

#3

OFFICE OF THE MAYOR



JOE A. SMITH
MAYOR
mayor@nlr.ar.gov

PHONE (501) 975-8601
FAX (501) 975-8633

CITY HALL
P.O. BOX 5757
NORTH LITTLE ROCK, ARKANSAS 72119-5757
website: www.nlr.ar.gov

MEMORANDUM

TO: Members of the North Little Rock City Council
FROM: Glinda Craigmyle *GC*
DATE: May 28, 2015
SUBJECT: Alcoholic Beverages Permit Request

For your information, I have enclosed a copy of the *Assignment and Comments of Officials* form from the State of Arkansas, Alcoholic Beverage Control Division.

The following applicant has applied for a new restaurant beer and wine permit:

Qiao Y. Wu
Kirin Garden Inc.
4000 Vali Court
North Little Rock, AR

Please note the 15 day comment period referred to in the final paragraph of the *Comment* page.

Thank you.

Attachments

FILED _____ A.M. 2:16 P.M.
BY Glinda-Mayer's Ofc
DATE 5-28-15
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by J. Marshall

ASSIGNMENT

D6J003-D6L013

**Date Received:** 05/11/2015**Date Assigned:** 05/19/2015**Applicant:** QIAO Y. WU**D.O.B:** 02/28/1978**Green Card Number (Permanent Resident Alien):****Home Address:** 505 Forest Oak Cove, Jacksonville, AR, 72076**Home Phone:****Business Phone :** 501-955-4588**Cell Phone:** 917-361-0997**Trade Name:** KIRIN GARDEN INC**Former Trade Name:****Business Address :** 4000 Vali Court, North Little Rock**County** Pulaski**Type Of Investigation:** Restaurant Beer & Wine - NEW**Dancing, if requested:****Comments / Remarks :****Copies Of Assignment and
Comment Form Mailed to:**

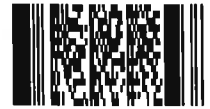
Mayor Joe Smith & City Council

Michael Davis, Chief of Police

Doc Holladay, Sheriff

Larry Jegley, Prosecuting Attorney

Assigned to Investigator: _____**Stockholders / Partners / LLC
Members:** Bi L Zhon, 505 Forest Oak Cove, Jacksonville, AR, 72076
DOB: 12/30/1984Xiang X Lin, 501 Forest Oak Cove, Jacksonville, AR, 72076
DOB: 7/11/1968Yu L Lin, 505 Forest Oak Cove, Jacksonville, AR, 72076
DOB: 7/1/1991



ALCOHOLIC BEVERAGE CONTROL DIVISION
COMMENTS OF PUBLIC OFFICIALS

APPLICANT'S NAME: QIAO Y. WU

TYPE OF APPLICATION: Restaurant Beer & Wine - NEW

BUSINESS NAME: KIRIN GARDEN INC

BUSINESS ADDRESS: 4000 Vali Court, North Little Rock, AR, 72076

DATE OF APPLICATION: 05/11/2015

NAME OF PUBLIC OFFICIAL: _____

TITLE OF OFFICIAL: _____

OFFICIAL MAILING ADDRESS: _____

PHONE : _____

SIGNATURE OF OFFICIAL: _____ DATE: _____

NAME OF AGENCY OR COURT: _____

Do you have any objections to the issuance of this permit? _____
(Yes or No)

If yes, please explain your objections below:

To ensure your comments are available at the time this application is considered by the Director, please complete and return this form to ABC Administration, 1515 West 7th Street, Suite 503, Little Rock, AR, 72201, within fifteen (15) days of receipt. In compliance with the Freedom of Information Act, this Comment Form will become a matter of public record.



DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES

For all ON PREMISES permits - except private clubs

DSJ003-D6L014

NAME OF OUTLET Kivin Garden

CITY North Little Rock COUNTY Pulaski

Under the Section 1.34 of the ABC Regulations, any permit issued by this agency is valid only for the uses described in the original application. Any material change in the outlet's operations or entertainment other than originally listed in this application, *without prior approval of the Director*, shall be grounds for revocation of the permit or other administrative penalties.

Describe the types of business and entertainment activities (cafe / restaurant, pool hall, dancing, etc.) to occur on your permitted premises on the lines below. Use the back of this form if necessary.

If live entertainment is proposed, you must be much specified as to the type and description of that entertainment, i.e., live bands, dancers, etc.

~~Cable TV~~

3 Cable TV

[Empty lined area for additional description]