale to minor Compliance Insp	Fined \$500	12/26/89
10/26/89	89-33816	Sale to minor Compliance Insp	Fined \$500	5/17/90
7/30/90		License suspended 14 days effective (3rd violation in 24 months)		7/23/90
2/22/91	91-5010	Sale to minor	Fined \$200	9/4/91
5/23/91	91-14242	Sale to minor Compliance Insp	Fined \$1000	11/18/91
10/14/91		David & Betty Stichler added as Co-Licensees		
9/29/95	95-35602	Sale to minor (Compliance Insp)	Fined \$300.	1/16/96
3/18/96	95-35602	Council hearing		Retrn all over 1yr, Retrn yearly.
2/4/98		Betty & David Stichler dropped as co-licensees		
6/15/98		Anthony Maciejewski Added as co-licensee		
08/21/98	MLCC	Sale to Minor (Compliance Insp.)		Pending

10/28/98	98-43640	Sale to Minor (Compliance Insp.)	\$700 fine
03/22/98		City Council resolves TIPS/TAM training for all emps with annual re-certification to police dept.	
06/01/99	99-20337	Liquor Inspection (Road Patrol)	NO VIOLATIONS
07/13/99	99-26567	Liquor Inspection (Road Patrol)	NO VIOLATIONS
06/22/99	99-23592	Compliance Test	PASSED
08/11/99		Reminder letter sent for proof, deadline 09/01/99	
09/01/99		Proof received TIPS trained on 06/01/99	
10/27/99	NONE	Compliance Test	PASSED
11/17/99	99-44050	Liquor Inspection (Road Patrol)	NO VIOLATIONS
02/04/00		A.R.M. added as co-licensee, Anthony R. Maciejewski dropped as co-licensee	
03/10/00	00-08360	Sale to Minors (FOP – DPU)	\$3000 fine, 7 day suspension Drop ARM Inc as co-licensee 09/19/00
07/25/00	none	Compliance Test	PASSED
11/01/00	MLCC	MLCC approves ARM Inc. dropped as co-licensee w/o investigation	
11/15/00	00-42360	Compliance Test	PASSED

02/19/01		Council approves adding Mizan Rahman as Co-Licensee (see below)	
02/21/01	MLCC	SDM suspended for 10 days effective 03/12/01 for having "3 or more separate violations in a 24 month period from November 1998 thru September 2000"	
02/28/01		Council Show Cause orders TIPS/TAM training for ALL employees with proof to PD within 60 days proof rec'd 04/27/01	
04/13/01	MLCC	MLCC denies adding Mizan Rahman due to prior Domestic conviction in FL	
04/24/01	NONE	Compliance Test	PASSED
04/27/01		Proof received TIPS	
05/21/01		Reminder letter sent for proof of TIPS	
06/20/01		MLCC rescinds RAHMAN denial and approves him as co-licensee	
.....			
08/14/01	01-29128	Compliance Test	PASSED

09/25/01	01-34452	Sale to Minor (Compliance Test)	pending	
10/31/01	01-39274	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
01/03/02	02-00238	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
02/27/02	Council	Public Hearings for 2001 Violation(s)-Resolution requiring TIPS/TAM training for all employees who sell alcohol with proof to the PD within 60 days		
02/28/02	02-06384	Compliance Test	PASSED	
03/06/02	02-06993	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
04/18/02		Proof Received		
04/19/02	02-12007	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/25/02	02-20178	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/25/02	02-	Compliance Test	PASSED	
08/25/02	02-28005	Liquor Inspection (Road Patrol-Fitzpatrick)	NO VIOLATIONS	
10/16/02	02-34052	Sale to Minor (Compliance test)	\$600 fine	01/09/03
11/23/02	02-38067	Liquor Inspection (Road Patrol-Piper)	NO VIOLATIONS	
01/06/03	03-589	Liquor Inspection (Road Patrol-Piper)	NO VIOLATIONS	

TROY POLICE DEPARTMENT

INCIDENT REPORT

500 W. Big Beaver - Troy, MI 48084-5285
ORI # MIG378400

01	DATE	DAY	SHIFT	PLATOON	BADGE 1	BADGE 2	UCR STATUS	E12 <input type="checkbox"/> EXTRACTION DECLINED	YEAR	INCIDENT NUMBER	
01	10/16/02	WED	09	99	006	062	E10 <input type="checkbox"/> DEATH OF OFFENDER E11 <input type="checkbox"/> PROSECUTION DECLINED	E13 <input type="checkbox"/> REFUSED TO COOPERATE E14 <input type="checkbox"/> JUVENILE, NO CUSTODY	02	34052	
02	RECEIVED	DISPATCHED	ARRIVED	COMPLETED	DATE(S) OCCURRED	TIMES(S) OCCURRED	ASSIGNED HOUR / DAY				
02	1845	1845	1845	2000	101602	1845	1845 2000 18WED				
03	LOCATION / ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER)				LOCATION 2 (INTERSECTING STREET)						
03	5020 JOHN R.										
04	CITY	STATE	ZIP	CODE	BUSINESS NAME	BUSINESS PHONE					
04	Troy	MI	48098	6	7-11	68528-1235					
05	BUSINESS COMMENTS / ESTABLISHMENT DESCRIPTION				ESTAB CODE	ORIGIN	HOW ACTIVATED	PATROL		DEOGRAPHIC	
05	Grocery Store				4200	<input type="checkbox"/> PHONE <input type="checkbox"/> PERSON <input type="checkbox"/> 911 <input type="checkbox"/> FOP <input type="checkbox"/> OTHER <input type="checkbox"/> MDT	<input type="checkbox"/> FOP <input type="checkbox"/> PERSON <input type="checkbox"/> MDT <input type="checkbox"/> DISP <input type="checkbox"/> OTHER	05			
06	NATURE OF OFFENSE #1		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/>	BIAS <input type="checkbox"/>	WEAPON <input type="checkbox"/>	# PREM	ACTIVITY	ACTIVITY TYPES (Maximum 3 Per Offense)	
06	L.C.C. VIOLATION				DRUGS <input type="checkbox"/>					B BUYING / RECEIVING C CULTIVATING / MANUFACTURING / PUBLISHING D DISTRIBUTING / SELLING E EXPLOITING CHILDREN O OPERATING / PROMOTING / ASSISTING P POSSESSING / CONCEALING T TRANSPORTING / TRANSMITTING / IMPORTING U USING / CONSUMING	
07	NATURE OF OFFENSE #2		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/>	BIAS <input type="checkbox"/>	WEAPON <input type="checkbox"/>	# PREM	ACTIVITY		
07					DRUGS <input type="checkbox"/>						
08	NATURE OF OFFENSE #3		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/>	BIAS <input type="checkbox"/>	WEAPON <input type="checkbox"/>	# PREM	ACTIVITY		
08					DRUGS <input type="checkbox"/>						
09	NATURE OF OFFENSE #4		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/>	BIAS <input type="checkbox"/>	WEAPON <input type="checkbox"/>	# PREM	ACTIVITY	OFFENSE COMMENTS	
09					DRUGS <input type="checkbox"/>						

CODES (1) REPT'D BY (2) OWNER (3) VICT (4) PERS INTERV (5) ARREST (6) SUSPECT (7) MISSING (8) WITH (9) SECURED BY (0) JUV ARREST (1) DRIVER (2) PASSENGER (3) SUMMONED (4) RESPONSIBLE

V 10	CODE	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX)				RAC	SEX	DOB	AGE
V 10	14		SPEITLER BRANDON, SCOTT				WM	M	05/16/84	18
I 11	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)				CITY	STATE	ZIP		
I 11	500	W. BIG BEAVER				TROY	MI			
G 12	HOME PHONE	BUSINESS PHONE (248)	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D.					
G 12		504-3477			STUDENT ENFORCEMENT (A)					

T 13	VICTIM CONNECTED TO OFFENSE	VICTIM TYPE	F <input type="checkbox"/> FINANCIAL	S <input type="checkbox"/> SOCIETY / PUBLIC	VICTIM INJURY	M <input type="checkbox"/> MINOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES	T <input type="checkbox"/> LOSS OF TEETH	F <input type="checkbox"/> FATAL	
T 13	<input type="checkbox"/> 01 <input type="checkbox"/> 03	<input type="checkbox"/> 1 INDIVIDUAL <input type="checkbox"/> 8 BUSINESS	<input type="checkbox"/> G GOVERNMENT <input type="checkbox"/> R RELIGIOUS	<input type="checkbox"/> O OTHER <input type="checkbox"/> P POLICE OFFICER	<input type="checkbox"/> N NONE <input type="checkbox"/> 9 BROKEN BONE	<input type="checkbox"/> M MINOR INJURY <input type="checkbox"/> O MAJOR INJURY	<input type="checkbox"/> I POSS. INT. INJURIES <input type="checkbox"/> L SEVERE LACERATION	<input type="checkbox"/> T LOSS OF TEETH <input type="checkbox"/> U UNCONSCIOUSNESS	<input type="checkbox"/> F FATAL	
I 14	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY				OUTSIDE FAMILY, BUT KNOWN			NOT KNOWN	REL / OFF #	FELONIOUS ASSAULT CIRCUMSTANCES
I 14	01 SPOUSE	05 CHILD	06 STEPPARENT	20 ACQUAINTANCE	24 BOY / GIRL FRIEND	28 EMPLOYEE	98 STRANGER	1		
M 15	02 C-L SPOUSE	08 GRANDPARENT	10 STEPCHILD	21 FRIEND	25 CHILD OF "BG" ABOVE	29 EMPLOYER	99 UNKNOWN	1		
M 15	03 PARENT	07 GRANDCHILD	11 STEPSIBLING	22 NEIGHBOR	26 HOMOSEXUAL REL.	30 OTHERWISE KNOWN	REL / OFF #			
M 15	04 SIBLING	08 IN-LAW	12 OTHER FAMILY	23 BABYSITTEE (baby)	27 EX-SPOUSE	31 VICTIM WAS OFFENDER	1			

A 17	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)				RAC	SEX	DOB	AGE
A 17	S	01	SHAMEON BEAZAR, DANHA				WM	M	07/01/54	48
A 17	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)				CITY	STATE	ZIP		
A 17	42040	RYAN RD				STEPHENS HEIGHTS	MI	48314		
R 18	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE	BUILD	SKIN TONE		
R 18	(586) 323-5039	(248) 508-1235								
R 19	STATE	DRIVER'S LICENSE #	BOC. SEC. #	SID #	FBI #					
R 19	MI	S.550.49.3.1.35.52.1								

E 20	PERSON COMMENTS / CLOTHING	SUMMONS / CITATION NUMBER(S)
E 20	CLERK AT 7-11	632126

S 21	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	PM	DIS	DEPARTMENT ARREST NUMBER
S 21									
T 22	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	PM	DIS	AFS NUMBER
T 22									

23	ARREST TYPE	ON VIEW (No Warrant) <input type="checkbox"/>	SUMMONS (No Custody) <input type="checkbox"/>	CUSTODY (Warrant) <input type="checkbox"/>	MULTIPLE ARREST INDICATOR <input type="checkbox"/>	MULTIPLE COUNT <input type="checkbox"/>	N/A <input type="checkbox"/>	CLEAR INDICATOR <input type="checkbox"/>	UPON ARREST ARMED WITH (ENTER "A" IF AUTO)	01 UNARMED <input type="checkbox"/>	11 FIREARM <input type="checkbox"/>	12 HANDGUN <input type="checkbox"/>	13 RIFLE <input type="checkbox"/>	14 SHOTGUN <input type="checkbox"/>	15 OTHER FIREARM <input type="checkbox"/>	20 LETHAL CUT INSTRUMENT (e.g. Switchblade Knife, etc.) <input type="checkbox"/>	30 CLUB / BRASS KNUCKLES <input type="checkbox"/>	ARREST ORIGIN <input type="checkbox"/> DIS <input type="checkbox"/> FOP <input type="checkbox"/> MDT <input type="checkbox"/> PER <input type="checkbox"/> TEL <input type="checkbox"/>
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24	CODES (H) HOLD (S) STOLEN (E) EVIDENCE (L) LOST (A) ATTACKED (R) RECOVERED (F) FOUND (C) CONFISCATED (I) IMPOUNDED (V) SUSPECT VEHICLE (B) BURNED (Y) FORGED / COUNTERFEITED	DESCRIPTION	PROPERTY TYPE	QUANTITY	YEAR	MAKE	MODEL
24	E	BEAR / RECEIPT		02		LABRATS	

25	STYLE	COLOR(S) TOP / BOTTOM	MONTH	YEAR	STATE	LICENSE	SERIAL / VIN NUMBER / CONDITION / OTHER I.D.
25							
26	STOLEN	DAMAGED	RECOVERED	PROPERTY TAG #	LOCATION PROPERTY	LEIN / NCC REF #	
26				119720	PROPERTY		

27	REC BADGE	REC BADGE 2	LEO	RECOVERY DATE	NOTIFY BADGE	NOTIFY DATE	NOTIFY TIME	PERSON / DEPARTMENT NOTIFIED
27								

28	COMMENTS - INSURANCE COMPANY / LIEN HOLDER / BANK	SEIZED DRUGS	TYPE	AMOUNT	MEAS
28	6 PAGES OF LABRAT BLUE RECEIPT OF PURCHASE				
29	INVESTIGATING OFFICER(S)	REVIEWED BY:	ATTENTION TO:		
29	H				

PERSON REPORT

01	DATE 10.16.02	DAY WED	SHIFT 09	PLATOON 99	BADGE 1 0040	BADGE 2 62	UCR STATUS E10 <input type="checkbox"/> DEATH OF OFFENDER E11 <input type="checkbox"/> PROSECUTION DECLINED	E12 <input type="checkbox"/> EXTRADITION DECLINED E13 <input type="checkbox"/> REFUSED TO COOPERATE E14 <input type="checkbox"/> JUVENILE, NO CUSTODY	YEAR 02	INCIDENT NUMBER 34052
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CODES (1) REPT'D BY (2) OWNER (3) VICT (4) PERS INTERV (5) ARREST (6) SUSPECT (7) MISSING (8) WITHN (9) SECUR'D BY (O) JUV ARREST (D) DRIVER (P) PASSENGER (S) SUMMONED (R) RESPONSIBL

V 02	CODE 4	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX) RAHMAN MEZAN, M.	RAC U M	SEX	DOB	AGE
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I 03	ADDRESS 5020 JOHN R	(DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY Troy	STATE	ZIP MI 48098
------	------------------------	--	--------------	-------	-----------------

G 04	HOME PHONE	BUSINESS PHONE 508-1235	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D. MANAGER / OWNER
------	------------	----------------------------	-------	--------------------	---

T 05	VICTIM CONNECTED TO OFFENSE <input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	VICTIM TYPE <input type="checkbox"/> I INDIVIDUAL <input type="checkbox"/> B BUSINESS	F <input type="checkbox"/> FINANCIAL G <input type="checkbox"/> GOVERNMENT R <input type="checkbox"/> RELIGIOUS	S <input type="checkbox"/> SOCIETY / PUBLIC O <input type="checkbox"/> OTHER P <input type="checkbox"/> POLICE OFFICER	VICTIM INJURY N <input type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONE M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES L <input type="checkbox"/> SEVERE LACERATION	T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS	F <input type="checkbox"/> FATAL
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I 06	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY			OUTSIDE FAMILY, BUT KNOWN			NOT KNOWN		REL / OFF #		FELONIOUS ASSAULT CIRCUMSTANCES	
M 07	01 SPOUSE	05 CHLD	09 STEPPARENT	20 ACQUAINTANCE	24 BOY / GIRL FRIEND	28 EMPLOYEE	98 STRANGER	/				
	02 C-L SPOUSE	06 GRANDPARENT	10 STEPCHILD	21 FRIEND	25 CHILD OF "BG" ABOVE	29 EMPLOYER	99 UNKNOWN	/				
	03 PARENT	07 GRANDCHILD	11 STEPSIBLING	22 NEIGHBOR	26 HOMOSEXUAL REL.	30 OTHERWISE KNOWN	REL / OFF #		/			
	04 SIBLING	08 IN-LAW	12 OTHER FAMILY	23 BABYSITEE (baby)	27 EX-SPOUSE	31 VICTIM WAS OFFENDER	/		/			

V 08	CODE	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE
------	------	--------	------------------------------------	-----	-----	-----	-----

I 09	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY	STATE	ZIP
------	---------	--	------	-------	-----

G 10	HOME PHONE	BUSINESS PHONE	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D.
------	------------	----------------	-------	--------------------	------------------------------

