#9

#### OFFICE OF THE MAYOR



JOE A. SMITH

MAYOR

mayor@nlr.ar.gov

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

#### 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: Anita Paul ARITE: February 6, 2020

SUBJECT: Alcoholic Beverages Permit Request

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

The following applicant has applied for a retail beer off premise, small farm wine-retail and grocery store wine permit – New:

Lonnie W. McCaffety Family Dollar Store #32112 5613 MacArthur Drive North Little Rock, AR 72118

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

Thank you.

**Attachments** 

BY amita part

DATE 2-6-70

Diane Whitbey, City Clark and Collector

North Little Work, Arkanian

RECEIVED by

"An Equal Opportunity Employer"

Date Received: 02/03/2020

#### **ASSIGNMENT**





Received

FEB **06** 2020

Date Assigned: 02/04/2020

Applicant: LONNIE W. MCCAFFETY

D.O.B: 01/30/1970

Green Card Number (Permanent Resident Agen):

Home Address: 313 Cawdor Crossing, Chesapeake, VA, 23322

Home Phone: 757-695-7539 Business Phone: 757-698-7539 Cell Phone:

Trade Name: FAMILY DOLLAR STORE #32112

Former Trade Name:

Business Address: 5613 MacArthur Drive, North Little Rock County Pulaski

Type Of Investigation: Retail Beer Off Premise, Small Farm Wine-Retail, & Grocery Store 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

Sheriff Eric S. Higgins

Mr. Larry Jegley, Prosecuting Attorney

Assigned to Investigator:

Stockholders / Partners / LLC

Members:



## ALCOHOLIC BEVERAGE CONTROL DIVISION COMMENTS OF PUBLIC OFFICIALS

APPLICANT'S NAME: LONNIE W. MCCAFFETY

TYPE OF APPLICATION: Retail Beer Off Premise, Small Farm Wine-Retail, & Grocery Store Wine-NEW

BUSINESS NAME: FAMILY DOLLAR STORE #32112

BUSINESS ADDRESS: 5613 MacArthur Drive, North Little Rock, AR, 72118

DATE OF APPLICATION: 02/03/2020

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. Pursuant to ACA 3-2-103, a national fingerprint based background check will be, or has been, conducted. At ACIC request, do not run your own criminal history check through ACIC.

**Printed On:** 02/04/2020 Revised 03/11/2016

PAN pol 3/20 3 FP | 2/3/20



#### STATE OF ARKANSAS ALCOHOLIC BEVERAGE CONTROL DIVISION

#### APPLICATION FOR RETAIL BEER PERMIT

Check One:	() ON PREMISES COI		Replace	plication X ement	<u> </u>	
I, or we, do hereby submit answers to	make application to the the following questions to	State of Arkansas Inder oath for your	for a permit to se approval:	ell beer at retail, a	and do hereby	
Family Dollar St Corporate /Partner	ores of Arkansas, LL ship/LLC Name	С	FEIN# 56-1	343356		
NAME Lonnie		Wayne		McCaff	ety	
First		Middle		Last	B	
HOME ADDRESS	500 Volvo Parkway	Chesapeake,	VA 23320			
	Street	City	Zip	Count	y	
<b>BUSINESS NAME</b>	Family Dollar Store	#32112	FORMER NAM	E	· OI	
BUSINESS ADDRI	ess <u>5613 Mac</u> Arthui	Drive N. Little	Rock 72118	Pulaski	co	
	Street	City	Zip	County	Tewnship	
Is proposed location	n inside or outside city li	mits? Inside			N.	
Is the beer to be so	old in connection with any	other business?	Yes (A)	If so, state type o	f husiness	-
(café, drug store, p	ool hall, service station,	convenience store			. 240111003	
				to be sold in con	noetion with a	
motor fuel sales bu	siness give number of g	asoline and/or dies			Hection With a	
	of the proposed premise				Yes	_
	e and address of owner					33433
Will there be dancing	ng on the premises? No	Da	nce Space	x_		₹/
Does anyone now l	nold a beer or any other	permit at this locat	ion? No	If so, give name	and permit	9
number(s) N/A	to a superior of the superior				rain pointie	
Has anyone, to you	r knowledge, held a bee	r or any other pern	nit at this location	1? No If	so, give name	
and permit number	(s) N/A				707	
Do you or any othe	person interested in thi	s permit hold any o	ther type alcoho	lic beverage perr	nitz Yes	
If held give wame,	place and permit number	r(s) Applying for	multiple Famil	y Dollar location	18.2	No.
·	¥ 9.			300	<del>- N</del>	×
Phr 1					12	-



