

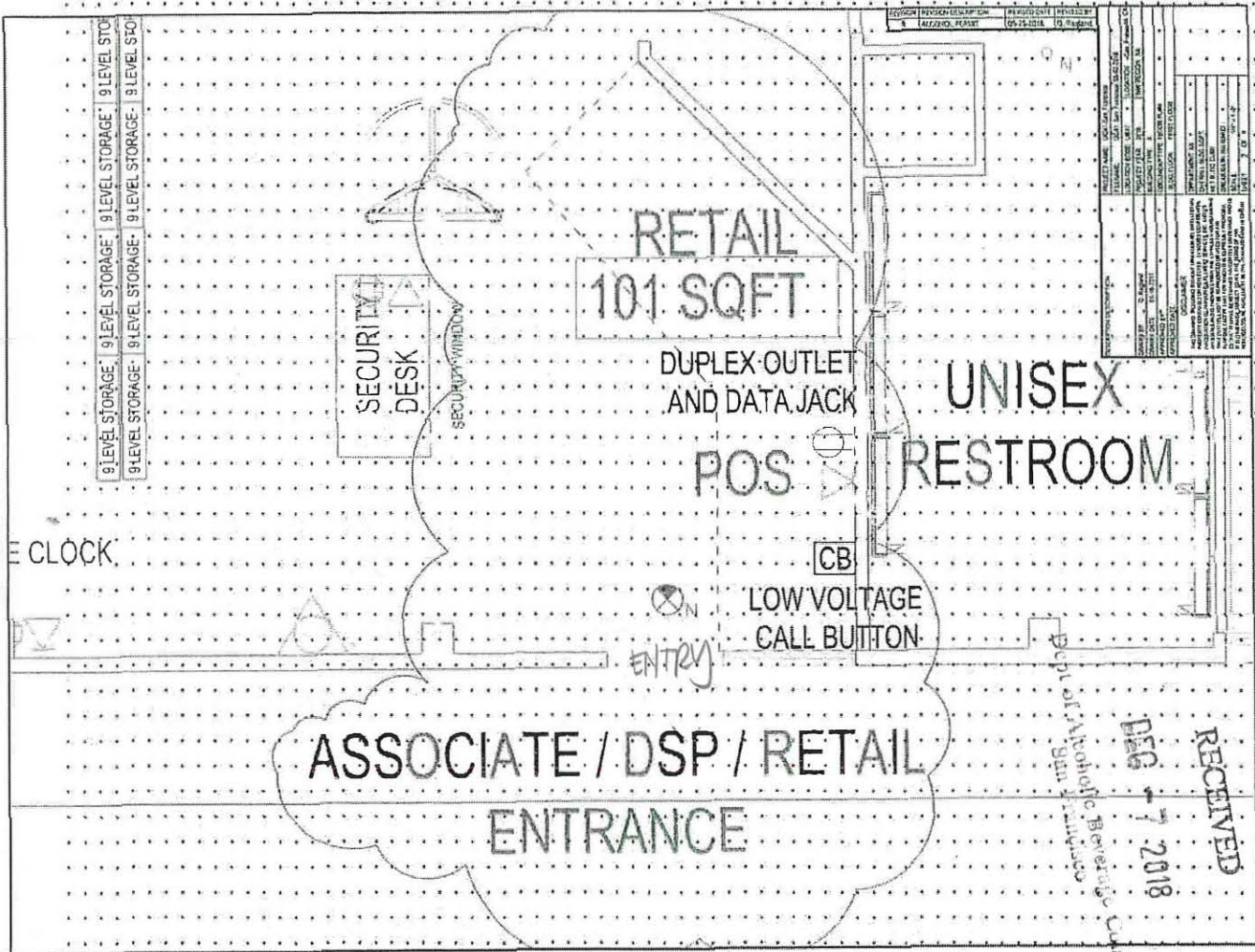
Department of Alcoholic Beverage Control
LICENSED PREMISES DIAGRAM (RETAIL)

State of California

1. APPLICANT NAME (Last, first, middle) Prime Now LLC	2. LICENSE TYPE 21
3. PREMISES ADDRESS (Street number and name, city, zip code) 888 Tennessee St, San Francisco CA 94107	4. NEAREST CROSS STREET 20th St.

The diagram below is a true and correct description of the entrances, exits, interior walls and exterior boundaries of the premises to be licensed, including dimensions and identification of each room (i.e., "storeroom", "office", etc.).

DIAGRAM



It is hereby declared that the above-described boundaries, entrances and planned operation as indicated on the reverse side, will not be changed without first notifying and securing prior written approval of the Department of Alcoholic Beverage Control. I declare under penalty of perjury that the foregoing is true and correct.