T 11	VICTIM CONNECTED TO OFFENSE <input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	VICTIM TYPE <input type="checkbox"/> I INDIVIDUAL <input type="checkbox"/> B BUSINESS	F <input type="checkbox"/> FINANCIAL G <input type="checkbox"/> GOVERNMENT R <input type="checkbox"/> RELIGIOUS	S <input type="checkbox"/> SOCIETY / PUBLIC O <input type="checkbox"/> OTHER P <input type="checkbox"/> POLICE OFFICER	VICTIM INJURY N <input type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONE M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES L <input type="checkbox"/> SEVERE LACERATION	T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS	F <input type="checkbox"/> FATAL
------	---	---	---	--	--	--	--	----------------------------------

I 12	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY			OUTSIDE FAMILY, BUT KNOWN			NOT KNOWN		REL / OFF #		FELONIOUS ASSAULT CIRCUMSTANCES	
M 13	01 SPOUSE	05 CHLD	09 STEPPARENT	20 ACQUAINTANCE	24 BOY / GIRL FRIEND	28 EMPLOYEE	98 STRANGER	/				
	02 C-L SPOUSE	06 GRANDPARENT	10 STEPCHILD	21 FRIEND	25 CHILD OF "BG" ABOVE	29 EMPLOYER	99 UNKNOWN	/				
	03 PARENT	07 GRANDCHILD	11 STEPSIBLING	22 NEIGHBOR	26 HOMOSEXUAL REL.	30 OTHERWISE KNOWN	REL / OFF #		/			
	04 SIBLING	08 IN-LAW	12 OTHER FAMILY	23 BABYSITEE (baby)	27 EX-SPOUSE	31 VICTIM WAS OFFENDER	/		/			

14	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE
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A 15	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY	STATE	ZIP
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R 16	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE	BUILD	SKIN TONE
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R 17	STATE	DRIVER'S LICENSE #	SOC. SEC. #	SID #	FBI #
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E 18	PERSON COMMENTS / CLOTHING	SUMMONS / CITATION NUMBER(S)
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S 19	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	DEPARTMENT ARREST NUMBER
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T 20	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER
------	------------------------------	-----------------	-------------	---------	---------	---------	----	-----	-------------

21	ARREST TYPE <input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST INDICATOR <input type="checkbox"/> MULTIPLE COUNT <input type="checkbox"/> N/A	CLEAR INDICATOR <input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST <input type="checkbox"/> ARMED WITH (ENTER "A" IF AUTO)	01 <input type="checkbox"/> UNARMED	13 <input type="checkbox"/> RIFLE	20 <input type="checkbox"/> LETHAL CUT INSTRUMENT (e.g. Switchblade Knife, etc.)	ARREST ORIGIN <input type="checkbox"/> FOP <input type="checkbox"/> MOT <input type="checkbox"/> TEL	DISP <input type="checkbox"/> PER
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22	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE
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A 23	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY	STATE	ZIP
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R 24	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE	BUILD	SKIN TONE
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R 25	STATE	DRIVER'S LICENSE #	SOC. SEC. #	SID #	FBI #
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E 26	PERSON COMMENTS / CLOTHING	SUMMONS / CITATION NUMBER(S)
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S 27	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	DEPARTMENT ARREST NUMBER
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T 28	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER
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29	ARREST TYPE <input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST INDICATOR <input type="checkbox"/> MULTIPLE COUNT <input type="checkbox"/> N/A	CLEAR INDICATOR <input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST <input type="checkbox"/> ARMED WITH (ENTER "A" IF AUTO)	01 <input type="checkbox"/> UNARMED	13 <input type="checkbox"/> RIFLE	20 <input type="checkbox"/> LETHAL CUT INSTRUMENT (e.g. Switchblade Knife, etc.)	ARREST ORIGIN <input type="checkbox"/> FOP <input type="checkbox"/> MOT <input type="checkbox"/> TEL	DISP <input type="checkbox"/> PER
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TROY POLICE DEPT.500 W. Big Beaver, Troy, MI 48084
ORI #MI6378400**NARRATIVE REPORT** S CORR DELETE

PAGE 3 of 3

01	DATE 10/16/02	Day Wed	SHIFT 09	99	BADGE 1 006	BADGE 2 062	INCIDENT STATUS <input type="checkbox"/> CLR ARREST <input type="checkbox"/> CLR EXCEPT	<input type="checkbox"/> UNF <input type="checkbox"/> INACT	PRIM CLASS	YEAR 02	INCIDENT # 34052

Directed Patrol Unit working Liquor Compliance Checks with Student Enforcement Aide Brandon Scheitler.

Aide Scheitler entered the 7-11 convenience store at 5020 John R Rd., selected a six pack of Labatt Blue beer and took it to the cashier for purchase. The cashier, Leazon Shameon, made no inquiry as to Scheitler's age and completed the transaction. Scheitler then left the store with the beer.

Officers spoke with Shameon and advised him of the violation. Shameon stated that he had come back from the cooler and had found customers at the counter. He made the sale without inquiring as to Scheitler's age because the store was busy and there were customers waiting. Shameon indicated that he bypassed the date of birth entry on the keyboard by entering his own birthdate. Due to a slight language barrier, officers were unable to determine if Shameon was TIPS/TAMS trained.

Shameon was issued Citation No. 632126 for Furnishing Alcohol to a Minor and advised. The six pack of Labatt and the receipt from the transaction were tagged and entered into the property room. (Tag No. 119729)

BRAGG	REVIEWED BY	ASSIGNED TO/BADGE	ATTENTION TO

NARRATIVE REPORT
 WITNESS STATEMENT

01	DATE	DAY	SHIFT	PLAT	BADGE 1	BADGE 2	INCIDENT STATUS	PRIM CLASS	YEAR	INCIDENT #
	10/16/02	WED	019	919	06	62	<input type="checkbox"/> CLR ARREST <input type="checkbox"/> UNF <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> INACT		02	34052

02 Statement of: Brandon Scheitler Home Phone: _____
 (PLEASE PRINT)

03 Address: 500 W. Big Beaver Rd. Business Phone: 248-524-3431

04 City: Troy State: MI Zip: 48084

06 I, Brandon Scheitler, entered to 7-Eleven on 5020
 07 John R 10-16-02 at about 6:48 pm. I picked out a six
 08 pack of Labatt Blue. I took it to the front register. The
 09 clerk an other male with a red 7-11 shirt rang me up. He
 10 did not ask for any Id or what my age was. I payed him 6.84
 11 and left the store with the beer.

27 X: Brandon Scheitler
 (SIGNATURE)

28 Taken By: [Signature]
 (SIGNATURE)

29 Place: 500 W. Big Beaver Date: 10/16/02 Time: 19:35

INVESTIGATING OFFICER(S) REVIEWED BY ASSIGNED TO / BADGE ATTENTION TO

7-ELEVEN

5020 JOHN R

TROY MI 480984018

2485281235

STORE#: 17482

THANKS FOR SHOPPING 7-ELEVEN

PLEASE COME AGAIN

Handwritten signature
10/16/02

1 LabattBl 6p12z Ln8t	5.89T
1 Btl Dep-No	0.60
TOTAL DEPOSIT	0.60
SUBTOTAL	6.49
SALES TAX ON 5.89	0.35
TOTAL DUE	6.84
CASH	20.00
CHANGE	13.16

CUSTOMER SERVICE HOTLINE, 1-800-255-0711

HOW CAN WE SERVE YOU BETTER?

***** REPRINT *****

T#01 OP20 TRN3356 02/10/16 06:48 pm

State of Michigan
Uniform Law Citation

Tick# No.

No 632126

Victim Involved

US DOT #

Incident No.

02-34052

Dept. No. 184

The People of: the State of Michigan

Township City Village County

Local Use/Arrest No.

Detection Device

OF:

TROY

BAC

1 of 1

THE UNDERSIGNED SAYS THAT ON:

Month

Day

Year

At approximately

A.M.

P.M.

Date

Month

Day

Year

State

Driver's License Number

M.I.

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Name (First, Middle, Last)

LEAZAR DAN-KHA SHANTON

Street

42046

RYAN

RD

MT

18314

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18314

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City

STERLING

HEIGHTS

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Vehicle Plate No.

Year

State

Vehicle Description (Year, Make, Color)

Type

THE PERSON NAMED ABOVE, in violation of Local Ordinance State Law Administrative Rule UPON

AT OR NEAR 5020 JOHN R

WITHIN CITY VILLAGE TOWNSHIP OF TROY

COUNTY OF OAKLAND

DID THE FOLLOWING:

Type	MCL Cite/PACC Code/ Ordinance	Description (include any bond amount collected on each charge)	Charge No.
<input type="checkbox"/> C1 <input type="checkbox"/> Wam <input type="checkbox"/> Misd <input type="checkbox"/> Fel <input type="checkbox"/> Fug <input type="checkbox"/> Waiv	<input type="checkbox"/> Authorization pend.	SEWER HEADHOL W/O DELICIOUS INDUSTRY	1
<input type="checkbox"/> C1 <input type="checkbox"/> Wam <input type="checkbox"/> Misd <input type="checkbox"/> Fel <input type="checkbox"/> Fug <input type="checkbox"/> Waiv	<input type="checkbox"/> Authorization pend.		
<input type="checkbox"/> C1 <input type="checkbox"/> Wam <input type="checkbox"/> Misd <input type="checkbox"/> Fel <input type="checkbox"/> Fug <input type="checkbox"/> Waiv	<input type="checkbox"/> Authorization pend.		
<input type="checkbox"/> C1 <input type="checkbox"/> Wam <input type="checkbox"/> Misd <input type="checkbox"/> Fel <input type="checkbox"/> Fug <input type="checkbox"/> Waiv	<input type="checkbox"/> Authorization pend.		

TO THE COURT: Do not arraign on a felony charge until an authorized complaint is filed.

Offense Code(s)
1 M250 2 3
Key for Type C1 = Civil Infraction Misd = Misdemeanor Fel = Felony Wam = Warning Fug = Fugitive Waiv = Violation for Which Fines/Costs May be Waived Authorization pend. = Authorization pending

Remarks

CHECK IF APPROPRIATE Damage to Property Local Court Bond \$ Vehicle Impounded Injury License Posted in Lieu of Bond Traffic Crash Death Appearance Certificate Person in Active Military Service Yes No None

SEE DATE BELOW - SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS
 Appearance Date on or before 02-23-02 8:30 AM Hearing Date (if applicable) on Contact Court Juvenile Traffic Misd. (Court will Notify) Formal Hearing Required (Court will Notify)

In the 52-4 DISTRICT Court of OAKLAND COUNTY
Court Address & Phone Number
520 W. BIG BEAVER RD., TROY, MICHIGAN 48084
PHONE: (248) 528-0400

I served a copy of the civil infraction complaint upon the defendant (or owner/occupant by posting if applicable).
I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.

Complainant's Signature and receipt if applicable
R. BRASS P. BROWNE
Officer's Name (printed)
R. BRASS P. BROWNE
Month 10 Day 16 Year 02
Officer's ID No. 602

Agency ORI MI-6378400 Agency Name TROY POLICE DEPARTMENT
UC-01a (rev. 11/95) Court Copy 1

PRESS - YOU ARE MAKING FIVE COPIES
ORDER BY FORM NO. M76 (Revised 11/95)
FIDLAR DOUBLEDAY KALAMAZOO, MI

Ticket No. No 632126 Name

Case No.

Michigan Department of Consumer & Industry Services



LIQUOR CONTROL COMMISSION (CC)

7150 Harris Drive

P.O. Box 30005

Lansing, Michigan 48909-7505

Phone (517) 322-1390 ~ FAX (517) 322-6347

VIOLATION REPORT

(Authorized by P.A.58 of 1998)

* Officers Please Obtain This Information From The License *

License No. 13474-2002

Business ID 16346

File #

(THIS INFORMATION NOT AVAILABLE ON LICENSE UNTIL 3/1/99)

1. Name of Licensee 7-ELEVEN INC 2. Doing Business As 7-11

3. Mailing Address (street, city, zip code) 5020 JOHN R ROAD; TROY MI 48085

4. Township 5. County OAKLAND

6. Type of License(s) & Permit(s) SDM

7. Date of Violation: WEDNESDAY OCTOBER 16, 2002 6:45 PM AM or PM (DAY) (DATE) (HOUR)

8. Violation Type: X Minor Intoxicated Person After hours sales/consumption Gambling Fighting (must be inside licensed premises) Controlled Substances Failure to Cooperate Prohibited Conduct OTHER:

if MINOR: Birth date 05/16/84 Was this a DECOY? Yes/No If no, you MUST answer below:

IF above minor violation was not a decoy describe Enforcement Action Taken:

COPY OF APPEARANCE TICKET MUST BE ATTACHED

9. Submit Report Below or Indicate Attached Report # 02-34052

Officer Signature Russell Bragg Name and Title (print) Russell Bragg, Police Officer

Officer Signature Patrick Browne Name and Title (print) Patrick Browne, Police Officer

Department Name Troy Police Department Phone # 248-524-3477

WITNESSES

1. Name LEAZAR SHAMEO, Address 42040 . n Road; Sterling Heights MI 483

Will testify to: Cashier

2. Name BRANDON SCHEITLER Address 500 West Big Beaver Road; Troy MI 48084

Will testify to: Student Enforcement Aide

3. Name RUSSELL BRAGG Address 500 West Big Beaver Road; Troy MI 48084

Will testify to: Troy Police Officer

4. Name PATRICK BROWNE Address 500 West Big Beaver Road; Troy MI 48084

Will testify to: Troy Police Officer

5. Name _____ Address _____

Will testify to: _____

EVIDENCE

Location Held: Six-pack of Labatt Blue beer and receipt from purchase

JENNIFER M. GRANHOLM
GOVERNOR



STATE OF MICHIGAN
LIQUOR CONTROL COMMISSION
DEPARTMENT OF CONSUMER & INDUSTRY SERVICES
NOELLE CLARK, DIRECTOR

JUDITH ALLEN
CHAIRWOMAN

February 10, 2003



7-ELEVEN, INC.
MIZAN M. RAHMAN
D/B/A 7-ELEVEN
5020 JOHN R
TROY, MI 48098

RE: Complaint No. 2-71110

Dear Licensee:

Enclosed is a copy of the Commissioner's Order issued as the result of the above Complaint.

If you elect to pay the fine, a bank or postal money order, certified check, or authorized credit card payable to the STATE OF MICHIGAN must be received in this office no later than March 17, 2003 as indicated on your Invoice No. 81049. Failure to submit the fine will result in confiscation of your license for the alternative penalty. In any event, costs assessed must be paid, as only fines assessed are alternative to a suspension.

If there are any questions regarding this Order, please contact Hearings and Appeals at (517) 322-1390. Our office hours are from 8:00 a.m. to 5:00 p.m.

Sincerely,

MICHIGAN LIQUOR CONTROL COMMISSION

A handwritten signature in cursive script that reads "Susan K. Conklin".

Susan K. Conklin, Supervisor
Hearings and Appeals

SKC:tmn

Enclosures

cc: Home Office
Elaine A. Murphy, Attorney
Troy PD

STATE OF MICHIGAN

DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES
LIQUOR CONTROL COMMISSION

IN RE: 7-ELEVEN, INC. & MIZAN M. RAHMAN
D/B/A 7-ELEVEN
5020 JOHN R.
TROY, MI 48098

HEARING: JANUARY 9, 2003
PLACE: FARMINGTON
COMPLAINT NO: 2-71110
BUSINESS ID NO. 16346
SDM

CHARGES - OCTOBER 16, 2002

- (1) Sold or furnished alcoholic liquor to Decoy Brandon Scheitler, date of birth May 16, 1984, who was less than twenty-one (21) years old, contrary to Const 1963, art 4, § 40 and contrary to Section 801(2) and/or Section 701(1) of the Michigan Liquor Control Code, MCL 436.1801(2) and/or MCL 436.1701(1).

NEGOTIATED SETTLEMENT

This matter comes before the Commission as a proposed negotiated settlement, the state being represented by Linda Pytel McDowell, Assistant Attorney General, and the Licensed Corporation, 7-Eleven, Inc., being represented by Elaine Murphy, Attorney at Law. Mizan Rahman, the Co-Licensee, was also present at the hearing. Pursuant to Section 903 of the Michigan Liquor Control Code, MCL 436.1903, and Rule R436.1909 of the Michigan Liquor Control Commission (MLCC), the parties stipulated and agreed that:

- (1) the Co-Licensees would acknowledge responsibility to Charge 1;
- (2) the Administrative Law Judge will enter the Violation Report of the case and attachments thereto into the record as substantive evidence without objection and will further take notice of the prior record of these Co-Licensees since being licensed by the MLCC at the above location under current ownership;

(3) the Co-Licensees would pay a maximum fine of \$600, with no suspension or revocation as a penalty;

(4) there would be no appeal of this decision to the Appeal Board or to any court of law, and if not approved, the hearing officer would not recuse himself upon a contested hearing of the matter.

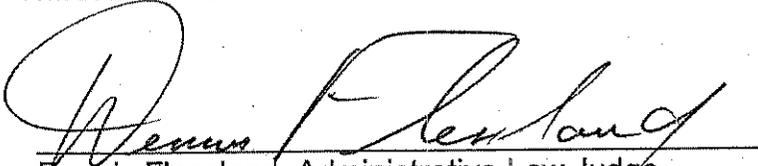
ORDER

The Co-Licensees have been licensed at this location since April 18, 2002, and after reviewing the Co-Licensees' past record and the Violation Report setting forth the facts of this case, the Administrative Law Judge accepts the terms of the Negotiated Settlement and orders as follows:

- (1) the plea acknowledging the charge in this case be accepted;
- (2) the Violation Report and attachments are accepted as substantive evidence;
- (3) based upon the Violation Report and statements at the hearing, the Administrative Law Judge finds that the Co-Licensees did violate Section 801(2) of the Michigan Liquor Control Code, MCL 436.1801(2), as alleged in Charge 1;
- (4) for the charge for which a violation was found, the Co-Licensees are fined \$600;
- (5) a suspension of 30 continuous days be imposed if the total fine of \$600 is not paid, with this suspension to be served consecutively and not concurrently with any other suspensions ordered by the MLCC for these Co-Licensees;
- (6) this Negotiated Settlement is a full and final disposition of the matter before the MLCC, recognizing that as to the Complaint, there is no further right of administrative or judicial appeal, either to the MLCC or a court of law and that there are no promises, stipulations, understandings or agreements other than those stated in the record, and this Order represents the final agreed settlement.

In addition, the Administrative Law Judge Orders the Co-Licensees to pay total cost of \$11.00 for witness fees involved in connection with the hearing.

MICHIGAN LIQUOR CONTROL COMMISSION


Dennis Flesland, Administrative Law Judge

Dated: January 31, 2003

Linda Pytel McDowell
Assistant Attorney General
24155 Drake Road
Farmington, MI 48335

Elaine A. Murphy
Attorney at Law
25800 Northwestern Hwy.
Suite #950
Southfield, MI 48075-0197

DF: 2-71110

TRUE COPY

Michigan County Road Industry Services
VIOLATION COMPLAINT PROFILE of COMPLAINANT

VIOLATION COMPLAINTS

Attention : SCHEITLER

BUS ID : 16346 File No. : D - 45235 Lic Curr Issued : 04-18-2002 Lic Orig Issued : 12-10-1975 LGU : 132.5
 DBA : 7-ELEVEN County : OAKLAND

Licensee : 7-ELEVEN, INC. (A TEXAS CORPORATION) TWP :
 Address : 5020 JOHN R TROY, MI 48098 Mailing : 19500 VICTOR PARKWAY SUITE 350 LIVONIA, MI 48152

BUS STATUS : ACTIVE Pending Reqs: 1 Complaint No: 71110
 Viol Received : 10-21-2002 Viol Occured : 10-16-02 Agency : OPD Status : ACTIVE Total 801(2) : 0 Ori. Des :
 Actv. Status : N5 Stat : 01-09-2003 Due : Pd : Susp : Rev :
 Total Charge : 1 Fine Amt : \$.00 Days Suapp : 0 CMNY COMPL No :

VIOLATIONS

Description	Date Occured	Minor Decoy
Sell, furnish to, allow person under 21 to consume-SCHEITLER	10-16-2002	Y

VIOLATION ACTIVITIES

Description	Act Date	Comments
HOME OFFICE	12-10-1975	***MO 19500 VICTOR PARKWAY, SUITE 350, LIVONIA, MI 48152***
ATTORNEY APPEARANCE	12-10-1975	***ATTY ELAINE A MURPHY, 25800 NORTHWESTERN HWY, SUITE 950, SOUTHFIELD, MI 48075-0197 PH 248-357-0000 FAX 248-357-7488***
Violation Type	10-16-2002	SALE TO MINOR (18): (TROY PD/SCHEITLER)
To Attorney General for Complaint	10-30-2002	To legal for complaint-FARM
From Attorney General	11-19-2002	Pending scheduling of hearing
Notice of Complaint Information	11-20-2002	NOC MAILED. ALF
Notice of Hearing Mailed	12-09-2002	TBS 1-9 FARM-F
Hearing Held	12-10-2002	1-9-03 FARMINGTON FLESSLAND 9:30 A.M. TMN
	01-09-2003	HEARING HELD FARMINGTON FLESSLAND-MCDOWELL-DECLERCO NEG SET COST \$11 ✓

LICENSES

License Number	Year	License Type	Permits
13474	2002	SDM	

LICENSEES & SUBORDINATES

Name : 7-ELEVEN, INC. (A TEXAS CORPORATION) Role : CLC Status : ACTIVE
 Name : RAHMAN, MIZAN M Role : CLI Status : ACTIVE



500 West Big Beaver
Troy, Michigan 48084
Fax: (248) 524-0851
www.ci.troy.mi.us

Area code (248)

Assessing
524-3311

Bldg. Inspections
524-3344

Bldg. Operations
524-3368

City Clerk
524-3316

City Manager
524-3330

Community Affairs
524-1147

Engineering
524-3383

Finance
524-3411

Fire-Administration
524-3419

Human Resources
524-3339

Information Technology
619-7279

Law
524-3320

Library
524-3545

Parks & Recreation
524-3484

Planning
524-3364

Police-Administration
524-3443

Public Works
524-3370

Purchasing
524-3338

Real Estate & Development
524-3498

Treasurer
524-3334

General Information
524-3300

February 7, 2003

7-Eleven
5020 John R
Troy, Michigan 48098

Re: Liquor License: 7-Eleven
5020 John R
Troy, Michigan 48098

A Public Hearing will be held by and before the Council of the City of Troy at City Hall, 500 W Big Beaver, Troy, Michigan on Wednesday, February 26, 2003 at 7:30 PM, or as soon thereafter as the agenda will permit, to determine whether the City Council should recommend to the Michigan Liquor Control Commission, the revocation of licenses allowed for the sale and/or consumption of alcoholic beverage, for the following reasons:

License Type: SDM (13474-2002)
Violation Name: SALE TO MINOR (COMPLIANCE TEST)
Violation Date(s): October 16, 2002

You will be given an opportunity to be heard and present evidence at the public hearing and legal counsel may represent you. If you have questions regarding the procedure or the facts and circumstances surrounding your violation(s), you may contact the City Attorney's office at 248-524-3320.

Sincerely,

Barbara A. Holmes, CMC
Deputy City Clerk

C: Elaine Murphy
Attorney at Law
25800 Northwestern Hwy., #950
Southfield, Michigan 48075

CERTIFIED MAIL



7000 0520 0020 0628 8428
7000 0520 0020 0628 8428

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Hwy., #950
48075

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

To Elaine Murphy
Attorney at Law
25800 Northwestern Hwy., #950
Southfield, Michigan 48075

PS 7-11 5020 John R

mailer)

Instructions



500 West Big Beaver
Troy, Michigan 48084



500 West Big Beaver
Troy, Michigan 48084

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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7002 1000 0004 9357 0817

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

To 7-Eleven
Southland Corporation & M
Rahman
5020 John R
Troy, Michigan 48098

Hungry Howies
3615 Rochester
Troy MI 48084
SDM (11104-2002)
Sale to Minor (Compliance Test)

City Council Hearings for Liquor Violations

- X Current History file
- X Copy of original incident report
- X Copy of MLCC violation report
- X Copy of MLCC hearing disposition
- X Disposition of City Summons to server/seller

Hungry Howies
3615 Rochester

LCC

Liquor Licensee History

Business name: **Hungry Howies**

Address: 3615 Rochester (248) 642-1400

Licensee: Giancarlo DeAngelis

License type: **SDM (11104-2002)**

Permits:

Comments:

Date	Troy Incident #	Type	Disposition	Date
7/16/84		Council approves transfer from Beatris & Nadhim Haddad to Giancarlo DeAngelis.		
6/7/90	90-17056	Sale to Minor (Decoy)	Fined \$300.	6/14/91
7/27/98	98-30259	Refused sale to minor - Called Police, minor cited.		
01/10/99	99-01379	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
03/07/99	99-08857	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/22/99	99-23597	Compliance Test	PASSED	
10/27/99	none	Compliance Test	PASSED	
04/28/00	00-14441	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
08/27/00	00-31757	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
11/15/00	00-42365	Compliance Test	PASSED	
01/13/01	01-01554	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
03/17/01	01-09241	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
04/24/01		Compliance Test	PASSED	
06/06/01	01-19816	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
08/14/01	01-29139	Compliance Test	PASSED	
08/28/01	01-30943	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
09/25/01	01-34493	Compliance Test	PASSED	
12/11/01	01-44282	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
02/10/02	02-04271	Liquor Inspection (Road Patrol)	NO VIOLATIONS	

02/28/02	02-06350	Sale to Minor (Compliance Test)	\$400	05/12/02
03/02/02	02-06626	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/25/02	02-	Compliance Test	PASSED	
10/16/02	02-34076	Compliance Test	PASSED	
12/03/02	02-39186	Liquor Inspection (Road Patrol-Dimaria)	NO VIOLATIONS	
01/08/03	03-836	Liquor Inspection (Road Patrol-Dimaria)	NO VIOLATIONS	

INCIDENT REPORT

01	DATE	DAY	SHIFT	PLATOON	BADGE 1	BADGE 2	UCR STATUS	E12 <input type="checkbox"/> EXTRADITION DECLINED	YEAR	INCIDENT NUMBER	
	022802	T.HU	0999	105	006		E10 <input type="checkbox"/> DEATH OF OFFENDER E11 <input type="checkbox"/> PROSECUTION DECLINED	E13 <input type="checkbox"/> REFUSED TO COOPERATE E14 <input type="checkbox"/> JUVENILE, NO CUSTODY	02	6350	
02	RECEIVED	DISPATCHED	ARRIVED	COMPLETED	DATE(S) OCCURED	TIMES(S) OCCURED	ASSIGNED HOUR / DAY				
	1855	1855	1855	1920	022802	1855	1817.144				
03	LOCATION 1 / ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER)					LOCATION 2 (INTERSECTING STREET)					
	3615 ROCHESTER RD.										
04	CITY	STATE	ZIP	CODE	BUSINESS NAME	BUSINESS PHONE					
	TROY	MI	48084	L	HUNGRY HOWIE'S	689-8400					
05	BUSINESS COMMENTS / ESTABLISHMENT DESCRIPTION				ESTAB CODE	ORIGIN	HOW ACTIVATED	PATROL	GEOGRAPHIC		
	PIZZA / PARTY STORE				0204	<input type="checkbox"/> PHONE <input type="checkbox"/> FOP	<input type="checkbox"/> PERSON <input type="checkbox"/> DISP	<input type="checkbox"/> MOT	<input type="checkbox"/> MOT	05	
06	NATURE OF OFFENSE #1			ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL DRUGS COMP	BIAS	WEAPON	# PREM	ACTIVITY	ACTIVITY TYPES (Maximum 3 Per Offense)
	FURNISH ALCOHOL TO A MINOR										B BUYING / RECEIVING C CULTIVATING / MANUFACTURING / PUBLISHING D DISTRIBUTING / SELLING E EXPLOITING CHILDREN O OPERATING / PROMOTING / ASSISTING P POSSESSING / CONCEALING T TRANSPORTING / TRANSMITTING / IMPORTING U USING / CONSUMING
07	NATURE OF OFFENSE #2			ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL DRUGS COMP	BIAS	WEAPON	# PREM	ACTIVITY	
	LCC VIOLATION										
08	NATURE OF OFFENSE #3			ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL DRUGS COMP	BIAS	WEAPON	# PREM	ACTIVITY	
09	NATURE OF OFFENSE #4			ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL DRUGS COMP	BIAS	WEAPON	# PREM	ACTIVITY	OFFENSE COMMENTS

CODES (1) REPT'D BY (2) OWNER (3) VICT (4) PERS INTERV (5) ARREST (6) SUSPECT (7) MISSING (8) WITH (9) SECURED BY (10) JUV ARREST (11) DRIVER (12) PASSENGER (13) SUMMONED (14) RESPONSE	V 10	CODE	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE	
		148		MCDONALD, PAMELA			WF030282	19	
	I 11	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)				CITY	STATE	ZIP
		500	W. BIG BEAVER				TROY	MI	48084
	G 12	HOME PHONE	BUSINESS PHONE	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D.			
			524-3431			STUDENT ENFORCEMENT AID			

T 13	VICTIM CONNECTED TO OFFENSE	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> 3 <input type="checkbox"/> 4	VICTIM TYPE	<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> BUSINESS	F <input type="checkbox"/> FINANCIAL G <input type="checkbox"/> GOVERNMENT R <input type="checkbox"/> RELIGIOUS	S <input type="checkbox"/> SOCIETY / PUBLIC O <input type="checkbox"/> OTHER P <input type="checkbox"/> POLICE OFFICER	VICTIM INJURY	N <input type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONE M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES L <input type="checkbox"/> SEVERE LACERATION	T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS	F <input type="checkbox"/> FATAL
I 14	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY			OUTSIDE FAMILY, BUT KNOWN			NOT KNOWN	REL / OFF #	FELONIOUS ASSAULT CIRCUMSTANCE			
	01 SPOUSE	05 CHILD	09 STEPPARENT	20 ACQUAINTANCE	24 BOY / GIRL FRIEND	28 EMPLOYEE	99 STRANGER	/	/			
	02 C-L SPOUSE	06 GRANDPARENT	10 STEPCHILD	21 FRIEND	25 CHILD OF "BIG" ABOVE	29 EMPLOYER	99 UNKNOWN	/	/			
	03 PARENT	07 GRANDCHILD	11 STEPSIBLING	22 NEIGHBOR	26 HOMOSEXUAL REL.	30 OTHERWISE KNOWN	REL / OFF #	/	/			
	04 SIBLING	08 IN-LAW	12 OTHER FAMILY	23 BABYSITTEE (baby)	27 EX-SPOUSE	31 VICTIM WAS OFFENDER						

E 20	PERSON COMMENTS / CLUTTERING	HUNGRY HOWIE'S EMPLOYEE	SUMMONS / CITATION NUMBER(S)	624962						
S 21	ARREST / SUMMONS DESCRIPTION	FURNISH ALCOHOL TO A MINOR	ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	PM	DIS	DEPARTMENT ARREST NUMBER
				022802	99	105	0106M			
T 22	ARREST / SUMMONS DESCRIPTION		ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	PM	DIS	AFIS NUMBER

23	ARREST TYPE	<input type="checkbox"/> ON VIEW (No Warrant) <input checked="" type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST INDICATOR	<input type="checkbox"/> MULTIPLE <input type="checkbox"/> COUNT 1 <input type="checkbox"/> N/A	CLEAR INDICATOR	<input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST	<input type="checkbox"/> ARMED WITH (ENTER "A" IF AUTO)	01 <input type="checkbox"/> UNARMED 11 <input type="checkbox"/> FIREARM	13 <input type="checkbox"/> RIFLE 14 <input type="checkbox"/> SHOTGUN	20 <input type="checkbox"/> LETHAL CUT INSTRUMENT (e.g. Switchblade Knives, etc.)	30 <input type="checkbox"/> CLUB / BRASS KNUCKLES	ARREST ORIGIN	<input type="checkbox"/> DISP <input type="checkbox"/> PER <input type="checkbox"/> MOT <input type="checkbox"/> TEL
----	-------------	---	---------------------------	---	-----------------	--	-------------	--	--	--	--	---	---------------	---

24	CODES	DESCRIPTION	PROPERTY TYPE	QUANTITY	YEAR	MAKE	MODEL	
		E 4 PK WINE COOLERS		4		SEAGRAMS	STRAWBERRY DAQUIRI	
25	STYLE	COLOR(S) TOP / BOTTOM	MONTH	YEAR	STATE	LICENSE	SERIAL / VIN NUMBER / CONDITION / OTHER I.D.	
26	STOLEN	DAMAGED	RECOVERED	PROPERTY TAG #	LOCATION PROPERTY	LEIN / NOIC REF #		
				116761	PROP. ROOM			
27	REC BADGE	REC BADGE 2	LEO	RECOVERY DATE	NOTIFY BADGE	NOTIFY DATE	NOTIFY TIME	PERSON / DEPARTMENT NOTIFIED

28	COMMENTS - INSURANCE COMPANY / LIEN HOLDER / BANK	PURCHASED AT HUNGRY HOWIE'S	SEIZED DRUGS	TYPE	AMOUNT	MEAS
29	INVESTIGATING OFFICER(S):	11-1-10	REVIEWED BY:	11-1-10	ATTENTION TO:	

PERSON REPORT

01	DATE 022802	DAY THU	SHIFT 0979	PLATOON	BADGE 1 205	BADGE 2 06	UCR STATUS E10 <input type="checkbox"/> DEATH OF OFFENDER E11 <input type="checkbox"/> PROSECUTION DECLINED	E12 <input type="checkbox"/> EXTRACTION DECLINED E13 <input type="checkbox"/> REFUSED TO COOPERATE E14 <input type="checkbox"/> JUVENILE, NO CUSTODY	YEAR 02	INCIDENT NUMBER 6350	
CODES (1) REPT'D BY (2) OWNER (3) VICT (4) PERS INTERV (5) ARREST (6) SUSPECT (7) MISSING (8) WITH (9) SECUR'D BY (10) JUV ARREST (11) DRIVER (12) PASSENGER (13) SUMMONED (14) RESPONSE											
V 02	CODE 48	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX) BEAUFORD MIKE				RAC W	SEX M	DOB	AGE	
I 03	ADDRESS 3615		(DIRECTION, STREET, SUFFIX, QUALIFIER) ROCHESTER RD				CITY TROY		STATE MI	ZIP 48085	
G 04	HOME PHONE 645-0214	BUSINESS PHONE 689-8400	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D. MANAGER						
T 05	VICTIM CONNECTED TO OFFENSE <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	VICTIM TYPE <input type="checkbox"/> A INDIVIDUAL <input type="checkbox"/> B BUSINESS	F <input type="checkbox"/> FINANCIAL G <input type="checkbox"/> GOVERNMENT R <input type="checkbox"/> RELIGIOUS	S <input type="checkbox"/> SOCIETY / PUBLIC O <input type="checkbox"/> OTHER P <input type="checkbox"/> POLICE OFFICER	VICTIM INJURY N <input type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONE		M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES L <input type="checkbox"/> SEVERE LACERATION	T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS	F <input type="checkbox"/> FAT.	
I 06	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY				OUTSIDE FAMILY, BUT KNOWN			NOT KNOWN	REL / OFF #	FELONIOUS ASSAULT CIRCUMSTANCE	
M 07	01 SPOUSE 02 C-L SPOUSE 03 PARENT 04 SIBLING	05 CHILD 06 GRANDPARENT 07 GRANDCHILD 08 IN-LAW	09 STEPPARENT 10 STEPCCHILD 11 STEPSIBLING 12 OTHER FAMILY	20 ACQUAINTANCE 21 FRIEND 22 NEIGHBOR 23 BABYSITEE (baby)	24 BOY / GIRL FRIEND 25 CHILD OF "BG" ABOVE 26 HOMOSEXUAL REL. 27 EX-SPOUSE	28 EMPLOYEE 29 EMPLOYER 30 OTHERWISE KNOWN 31 VICTIM WAS OFFENDER	98 STRANGER 99 UNKNOWN	REL / OFF #	FELONIOUS ASSAULT CIRCUMSTANCE		
V 08	CODE	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX)				RAC	SEX	DOB	AGE	
I 09	ADDRESS		(DIRECTION, STREET, SUFFIX, QUALIFIER)				CITY		STATE	ZIP	
G 10	HOME PHONE	BUSINESS PHONE	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D.						
T 11	VICTIM CONNECTED TO OFFENSE <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	VICTIM TYPE <input type="checkbox"/> A INDIVIDUAL <input type="checkbox"/> B BUSINESS	F <input type="checkbox"/> FINANCIAL G <input type="checkbox"/> GOVERNMENT R <input type="checkbox"/> RELIGIOUS	S <input type="checkbox"/> SOCIETY / PUBLIC O <input type="checkbox"/> OTHER P <input type="checkbox"/> POLICE OFFICER	VICTIM INJURY N <input type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONE		M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES L <input type="checkbox"/> SEVERE LACERATION	T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS	F <input type="checkbox"/> FATA.	
I 12	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY				OUTSIDE FAMILY, BUT KNOWN			NOT KNOWN	REL / OFF #	FELONIOUS ASSAULT CIRCUMSTANCE	
M 13	01 SPOUSE 02 C-L SPOUSE 03 PARENT 04 SIBLING	05 CHILD 06 GRANDPARENT 07 GRANDCHILD 08 IN-LAW	09 STEPPARENT 10 STEPCCHILD 11 STEPSIBLING 12 OTHER FAMILY	20 ACQUAINTANCE 21 FRIEND 22 NEIGHBOR 23 BABYSITEE (baby)	24 BOY / GIRL FRIEND 25 CHILD OF "BG" ABOVE 26 HOMOSEXUAL REL. 27 EX-SPOUSE	28 EMPLOYEE 29 EMPLOYER 30 OTHERWISE KNOWN 31 VICTIM WAS OFFENDER	98 STRANGER 99 UNKNOWN	REL / OFF #	FELONIOUS ASSAULT CIRCUMSTANCE		
14	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)				RAC	SEX	DOB	AGE	
A 15	ADDRESS		(DIRECTION, STREET, SUFFIX, QUALIFIER)				CITY		STATE	ZIP	
R 16	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE		BUILD	SKIN TONE		
R 17	STATE	DRIVER'S LICENSE #	SOC. SEC. #	SID #	FBI #						
E 18	PERSON COMMENTS / CLOTHING				SUMMONS / CITATION NUMBER(S)						
S 19	ARREST / SUMMONS DESCRIPTION		ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	DEPARTMENT ARREST NUMBER	
T 20	ARREST / SUMMONS DESCRIPTION		ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER	
21	ARREST TYPE <input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST INDICATOR <input type="checkbox"/> MULTIPLE <input type="checkbox"/> COUNT 1 <input type="checkbox"/> N/A	CLEAR INDICATOR <input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST <input type="checkbox"/> UNARMED <input type="checkbox"/> ARMED WITH (ENTER "A" IF AUTO)	01 UNARMED 11 FIREARM 12 HANDGUN	13 RIFLE 14 SHOTGUN 15 OTHER FIREARM	20 LETHAL CUT INSTRUMENT (e.g. Switchblade Knives, etc.) 30 CLUB / BRASS KNUCKLES	ARREST ORIGIN <input type="checkbox"/> FOP <input type="checkbox"/> MOT	DISP <input type="checkbox"/> PER <input type="checkbox"/> TEL		
22	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)				RAC	SEX	DOB	AGE	
A 23	ADDRESS		(DIRECTION, STREET, SUFFIX, QUALIFIER)				CITY		STATE	ZIP	
R 24	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE		BUILD	SKIN TONE		
R 25	STATE	DRIVER'S LICENSE #	SOC. SEC. #	SID #	FBI #						
E 26	PERSON COMMENTS / CLOTHING				SUMMONS / CITATION NUMBER(S)						
S 27	ARREST / SUMMONS DESCRIPTION		ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	DEPARTMENT ARREST NUMBER	
T 28	ARREST / SUMMONS DESCRIPTION		ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER	
29	ARREST TYPE <input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST INDICATOR <input type="checkbox"/> MULTIPLE <input type="checkbox"/> COUNT 1 <input type="checkbox"/> N/A	CLEAR INDICATOR <input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST <input type="checkbox"/> UNARMED <input type="checkbox"/> ARMED WITH (ENTER "A" IF AUTO)	01 UNARMED 11 FIREARM 12 HANDGUN	13 RIFLE 14 SHOTGUN 15 OTHER FIREARM	20 LETHAL CUT INSTRUMENT (e.g. Switchblade Knives, etc.) 30 CLUB / BRASS KNUCKLES	ARREST ORIGIN <input type="checkbox"/> FOP <input type="checkbox"/> MOT	DISP <input type="checkbox"/> PER <input type="checkbox"/> TEL		
30	INVESTIGATING OFFICER(S)				REVIEWED BY:		ATTENTION TO:				

TROY POLICE DEPT.

500 W. Big Beaver, Troy, MI 48064

ORI #MI6378400

ARRATIVE REPORT

SUPP CORR DELETE

01	DATE	DAY	SHIFT	PLAT	BADGE 1	BADGE 2	INCIDENT STATUS	PRIM CLASS	YEAR	INCIDENT #
	2/28/02	Thu	09	99	105		<input type="checkbox"/> CLR ARREST <input type="checkbox"/> UNF <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> INACT		02	**6350

Directed Patrol Unit working Liquor Compliance Checks with Student Enforcement Aide Pamela McDonald (19).

Aide McDonald entered Hungary Howies at 3615 Rochester Rd, selected a 4 pack of Seagrams Cooler and presented it at the register for purchase. [redacted] completed the transaction without asking for identification or her age.

[redacted] stated to Officers that he thought she looked over 21. [redacted] has been working for Hungry Howies for 2 years and is not TIPS/TAMS trained. Manager Mike Beaufore was advised.

Citation issued to [redacted] for Furnishing Alcohol to Minor. 4 pack of Seagrams Cooler was tagged and placed into property. LCC violation completed.

INVESTIGATING OFFICER(S) WOLFE #105	REVIEWED BY	ASSIGNED TO/BADGE	ATTENTION TO
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NARRATIVE REPORT
WITNESS STATEMENT

01	DATE 02-28-02	DAY THU	SHIFT 99	PLAT 99	BADGE 1 105	BADGE 2 06	INCIDENT STATUS <input type="checkbox"/> CLR ARREST <input type="checkbox"/> UNF <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> INACT	PRIM CLASS	YEAR 02	INCIDENT # 6350
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02 Statement of: Pamela McDonald Home Phone:

03 Address: 500 W. Big Beaver Business Phone:

04 City: Troy State: MI Zip: 48084

06 I Pamela McDonald, entered Hungry Howies
 07 on 3615 Rochester 2-28-02 at 6:53 pm.
 08 I walked in grabbed a 4 pack of Seagram's
 09 Wild Strawberry Daiquiri. I approached
 10 the counter a dark complected young man
 11 asked me if that was all I said yes.
 12 Then he cashed me out with out
 13 asking for my I.d or age.

x: Pamela McDonald
(SIGNATURE)

28 Taken By: Wolfe
(SIGNATURE)

29 Place: Station

Date: 2-28-02 Time: 2020

INVESTIGATING OFFICER(S) WOLFE	REVIEWED BY	ASSIGNED TO / BADGE	ATTENTION TO
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The People of: The State of Michigan Local Use/Arrest No. Detection Device

OF: Township City Village County BAC

THE UNDERSIGNED Month Day Year At approximately A.M. P.M.
SAYS THAT ON: 2 28 02 6:55

State Driver's License Number Social Sec
N/A

Race Sex Height Weight Hair Eyes Occupation/Employer
B M 59 180 BRK BR

Vehicle Plate No. Year State Vehicle Description (Year, Make, Color) Type

THE PERSON NAMED ABOVE, in violation of Local Ordinance State Law Administrative Rule
UPON Humbrey Howes

AT OR NEAR 3615 ROCHESTER

WITHIN CITY VILLAGE TOWNSHIP OF TROY

COUNTY OF OAKLAND DID THE FOLLOWING:

Type	MCL CRe/PACC Code/ Ordinance	Description (include any bond amount collected on each charge)	Charge No.
<input checked="" type="checkbox"/> CI <input type="checkbox"/> Wam <input type="checkbox"/> Authorization pend.	9.77.3	FURNISH ALCOHOL TO MINOR	1
<input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Waiv			
<input type="checkbox"/> CI <input type="checkbox"/> Wam <input type="checkbox"/> Authorization pend.			
<input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Waiv			
<input type="checkbox"/> CI <input type="checkbox"/> Wam <input type="checkbox"/> Authorization pend.			
<input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Fel <input type="checkbox"/> Waiv			

TO THE COURT: Do not arraign on a felony charge until an authorized complaint is filed.

Offense Code(s)
1 2 3
Key for Type CI = Civil Infraction Misd = Misdemeanor Fel = Felony Wam = Warning Fug = Fugitive
Waiv = Violation for Which Fines/Costs May be Waived Authorization pend. = Authorization pending

Remarks
"THOUGHT SHE LOOKED OF AGE"
248 524-1581 2 yrs

CHECK IF APPROPRIATE Damage to Property Local Court Bond \$
 Vehicle Impounded Injury License Posted In Lieu of Bond
 Traffic Crash Death Appearance Certificate
Person in Active Military Service Yes No None

SEE DATE BELOW/SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS
 Hearing Date (if applicable)
 Informal Hearing Required (Court will notify)

In the 52-4 DISTRICT Court of OAKLAND COUNTY

Court Address & Phone Number
520 W. BIG BEAVER RD., TROY, MICHIGAN 48084
PHONE: (248) 528-0400

I served a copy of the civil infraction complaint upon the defendant (or owner/occupant by posting if applicable).
I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.

Complainant's Signature and receipt if applicable Month Day Year
Wolfe / BRAB6 2 28 02
Officer's Name (printed) Officer's ID No.
Wolfe / BRAB6 105106

Agency ORI Agency Name
MI- 6378400 TROY POLICE DEPARTMENT

UC-01a Court Copy 1
(rev. 11/95)

PRESS - YOU ARE MAKING FIVE COPIES
ORDER BY FORM NO. M76 (Revised 11/95)
Doubleday Bros. & Co., Kalamazoo, MI (616) 381-1040, (800) 632-2259

Ticket No.
No 6249662
Name

Case No.



Michigan Department of Consumer & Industry Services

LIQUOR CONTROL COMMISSION (C)
7150 Harris Drive
P.O. Box 30005
Lansing, Michigan 48909-7505
Phone (517) 322-1390 ~ FAX (517) 322-6347

VIOLATION REPORT

(Authorized by P.A.58 of 1998)

Officers Please Obtain This Information From The Licensee
License No. SDM 11104-2001 Business ID 65763 File #
THIS INFORMATION NOT AVAILABLE TO LICENSEE UNTIL 1/2001

1. Name of Licensee John DeAngelis 2. Doing Business As Giancarlo DeAngelis
3. Mailing Address (street, city, zip code) 3615 Rochester
4. Township Troy 5. County Oakland

6. Type of License(s) & Permit(s) SDM

7. Date of Violation: Thursday 2/28/02 6:55 AM of PM
(DAY) (DATE) (HOUR)

8. Violation Type: XX Minor
Intoxicated Person After hours sales/consumption Gambling
Fighting (must be inside licensed premises) Controlled Substances
Failure to Cooperate Prohibited Conduct OTHER:

if MINOR: Birth date 3/2/82 Was this a DECOY? Yes No If no, you MUST answer below:

IF above minor violation was not a decoy describe Enforcement Action Taken:

COPY OF APPEARANCE TICKET MUST BE ATTACHED

9. Submit Report Below or Indicate Attached Report # 02-6350

Officer Signature [Signature] Name and Title (print) Police Officer Wolfe

Officer Signature [Signature] Name and Title (print) Police Officer Bragg

Department Name Troy Police Department Phone # 248-524-3477

WITNESSES

1. Name Officers Wolfe & Bogg Address 500 W. Big Beaver, Troy, MI 48084

Will testify to: Sale to minor

2. Name Pamela McDonald Address 500 W. Big Beaver, Troy, MI 48084

Will testify to: Sale to minor

3. Name _____

Will testify to: Clerk completed transaction

4. Name Mike Beaufore Address 3615 Rochester, Troy, MI 48084

Will testify to: Manager on duty

5. Name _____ Address _____

Will testify to: _____

EVIDENCE

Location Held: 4 pkg Seagrams Wine Cellars

Placed into Property Tag # 116761

VIOLATION COMPLAINT PROFILE of COMPLAINANT

VIOLATION COMPLAINTS

Attention : MCDONALD

BUS ID : 15763 File No. : D - 55093 Lic Curr Issued : 04-01-2002 Lic Orig Issued : 08-09-1984 LGV : 132.5
 DBA : County : OAKLAND

Licensee : DE ANGELIS, GIANCARLO

TWP :

Address : 3615 ROCHESTER TROY, MI 48064

Mailing : 3615 ROCHESTER TROY, MI 48064

BUS STATUS : ACTIVE

Pending Reqs: 0

Complaint No: 68498

Viol Received : 03-11-2002 Viol Occured : 02-28-02 Agency : OPD Status : CLOSED Total 801(2) : 1 Ori. Dec : D7

Actv.Status : ACK Stat : 05-02-2002 Due : 06-17-2002 Ed : 06-12-2002 Susp : Rev :

Total Charge : 1 Fine Amt : \$ 400.00 Days Suspp : 0 CASH COMPL No 1

VIOLATIONS

Description	Date Occured	Minor Decoy
Sell, furnish to, allow person under 21 to consume-MCDONALD	02-28-2002	Y

VIOLATION ACTIVITIES

Description	Act Date	Comments
Violation Type	02-28-2002	SALE TO MINOR (19): (TROY PD/MCDONALD)
To Attorney General for Complaint	03-20-2002	To legal for complaint-FARM
From Attorney General	03-25-2002	Pending scheduling of hearing
Notice of Complaint	03-27-2002	NOTICE OF COMPLAINT MAILED JCC
Acknowledgement	05-02-2002	LIC ACK - COMM STOREY
Information	05-02-2002	FILE TO COMMISSION OFFICE JCC
Information	05-09-2002	FILE TO LP
Decision	05-12-2002	\$400 OR 20 DAYS SUSP - SEC 801(2)
Letter to licensee	05-14-2002	LTR & COPY OF ORDER SENT TO LICENSEE INV NO. 79186 FOR \$400 DUE 6-17-02; CC: TROY PD. TMN
Fine Paid	06-12-2002	\$400 REC'D, FILE CLOSED. TMN

LICENSES

License Number	Year	License Type	Permits
11104	2002	SDM	

LICENSEES & SUBORDINATES

Name : DE ANGELIS, GIANCARLO Role : IND Status : ACTIVE

SUBORDINATES

Name	Role	Status	Begin Date	End Date
DE ANGELIS, JOHN	AKA	ACTIVE	07-13-1981	

STATE OF MICHIGAN

DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES
LIQUOR CONTROL COMMISSION

IN RE: GIANCARLO DeANGELIS
A/K/A JOHN DeANGELIS
3615 ROCHESTER
TROY, MI. 48084

COMPLAINT NO. 2-68498
BUSINESS I.D. NO. 15763

SDM

CHARGE - February 28, 2002

- (1) Sell, furnish or give away alcoholic liquor to a person, one Pamela McDonald, who had not then attained the age of twenty-one (21) years, contrary to Const. 1963, Art. 4, §40 and contrary to Section 801(2) and/or Section 701(1) of the Michigan Liquor Control Code, MCL 436.1801(2) and/or MCL 436.1701(1).

