LIQUOR LICENSE REVIEW

TO:	Planning Dep AnMarie Rod Georgia Pow Fax No.: (415	File:	171057					
TO:	Police Department Inspector Nelly Gordon Phone: (415) 837-7273							
DATE:	September 29, 2017							
Please submit your response in four to six weeks for the matter to be heard. PLEASE EMAIL YOUR RESPONSE BY: November 9, 2017, to John Carroll, Public Safety and Neighborhood Services Committee Clerk. john.carroll@sfgov.org - Fax No: 554-5163								
Applicant Na	ame:	Jennie Jie Cł Michael Jian						
Business Name:		Gum Hua Lee						
Application Address:		915-917 Stockton Street San Francisco, CA 94108						
and contact info:		Contact: Jennie Jie Chen 415-299-1118 Michael Jian Hua Ye 415-299-1119						
PLANNING COMMENTS: Approval Denial								
POLICE (COMMEN	ΓS:	☐ Approval	□ D ₀	enial			

September 22, 2017

Clerk of the Board San Francisco Board of Supervisors 1 Dr. Carlton B Goodlett Place, Room 244 San Francisco, California 94102 78.7 LIP 20 7/8 2: 28

Re: Public Convenience and Necessity "PCN" Request

Dear Clerk of the Board:

Gum Hua Lee liquor store has applied with the Department of Alcoholic Beverage Control (ABC) to transfer a type 21, off-sale General License to new location at 915-917 Stockton St. The new location is two doors down from existing location now located at 903 Stockton St. Before ABC will issue the premise to premise transfer, they require that we secure a Letter of Public Convenience and Necessity from San Francisco Board. The following facts are required.

Premise address:

915 Stockton St.

San Francisco, CA 94108

Mailing Address:

1745 Hickory Ave.

San Bruno, CA 94066-2943

Operational Hours:

9:30 AM to 7 PM, Monday to Sunday.

Gum Hua Lee is a minority owner operated small business located in the historic San Francisco Chinatown neighborhood. Gum Hua Lee store have been a neighborhood staple in Chinatown for more than 30 years. Local residents have been conveniently going to the store for generations. The store provides an extensive selection of fine wines/spirits, cooking wines, nonalcoholic beverages, and various snacks i.e.: chips and candy. We are requesting the relocation to updated site two doors down from existing location. The new site is similar in size but the facility is updated. The new updated location will enhance the local customers shopping experience and best serve existing local clientele. Customers can enjoy the same convenience of the store on the same street with an updated layout. This premise to premise transfer will not hinder the residents and businesses of the neighborhood do to existing business being within the same street. Gum Hua store has been an upstanding local business with no history of run ins with the law. Please take this letter request for issuance of the Type 21 license at location to allow Guam Hua Lee to provide the same local public convenience to the neighborhood.

Sincerely,

Jennie Jie Chen (Owner)

Michael Jian Hua Ye (Owner)

4-15-299-1118

415-299-1119

STATE OF CALIFORNIA DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL ALCOHOLIC BEVERAGE LICENSE

OFF-SALE GENERAL

VALID FROM

EXPIRES

Apr 01, 2017

CHEN, JENNIE JIE 1745 HICKORY AVE SAN BRUNO, CA 94066-2943

Mar 31, 2018

TYPE NUMBER DUP

21 551939

AREA CODE

RENEWAL

3800 24

BUSINESS ADDRESS DBA: GUM HUA LEE (IF DIFFERENT)

903 STOCKTON ST

SAN FRANCISCO, CA 94108-1607

CONDITIONS

OWNERS:

CHEN, JENNIE JIE YE, MICHAEL JIAN HUA



IMPORTANT INFORMATION

EFFECTIVE PERIOD: This license is effective only for the operating period shown above. A new license will be sent 4 to 6 weeks after the expiration date on your license if payment is timely. Your license status will remain in good standing for 60 days after the expiration date if the renewal payment was received timely. To check the status of your license, visit http://www.abc.ca.gov/datport/LQSMenu.html.

RENEWAL NOTICES: Renewal notices are sent to premises address unless a specific mailing address is requested. If a notice is not received 30 days before expiration date shown above, contact the nearest ABC office. To assure receipt of notices, advise your local ABC office of any change in

RENEWAL DATES: It is the licensee's responsibility to pay the required renewal fee by the expiration date shown above.

A Penalty is charged for late renewal and the license can be automatically revoked for failure to pay.

RENEWAL PAYMENTS: Renewal payments can be made in person by visiting your local office or sent by mail to ABC Headquarters, 3927 Lennane Drive, Suite 100, Sacramento, CA 95834. If you do not have your renewal notice, your license number and the reason for payment (ex. "renewal") must be clearly indicated on the check. You can contact your local ABC office for your renewal fee amount.