If applicant is a partnership, give names and addresses of all partners:  N/A		
If applicant is a corporation/LLC, give (A) Name and address of stockholders and amount of stock held by each:		
Family Dollar Stores, Inc., 500 Volvo Parkway, Chesapeake, VA 23320 - 100% owner		
(B) Name and address of President and Secretary:		
Lonnie W. McCaffety, 313 Cawdor Crossing, Chesapeake, VA 23320		
Sandra L. Boscia, 127 Meadowbrook, Charlotte, NC 28211		
NOTE: Schedule A is to be completed by each party to this application and is to be considered a part of the application. Any mis-statements or concealment of fact will be grounds for refusal of application, or revocation of permit(s) if later disclosed.  Signed this 6 day of December 2019		
Signature of Applicant or Managing Agent		
Subscribed and sworn to before me this  REBECCA LYNNE MCKEITHAN Notary Public Commonwealth of Virginia Registration No. 7822461 My Commission Expires Jan 31, 2023  My Commission Expires: 1.31.23		



#### STATE OF ARKANSAS ALCOHOLIC BEVERAGE CONTROL DIVISION

	Replace	ement
ABBI IOAWAN WAR	Permit I	No
APPLICATION FOR:		
☑ Small Farm Winery - Retail  ☐ Small Farm	Winery - Wholesale   Small	Farm Winery - Manufacture
I, or we, do hereby make application for the perr following questions under oath for your approval	nit noted above and do hereb	y submit answers to the
Family Dollar Stores of Arkansas, LL Corporate/Partnership/LLC Name	C FEIN# 56-	1343356
NAME Lonnie First	Wayne	McCaffety
	Middle	Last
HOME ADDRESS 500 Volvo Parkway Street	Chesapeake VA	23320
BUSINESS NAME Family Dollar Store #321	City State  12 FORMER NAME	Zip County
BUSINESS ADDRESS 5613 MacArthur Drive Notice Street C	N. Little Rock AR	72118 Pulaski Zip County
Is proposed location inside or outside city limits?	Inside	, oounty
If application is for retail level, are you a grocery	store, convenience store or lic	quor store? (x) Yes ( ) No
(Convenience stores must maintain a \$7,500.00	inventory of human consumat	bles.)
if application is for manufacturing, (1) how many		
(2) What was your total production for the last cal	lendar year? N/A	
Are you the owner of the proposed premises?	lo If leased,	give name and address of
owner Quanah Stone, LLC, Attn: Devon Glad	dstone, 21362 Sonesta Wa	y, Boca Raton, FL 33433
Does anyone now hold any other permit(s) at this	location? No	lf so, give name, type
and permit number(s) N/A		
Has anyone, to your knowledge, held any other ty name and permit number(s) N/A	pe permit(s) at this location?	No If so, give
,		