FINDINGS OF FACT

The Commissioner finds as fact that based upon the signature of Giancarlo DeAngelis, the above named Licensee, on the Waiver and Acknowledgment form of the Michigan Liquor Control Commission (MLCC), the aforementioned Licensee in this case voluntarily waived right to contest the cited allegation in this matter and, further, waived right to a hearing and entered a plea of acknowledgment to the one charge stated in Case No. 2-68498 pursuant to Rule 436.1907 of the MLCC.

The Commissioner further accepts the Violation Report of this case and attachments therein and a True Copy of the prior record of this Licensee since being licensed by the MLCC at the above named location under the current ownership as evidence in lieu of testimony in this matter.

GIANCARLO DeANGELIS, A/K/A JOHN DeANGELIS**COMPLAINT NO. 2-68498
PAGE 2**

The Commissioner believes and finds as fact, on the bases of the Violation Report and attachments therein, that Pamela McDonald, while under the direction of the Troy Police Department, entered the above named licensed establishment during February 28, 2002 and purchased alcoholic liquor from an employee of the above-named Licensee without showing proper proof of age.

The Commissioner further finds that the employee of the above-named Licensee in this case did not demand, nor was shown, proper proof of age and did not make a diligent inquiry to determine the proper true age of the purchaser.

The Commissioner further believes and finds as fact, on the bases of the Violation Report and attachments therein, that Pamela McDonald was 19 years of age at the time of this incident.

The Commissioner took under consideration for mitigative circumstances a signed written statement submitted to the MLCC by the above-named Licensee which stated, in part, the steps that have been taken to prevent future violations of this type.

CONCLUSIONS OF LAW

Based upon the aforementioned Acknowledgment and Findings of Fact, the Commissioner concludes that the Licensee in Case No. 2-68498 did violate MCL 436.1801(2), as cited.

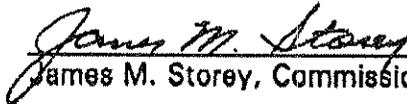
GIANCARLO DeANGELIS, A/K/A JOHN DeANGELIS

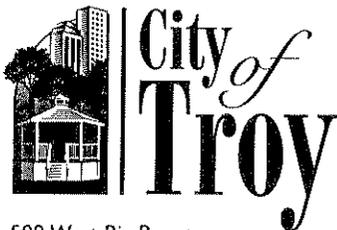
COMPLAINT NO. 2-68498
PAGE 3**ORDER**

In determining penalty for the charge for which a violation was found, the Commissioner considered the Licensee's total record which shows one prior violation which is similar to the one in this Complaint, and which occurred in 1990, since being licensed by the MLCC on August 9, 1984 at the above named location under the current ownership; further, the Commissioner notes that the above-named Licensee successfully passed a MLCC controlled buy operation on May 10, 2001.

The Commissioner, therefore, Orders a fine of \$400.00 as penalty in this matter. The Commissioner further Orders that a suspension of 20 days be imposed if the fine is not paid.

MICHIGAN LIQUOR CONTROL COMMISSION

Dated: May 12, 2002
James M. Storey, Commissioner



500 West Big Beaver
Troy, Michigan 48084
Fax: (248) 524-0851
www.ci.troy.mi.us

Area code (248)
Assessing
524-3311
Bldg. Inspections
524-3344
Bldg. Operations
524-3368
City Clerk
524-3316
City Manager
524-3330
Community Affairs
524-1147
Engineering
524-3383
Finance
524-3411
Fire-Administration
524-3419
Human Resources
524-3339
Information Technology
619-7279
Law
524-3320
Library
524-3545
Parks & Recreation
524-3484
Planning
524-3364
Police-Administration
524-3443
Public Works
524-3370
Purchasing
524-3338
Real Estate & Development
524-3498
Treasurer
524-3334
General Information
524-3300

February 7, 2003

Hungry Howies
3615 Rochester
Troy, Michigan 48084

Re: Liquor License: Hungry Howies
3615 Rochester
Troy, Michigan 48084

A Public Hearing will be held by and before the Council of the City of Troy at City Hall, 500 W Big Beaver, Troy, Michigan on Wednesday, February 26, 2003 at 7:30 PM, or as soon thereafter as the agenda will permit, to determine whether the City Council should recommend to the Michigan Liquor Control Commission, the revocation of licenses allowed for the sale and/or consumption of alcoholic beverage, for the following reasons:

License Type: SDM (11104-2002)
Violation Name: SALE TO MINOR (COMPLIANCE TEST)
Violation Date(s): February 28, 2002

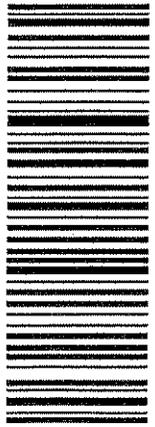
You will be given an opportunity to be heard and present evidence at the public hearing and legal counsel may represent you. If you have questions regarding the procedure or the facts and circumstances surrounding your violation(s), you may contact the City Attorney's office at 248-524-3320.

Sincerely,

Barbara A. Holmes, CMC
Deputy City Clerk

C: Giancarlo DeAngelis
Licensee
3615 Rochester
Troy, Michigan 48084

CERTIFIED MAIL



7000 0520 0020 0628 8435
7000 0520 0020 0628 8435

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

[Empty box for recipient name]

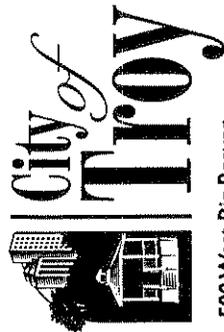
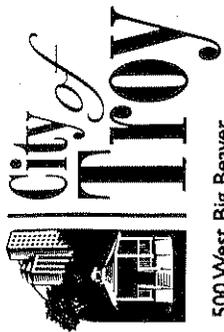
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Rec. Licensee
Street 3615 Rochester
City, Troy, Michigan 48084

Hungry Howies

PS Form 3800, April 2002



U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

[Empty box for recipient name]

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

Sent To Hungry Howies
Street Giancarlo DeAngelis
City, Si 3615 Rochester
Troy, Michigan 48084

PS Form 3800, April 2002

Spectadium
2511 Livernois
Troy MI 48084
Class C (3577-2002)
Sale to Minor (MLCC Compliance Test)

City Council Hearings for Liquor Violations

X

Current History file

Copy of original incident report (MLCC operation).

Copy of MLCC violation report (MLCC operation)

X

Copy of MLCC hearing disposition

Disposition of City Summons to server/seller (MLCC operation)

Spectadium

2511 Liversnois

LCC

Liquor Licensee History

Business name: **Spectadium**
 Address: 2511 Livernois (248)
 Licensee: Premier Sports, L.L.C.
 License type: **Class C (3577-2002)**
 Permits: Outdoor Service, 3 bars, Sunday Sales, Dance/Ent
 Comments:

Date	Troy Incident #	Type	Disposition	Date
1/27/95		Business Opened by The Athletic Club Company.		
10/23/95	95-40225	Gambling rpt by LCC	Unsustained	11/06/95
8/26/96		Business transferred to Spectadium, L.L.C.		
11/25/96		2 nd bar approval.		
1/24/97	97-2989	Violation: Serve under 21, Allow intoxicated, furnish to intoxicated, unsigned license.	\$400. By LCC	5/12/97
7/1/97	97-23987	Sell to minor (Compliance Insp).	\$1000.	9/30/97
10/24/97	97-38731	Serve intoxicated person/Allow patron to be molested.	\$1300.	4/24/98
10/24/97	MLCC	Change in Stockholders (Mark Alhermizi 40% transferred to "remaining partners")		
01/15/99	99-02312	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
03/05/99	99-08619	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/23/99	99-23831	Compliance Test	PASSED	
11/02/99	none	Compliance Test	PASSED	
06/25/00	00-22543	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
07/26/00	none	Compliance Test	PASSED	
08/19/00	00-30607	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
10/17/00	00-38417	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
10/25/00	00-39556	Compliance Test	PASSED	

11/16/00	00-42526	Compliance Test	PASSED	
02/05/01	01-04285	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
04/17/01	01-13075	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
04/23/01	01-13983	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
05/03/01		Compliance Test	PASSED	
05/15/01	01-16978	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/18/01	01-21508	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/19/01	01-21590	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
08/15/01	01-29311	Compliance Test	PASSED	
09/27/01	01-34740	Compliance Test	PASSED	
10/12/01	01-36821	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
12/12/01	01-44424	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
02/22/02	02-05706	Compliance Test	PASSED	
03/07/02	02-07078	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
03/23/02	MLCC	Sale to Minor (MLCC Compliance Test)	\$600	05/15/02
04/11/02	02-11068	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/26/02	02-20477	Compliance Test	PASSED	
06/27/02	02-20637	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
08/29/02	02-28601	Liquor Inspection (Road Patrol- Kocenda)	NO VIOLATIONS	
10/08/02	02-33185	Compliance Test	PASSED	
12/22/02	02-41328	Liquor Inspection (Road Patrol- Giorgi)	NO VIOLATIONS	



MICHIGAN DEPARTMENT OF CONSUMER & INDUSTRY SERVICES
LIQUOR CONTROL COMMISSION
7150 Harris Drive
P.O. Box 30005
Lansing, MI 48909-7505

NOTIFICATION OF VIOLATION REPORT

(Authorized by MCL 436.1703 & MAC R436.1905)

TO: Troy Police Department
Chief of Police
500 W Big Beaver
Troy MI 48084

DATE: 3-25-02

This is to advise you that a violation report has been submitted by investigators of the Michigan Liquor Control Commission against the following licensee:

Licensee: Premier Sports LLC
Address: 2511 Livernois, Troy

This licensee has been charged with 436.1801 Sale of alcoholic beverages to a person less than 21 years of age

on 3-23-02

You will be notified of the disposition of the alleged violation after a hearing has been held and a decision has been made. If you have any questions, please contact the Enforcement Division at 517-322-1370.

RECEIVED
Chief of Police
3/26/02 CTC



State of Michigan
John Engler, Governor

Department of Consumer & Industry Services
Kathleen M. Wilbur, Director

Liquor Control Commission
7150 Harris Drive
P.O. Box 30005
Lansing, Michigan 48909-7505
(517) 322-1345

May 20, 2002

*# 600.- (\$300 x 2)
5/15/02*

PREMIER SPORTS, L.L.C.
D/B/A SPECTADIUM
2511 LIVERNOIS
TROY, MI 48084

RE: Complaint No. 2-68841

Dear Licensee:

Enclosed is a copy of the Commissioner's Order issued as the result of the above Complaint.

If you elect to pay the fine, a bank or postal money order, certified check, or authorized credit card payable to the STATE OF MICHIGAN must be received in this office no later than June 24, 2002 as indicated on your Invoice No. 79242. Failure to submit the fine will result in confiscation of your license for the alternative penalty.

Should you wish to appeal the decision, a request for an appeal, accompanied by a fee of \$25, must be received in this office within 20 days from the mailing date of this Order. **IN FILING FOR AN APPEAL, YOU MUST STATE YOUR REASONS FOR REQUESTING THE APPEAL OR YOUR REQUEST WILL NOT BE HONORED.**

If there are any questions regarding this Order, please contact Hearings and Appeals at (517) 322-1390. Our office hours are from 8:00 a.m. to 5:00 p.m.

Sincerely,

MICHIGAN LIQUOR CONTROL COMMISSION

Susan K. Conklin

Susan K. Conklin, Supervisor
Hearings and Appeals

SKC:wls

Enclosures

cc: Inv. William Klingbeil
Inv. Laura Peters
✓Troy PD

RECEIVED
Chief of Police
5/22/02 *CR*

STATE OF MICHIGAN

DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES
LIQUOR CONTROL COMMISSION

IN RE: PREMIER SPORTS, L.L.C.
D/B/A SPECTADIUM
2511 LIVERNOIS
TROY, MI. 48084

COMPLAINT NO. 2-68841
BUSINESS I.D. NO. 2328

CLASS C

CHARGE - March 23, 2002

- (1) Sell, furnish or give away alcoholic liquor to a person, one unnamed minor, X-096, date of birth November 24, 1982, who had not then attained the age of twenty-one (21) years, contrary to Const. 1963, Art. 4, §40 and contrary to Section 801(2) and/or Section 701(1) of the Michigan Liquor Control Code, MCL 436.1801(2) and/or MCL 436.1701(1).
- (2) Sell, furnish or give away alcoholic liquor to a person, one unnamed minor, X-099, date of birth December 5, 1982, who had not then attained the age of twenty-one (21) years, contrary to Const. 1963, Art. 4, §40 and contrary to Section 801(2) and/or Section 701(1) of the Michigan Liquor Control Code, MCL 436.1801(2) and/or MCL 436.1701(1).

FINDINGS OF FACT

The Commissioner finds as fact that based upon the signature of Paul M. VanGamper, a member of the above named Licensed Limited Liability Company, on the Waiver and Acknowledgment form of the Michigan Liquor Control Commission (MLCC), the aforementioned Licensee in this case voluntarily waived right to contest the cited allegations in this matter and, further, waived right to a hearing and entered pleas of acknowledgment to the two charges stated in Case No. 2-68841 pursuant to Rule 436.1907 of the MLCC.

The Commissioner further accepts the Violation Report of this case and attachments therein and a True Copy of the prior record of this Licensee since being licensed by the MLCC at the above-named location under the current ownership as evidence in lieu of testimony in this matter.

The Commissioner believes and finds as fact, on the bases of the Violation Report and attachments therein, that two unnamed minors, X-096, date of birth November 24, 1982, and X-099, date of birth December 5, 1982, while under the direction of the Michigan Liquor Control Commission, entered the above named licensed establishment during March 23, 2002 and were served alcoholic liquor by an employee of the above-named Licensee after showing proper proofs of age which stated their true ages of 19 and included the words "Under 21".

The Commissioner further finds that the employee of the above-named Licensee in this case requested and was shown proper proofs of age and did not make a diligent inquiry to determine the proper true ages of the purchasers.

The Commissioner further believes and finds as fact, on the bases of the Violation Report and attachments therein, that the unnamed minors, X-096, date of birth November 24, 1982, and X-099, date of birth December 5, 1982, were each 19 years of age at the time of this incident.