SEASONAL LICENSES: It is the licensee's responsibility to pay the required renewal fee prior to the next operating period.

POSTING: Cover this license with glass or other transparent material and post it on premises in a conspicuous place.

CONDITIONS: A copy of all applicable conditions must be kept on premises.

LICENSEE NAME: Only 10 names will be printed on each license. If there are more names associated with the license, they will be indicated by "AND XX OTHERS". All names are on file and available upon request from your local ABC office.

DBA: If you change your business name please notify your local ABC office.

If you have any questions regarding this license, contact your local ABC office. You can find the contact information for each district office at http://www.abc.ca.gov/distmap.html.

NOTE: CONTACT YOUR LOCAL ABC OFFICE IF YOUR LICENSED PREMISES WILL BE TEMPORARILY CLOSED FOR MORE THAN 15 DAYS OR WILL BE PERMANENTLY CLOSED.

http://www.abc.ca.gov



CaliforniaABC

Page 1

License Serial#

1400198

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 1. APPLICANT'S NAME	BC				<u>:</u>			
Jennie Jie Chen ; Michael Jia	n Hua Vo							
2. PREMISES ADDRESS (Street number and name, cit	ty, zip code)		3. L	ICENSE TYPE	<u> </u>			
915-917 Stockton St., San Francisco CA 94108-1607 21								
4. TYPE OF BUSINESS Full Service Restaurant	Hofbrau/Cafeteria Cocktail Lounge			Private Club				
Deli or Specialty Restaurant	Comedy Club Night Club		Veterans Club		-			
Cafe/Coffee Shop	Brew Pub	ew Pub Tavern: Beer		Fraternal Club				
Bed & Breakfast:	Theater	r Tavern: Beer & Wine		Wine Tasting Room				
Wine only All				·				
Supermarket	Membership Store Service Station		Swap Meet/Flea Market					
X Liquor Store	Department Store	ment Store Convenience Market		Drive-in Dairy				
Drug/Variety Store	Florist/Gift Shop	Convenience Market w/	Gasoline					
Other - describe:								
5. COUNTY POPULATION	6. TOTAL NUMBER OF LICENSES IN	COUNTY		TO POPULATION IN COUNTY				
866,583		On-Sale Off-Sale	1086	On-Sale	X Off-Sale			
8. CENSUS TRACT NUMBER	9. NO. OF LICENSES ALLOWED IN C		_	EXISTING IN CENSUS TRACT				
113	2	On-Sale X Off-Sale	3	On-Sale	X Off-Sale			
11. IS THE ABOVE CENSUS TRACT OVERCONCENTRATED WITH LICENSES? (i.e., does the ratio of licenses to population in the census tract exceed the ratio of licenses to population for the entire county?) X Yes, the number of existing licenses exceeds the number allowed No, the number of existing licenses is lower than the number allowed 12. DOES LAW ENFORCEMENT AGENCY MAINTAIN CRIME STATISTICS?								
X Yes (Go to Item #13)	No (Go to Item #20)							
13. CRIME REPORTING DISTRICT NUMBER	14. TOTAL NUMBER OF REPORTING	DISTRICTS	1	F OFFENSES IN ALL REPORTI	NG DISTRICTS			
148	653		50,774					
16. AVERAGE NO. OF OFFENSES PER DISTRICT	17. 120% OF AVERAGE NUMBER OF OFFENSES		18. TOTAL NUMBER OF OFFENSES IN REPORTING DISTRICT					
78 19. IS THE PREMISES LOCATED IN A HIGH CRIME F	93 REPORTING DISTRICT? (i.e. has a 20%	greater number of reported crimes th	143 an the average number of	reported crimes as determined f	rom all crime			
 19. IS THE PREMISES LOCATED IN A HIGH CRIME REPORTING DISTRICT? (i.e., has a 20% greater number of reported crimes than the average number of reported crimes as determined from all crime reporting districts within the jurisdiction of the local law enforcement agency) X Yes, the total number of offenses in the reporting district equals or exceeds the total number in item #17 No, the total number of offenses in the reporting district is lower than the total number in item #17 CHECK THE BOX THAT APPLIES (check only one box) a. If "No" is checked in both item #11 and item #19, Section 23958.4 B&P does not apply 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. 								
b. If "Yes" is checked in either item #11 or item #19, and the applicant is applying for a non-retail license, a retail bona fide public eating place license, a retail license issued for a hotel, motel or other lodging establishment as defined in Section 25503.16(b) B&P, or a retail license issued in conjuction with a beer manufacturer's license, or winegrower's license, advise the applicant to complete Section 2 and bring the completed form to ABC when filing the application or as soon as possible thereafter.								
c. If " <u>Yes</u> " is checked in either item #11 <u>or</u> item #19, <u>and</u> the applicant is applying for an off-sale beer and wine license, an off-sale general license, an on-sale beer and wine (public premises) license, or an on-sale general (public premises) license; advise the <u>applicant to take this form</u> to the local governing body, or its designated subordinate officer or body to have them complete Section 3. The completed form will need to be provided to ABC in order to process the application.								
Governing Body/Designated Subordinate Name: Board of Supervisors								
PREPARED BY (Name of Department Employee)					-			
				•				
ABC-245 (rev. 01-11)								