Give nearest distance, building to building, from CHURCH 0.5 miles	SCHOOL 2.6 miles
If applicant is a partnership, give names and addresses of all partners:	N/A
If applicant is a corporation give (A) Name and address of stockholders each:	and amount of stock held by
Family Dollar Stores, Inc., 500 Volvo Parkway, Chesapeake, VA	
B) Name and address of President and Secretary:	
onnie W. McCaffety, 313 Cawdor Crossing, Chesapeake	VA 23322
Sandra L. Boscia, 127 Meadowbrook, Charlotte, NC 2821	
Schedule "A" is to be completed by each party to this application and is tapplication. Any mis-statements or concealment of fact will be grounds evocation of permit(s) if later disclosed.	
f making application for a <b>Small Farm Winery-Manufacturer, I</b> certify th lescribed in ACA 3-5-1602(c)(1) and enclose a copy of my Federal Basic production from the calendar year previous to my application <b>(form/s TT</b>	
Signed this 6day of December	2019
subscribed and sworn to before me this (oth day of	Applicant's Signature
REBECCA LYNNE MCKEITHAN Notary Public Commonwealth of Virginia Registration No. 7822461 My Commission Expires Jan 31, 2023	lebecia Gulters
v Commission Evolves: 1.31.73	Notary Public



# STATE OF ARKANSAS ALCOHOLIC BEVERAGE CONTROL DIVISION

### APPLICATION FOR GROCERY STORE WINE PERMIT

Check One: (*) Less than 35,001 sq.ft ( ) 35,001 sq.ft - 50,000 ( ) 50,001 sq.ft - 75,000 ( ) Greater than 75,000 s	sq.ft Permit No.	
I, or we, do hereby make application to t authorized by Act 508 of 2017 and do he approval:	he State of Arkansas for a permit to sell wi reby submit answers to the following quest	ne in a grocery store as lons under oath for your
Family Dollar Stores of Arkansas, LI Corporate/Partnership/LLC N		1343356
NAME Lonnie	Wayne	MaCaffah
First	Middle	McCaffety
MAILING ADDRESS 500 Volvo Parkwa	y Chesapeake, VA	23320
Street	City	Zip County
BUSINESS NAME Family Dollar Store	#32112	
BUSINESS ADDRESS 5613 MacArthur	Drive N. Little Rock 72118	Pulaski
Street	City Zip	County Township
Does your store, or will your store, maint	ain an inventory of human consumables? ≥	Yes No
Provide the date your store opened for bu		
What percentage of your gross sales are	derived, or will be derived, from the sale of	alcoholic
beverages? <u>· 10</u> %	, and any most the sale of	i i
Does anyone now hold any type of nermi	t at this location?yes X	No
•		,NO
a. If "yes", give name, permit typ	e, and permit number(s)	
N/A		
b. Is one of the permits listed abo	ove a small farm wine retail permit?	YesNo
c. Will the named permittee and unchanged?YesNo	floor plan of the permitted premises remain	I
d. If you answered "Yes" to the al form. You do not need to com the application and have it not	bove question, please complete the "Certific plete the remaining portion of this applicati arized.	cation of Permit Status" on; however, you must sign
Is the proposed location inside or outside	city limits? Inside	
Are you the owner of the proposed premis	ses? No Do you have the premis	es leased? Yes
If leased, give name and address of owner	Quanah Stone, LLC, Attn: Devon Gladstone, 2136	



If applicant is a partnership, give names and addresses of a	all partners:
N/A	
1	
If applicant is a corporation/LLC, give (A) Name and addres	s of stockholders and amount of stock held by eac
Family Dollar Stores, Inc., 500 Volvo Parkway, Chesap	
1 1	
-	
(B) Name and address of President and Secretary:	
Lonnie W. McCaffety, 313 Cawdor Crossing, Chesapea	ake, VA 23320
Sandra L. Boscia, 127 Meadowbrook Rd., Charlotte, No	The state of the s
,	
NOTE: A Schedule A form is to be completed by each party the application. Existing Small Farm Wine Retail Permittees they must complete a Certification of Permit Status form. A grounds for refusal of application, or revocation of permit(s)	need not complete a Schedule A form; however,
Signed this _6 day ofDecember	2019
	hall
	Signature of Applicant or Managing Agent
". "C. Als	L O
Subscribed and sworn to before me this( day of	Michigan, 2019
REBECCA LYNNE MCKEITHAN Notary Public Commonwealth of Virginia Registration No. 7822461 My Commission Expires	Robert Public
My Commission Expires Jan 31. 2033  My Commission Expires Jan 31. 2033	Noted y Public