CONCLUSIONS OF LAW

Based upon the aforementioned Acknowledgment and Findings of Fact, the Commissioner concludes that the Licensee in Case No. 2-68841 did violate MCL 436.1801(2), as cited in Charge Nos. 1 and 2 of the Complaint in this matter.

ORDER

In determining penalty for the charges for which violations were found, the Commissioner considered the Licensee's total record which shows no prior violation since being licensed by the MLCC on August 27, 1998 at the above-named location under the current ownership.

The Commissioner, therefore, Orders a fine of \$300 for each Charge as penalty in this matter. The Commissioner further Orders that a suspension of 30 days be imposed if the total fine of \$600.00 is not paid.

MICHIGAN LIQUOR CONTROL COMMISSION

Dated: 05-15-02



Walter R. Keck, Commissioner

TRUE COPY

VIOLATION COMPLAINT RECORD COMPLAINT

LATION COMPLAINTS

LICENSEES & SUBORDINATES

Name : PREMIER SPORTS, L.L.C.

Role : LLC

Status : ACTIVE

SUBORDINATES

<u>Name</u>	<u>Role</u>	<u>Status</u>	<u>Begin Date</u>	<u>End Date</u>
FORBES, SCOTT M	MEN	ACTIVE	08-27-1998	
VAN GAMPER, JOSEPH E	MEN	ACTIVE	08-27-1998	
DON KITSON, L.L.C.	MEN	ACTIVE	08-27-1998	
VERDONICK, GREGORY W	MEN	ACTIVE	08-27-1998	
VAN GAMPER, PAUL M	MEN	ACTIVE	08-27-1998	
DAY, HOLLY S	MEN	ACTIVE	08-27-1998	
ALEXANDER, ROBIN J	MEN	ACTIVE	08-27-1998	
FORMHAND, CHRIS	MEN	ACTIVE	08-27-1998	
RHODES, STEVEN	MEN	ACTIVE	08-27-1998	
HALPIN, JOHN M	MEN	ACTIVE	08-27-1998	

VIOLATION COMPLAINTS

VIOLATION COMPLAINTS

Attention : X096 X099 (SCH TUES OR THURS ONLY)

BUS ID : 2328 File No. : D - 66707 Lic Curr Issued : 04-11-2002 Lic Orig Issued : 08-27-1998 LGU : 132.5
 DBA : SPECTADIUM County : OAKLAND

Licensee : PREMIER SPORTS, L.L.C. TWP :

Address : 2511 LIVERNOIS TROY, MI 48084 Mailing : 2511 LIVERNOIS TROY, MI 48084

BUS STATUS : ACTIVE Pending Reqs: 0 Complaint No: 68841

Viol Received : 03-26-2002 Viol Occured : 03-23-02 Agency : LCC Status : CLOSED Total 801(2) : 1 Gri. Dec : D7

Actv. Status : ACK Stat : 05-09-2002 Due : 06-24-2002 Pd : 06-06-2002 Susp : Rev :

Total Charge : 1 Fine Amt : 5 600.00 Days Suspp : 0 OMNI COMPL No :

VIOLATIONS

Description	Date Occured	Minor Desoy
Sell. furnish to, allow parson under 21 to consume-X096 & X099	03-23-2002	Y

VIOLATION ACTIVITIES

Description	Act Date	Comments
Violation Type	03-23-2002	1) SALE TO MINOR-X096 (19); 2) SALE TO MINOR-X099 (19): (LCC INVS KLINGBEIL & PETERS/X-099 & X-096)
To Attorney General for Complaint	04-12-2002	To legal for complaint-FARM
From Attorney General	04-17-2002	Pending scheduling of hearing
Notice of Complaint	04-29-2002	NOTICE OF COMPLAINT MAILED CMG
Acknowledgement	05-09-2002	LIC ACK - COMM KRECK
Information	05-10-2002	FILE TO COMMISSION OFFICE CMG
Information	05-15-2002	FILE TO LF
Decision	05-15-2002	1)\$300, 2)\$300 TOTAL OF \$600 OR 30 DAYS SUSP - SEC 801(2)
Letter to licensee	05-20-2002	LTR SENT TO LICENSEE INV 79242 FOR \$600 DUE 6-24-02, CC: INV. KLINGBEIL, INV. PETERS, TROY PD WLS
Fine Paid	06-06-2002	\$600 REC'D - FILE CLOSED. WLS
Information	06-21-2002	EVIDENCE REPORT TO SUPR HARDY
Information	07-03-2002	EVIDENCE DESTROYED PER SUPR HARDY.

LICENSES

License Number	Year	License Type	Permits
2377	2002	CLASSC	SUNDAY SALES, DAMC-ENT, CD-SERV



500 West Big Beaver
Troy, Michigan 48084
Fax: (248) 524-0851
www.ci.troy.mi.us

February 7, 2003

Area code (248)

Assessing
524-3311

Bldg. Inspections
524-3344

Bldg. Operations
524-3368

City Clerk
524-3316

City Manager
524-3330

Community Affairs
524-1147

Engineering
524-3383

Finance
524-3411

Fire-Administration
524-3419

Human Resources
524-3339

Information Technology
619-7279

Law
524-3320

Library
524-3545

Parks & Recreation
524-3484

Planning
524-3364

Police-Administration
524-3443

Public Works
524-3370

Purchasing
524-3338

Real Estate & Development
524-3498

Treasurer
524-3334

General Information
524-3300

Spectadium
2511 Livernois
Troy, Michigan 48084

Re: Liquor License: Spectadium
2511 Livernois
Troy, Michigan 48084

A Public Hearing will be held by and before the Council of the City of Troy at City Hall, 500 W Big Beaver, Troy, Michigan on Wednesday, February 26, 2003 at 7:30 PM, or as soon thereafter as the agenda will permit, to determine whether the City Council should recommend to the Michigan Liquor Control Commission, the revocation of licenses allowed for the sale and/or consumption of alcoholic beverage, for the following reasons:

License Type: Class C (3577-2002)
Violation Name: SALE TO MINOR (MLCC COMPLIANCE TEST)
Violation Date(s): March 23, 2002

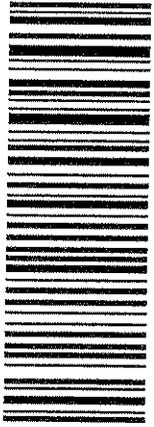
You will be given an opportunity to be heard and present evidence at the public hearing and legal counsel may represent you. If you have questions regarding the procedure or the facts and circumstances surrounding your violation(s), you may contact the City Attorney's office at 248-524-3320.

Sincerely,

Barbara A. Holmes, CMC
Deputy City Clerk

C: Paul VanGamper
Premier Sports, L.L.C.
2511 Livernois
Troy, Michigan 48084

CERTIFIED MAIL



7000 0520 0020 0628 8442
7000 0520 0020 0628 8442

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)



Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark
Here

To: **Paul VanGammer**
Re: **Premier Sports, L.L.C.**
Str: **2511 Livernois**
City: **Troy, Michigan 48084**

(nailer)

PS Form 3800, February 2006

Instructions



500 West Big Beaver
Troy, Michigan 48084

084

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)



Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Pc

To: **Spectadium**
Se: **Premier Sports, L.L.C**
Str: **2511 Livernois**
City: **Troy, Michigan 48084**

PS



500 West Big Beaver
Troy, Michigan 48084

Alibi Lounge
6700 Rochester
Troy MI 48098
Class C (858-2002)
Sale to Minor (Compliance Test)

City Council Hearings for Liquor Violations

- X Current History file
- X Copy of original incident report
- X Copy of MLCC violation report
- Copy of MLCC hearing disposition (pending)
- X Disposition of City Summons to server/seller

Alibi Lounge
6700 Rochester

will take 45 days for paperwork
to be filed in Lansing.

LCC

Liquor Licensee History

Business name: **Alibi Lounge**
 Address: 6700 Rochester (248) 879-0014
 Licensee: Alibi Lounge of Troy, Inc.
 License type: **Class C (858-2002)**
 Permits: Sunday Sales
 Comments:

Date	Troy Incident #	Type	Disposition	Date
03/17/80		Council approves license transfer		
10/26/89	89-33821	Sale to Minor (compliance test)	\$200 fine	04/11/90
04/16/93	93-10747	Sale to Minor (compliance test)	\$100 fine	03/31/94
03/28/94		Council orders TIPS training for all employees-proof sent to PD		
01/09/99	99-01282	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
03/06/99	99-08774	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/07/99		Council approves add space request		
06/23/99	99-23638	Compliance Test	PASSED	
11/02/99	none	Compliance Test	PASSED	
11/16/99	none	Compliance Test	PASSED	
04/27/00	00-14304	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
07/26/00	none	Compliance Test	PASSED	
08/27/00	00-31777	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
11/01/00	00-40529	Compliance Test	PASSED	
11/14/00	00-42180	Compliance Test	PASSED	
01/17/01	01-01998	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
03/27/01	01-10470	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
05/03/01		Compliance Test	PASSED	
06/06/01	01-19809	Liquor Inspection (Road Patrol)	NO VIOLATIONS	

08/16/01	01-29499	Compliance Test	PASSED	
09/13/01	01-32999	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
10/02/01	01-35426	Compliance Test	PASSED	
10/18/01	01-37640	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
01/12/02	02-01253	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
01/16/02	02-01706	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
02/09/02	02-04270	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
02/26/02	02-06161	Compliance Test	PASSED	
03/15/02	02-08090	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
04/16/02	02-11686	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/21/02	02-19782	Liquor Inspection (Road Patrol)	NO VIOLATIONS	
06/27/02	02-20616	Compliance Test	PASSED	
10/11/02	02-33510	Sale to Minor (compliance test)	\$500 fine	01/09/03
11/18/02	02-37557	Liquor Inspection (Road Patrol-Barrows)	NO VIOLATIONS	
01/07/03	03-743	Liquor Inspection (Road Patrol-Barrows)	NO VIOLATIONS	

01	DATE	DAY	SHIFT	PLATOON	BADGE 1	BADGE 2	UCR STATUS	E12 <input type="checkbox"/> EXTRACTION DECLINED	YEAR	INCIDENT NUMBER	
01	10.11.02	FRI	09	99	070	062	E10 <input type="checkbox"/> DEATH OF OFFENDER E11 <input type="checkbox"/> PROSECUTION DECLINED	E13 <input type="checkbox"/> REFUSED TO COOPERATE E14 <input type="checkbox"/> JUVENILE, NO CUSTODY	02	33570	
02	RECEIVED	DISPATCHED	ARRIVED	COMPLETED	DATE(S) OCCURRED	TIMES(S) OCCURRED	ASSIGNED HOUR / DAY				
02	2130	2130	2120	2240	10.11.02	3120	211 FRI				
03	LOCATION / ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER)					LOCATION 2 (INTERSECTING STREET)					
03	16700 ROCHESTER										
04	CITY	STATE	ZIP	CODE	BUSINESS NAME	BUSINESS PHONE					
04	TROY	MI	48068	L	ALTR	(248) 879-00					
05	BUSINESS COMMENTS / ESTABLISHMENT DESCRIPTION				ESTAB CODE	ORIGIN	HOW ACTIVATED			PATROL	GEOGRAPHIC
05	BAR				1560	PHONE <input type="checkbox"/> PERSON <input type="checkbox"/> #11 <input type="checkbox"/> POP <input type="checkbox"/> PERSON <input type="checkbox"/> MDT <input type="checkbox"/>	OTHER <input type="checkbox"/> DISP <input type="checkbox"/> OTHER <input type="checkbox"/>			05	
06	NATURE OF OFFENSE #1		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS <input type="checkbox"/>	WEAPON <input type="checkbox"/>	# PREM	ACTIVITY	ACTIVITY TYPES (Maximum 3 Per Offense)	
06	LCC VIOLATION							00	00	B BUYING / RECEIVING C CULTIVATING / MANUFACTURING / PUBLIC D DISTRIBUTING / SELLING E EXPLOITING CHILDREN O OPERATING / PROMOTING / ASSISTING P POSSESSING / CONCEALING T TRANSPORTING / TRANSMITTING / IMPOR. U USING / CONSUMING	
07	NATURE OF OFFENSE #2		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS <input type="checkbox"/>	WEAPON <input type="checkbox"/>	# PREM	ACTIVITY		
07											
08	NATURE OF OFFENSE #3		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS <input type="checkbox"/>	WEAPON <input type="checkbox"/>	# PREM	ACTIVITY		
08											
09	NATURE OF OFFENSE #4		ATT <input type="checkbox"/>	CRIME CLASS	ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> COMP <input type="checkbox"/>	BIAS <input type="checkbox"/>	WEAPON <input type="checkbox"/>	# PREM	ACTIVITY	OFFENSE COMMENTS	
09											

10	CODE	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX)					RAC	SEX	DOB	AGE
10	V	14	CROCKER DAVID A					WM	M	09/14/83	1
11	ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER)		CITY		STATE	ZIP					
11	500 W BIG BEAVER		TROY		MI	48068					
12	HOME PHONE	BUSINESS PHONE	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D.						
12		(248) 3477									

13	VICTIM CONNECTED TO OFFENSE	<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 04	VICTIM TYPE	F <input type="checkbox"/> FINANCIAL G <input type="checkbox"/> GOVERNMENT R <input type="checkbox"/> RELIGIOUS	S <input type="checkbox"/> SOCIETY / PUBLIC O <input type="checkbox"/> OTHER P <input type="checkbox"/> POLICE OFFICER	VICTIM INJURY	N <input type="checkbox"/> NONE B <input type="checkbox"/> BROKEN BONE O <input type="checkbox"/> MAJOR INJURY L <input type="checkbox"/> SEVERE LACERATION U <input type="checkbox"/> UNCONSCIOUSNESS	M <input type="checkbox"/> MINOR INJURY O <input type="checkbox"/> MAJOR INJURY	I <input type="checkbox"/> POSS. INT. INJURIES L <input type="checkbox"/> SEVERE LACERATION	T <input type="checkbox"/> LOSS OF TEETH U <input type="checkbox"/> UNCONSCIOUSNESS	F <input type="checkbox"/> F F <input type="checkbox"/> F
14	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY			OUTSIDE FAMILY, BUT KNOWN			NOT KNOWN		REL / OFF #		FELONIOUS ASSAULT CIRCUMSTAN
14	01 SPOUSE	05 CHILD	09 STEPPARENT	20 ACQUAINTANCE	24 BOY / GIRL FRIEND	28 EMPLOYEE	88 STRANGER	/		/	
14	02 C-L SPOUSE	06 GRANDPARENT	10 STEPCHILD	21 FRIEND	25 CHILD OF "BIG" ABOVE	29 EMPLOYER	89 UNKNOWN	/		/	
14	03 PARENT	07 GRANDCHILD	11 STEPSIBLING	22 NEIGHBOR	26 HOMOSEXUAL REL.	30 OTHERWISE KNOWN	REL / OFF #		/		
14	04 SIBLING	08 IN-LAW	12 OTHER FAMILY	23 BABYSITTEE (baby)	27 EX-SPOUSE	31 VICTIM WAS OFFENDER	/		/		

16	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)					RAC	SEX	DOB	AGE
16	A	01	HENDERSONS RITA JOYCE					WM	F	12/03/49	5
17	ADDRESS (DIRECTION, STREET, SUFFIX, QUALIFIER)		CITY		STATE	ZIP					
17	3035 CARRY CT		ARIZONA HILLS		MI	48322					
18	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE	BUILD	SKIN TONE			
18		(248) 879-0014	506								
19	STATE	DRIVER'S LICENSE #	BOC. SEC. #	BD #	FBI #						
19		44H536238447922									
20	PERSON COMMENTS / CLOTHING					SUMMONS / CITATION NUMBER(S)					
20						632147					

21	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	DEPARTMENT	ARREST NUMBER
21	FRESH ARREST		10.11.02	09	070	062				
22	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER	
22										
23	ARREST TYPE	<input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE <input type="checkbox"/> MULTIPLE <input type="checkbox"/> CLEAR <input type="checkbox"/> Y ARREST <input type="checkbox"/> COUNT 1 <input type="checkbox"/> INDICATOR <input type="checkbox"/> N/A	UPON ARREST <input type="checkbox"/> ARMED WITH <input type="checkbox"/> (ENTER "A" IF AUTO)	01 <input type="checkbox"/> UNARMED 11 <input type="checkbox"/> FIREARM 12 <input type="checkbox"/> HANDGUN	13 <input type="checkbox"/> RIFLE 14 <input type="checkbox"/> SHOTGUN 15 <input type="checkbox"/> OTHER FIREARM	20 <input type="checkbox"/> LETHAL CUT INSTRUMENT (e.g. Switchblade Knife, etc.)	30 <input type="checkbox"/> CLUB / BRASS KNUCKLES	ARREST ORIGIN <input type="checkbox"/> POP <input type="checkbox"/> MDT <input type="checkbox"/>	
23										