APPLICANT SIGNATURE (Only one signature required) 	DATE SIGNED November 29, 2018
FOR ABC USE ONLY	
CERTIFIED CORRECT (Signature)	PRINTED NAME
	INSPECTION DATE

Department of Alcoholic Beverage Control
PLANNED OPERATION (RETAIL)

SECTION I - FOR ALL RETAIL APPLICANTS

RECEIVED
 REG - 7 2018
 Dept of Alcoholic Beverage Control
 SAN FRANCISCO

1. APPLICANT NAME(S) Prime Now LLC
 2. LICENSE TYPE(S) 21

3. PREMISES ADDRESS (Street number and name, city, zip code) 888 Tennessee St. San Francisco CA 94107
 4. NEAREST CROSS STREET 20th St.

5. TYPE OF BUSINESS (Choose one that best describes the planned operation)

<input type="checkbox"/> Full Service Restaurant	<input type="checkbox"/> Cafeteria/Hofbrau	<input type="checkbox"/> Cocktail Lounge	<input type="checkbox"/> Private Club
<input type="checkbox"/> Deli or Specialty Restaurant	<input type="checkbox"/> Comedy Club	<input type="checkbox"/> Night Club	<input type="checkbox"/> Veterans Club
<input type="checkbox"/> Cafe/Coffee Shop	<input type="checkbox"/> Brew Pub	<input type="checkbox"/> Tavern	<input type="checkbox"/> Fraternal Club
<input type="checkbox"/> Bed & Breakfast	<input type="checkbox"/> Theater	<input type="checkbox"/> Wine Tasting Room	
<input type="checkbox"/> Supermarket	<input type="checkbox"/> Membership Store	<input type="checkbox"/> Service Station	<input type="checkbox"/> Swap Meet/Flea Market
<input type="checkbox"/> Liquor Store	<input type="checkbox"/> Department Store	<input type="checkbox"/> Convenience Market	<input type="checkbox"/> Drive-in Dairy
<input type="checkbox"/> Variety/Drug Store	<input type="checkbox"/> Gift Shop/Florist	<input type="checkbox"/> Convenience Market w/Gasoline	
<input checked="" type="checkbox"/> Other - describe: Off-Sale Package Store			

6. PATRON CAPACITY n/a
 7. SURROUNDING AREA
 Commercial Rural
 Residential Industrial
 Other
 8. PREMISES IS LOCATED IN
 Free Standing Building
 Shopping Center (Name):
 10 Units or Less More than 10 Units

9. FOOD SERVICE
 None Minimal Full Meals
 10. PARKING LOT? *Area*
 Yes No
 11. PATIO?
 Yes No
 12. WILL YOU HIRE A MANAGER? (Rule 57.5)
 Yes No
 13. WILL YOU HAVE A FOOD LESSEE? (Rule 57.7)
 Yes No

14. MEAL TYPE
 Dinner House Seafood
 Fast Food/Deli Other:
 Pizza/Pasta
 15. TYPE OF FOOD
 American Greek Indian French
 Chinese Korean Italian Thai
 Japanese Other:
 16. HOURS OF FOOD SERVICE
 BREAKFAST HOURS From: To:
 LUNCH HOURS From: To:
 DINNER HOURS From: To:

17. OPERATING HOURS

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Opening Time	8:00 am	8:00 am	8:00 am	8:00 am	8:00 am	8:00 am	8:00 am
Closing Time	0:00 am	0:00 am	0:00 am	0:00 am	0:00 am	0:00 am	0:00 am

RETAIL
 10A-6P

18. ENTERTAINMENT (One or more may apply. Please describe any entertainment with an asterick (*) below)

<input checked="" type="checkbox"/> None	<input type="checkbox"/> *Amplified Music	<input type="checkbox"/> Patron Dancing	<input type="checkbox"/> Card Room
<input type="checkbox"/> Recorded Music	<input type="checkbox"/> *Live Entertainment	<input type="checkbox"/> Bikini/Topless/Exotic	<input type="checkbox"/> Movies
<input type="checkbox"/> Juke Box	<input type="checkbox"/> *Floor/Stage Shows	<input type="checkbox"/> Pool/Billiard Tables	<input type="checkbox"/> "Hot Spot"/Lottery
<input type="checkbox"/> *Other	<input type="checkbox"/> Karaoke	<input type="checkbox"/> *Amateur/Pro Sports Events	<input type="checkbox"/> Video/Coin-Operated Games

*Description:

19. PREMISES IS LOCATED ON
 Major Thoroughfare Secondary Street Other
 20. TYPE OF STRUCTURE
 Single Story Two-Story
 Multi-Story - Number of stories:

21. PASS-THROUGH WINDOW? Yes No
 22. FIXED BARS? Yes - how many: No
 23. WHAT PERCENTAGE OF YOUR TOTAL SALES WILL BE ALCOHOLIC BEVERAGES? 13%

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24. INFORMATION GIVEN (R-27, R-107, Sec. 25612.5, Sec. 23790.5, etc.)
 25. DATE ENTERED INTO CABIN