

CITY COUNCIL ACTION REPORT

July 15, 2008

TO: Phillip L. Nelson, City Manager

FROM: Charles T. Craft, Chief of Police *CDM for CTC*
 Captain Colleen Mott, Support Services Division *CDM*
 Sergeant Robert Cantlon *RC*

SUBJECT: Application for new SDM license, Agrusa International Marketplace, LLC.

Background:

- Agrusa International Marketplace, LLC request new SDM licensed business to be located at 5047 Rochester, Troy, MI 48085 {MLCC req #436420}
- On July 14, 2008, the applicants, Salvatore Agrusa, Anthony Capizzi and Stefano Primavera, answered questions for the Liquor Advisory Committee.
- The applicants explained to the Committee they have operated a produce and grocery store at this location since 2007. They have operated in retail sales for more than 30 years in various locations.
- The Committee unanimously approved this request.

Financial Considerations:

- There are no financial considerations for the City.

Legal Considerations:

- The request complies with all applicable Troy City ordinances and Michigan Liquor Control Commission rules.
- The Police Department did not find any disqualifying factors for this request.
- The MLCC does not require local government approval for a new SDM license, however, it has been the policy of Troy City Council to review such requests

Policy Considerations:

- City Goal III: "Retain and attract investment while encouraging redevelopment".

Options:

City Council can approve or deny the request.



FOR MLCC USE ONLY
 Request ID # 436420
 Business ID # 204854

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

Please conduct your investigation as soon as possible, complete all four sections of this report and return the completed report and fingerprint cards to the MLCC PAGE 1 OF 2

LICENSEE/APPLICANT NAME, BUSINESS ADDRESS AND LICENSING REQUEST:

AGRUSA INTERNATIONAL MARKETPLACE, L.L.C. 5047 ROCHESTER, TROY, MI 48085, OAKLAND COUNTY
 REQUEST: NEW SDM LICENSE

Section 1. APPLICANT INFORMATION

APPLICANT #1: SALVATORE AGRUSA 13266 PARTRIDGE RUN, SHELBY TOWNSHIP, MI 48315 (586) 991-0203-H (248) 457-0041-W	APPLICANT #2: ANTHONY CAPIZZI 52590 WICKERSHAM, SHELBY TOWNSHIP, MI 48315 (586) 566-3413-H (248) 457-0041-W
DATE FINGERPRINTED: NO FINGERPRINTS REQUIRED	DATE FINGERPRINTED: NO FINGERPRINTS REQUIRED
DATE OF BIRTH: Is the applicant a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have permanent Resident Alien status? <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have a Visa? Enter status:	DATE OF BIRTH: Is the applicant a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have permanent Resident Alien status? <input type="checkbox"/> Yes <input type="checkbox"/> No* *Does the applicant have a Visa? Enter status:
Attach the fingerprint card and \$30.00 for each card and mail to the Michigan Liquor Control Commission	
ARREST RECORD: <input type="checkbox"/> <u>Felony</u> <input type="checkbox"/> <u>Misdemeanor</u> Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)	ARREST RECORD: <input type="checkbox"/> <u>Felony</u> <input type="checkbox"/> <u>Misdemeanor</u> Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)

Section 2. INVESTIGATION OF BUSINESS AND ADDRESS TO BE LICENSED

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

Are gas pumps on the premises or directly adjacent? No Yes, explain relationship:

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

Will the applicant's proposed location meet all appropriate state and local building, plumbing, zoning, fire, sanitation and health laws and ordinances, if this license is granted? Yes No

If you are recommending approval subject to certain conditions, list the conditions: (attach a signed and dated report if more space is needed)

Section 4. RECOMMENDATION

From your investigation:

1. Is this applicant qualified to conduct this business if licensed? Yes No

2. Is the proposed location satisfactory for this business? Yes No

3. Should the Commission grant this request? Yes No

4. If any of the above 3 questions were answered no, state your reasons: (Attach a signed and dated report if more space is needed)

Signature (Sheriff or Chief of Police) Date
 TROY POLICE DEPARTMENT



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

FOR MLCC USE ONLY

Request ID # 436420

Business ID # 204854

POLICE INVESTIGATION REPORT

[Authorized by MCL 436.1217 and R 436.1105; MAC]

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LICENSEE/APPLICANT NAME, BUSINESS ADDRESS AND LICENSING REQUEST:

AGRUSA INTERNATIONAL MARKETPLACE, L.L.C. 5047 ROCHESTER, TROY, MI 48085, OAKLAND COUNTY
 REQUEST: NEW SDM LICENSE

Section 1. APPLICANT INFORMATION

APPLICANT #3: STEFANO PRIMAVERA 52744 FLORENCE, SHELBY TOWNSHIP, MI 48315 (586) 254-5616-H (248) 457-0041-W	APPLICANT #4:
DATE FINGERPRINTED: NO FINGERPRINTS REQUIRED	DATE FINGERPRINTED: NO FINGERPRINTS REQUIRED
DATE OF BIRTH: Is the applicant a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No*	DATE OF BIRTH: Is the applicant a U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No*
Does the applicant have permanent Resident Alien status? <input type="checkbox"/> Yes <input type="checkbox"/> No	*Does the applicant have permanent Resident Alien status? <input type="checkbox"/> Yes <input type="checkbox"/> No*
*Does the applicant have a Visa? Enter status:	*Does the applicant have a Visa? Enter status:

