## **INFORMATION AND INSTRUCTIONS -**

## **SECTION 23958.4 B&P**

- Instructions This form is to be used for all applications for original issuance or premises to premises transfer of licenses.

   Part 1 is to be completed by an ABC employee, given to applicant with pre-application package, with copy retained in holding file or applicant's district file.
  - Part 2 is to be completed by the applicant, and returned to ABC.
    Part 3 is to be completed by the local governing body or its designated subordinate officer or body, and returned to ABC.

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PART 1 - TO BE COMPLETED BY A  1. APPLICANT'S NAME	ВС						
SANTA CONVENIENCE LLC							
2. PREMISES ADDRESS (Street number and name, cit	y, zip code)				3. LICENSE TYPE		
3825 SANTA CLAUS LN, CAI	RPINTERIA, 93013-11	10			20		
TYPE OF BUSINESS  Full Service Restaurant	Hofbrau/Cafeteria	Cockt	ail Lounge		Private Clul	200	
Deli or Specialty Restaurant	Comedy Club		ū				
Cafe/Coffee Shop	Brew Pub	Night			Veterans C		
Bed & Breakfast:	7		n: Beer		Fraternal C		
	Theater	Taveri	n: Beer & Wine		Wine Tastir	ig Room	
Wine only All							
Supermarket	Membership Store	Servic	e Station		Swap Meet	/Flea Market	
Liquor Store	Department Store	X Conve	nience Market		Drive-in Da	iry	
Drug/Variety Store	Florist/Gift Shop	Conve	nience Market w	/Gasoline			
Other - describe:							
5. COUNTY POPULATION	6. TOTAL NUMBER OF LICENSES IN		. П	7. RATIO OF LICE	ENSES TO POPULAT		
8. CENSUS TRACT NUMBER	O NO OF LICENSES ALLOWED IN	On-Sa		10 110 05 11051	IOCO EVIOTINO IN O	On-Sale	Off-Sale
17.06	9. NO. OF LICENSES ALLOWED IN (	On-Sa		10. NO. OF LICEN	NSES EXISTING IN C		
11. IS THE ABOVE CENSUS TRACT OVERCONCENT	1 2			1	the ratio of lineages	On-Sale	X Off-Sale
X Yes, the number of existing licenses ex		or ratio or moorie	es to population in the	s cerisus tract exceet	Title ratio of licerises	to population for	the entire county?)
No, the number of existing licenses is							
12. DOES LAW ENFORCEMENT AGENCY MAINTAIN							
Yes (Go to Item #13)	No (Go to Item #20)						
13. CRIME REPORTING DISTRICT NUMBER	14. TOTAL NUMBER OF REPORTING DISTRICTS  15. TOTAL NUMBER OF OFFENSES IN ALL REPORTING DISTRICTS						
16. AVERAGE NO. OF OFFENSES PER DISTRICT	17. 120% OF AVERAGE NUMBER OF	OFFENSES		18. TOTAL NUMB	ER OF OFFENSES I	N REPORTING	DISTRICT
19. IS THE PREMISES LOCATED IN A HIGH CRIME R	EPORTING DISTRICT? (i.e., has a 20%	greater number	er of reported crimes the	han the average num	ber of reported crime	s as determined	from all crime
reporting districts within the jurisdiction of the local la	w enforcement agency)						
Yes, the total number of offenses in the		100 100 100 100					
No, the total number of offenses in the		the total nu	mber in item #17				
20. CHECK THE BOX THAT APPLIES (check only one a. If "No" is checked in both item #11		1 R&P does	not annly to this	application and	d no additional in	oformation wi	ill he nooded
on this issue. Advise the applicant to					i no additional ii	nonnation wi	iii be lleeded
b. If "Yes" is checked in either item #	11 or item #19, and the applica	nt is annivir	na for a non-retai	l license a retai	l hona fide nubli	c eating plac	o liconco. a
retail license issued for a hotel, motel	or other lodging establishment	as defined	in Section 25503	3.16(b) B&P, or a	a retail license is	sued in conj	uction with a
beer manufacturer's license, or winegrapplication or as soon as possible the		licant to coi	nplete Section 2	and bring the co	ompleted form to	ABC when	filing the
2 Personal and the second seco							
X c. If "Yes" is checked in either item #	11 <u>or</u> item #19, <u>and</u> the applicar	nt is applyir	g for an off-sale	beer and wine li	icense, an off-sa	ile general lic	cense, an on-
sale beer license, an on-sale beer and to the local governing body, or its desi							
ABC in order to process the application		ouy to nave	them complete	<u>Section 5</u> . The	completed form	will fleed to	ne biovided to
Governing Body/Designated Subordina	ate Name: COUNT	Y OF SA	NTA BARB	ARA			
FOR DEPARTMENT USE ONLY PREPARED BY (Name of Department Employee)							
TALEANED BY (Maine of Department Employee)							

PART 2 - TO BE COMPLETED	BY THE APPLICANT (If box #20b is chec	ked)
necessity would be served by th	n the reverse, the Department may approve se issuance of the license. Please describe parate sheet or additional documention, if de	your application if you can show that public convenience or below the reasons why issuance of another license is justified in esired. Do <i>not</i> proceed to Part 3.
=	1	
2. APPLICANT SIGNATURE		23. DATE SIGNED
PART 3 - TO BE COMPLETED	BY LOCAL OFFICIALS (If box #20c is che	ecked)
lode). Sections 23958 and 239	58.4 of the Business and Professions Code	requires the Department to deny the application unless the local
4. WILL PUBLIC CONVENIENCE OR NECESS	SITY BE SERVED BY ISSUANCE OF THIS ALCOHOLIC BEVER	
1. WILL PUBLIC CONVENIENCE OR NECESS		RAGE LICENSE?  See Attached (i.e., letter, resolution, etc.)
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4. WILL PUBLIC CONVENIENCE OR NECESS Yes 5. ADDITIONAL COMMENTS, IF DESIRED (ma	SITY BE SERVED BY ISSUANCE OF THIS ALCOHOLIC BEVER No ay include reasons for approval or denial of public convenience	RAGE LICENSE?  See Attached (i.e., letter, resolution, etc.) or necessity):
1. WILL PUBLIC CONVENIENCE OR NECESS	SITY BE SERVED BY ISSUANCE OF THIS ALCOHOLIC BEVER	RAGE LICENSE?  See Attached (i.e., letter, resolution, etc.)