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.

PART 1 - TO BE COMPLETED BY A	NPC						
1. APPLICANT'S NAME	ADC						
MONTECITO RETIREMENT	ASSOCIATION						
2. PREMISES ADDRESS (Street number and name, c	3. LICENSE TYPE						
300 HOT SPRINGS RD, SAN	57						
Full Service Restaurant	Hofbrau/Cafeteria	Cocktail Lounge	X Private Club				
Deli or Specialty Restaurant	Comedy Club	Night Club	Veterans Club				
Cafe/Coffee Shop	Brew Pub	Tavern: Beer	Fraternal Club				
Bed & Breakfast:	Theater	Tavern: Beer & Wine	Wine Tasting Room				
Wine only All							
Supermarket	Membership Store	Service Station	Swap Meet/Flea Market				
Liquor Store	Department Store	Convenience Market	Drive-in Dairy				
Drug/Variety Store	Florist/Gift Shop	Convenience Market w/Gasoline					
X Other - describe: Sf		Name of the Control o					
5. COUNTY POPULATION	6. TOTAL NUMBER OF LICENSES II	N COUNTY	7. RATIO OF LICENSES TO POPULATION IN COUNTY				
		On-Sale Off-Sale	On-Sale Off-Sale				
8. CENSUS TRACT NUMBER	9. NO. OF LICENSES ALLOWED IN		10. NO. OF LICENSES EXISTING IN CENSUS TRACT				
14.02	[6	X On-Sale Off-Sale	ZOn-Sale Off-Sale				
11. IS THE ABOVE CENSUS TRACT OVERCONCEN X Yes, the number of existing licenses of		ne ratio of licenses to population in the	census tract exceed the ratio of licenses to population for the entire county?)				
No, the number of existing licenses is 12. DOES LAW ENFORCEMENT AGENCY MAINTAIL							
Yes (Go to Item #13)	No (Go to Item #20)						
13. CRIME REPORTING DISTRICT NUMBER	14. TOTAL NUMBER OF REPORTIN	IG DISTRICTS	15. TOTAL NUMBER OF OFFENSES IN ALL REPORTING DISTRICTS				
	,						
16. AVERAGE NO. OF OFFENSES PER DISTRICT	17. 120% OF AVERAGE NUMBER O	OF OFFENSES	18. TOTAL NUMBER OF OFFENSES IN REPORTING DISTRICT				
19. IS THE PREMISES LOCATED IN A HIGH CRIME	REPORTING DISTRICT? (i.e., has a 20%	6 greater number of reported crimes the	an the average number of reported crimes as determined from all crime				
reporting districts within the jurisdiction of the local		rannada dha dadad uuruuhan in Mar	#4.7				
Yes, the total number of offenses in the No, the total number of offenses in the							
20. CHECK THE BOX THAT APPLIES (check only on							
a. If "No" is checked in both item #11 <u>and</u> item #19, <u>Section 23958.4 B&P does not apply</u> to this application, and no additional information will be needed on this issue. Advise the applicant to bring this completed form to ABC when filling the application.							
retail license issued for a hotel, mote	el or other lodging establishmen grower's license, advise the <i>app</i>	t as defined in Section 25503	license, a retail bona fide public eating place license, a 3.16(b) B&P, or a retail license issued in conjuction with a and bring the completed form to ABC when filing the				
sale beer license, an on-sale beer a	nd wine (public premises) licens esignated subordinate officer or	se, or an on-sale general (pub	beer and wine license, an off-sale general license, an on- lic premises) license, advise the <u>applicant to take this form</u> <u>Section 3.</u> The completed form will need to be provided to				
Governing Body/Designated Subordinate Name: SB COUNTY BOARD OF SUPERVISORS							
FOR DEPARTMENT USE ONLY							
PREPARED BY (Name of Department Employee) MR							
ABC-245 (rev. 01-11)							

PART 2 - TO BE COMPLETED BY	THE APPLICANT (If hov #	20h is checked)			
PART 2 - TO BE COMPLETED BY THE APPLICANT (If box #20b is checked) 21. Based on the information on the reverse, the Department may approve your application if you can show that public convenience or necessity would be served by the issuance of the license. Please describe below the reasons why issuance of another license is justified in this area. You may attach a separate sheet or additional documention, if desired. Do not proceed to Part 3.					

22. APPLICANT SIGNATURE			23. DATE SIGNED		
PART 3 - TO BE COMPLETED BY I	OCAL OFFICIALS (If box	#20c is checked)		
The applicant named on the reverse an over-concentration of licenses an Code). Sections 23958 and 23958.4 governing body of the area in which to days of notification of a completed at Please complete items #24 to #30 be letter on official letterhead stating wh				er or body, determines within 90 issuance. or Board resolution or a signed ublic convenience or necessity.	
24. WILL PUBLIC CONVENIENCE OR NECESSITY E Yes	SE SERVED BY ISSUANCE OF THIS AI	COHOLIC BEVERAGE L	CENSE? See Attached (i.e., letter, re	solution, etc.)	
25. ADDITIONAL COMMENTS, IF DESIRED (may inc	lude reasons for approval or denial of p	ublic convenience or nece	ssity):		
	A				

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26. CITY/COUNTY OFFICIAL NAME	27. CITY/COUNTY OFFICIAL TITL	E	28. CITY/COUNTY O	FFICIAL PHONE NUMBER	
29. CITY/COUNTY OFFICIAL SIGNATURE			30. DATE SIGNED		

Department of Alcoholic Beverage Control

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S) ABC 211 (6/99)

California

TO: Department of Alcoholic Beverage Control

1000 SOUTH HILL ROAD

SUITE 310

VENTURA, CA 93003

(805) 289-0100

File Number: 611463

Receipt Number: 2601875 Geographical Code: 4200

Copies Mailed Date: September 27, 2019

Issued Date:

RECEIVED

OCT 22 2019

DISTRICT SERVING LOCATION:

VENTURA

First Owner: Name of Business:

Location of Business:

LUNA HART WINES LLC

LUNA HART WINES LLC

3865 STERRETT AVE

SANTA BARBARA, CA 93110

SB CUUIVIT

PLANNING & DEVELOPMENT

County:

SANTA BARBARA

Is Premises inside city limits?

No

Census Tract:

0001.02

Mailing Address:(If different

from

premises address)

Type of license(s):

02

Dropping Partner: Yes

No

Transferor's license/name:

License Type 02 - Winegrower

Transaction Type DOR

ANNUAL FEE

Master

Secondary LT And Count

License Type 02 - Winegrower

Transaction Description

Fee Code NA

Dup Date 1 09/27/19

Total

Fee \$111.00

\$111.00

Have you ever been convicted of a felony? No

Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the

Department pertaining to the Act?

STATE OF CALIFORNIA

County of SANTA BARBARA

Date: September 27, 2019

Applicant Name(s)

LUNA HART WINES LLC