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

ARREST RECORD: <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)	ARREST RECORD: <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)
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Will the applicant's proposed location meet all appropriate state and local building, plumbing, zoning, fire, sanitation and health laws and ordinances, if this license is granted? Yes No

If you are recommending approval subject to certain conditions, list the conditions: (attach a signed and dated report if more space is needed)

Section 4. RECOMMENDATION

From your investigation:

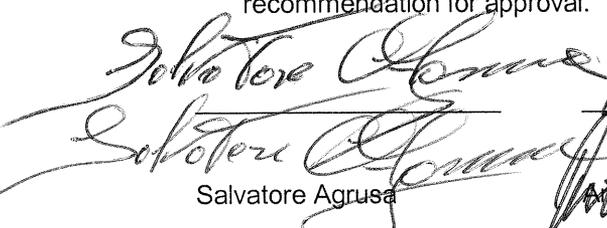
- Is this applicant qualified to conduct this business if licensed? Yes No
- Is the proposed location satisfactory for this business? Yes No
- Should the Commission grant this request? Yes No
- If any of the above 3 questions were answered no, state your reasons: (Attach a signed and dated report if more space is needed)

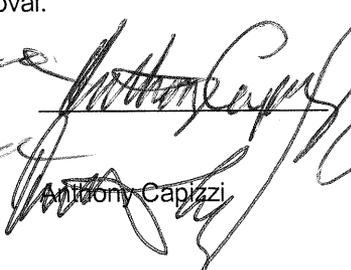
Signature (Sheriff or Chief of Police) _____ Date _____
 TROY POLICE DEPARTMENT

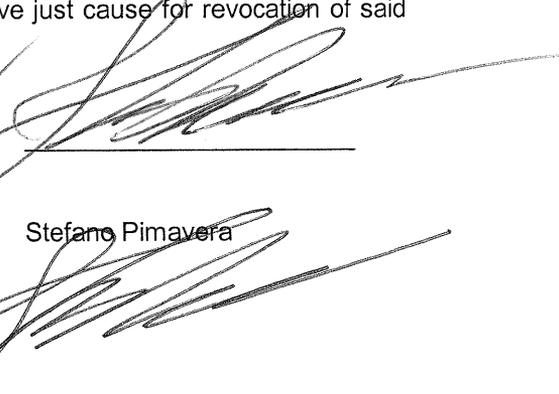
AGREEMENT REGARDING LIQUOR LICENSE REQUEST

This Agreement, made this 18 day of JUNE, 2008, by and between the CITY OF TROY, MICHIGAN, a municipal corporation, with offices located at 500 W. Big Beaver Road, Troy, Michigan, 48084, hereinafter known as THE CITY, and Agrusa International Marketplace LLC. whose address is 5047 Rochester Rd, the Applicant, hereinafter known as APPLICANT.

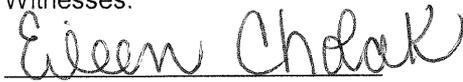
1. The City Council of the City of Troy, for and in consideration of the following covenants and conditions, agrees to recommend to the Michigan Liquor Control Commission Approval of the request for a new SDM licensed business located at 5047 Rochester Rd.
2. In consideration of the City of Troy's recommendation for approval of the request, the applicant hereby agrees that:
 - (a) It has read and is aware of the provisions of City of Troy Ordinances, Chapter No. 92 and Chapter No. 98, and agrees that it shall be deemed to have knowledge of any subsequent amendments to said Chapters which may become effective during the term of this agreement.
 - (b) It agrees to observe and comply with all laws, statutes, ordinances, rules, regulations or resolutions of the United States government, State of Michigan, and the City of Troy, or any department or agency of the governmental entities, as well as the rules and regulations of the Michigan Liquor Control Commission as they pertain to the operation of a liquor licensed business in the City of Troy.
 - (c) It agrees to immediately require all employees who serve/sell alcohol to attend a recognized alcohol awareness program, and forward the names of each certified employee to the Troy Police Department. The alcohol awareness program must either be recognized by the Troy Police Department (i.e. TIPS,TAMS), or the program must be reviewed by the Troy Police Department to insure that the program is comparable to the recognized programs.
3. Applicant agrees that the recommendation for Approval agreed upon by the City Council is not a property right and is approved upon the express and continuing condition that no violation as set forth in paragraph 2 of this agreement shall occur.
4. Applicant agrees that the recommendation for Approval agreed upon by the City Council is approved upon the express and continuing condition that the physical characteristics (including but not limited to the inside layout, building design and engineering, seating capacity, parking space allocations, fire exits, and other physical attributes); and also the nature and type of business intended to be conducted remain virtually the same.
5. Applicant agrees that upon such violation, after full investigation and an opportunity for said applicant to be heard, upon a finding by the City Council that a violation as set forth in paragraph 2 of this agreement has occurred, the City Council shall have just cause for revocation of said recommendation for approval.


Salvatore Agrusa


Anthony Capizzi


Stefano Pimavera

Witnesses:


Eileen Cholak


Ruth Sunda

Subscribed and sworn to before me
this 1 day of July, 2008
M Aileen Bittner

Notary Public, Oakland
County, Michigan
My commission expires: January 22, 2014

M. AILEEN BITTNER, Notary Public
State of Michigan, County of Oakland
My Commission expires January 22, 2014
Acting in the County of Oakland

CITY OF TROY

By: _____
Louise Schilling, Mayor

By: _____
Tonni Bartholomew, City Clerk

Witnesses:

Subscribed and sworn to before me
this _____ day of _____, 200 _____

Notary Public, Oakland
County, Michigan
My commission expires: