Prime 9



CITY OF LEE'S SUMMIT, MISSOURI APPLICATION FOR BUSINESS LIQUOR LICENSE

Please mark ("x") which <u>one</u> of the following licenses you will need for a Lee's Summit, Missouri establishment. Sunday licenses are a separate application.

| A1 - Manufacturing, brewing malt liquor (\$300.00) |
|---|
| A3 - Wholesale selling of malt liquor (\$75.00) |
| B1 - Manufacturing 22% or less alcohol content intoxicating liquor (\$150.00) |
| B2 - Manufacturing, distilling, blending intoxicating liquor of all kinds (\$300.00) |
| B3 - Wholesale selling of 22% or less alcohol-content intoxicating liquor (\$150.00) |
| B4 - Wholesale selling of intoxicating liquor of all kinds (\$375.00) |
| C1 - General retail selling of malt liquors, or wine, or both, by the drink <u>and</u> in the original package (\$52.50) |
| C2 - Hotel retail selling of malt liquor by the drink and in the original package \$52.50) |
| C3 - Restaurant retail selling of malt liquor by the drink and also in the original package, including Sunday sales (\$75.00) |
| _ D - Retail selling of malt liquor only in the original package, Including Sunday (22.50) |
| G1 - General retail selling of intoxicating liquor of all kinds by the drink and in the origin package (\$450.00) |
| G2 - Hotel retail selling of intoxicating liquor of all kinds by the drink and also in the |
| original package (\$450.00) |
| G3 - Restaurant retail selling of intoxicating liquor of all kinds by the drink and in the |
| original package (\$450.00) |
| H - Retail selling of intoxicating liquor of all kinds only in the original package (\$150.00) I - Consuming intoxicating liquor on premises not licensed to sell (C.O.L.) (\$90.00) |
| J - Resort retail selling of intoxicating liquor by the drink (\$450.00) |
| J (temp) – Resort temporary retail selling of intoxicating liquor by the drink (\$75.00 in addition to Type J) |
| M – Caterer temporary location (7-day) for retail selling of intoxicating liquor by the drini (\$15.00/day) |
| N – Caterer temporary location (50-day) for retail selling of intoxicating liquor by the drink (\$500.00) |
| O - Caterer temporary location (unlimited) for retail selling of intoxicating liquor by the drink (\$1,000.00) |
| P – Fourth of July temporary 7-day selling of wine and malt liquor by the drink (church, school, etc.) (\$150.00) |
| Q - Temporary (7-day) picnic retail selling of intoxicating malt liquor by the drink (churc school, etc.) (\$15.00/day) |
| R - Temporary (7-day) picnic retail selling of intoxicating liquor by the drink (\$37.50/day |
| S - Sunday license retail selling intoxicating liquor of all kinds (\$300.00 in addition to specific type) |
| Tasting – yearly fee in addition to specific type (\$25.00) |

(Any reference to "Applicant" in this document refers to the Owner/Managing Officer.)