PART 2 - TO BE COMPLETED E	BY THE APPLICANT	(If box #20b is check	red)	
21. Based on the information on necessity would be served by the this area. You may attach a separate the served by the served b	issuance of the licer	se. Please describe l	elow the reason	if you can show that public convenience or s why issuance of another license is justified in occed to Part 3.
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22. APPLICANT SIGNATURE			. 23	3. DATE SIGNED
PART 3 - TO BE COMPLETED E	BY LOCAL OFFICIAL	S (If box #20c is che	cked)	
an over-concentration of licenses Code). Sections 23958 and 2395 governing body of the area in whi days of notification of a complete Please complete items #24 to #3(letter on official letterhead stating	and/or a nigner than 88.4 of the Business a ch the applicant prem d application that pub D below and certify or whether or not the is	average crime rate as and Professions Code nises are located, or it lic convenience or ned affix an official seal, o suance of the applied	defined in Secti requires the Dep s designated sub sessity would be r attach a copy of for license would	premises where undue concentration exists (i.e., on 23958.4 of the Business and Professions partment to deny the application unless the local ordinate officer or body, determines within 90 served by the issuance. If the Council or Board resolution or a signed I serve as a public convenience or necessity.
			-	
24. WILL PUBLIC CONVENIENCE OR NECESS Yes	ITY BE SERVED BY ISSUANC	E OF THIS ALCOHOLIC BEVER		d (i.e., letter, resolution, etc.)
25. ADDITIONAL COMMENTS, IF DESIRED (ma		or denial of public convenience		
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6. CITY/COUNTY OFFICIAL NAME	27. CITY/COUNTY OF	FICIAL TITLE	28	. CITY/COUNTY OFFICIAL PHONE NUMBER
9. CITY/COUNTY OFFICIAL SIGNATURE	-		30	. DATE SIGNED
•	•			

Department of Alcoholic Beverage Control

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

State of California

TO: Department of Alcoholic Beverage Control

33 NEW MONTGOMERY STREET

SUITE 1230

SAN FRANCISCO, CA 94105

(415) 356-6500

File Number: 585314

Receipt Number: 2452418 Geographical Code: 3800

Copies Mailed Date: September 13, 2017

Issued Date:

DISTRICT SERVING LOCATION:

SAN FRANCISCO

First Owner: Name of Business: CHEN, JENNIE JIE **GUM HUA LEE**

Location of Business:

915-917 STOCKTON ST

SAN FRANCISCO, CA 94108-1607

County:

SAN FRANCISCO

Is Premise inside city limits?

Yes

0113.00 Census Tract

Mailing Address: (If different from premises address)

Type of license(s):

21

Transferor's license/name: 551939 / CHEN, JENNIE JIE

Dropping Partner:

No

License Type

Transaction Type

Fee Type

Master Dup

Date

Fee

21 - Off-Sale General

PREMISE TO PREMISE TRANSFER NA

Y

09/13/17

\$100.00

Yes

Total

\$100.00

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? No

Explain any "Yes" answer to the above questions on an attachment which shall be deemed part of this application.

Applicant agrees (a) that any manager employed in an on-sale licensed premises will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

STATE OF CALIFORNIA

County of SAN FRANCISCO

Date: September 13, 2017

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is an applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf. (2) that he has read the foregoing and knows the contents thereof and that each of the above statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant or applicant's business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor or transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

Effective July 1, 2012, Revenue and Taxation Code Section 7057, authorizes the State Board of Equalization and the Franchise Tax Board to share taxpayer information with Department of Alcoholic Beverage Control. The Department may suspend, revoke, and refuse to issue a license if the licensee's name appears in the 500 largest tax delinquencies list. (Business and Professions Code Section 494.5.)

Applicant Name(s)

Applicant Signature(s)

See 211 Signature Page

CHEN, JENNIE JIE

YE, MICHAEL JIAN HUA