24	CODES	DESCRIPTION	PROPERTY TYPE	QUANTITY	YEAR	MAKE	MODEL	
24	E	PHOTO		01				
25	STYLE	COLOR(S) TOP / BOTTOM	MONTH	YEAR	STATE	LICENSE	SERIAL / VIN NUMBER / CONDITION / OTHER I.D.	
25								
26	STOLEN	DAMAGED	RECOVERED	PROPERTY TAG #	LOCATION PROPERTY	LEIN / NCIC REF #		
26								
27	REC BADGE	REC BADGE 2	LEO	RECOVERY DATE	NOTIFY BADGE	NOTIFY DATE	NOTIFY TIME	PERSON / DEPARTMENT NOTIFIED
27								

28	COMMENTS - INSURANCE COMPANY / LIEN HOLDER / BANK	SEIZED DRUGS	TYPE	AMOUNT	MEAS
28	PHOTO OF ALCOHOL BEVERAGES SEIZED AT ALTR				
29	INVESTIGATING OFFICER(S)	REVIEWED BY:	ATTENTION TO:		
29	ROBERTA ROBERTS	WLA # 221			

PERSON REPORT

01	DATE	DAY	SHIFT	PLATOON	BADGE 1	BADGE 2	UCR STATUS E10 <input type="checkbox"/> DEATH OF OFFENDER E11 <input type="checkbox"/> PROSECUTION DECLINED	E12 <input type="checkbox"/> EXTRADITION DECLINED E13 <input type="checkbox"/> REFUSED TO COOPERATE E14 <input type="checkbox"/> JAIL/IN, NO CUSTODY	YEAR	INCIDENT NUMBER
	10.11.02	FRI	09	9.9	0.70	06.2			021	33510

CODES (1) REPT'D BY (2) OWNER (3) VICT (4) PERS INTERV (5) ARREST (6) SUSPECT (7) MISSING (8) WITHN (9) SECUR'D BY (10) JUV ARREST (11) DRIVER (12) PASSENGER (13) SUMMONED (14) RESPON:

V 02	CODE	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE
	14		SOIX, ELIZABETH, A.			WF 10.30.83	18

I 03	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY	STATE	ZIP
	500 W Big Beaver		TROY	MI	48068

G 04	HOME PHONE	BUSINESS PHONE	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D.
		524-3477			

T 05	VICTIM CONNECTED TO OFFENSE	<input type="checkbox"/> 1 <input type="checkbox"/> 2	VICTIM TYPE	<input type="checkbox"/> 1 INDIVIDUAL <input type="checkbox"/> 2 BUSINESS	F FINANCIAL G GOVERNMENT R RELIGIOUS	S SOCIETY / PUBLIC O OTHER P POLICE OFFICER	VICTIM INJURY	<input type="checkbox"/> 1 NONE <input type="checkbox"/> 2 BROKEN BONE	M MINOR INJURY O MAJOR INJURY	I POSS. INT. INJURIES L SEVERE LACERATION	T LOSS OF TEETH U UNCONSCIOUSNESS	F FA
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I 06	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY			OUTSIDE FAMILY, BUT KNOWN			NOT KNOWN	REL / OFF #	FELONIOUS ASSAULT CIRCUMSTAN
	01 SPOUSE	05 CHILD	09 STEPPARENT	20 ACQUAINTANCE	24 BOY / GIRL FRIEND	28 EMPLOYEE	98 STRANGER	/	
	02 C-L SPOUSE	06 GRANDPARENT	10 STEPCHILD	21 FRIEND	25 CHILD OF "BG" ABOVE	29 EMPLOYER	99 UNKNOWN	/	
	03 PARENT	07 GRANDCHILD	11 STEPSIBLING	22 NEIGHBOR	26 HOMOSEXUAL REL.	30 OTHERWISE KNOWN	REL / OFF #	/	
	04 SIBLING	08 IN-LAW	12 OTHER FAMILY	23 BABYSITTEE (baby)	27 EX-SPOUSE	31 VICTIM WAS OFFENDER	/	/	

V 08	CODE	VICT #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE
	4		WOOD, STEVEN				

I 09	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY	STATE	ZIP
	6200 ROCHESTER		TROY	MI	48096

G 10	HOME PHONE	BUSINESS PHONE	STATE	DRIVER'S LICENSE #	PERSON COMMENTS / OTHER I.D.
		879-0014			MANAGER, ALICE

T 11	VICTIM CONNECTED TO OFFENSE	<input type="checkbox"/> 1 <input type="checkbox"/> 2	VICTIM TYPE	<input type="checkbox"/> 1 INDIVIDUAL <input type="checkbox"/> 2 BUSINESS	F FINANCIAL G GOVERNMENT R RELIGIOUS	S SOCIETY / PUBLIC O OTHER P POLICE OFFICER	VICTIM INJURY	<input type="checkbox"/> 1 NONE <input type="checkbox"/> 2 BROKEN BONE	M MINOR INJURY O MAJOR INJURY	I POSS. INT. INJURIES L SEVERE LACERATION	T LOSS OF TEETH U UNCONSCIOUSNESS	F FA
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I 12	RELATIONSHIP OF VICTIM TO OFFENDER WITHIN FAMILY			OUTSIDE FAMILY, BUT KNOWN			NOT KNOWN	REL / OFF #	FELONIOUS ASSAULT CIRCUMSTAN
	01 SPOUSE	05 CHILD	09 STEPPARENT	20 ACQUAINTANCE	24 BOY / GIRL FRIEND	28 EMPLOYEE	98 STRANGER	/	
	02 C-L SPOUSE	06 GRANDPARENT	10 STEPCHILD	21 FRIEND	25 CHILD OF "BG" ABOVE	29 EMPLOYER	99 UNKNOWN	/	
	03 PARENT	07 GRANDCHILD	11 STEPSIBLING	22 NEIGHBOR	26 HOMOSEXUAL REL.	30 OTHERWISE KNOWN	REL / OFF #	/	
	04 SIBLING	08 IN-LAW	12 OTHER FAMILY	23 BABYSITTEE (baby)	27 EX-SPOUSE	31 VICTIM WAS OFFENDER	/	/	

A 14	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE

A 15	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY	STATE	ZIP

R 16	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE	BUILD	SKIN TONE

R 17	STATE	DRIVER'S LICENSE #	SOC. SEC. #	SID #	FBI #

E 18	PERSON COMMENTS / CLOTHING	SUMMONS / CITATION NUMBER(S)

S 19	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	DEPARTMENT ARREST NUMBER

T 20	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER

21	ARREST TYPE	<input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST INDICATOR	<input type="checkbox"/> MULTIPLE COUNT <input type="checkbox"/> N/A	CLEAR INDICATOR	<input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST ARMED WITH (ENTER "A" IF AUTO)	01 UNARMED 11 FIREARM 12 HANDGUN	13 RIFLE 14 SHOTGUN 15 OTHER FIREARM	20 LETHAL CUT INSTRUMENT (e.g. Switchblade Knives, etc.) 30 CLUB / BRASS KNUCKLES	ARREST ORIGIN	<input type="checkbox"/> DIS <input type="checkbox"/> PEI <input type="checkbox"/> MOT <input type="checkbox"/> TE
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A 22	CODE	OFF #	NAME (LAST, FIRST, MIDDLE, SUFFIX)	RAC	SEX	DOB	AGE

A 23	ADDRESS	(DIRECTION, STREET, SUFFIX, QUALIFIER)	CITY	STATE	ZIP

R 24	HOME PHONE	BUSINESS PHONE	HEIGHT	WEIGHT	EYES	HAIR COLOR / LENGTH / STYLE	BUILD	SKIN TONE

R 25	STATE	DRIVER'S LICENSE #	SOC. SEC. #	SID #	FBI #

E 26	PERSON COMMENTS / CLOTHING	SUMMONS / CITATION NUMBER(S)

S 27	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 1	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	DEPARTMENT ARREST NUMBER

T 28	ARREST / SUMMONS DESCRIPTION	ARREST CHARGE 2	ARREST DATE	PLATOON	BADGE 1	BADGE 2	FM	DIS	AFIS NUMBER

29	ARREST TYPE	<input type="checkbox"/> ON VIEW (No Warrant) <input type="checkbox"/> SUMMONS (No Custody) <input type="checkbox"/> CUSTODY (Warrant)	MULTIPLE ARREST INDICATOR	<input type="checkbox"/> MULTIPLE COUNT <input type="checkbox"/> N/A	CLEAR INDICATOR	<input type="checkbox"/> Y <input type="checkbox"/> N	UPON ARREST ARMED WITH (ENTER "A" IF AUTO)	01 UNARMED 11 FIREARM 12 HANDGUN	13 RIFLE 14 SHOTGUN 15 OTHER FIREARM	20 LETHAL CUT INSTRUMENT (e.g. Switchblade Knives, etc.) 30 CLUB / BRASS KNUCKLES	ARREST ORIGIN	<input type="checkbox"/> DIS <input type="checkbox"/> PEI <input type="checkbox"/> MOT <input type="checkbox"/> TEL
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30	INVESTIGATING OFFICER(S)	REVIEWED BY:	ATTENTION TO:

NARRATIVE REPORT
 WITNESS STATEMENT

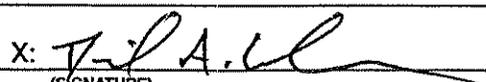
01	DATE	DAY	SHIFT	PLAT	BADGE 1	BADGE 2	INCIDENT STATUS	PRIM CLASS	YEAR	INCIDENT #
	11/01/02	12	DIS	512	270	062	<input type="checkbox"/> CLR ARREST <input type="checkbox"/> UNF <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> INACT		02	33510

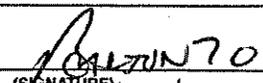
02 Statement of: **DAVID A CROCKER** Home Phone: _____
 (PLEASE PRINT)

03 Address: **500 W. BIG BEAVER** Business Phone: **(248) 524-34**

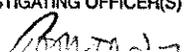
04 City: **TROY** State: **MI** Zip: **48084**

06 WE WALKED INTO ALIBI RESTAURANT 6700 ROCHESTER RD.
 07 AND PROCEEDED TO A TABLE IN THE BAR AREA. WE SAT DOWN
 08 AND ROUGHLY 5-10 MINUTES LATER A WAITRESS APPROACHED AND
 09 ASKED IF WE NEEDED MENUS. THE WAITRESS HAD CURLY BLONDE HAIR
 10 WAS MIDDLE-AGED, AND WORE A RED 'ALIBI' T-SHIRT. SHE
 11 RETURNED ANOTHER 5 MINUTES LATER TO TAKE OUR ORDER AND
 12 ASKED WHAT WE WANTED TO START OUT WITH. I ORDERED A
 13 HEINKEN AND LIZ ORDERED A BUD LIGHT. THE WAITRESS LEFT, THE
 14 RETURNED IN A FEW MINUTES WITH AN OPEN BOTTLE OF HEINEK
 15 AND AN OPEN BOTTLE OF BUD LIGHT. SHE SET THEM ON OUR TABLE,
 16 BUT DID NOT ASK OUR AGE OR FOR I.D.

X: 
 (SIGNATURE)

28 Taken By: 
 (SIGNATURE)

29 Place: **STATION** Date: **11-11-02** Time: **2330**

INVESTIGATING OFFICER(S)	REVIEWED BY	ASSIGNED TO / BADGE	ATTENTION TO
			

NARRATIVE REPORT
 WITNESS STATEMENT

01	DATE 10/11/02	DAY FR	SHIFT 29	PLAT SS	BADGE 1 070	BADGE 2 062	INCIDENT STATUS <input type="checkbox"/> CLR ARREST <input type="checkbox"/> UNF <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> INACT	PRIM CLASS	YEAR 02	INCIDENT # 83510
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02 Statement of: Elizabeth Spix Home Phone:

(PLEASE PRINT)

03 Address: 500 W. Big Beaver Business Phone: 524-3431

04 City: Troy State: MI Zip: 48084

05 We entered Alibi Resturant at 6700 Rochester Rd. and sat down in the
 06 smoking section, near the bar. A few minutes after we sat down the waitress came
 07 over and asked what we wanted. She was middle-aged, with short, curly blonde
 08 hair. She wore a red shirt with the restaurant logo on it. Her weight and height
 09 were average. I ordered a Bud-Lite and Dave ordered a Heinken.
 10 She left and about 5 minutes later, returned with the two opened bottles.
 11 She set them on the table. She left without asking for I.D. or asking
 12 our ages.

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26

X: *Elizabeth Spix*
 (SIGNATURE)

28 Taken By: *[Signature]*
 (SIGNATURE)

29 Place: *500 W. Big Beaver*

Date: 10-11-02 Time: 2230

INVESTIGATING OFFICER(S) <i>[Signature]</i>	REVIEWED BY	ASSIGNED TO / BADGE	ATTENTION TO
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TROY POLICE DEPT.

500 W. Big Beaver, Troy, MI 48064

ORI #MI6378400

INCIDENT REPORT SUPP CORR DELETEPAGE 1 OF 1

DATE	DAY	SHIFT	PLAT	BADGE 1	BADGE 2	INCIDENT STATUS	PRIM CLASS	YEAR	INCIDENT #
10/11/02	Fri	09	99	070	062	<input type="checkbox"/> CLR ARREST <input type="checkbox"/> UNF <input type="checkbox"/> CLR EXCEPT <input type="checkbox"/> INACT		02	33510

Members of the Directed Patrol Unit conducted a liquor control compliance test at the above location using the listed student enforcement aides. Enforcement Aid Spix is 18-year s old and Crocker is 19 years old.

The student enforcement aides entered the establishment and sat themselves in the bar area. The server, Rita Hendricks, approached and asked if they wanted to start off with something. Spix asked for a Bud Light. Crocker asked for a Heineken. Hendricks did not ask for Identification or age.

A short time later Hendricks returned with the beers. Officers secured the scene and the student enforcement aides left the establishment. The managers were contacted as well as Hendricks.

Officers spoke with Hendricks who stated that she thought the student enforcement aides looked to be over 21. She stated that he usually asks for identification before serving alcohol. Hendricks has been trained in the past about serving minors.

Hendricks was issued a citation for serving alcohol to a minor without making diligent inquiry. A LCC violation report was filled out and filed with the commission.

Both the managers and Hendricks were cooperative with officers during the investigation. Wood stated that all alcohol servers go through training.

INVESTIGATING OFFICER(S) Barton/Browne	REVIEWED BY	ASSIGNED TO/BADGE	ATTENTION TO
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State of Michigan Ticket No. **No 632147** Victim Involved

Uniform Law Citation Incident No. **02-33510** Dept. No. **104**

US DOT # Local Use/Arrest No. Detection Device

The People of: the State of Michigan Township City Village County BAC **1 of 1**

OF: **TROY**

THE UNDERSIGNED Month Day Year At approximately A.M. P.M. Date Month Day Year
SAYS THAT ON: **10 11 02 2120** **12 03 49**

State Driver's License Number **MI 53A 738 447922** Social Security No.

Race Sex Height Weight Hair Eyes Occupation/Employer
W F 500

Name (First, Middle, Last) **WETA JOYCE HENDRICKS**

Street **3035 CARRY CT.**

City **AUBURN HILLS** State **MI** Zip Code **48326**

Vehicle Plate No. Year State Vehicle Description (Year, Make, Color) Type

THE PERSON NAMED ABOVE, in violation of Local Ordinance State Law Administrative Rule

UPON **AT OR NEAR 6700 ROCHESTER RD**

WITHIN CITY VILLAGE TOWNSHIP OF **TROY**

COUNTY OF **OAKLAND** DID THE FOLLOWING:

Type	MCL Cite/PACC Code/Ordinance	Description (include any bond amount collected on each charge)	Charge No.
<input checked="" type="checkbox"/> Ctl <input type="checkbox"/> Warn <input type="checkbox"/> Authorization pend.		FURNISH RECORD	1
<input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Waiv		NO APPEARANCE IN COURT	2
<input type="checkbox"/> Ctl <input type="checkbox"/> Warn <input type="checkbox"/> Authorization pend.			3
<input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Waiv			
<input type="checkbox"/> Ctl <input type="checkbox"/> Warn <input type="checkbox"/> Authorization pend.			
<input type="checkbox"/> Misd <input type="checkbox"/> Fug <input type="checkbox"/> Waiv			

TO THE COURT: Do not arraign on a felony charge until an authorized complaint is filed.