| To be o | completed by applicant as (check on | <u>e):</u> | | | | | |
|--|--|---------------------------|---------------------|--------------|------------------|--|--|
| | Sole Owner & Operator | Corporation | Partnership [| LLC | (X | | |
| Corpor | ation/LLC Name: PRIME 9 LLC | | | | | | |
| Busine | ss Name: ZEDZ 9 | | Phone: [©] | 13-206-027 | 8 | | |
| Busine | ss Address: 519 SE MELODY LANE | | Lee's Su | ımmit, MO _ | 64063 | | |
| (I), (W | e), the undersigned, hereby apply to | the City of Lee's Su | mmit, MO, for the f | ollowing des | scribed license: | | |
| Type_G | 1, S, TASTING for the premises des | cribed above. | | | | | |
| Applica | ant's Name: RICHARD T BRYANT | | Phone:_ | 816-221-9 | 000 | | |
| | Address: | | | Data of Dist | | | |
| Place of | of Birth: of Employment (other than business) | Y RICHARD T BRYANT & AS | SSOCIATES, PC | Date of Birt | n:, | | |
| Employ | ment Address: 1111 MAIN STREET, SUIT | E 750, KANSAS CITY, MO 64 | 105 | Phone: 816-2 | 21-9000 | | |
| Email a | address: DICK2479@AOL.COM | | | | | | |
| List all previous addresses, if less than five years at current address: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2. | Are you a citizen of the United Stat naturalization: NA | es of America? YES | | zed, give da | ite and place of | | |
| | | | | | | | |
| 3. | Will you be the person in active of time? NO . If not, give control of the transfer of the tra | omplete details on the | | | | | |
| | | | | | | | |
| | | | | | | | |
| 4. | Have you or any person employed | | | | d by the City of | | |
| | Lee's Summit or by the licensing a | | | | | | |
| | Provide details: CLOUD 9 CONVENIENCE AND JOHNNY TAVERN | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| 5. | Has any such license listed in question #4 ever been suspended or revoked? NOIf so, please give complete details: NA | | | | | |
|-----|--|--|--|--|--|--|
| 6. | Have you ever made application for a liquor license that was denied by the City of Lee's Summit or by the licensing authority of any state, county or city? NOIf so, please give complete details:NA | | | | | |
| 7. | Have you or anyone interested either directly or indirectly in the premises to be licensed hereunder or the operation thereon ever been convicted of a felony? NO If so, please give complete details: NA | | | | | |
| 8. | If not a corporation/LLC, give names and business addresses of employers for the past five years. (If self-employed, state nature of business and location.): NA | | | | | |
| 9. | Is the proposed location within 300 feet of a church or school? NO | | | | | |
| 10. | If existing business, from whom and when was the business purchased? VACANT BUILDING Effective date of possession: ASAP. Name of mortgage holder, if any: NONE POSSESSION SUBJECT TO LICENSING | | | | | |
| 11. | Will any distiller, wholesaler, wine maker, brewer, or supplier, or coin operated, commercial, manual or mechanical amusement devices or the employees, officers or agents thereof, have any financial interest in the retail business of the applicant for the sale of alcoholic beverages, or "C.O.L.", and will the applicant directly or indirectly borrow or accept from any such persons equipment, money, credit, or property of any kind except ordinary commercial credit for liquor sold? NO If so, please explain: NA | | | | | |
| 12. | Will applicant either directly or indirectly borrow or accept from any person identified in #11 eithe equipment, money, credit or property of any kind except ordinary commercial credit for liquo sold? NO If so, please explain: NA | | | | | |

13. Will you at all times permit the entry of any officer or investigator who may have legal supervisory authority for the purpose of inspection or search; and will you permit the removal of all things and articles which may be in violation of the ordinances of Lee's Summit, Missouri, and the laws of the State of Missouri; and do you promise and agree not to violate any of the ordinances of Lee's Summit, Missouri, the laws of the State of Missouri, or the United States in the conduct of the business for which the license is sought? YES IF BUSINESS IS OWNED BY A CORPORATION. COMPLETE THIS SECTION: Name of corporation/LLC: PRIME 9 LLC Date of incorporation: MISSOURI State in which incorporated: MISSOURI 08/15/2017 If not a Missouri corporation/LLC, date authorized to do business in Missouri: Full name, complete residential address, date of birth and Social Security Number of the President, Vice President, Treasurer and Secretary of the corporation (or Members of the LLC): NIZAR RAWJANI 886 WEST 148TH TERRACE, OVERLAND PARK KS.-SOLE MEMBER If stock is not publicly held, give names and residential addresses of all stockholders who hold 10% or more of the capital stock: NIZAR RAWJANI 886 WEST 148TH TERRACE, OVERLAND PARK KS.-SOLE MEMBER XX. I wish to have my home address, Date of Birth, and place of birth withheld from public disclosure (initials) (County of Jackson) (State of Missouri) RICHARD T BRYANT ____, being of lawful age and duly sworn upon my oath, (Print Applicant's Name) do swear that the answers, information, and documents provided with this application are true and complete to the best of my knowledge and belief. Applicant's Signature Subscribed and sworn to before me this 29 day of JUNE

My commission expires: LSPD FORM #333 (Revised 08/20 A. BRESCIA

Notary Public - Notary Seal

Jackson County - State of Missouri

Commission Number 04622214

My Commission Expires Nov 9, 2024

Notary Public

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To Be Provided By Applicant:

| 1} | The Applicant and/or Managing Officer (if different) shall provide: | | | | | | | | |
|-----------|--|--|--|--|--|--|--|--|--|
| | a) Copy of State or US Government issued ID and a recent photograph if different than ID picture; OK | | | | | | | | |
| | b) Copy of Missouri voter registration card; OK | | | | | | | | |
| | c) Copy of paid Missouri personal property tax receipt for year immediately preceding date of application OK | | | | | | | | |
| | d) Fingerprints (obtained at the Lee's Summit Police Department, Main Lobby, 10 NE Tudor Rd., Lee's | | | | | | | | |
| | Summit, MO). The Applicant and/or Managing Officer (if different) will be fingerprinted as will all | | | | | | | | |
| | officers, directors and any shareholder holding more than a ten percent (10%) interest in the business. | | | | | | | | |
| 2) | Copy of Business License (contact Treasury Department at 816-969-1139). | | | | | | | | |
| 3) | Copy of Zoning Approval (contact Planning & Development at 816-969-1600). | | | | | | | | |
| 4) | Business Location Documents: | | | | | | | | |
| | a) Copy of lease or mortgage showing Proof of Occupancy. OK | | | | | | | | |
| | b) Recent photographs of the interior and exterior of the premises to be licensed. OK | | | | | | | | |
| | c) Complete description of the plans, specifications, and fixtures of the proposed place of business. This | | | | | | | | |
| | shall include measurements of the dimensions of the premises where alcohol will be served and sold. | | | | | | | | |
| | d) For newly constructed or remodeled businesses: Certificate of Occupancy Permit shall be obtained <u>prior</u> | | | | | | | | |
| | to the actual <u>issuance</u> of a city liquor license (contact Codes Administration at 816-969-1200) | | | | | | | | |
| 5) | Package Liquor Only: Inventory Affidavit, notarized by the applicant, stating the type of business | | | | | | | | |
| | presently engaged in, or in conjunction with, which the license shall be used; AND stating that in his place | | | | | | | | |
| | of business the applicant has, and at all times keeps, a stock of goods having an invoice of at least \$1,000, | | | | | | | | |
| | exclusive of fixtures and intoxicating liquors. OK | | | | | | | | |
| 6) | Appropriate license fee: Make checks and money orders payable to the City of Lee's Summit. | | | | | | | | |
| | ALIQUIOTIA 2004 | | | | | | | | |
| 7) | Estimated date of opening? AUGUST 1, 2021 | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Εo | or Office Use Only: | | | | | | | | |
| lt i | s recommended this application be APPROVED DISAPPROVED this 13th day of | | | | | | | | |
| | July2_021 | | | | | | | | |
| | | | | | | | | | |
| | W. Jours Fabor | | | | | | | | |
| | Director of Liquor Control | | | | | | | | |
| | | | | | | | | | |
| <u>C:</u> | City Council Action: Approved Discontinued Date: | | | | | | | | |
| () | ty Council Action: Approved Disapproved Date: | | | | | | | | |



LSPD FORM #333 (Revised 08/20)

APPLICATION FOR LIQUOR LICENSE

TYPE "S" - SUNDAY RETAIL (\$300)

The following is to be completed by the owner or managing officer:

| Sole Owner & | Operator 🗆 | Corporation | Partnership | LLC x | | | | |
|--|---|---------------|-------------------------|--------|-------------|--|--|--|
| Applicant's Name: | RICHARD T BRYA | NT | | | | | | |
| Business Name: ZED | Z 9 | 1000 | Phone: | | | | | |
| Business Address: 51 | 9 SE MELODY LANE | | _Lee's Summit, MO_ | 64063 | , | | | |
| I, the undersigned, hereby make application to the City of Lee's Summit, Missouri, for a Type "S" liquor license in accordance with Chapter 4, "Alcoholic Beverages" Ordinance of the City of Lee's Summit, Missouri. | | | | | | | | |
| County of Jackson) | | | | | | | | |
| State of Missouri) | SS | | | | | | | |
| I, (please print) RICHARD T BRYANT being of lawful age and duly sworn upon my oath, do swear that the answers, information, and documents provided with this application are true and complete to the best of my knowledge and belief. | | | | | | | | |
| | | | Applicant's Signature | | _ | | | |
| | | 2 | Applicant's Signature | | | | | |
| Subscribed and sworn My commission expi | res: 11-9-24 | day of JUNE | | 2021 | | | | |
| A. BRES Notary Public - Jackson County - Si Commission Numl My Commission Expi | Notary Seal rate of Missouri her 04622214 | | Notary Public | | - | | | |
| It is recommended th | is application be APPR | | OVED this 13th | day of | | | | |
| | | | W. Irans Fabor | | - | | | |
| | | D | irector of Liquor Contr | OI | | | | |
| City Council Action: | ☐ Approved ☐ D | isapproved Da | te: | | _ | | | |
| LSPD FORM #446 (New, 08/9 | 1, Revised 03/00, 09/12, 8/20) | | | | | | | |

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