Offense Code(s) **1 713D** 2 3

Key for Type Ctl = Civil Infraction Misd = Misdemeanor Fel = Felony Warn = Warning Fug = Fugitive Waiv = Violation for Which Fines/Costs May be Waived Authorization pend. = Authorization pending

Remarks

CHECK IF APPROPRIATE Damage to Property Local Court Bond \$
 Vehicle Impounded Injury License Posted In Lieu of Bond
 Traffic Crash Death Appearance Certificate
 Person in Active Military Service Yes No None

SEE DATE BELOW; SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS
 Appearance Date on or before **10/30/02 6:30 P.M.**
 Hearing Date (if applicable) on Contact Court
 Juvenile Traffic Misd. (Court will Notify) Formal Hearing Required (Court will Notify)

In the **52-4 DISTRICT** Court of **OAKLAND COUNTY**

Court Address & Phone Number
520 W. BIG BEAVER RD., TROY, MICHIGAN 48084
PHONE: (248) 528-0400

I have served a copy of the civil infraction complaint upon the defendant (or owner/occupant by posting if applicable).
 I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.

Complainant's Signature and name (if applicable) **P. Brown / C. Brown** Month Day Year **10 11 02**
 Officer's name (printed) **P. Brown / C. Brown** Officer's ID No. **02/70**

Agency ORI **MI-6378400** Agency Name **TROY POLICE DEPARTMENT**
 UC-01a (rev. 11/95) Court Copy 1.

Ticket No. **No 632147** Name Case No.

PRESS - YOU ARE MAKING FIVE COPIES
 ORDER BY FORM NO. M76 (Revised 11/95)
 FIDLAR DOUBLEDAY KALAMAZOO, MI



LIQUOR CONTROL COMMISSION (LCC)

7150 Harris Drive

P.O. Box 30005

Lansing, Michigan 48909-7505

Phone (517) 322-1390 ~ FAX (517) 322-6347

VIOLATION REPORT

(Authorized by P.A.58 of 1998)

* Officers Please Obtain This Information From The License *

License No. Class C 858 2002 SS Business ID 554 File # _____

(THIS INFORMATION NOT AVAILABLE ON LICENSE UNTIL 5/1/99)

1. Name of Licensee ALIBI LOUNGE & RESTAURANT 2. Doing Business As ALIBI LOUNGE

3. Mailing Address (street, city, zip code) 6700 Rochester Road; Troy, Michigan 48084

4. Township _____ 5. County Oakland

6. Type of License(s) & Permit(s) Sunday Sales

7. Date of Violation: _____ Friday 10/11/02 9:20 PM AM or PM
(DAY) (DATE) (HOUR)

8. Violation Type: Minor
 Intoxicated Person After hours sales/consumption Gambling
 Fighting (must be inside licensed premises) Controlled Substances
 Failure to Cooperate Prohibited Conduct OTHER: _____

if MINOR: Birth date 09/14/83 10/30/83 Was this a DECOY ? Yes / No If no, you MUST answer below:

IF above minor violation was not a decoy describe Enforcement Action Taken: _____

COPY OF APPEARANCE TICKET MUST BE ATTACHED

9. Submit Report Below or Indicate Attached Report # 02-33510

Officer Signature *Carl Barton* Name and Title (print) Carl Barton, Police Officer

Officer Signature *Pat Browne* Name and Title (print) Pat Browne, Police Officer

Department Name Troy Police Department Phone # 248-524-3477

WITNESSES

1. Name RITA HENDRICKS Address 6700 Rochester Road; Troy MI

Will testify to: Serving alcohol to minors

2. Name DAVID CROCKER Address 500 West Big Beaver Road; Troy MI

Will testify to: Being served alcohol

3. Name ELIZABETH SPIX Address 500 West Big Beaver Road; Troy MI

Will testify to: Being served alcohol

4. Name _____ Address _____

Will testify to: _____

5. Name _____ Address _____

Will testify to: _____

EVIDENCE

Location Held: Photograph-12 oz Heineken & 12 oz Bud Light

Troy Police Department

JENNIFER M. GRANHOLM
GOVERNOR



STATE OF MICHIGAN
LIQUOR CONTROL COMMISSION
DEPARTMENT OF CONSUMER & INDUSTRY SERVICES
NOELLE CLARK, DIRECTOR

JUDITH ALLEN
CHAIRWOMAN

February 10, 2003

ALIBI LOUNGE OF TROY, INCORPORATED
D/B/A ALIBI LOUNGE & RESTAURANT OF TROY
6700 ROCHESTER
TROY, MI 48098

RE: Complaint No. 2-71109

Dear Licensee:

Enclosed is a copy of the Commissioner's Order issued as the result of the above Complaint.

If you elect to pay the fine, a bank or postal money order, certified check, or authorized credit card payable to the STATE OF MICHIGAN must be received in this office no later than March 17, 2003 as indicated on your Invoice No. 81048. Failure to submit the fine will result in confiscation of your license for the alternative penalty. In any event, costs assessed must be paid, as only fines assessed are alternative to a suspension.

If there are any questions regarding this Order, please contact Hearings and Appeals at (517) 322-1390. Our office hours are from 8:00 a.m. to 5:00 p.m.

Sincerely,

MICHIGAN LIQUOR CONTROL COMMISSION

A handwritten signature in cursive script that reads "Susan K. Conklin".

Susan K. Conklin, Supervisor
Hearings and Appeals

SKC:tmn

Enclosures

cc: Kelly A. Allen, Attorney
Troy PD

STATE OF MICHIGAN
DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES
LIQUOR CONTROL COMMISSION

IN RE: ALIBI LOUNGE OF TROY, INCORPORATED
D/B/A ALIBI LOUNGE & RESTAURANT OF TROY
6700 ROCHESTER
TROY, MI 48098

HEARING: JANUARY 9, 2003
PLACE: FARMINGTON
COMPLAINT NO: 2-71109
BUSINESS ID NO. 554
CLASS C SS

CHARGES - OCTOBER 11, 2002

- (1) Sold or furnished alcoholic liquor to Decoy David Crocker, date of birth September 14, 1983, who was less than twenty-one (21) years old, contrary to Const 1963, art 4, § 40 and contrary to Section 801(2) and/or Section 701(1) of the Michigan Liquor Control Code, MCL 436.1801(2) and/or MCL 436.1701(1).
- (2) Sold or furnished alcoholic liquor to Decoy Elixabeth Spix, date of birth October 30, 1983, who was less than twenty-one (21) years old, contrary to Const 1963, art 4, § 40 and contrary to Section 801(2) and/or Section 701(1) of the Michigan Liquor Control Code, MCL 436.1801(2) and/or MCL 436.1701(1).

NEGOTIATED SETTLEMENT

This matter comes before the Commission as a proposed negotiated settlement, the state being represented by Linda Pytel McDowell, Assistant Attorney General, and the Licensed Corporation being represented by Kelly Allen, Attorney at Law. Glynda Chires, an Officer of the Licensed Corporation was also present at the hearing. Pursuant to Section 903 of the Michigan Liquor Control Code, MCL 436.1903, and Rule R436.1909 of the Michigan Liquor Control Commission (MLCC), the parties stipulated and agreed that:

- (1) the Licensed Corporation would acknowledge responsibility to Charge 2 and Charge 1 would be dismissed;
- (2) the Administrative Law Judge will enter the Violation Report of the case and attachments thereto into the record as substantive evidence without objection and will further

take notice of the prior record of this Licensed Corporation since being licensed by the MLCC at the above location under current ownership;

(3) the Licensed Corporation would pay a maximum fine of \$500 the one acknowledged charge, with no suspension or revocation as a penalty;

(4) there would be no appeal of this decision to the Appeal Board or to any court of law, and if not approved, the hearing officer would not recuse himself upon a contested hearing of the matter.

ORDER

The Licensed Corporation has been licensed at this location since April 9, 1985, and after reviewing the Licensed Corporation's past record and the Violation Report setting forth the facts of this case, the Administrative Law Judge accepts the terms of the Negotiated Settlement and orders as follows:

(1) the plea acknowledging Charge 2 in this case be accepted and Charge 1 is hereby Dismissed;

(2) the Violation Report and attachments are accepted as substantive evidence;

(3) based upon the Violation Report and statements at the hearing, the Administrative Law Judge finds that the Licensed Corporation did violate Section 801(2) of the Michigan Liquor Control Code, MCL 436.1801(2), as alleged in Charge 2;

(4) for the charge for which a violation was found, the Licensed Corporation is fined \$500;

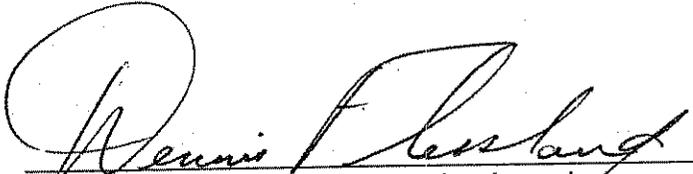
(5) a suspension of 25 continuous days be imposed if the total fine of \$500 is not paid, with this suspension to be served consecutively and not concurrently with any other suspensions ordered by the MLCC for the Licensed Corporation;

(6) this Negotiated Settlement is a full and final disposition of the matter before the MLCC, recognizing that as to the Complaint, there is no further right of administrative or

judicial appeal, either to the MLCC or a court of law and that there are no promises, stipulations, understandings or agreements other than those stated in the record, and this Order represents the final agreed settlement.

In addition, the Administrative Law Judge Orders the Licensed Corporation to pay total cost of \$22.00 for witness fees involved in connection with the hearing.

MICHIGAN LIQUOR CONTROL COMMISSION


Dennis Flessland, Administrative Law Judge

Dated: January 31, 2003

Linda Pytel McDowell
Assistant Attorney General
24155 Drake Road
Farmington, MI 48335

Kelly A. Allen
Attorney at Law
39533 Woodward Ave.
Suite #210
Bloomfield Hills, MI 48304

DF: 2-71109

TRUE COPY

Michigan Liquor and Beer Control Board
VIOLETION COMPLAINT PROFILE of COMPLAINT # 71109

VIOLETION COMPLAINTS

Attention : CROCKER & SPIX

BUS ID : 854 File No. : D - 55805 Lic Curr Issued : 04-01-2002 Lic Orig Issued : 04-09-1985 LGU : 132.5
 DBA : ALIBI LOUNGE & RESTAURANT OF TROY County : OAKLAND
 Licensee : ALIBI LOUNGE OF TROY, INCORPORATED TWP :
 Address : 6700 ROCHESTER TROY, MI 48098 Mailing : 6700 ROCHESTER TROY, MI 48098
 BUS STATUS : ACTIVE Pending Reqs: 0 Complaint No: 71109
 Viol Received : 10-21-2002 Viol Occured : 10-11-02 Agency : OPD Status : ACTIVE Total 801(2) : 0 Ori. Dec :
 Actv.Status : H5 Stat : 01-09-2003 Due : Ed : Susp : Rev :
 Total Charge : 1 Fine Amt : \$.00 Days Suspp : 0 OMNI COMPL No :

VIOLETIONS

Description	Date Occured	Minor Decoy
Sell, furnish to, allow person under 21 to consume-CROCKER & SPIX	10-11-2002	Y

VIOLETION ACTIVITIES

Description	Act Date	Comments
Violation Type	10-11-2002	1)SALE TO MINOR (19); 2)SALE TO MINOR (18); (TROY PD/CROCKER & SPIX)
To Attorney General for Complaint	10-30-2002	To legal for complaint-FARM
From Attorney General	11-19-2002	Pending scheduling of hearing
Notice of Complaint	11-20-2002	NOC MAILED. ALF
Information	12-09-2002	TBS 1-9 FARM-F
Notice of Hearing Mailed	12-10-2002	1-9-03 FARMINGTON FLESSLAND 9:30 A.M. TMN
ATTORNEY APPEARANCE	01-07-2003	***ATTY KELLY A ALLEN, 39533 WOODWARD AVE, SUITE 210, BLOOMFIELD HILLS, MI 48304 PH 248-540-7400 FAX 248-540-7401***
Information	01-08-2003	NOH, COMPLAINT, VIOLATION REPORT & HISTORY FAXED TO ATTY ALLEN. TMN
Hearing Held	01-09-2003	HEARING HELD FARMINGTON FLESSLAND-MCDOWELL-DECLERCO NEG SET COST \$22 ✓

LICENSES

License Number	Year	License Type	Permits
856	2002	CLASSC	SUNDAY SALES

LICENSEES & SUBORDINATES

Name : ALIBI LOUNGE OF TROY, INCORPORATED Role : CRP Status : ACTIVE

SUBORDINATES

Name	Role	Status	Begin Date	End Date
CHIRES, MICHAEL L	STK	ACTIVE	09-11-1992	
MAIER, CINDY L	STK	ACTIVE	09-11-1992	
WOOD, LINDA C	STK	ACTIVE	09-11-1992	
CHIRES, LOUIS M	STK	ACTIVE	04-09-1985	
CHIRES, LORI L	STK	ACTIVE	09-11-1992	
CHIRES, GLYNDA L	STK	ACTIVE	04-09-1985	
BARNETT, DIANE S	STK	ACTIVE	09-11-1992	
LOUIS E. AND GLYNDA L. CHIRES QUALIFIED SUBCHAPTER B TRUST AGREEMENT F/B/O STEVEN WOOD	STK	ACTIVE	08-16-2002	



500 West Big Beaver
Troy, Michigan 48084



7002 1000 0004 9357 0787
7002 1000 0004 9357 0787

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

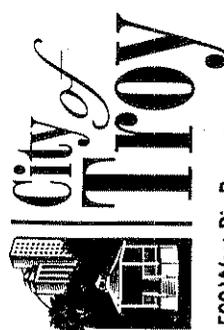
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark
Here

Total **Alibi Lounge**
 Sent **Alibi Lounge of Troy, Inc**
 Street or PO **6700 Rochester**
 City, State, ZIP **Troy, Michigan 48098**

PS Form 3849, October 2002 Instructions

98



500 West Big Beaver
Troy, Michigan 48084



7000 0520 0020 0628 8459
7000 0520 0020 0628 8459

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

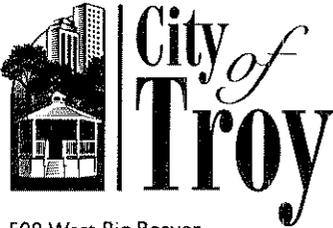
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Total Postage & Fees \$
 Rec: **Kelly Allen**
 Street **Attorney at Law**
 City, State, ZIP **39533 Woodward Ave - Suite 210**
Bloomfield Hills, Michigan 4830

PS Form 3849, October 2002 Instructions

Ave - Suite 210
Michigan 48304

Alibi



500 West Big Beaver
Troy, Michigan 48084
Fax: (248) 524-0851
www.ci.troy.mi.us

February 7, 2003

Area code (248)

Assessing
524-3311

Bldg. Inspections
524-3344

Bldg. Operations
524-3368

City Clerk
524-3316

City Manager
524-3330

Community Affairs
524-1147

Engineering
524-3383

Finance
524-3411

Fire-Administration
524-3419

Human Resources
524-3339

Information Technology
619-7279

Law
524-3320

Library
524-3545

Parks & Recreation
524-3484

Planning
524-3364

Police-Administration
524-3443

Public Works
524-3370

Purchasing
524-3338

Real Estate & Development
524-3498

Treasurer
524-3334

General Information
524-3300

Alibi Lounge
6700 Rochester
Troy, Michigan 48098

Re: Liquor License: Alibi Lounge
6700 Rochester
Troy, Michigan 48098

A Public Hearing will be held by and before the Council of the City of Troy at City Hall, 500 W Big Beaver, Troy, Michigan on Wednesday, February 26, 2003 at 7:30 PM, or as soon thereafter as the agenda will permit, to determine whether the City Council should recommend to the Michigan Liquor Control Commission, the revocation of licenses allowed for the sale and/or consumption of alcoholic beverage, for the following reasons:

License Type: Class C (858-2002)
Violation Name: SALE TO MINOR (COMPLIANCE TEST)
Violation Date(s): October 11, 2002

You will be given an opportunity to be heard and present evidence at the public hearing and legal counsel may represent you. If you have questions regarding the procedure or the facts and circumstances surrounding your violation(s), you may contact the City Attorney's office at 248-524-3320.

Sincerely,

Barbara A. Holmes, CMC
Deputy City Clerk

C: Kelly Allen
Attorney at Law
39533 Woodward Ave - Suite 210
Bloomfield Hills, Michigan 48304