

**LIQUOR LICENSE  
PUBLIC CONVENIENCE OR  
NECESSITY REFERRAL**

**TO:** Planning Department  
Georgia Powell  
Phone No. (415) 558-6371

**DATE:** May 7, 2019

**TO:** Police Department  
Inspector Nelly Gordon  
Phone No. (415) 837-7273

**AP Block/Lot Nos.:** 3760 / 027  
**Zoning:** 30-X  
**Quad:** SE Planning Team  
**Record No.:** 2019-006635MIS

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Please submit your response within three weeks; the Public Safety and Neighborhood Services Committee will tentatively schedule the PC or N hearing for a regular meeting in June of 2019.

**PLEASE EMAIL YOUR RESPONSE BY:** May 24, 2019, to John Carroll, Public Safety and Neighborhood Services Committee Clerk.

**[john.carroll@sfgov.org](mailto:john.carroll@sfgov.org) - Phone No: 554-4445**

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**Applicant name:** Bebidas Bananas Operations, LLC

**Business name:** CloudKitchen

**Application address:** 475 6<sup>th</sup> Street  
San Francisco, CA 94103

**Applicant contact info:** Kevin Hufford  
424-270-0736

**PLANNING REVIEW:**  Approval  Denial

Planning Staff Contact: Monica Giacomucci / monica.giacomucci@sfgov.org / (415) 575-8714

**Please print review comments on a trailing page.**

**POLICE REVIEW:**  Approval  Denial

**Please print review comments in a trailing report.**



**California Department of Alcoholic Beverage Control**  
**License Query System Summary as of 05/06/2019**

<b>License Information</b>	
<b>License Number:</b>	605447
<b>Primary Owner:</b>	BEBIDAS BANANAS OPERATIONS LLC
<b>ABC Office of Application:</b>	24 - SAN FRANCISCO

<b>Business Name</b>
CLOUD KITCHEN

<b>Business Address</b>
475 6TH ST
SAN FRANCISCO, CA. 94103
<b>County:</b> SAN FRANCISCO <b>Census Tract:</b> 0180.00

<b>Licensee Information</b>
<b>Licensee:</b> BEBIDAS BANANAS OPERATIONS LLC
<b>Company Information</b>
MEMBER: BERDAKIN, DIEGO GASTON

<b>License Types</b>
1) <b>License Type:</b> 21 - OFF-SALE GENERAL
<b>License Type Status:</b> PENDING
<b>Status Date:</b> 19-APR-2019 <b>Term:</b> 12 Month(s)
<b>Original Issue Date:</b> <b>Expiration Date:</b>
<b>Master:</b> Y <b>Duplicate:</b> <b>Fee Code:</b> P40
<b>License Type was Transferred On:</b> <b>From:</b> 21-438061
<b>License Type was Transferred On:</b> <b>To:</b>

<b>Operating Restrictions</b>
... No Operating Restrictions found ...

<b>Disciplinary Action</b>
... No Active Disciplinary Action found ...

<b>Disciplinary History</b>
... No Disciplinary History found ...

<b>Hold</b>
<b>Hold Date:</b> 02-AUG-2017 <b>Type:</b> BOARD OF EQUALIZATION HOLD
<b>Hold Date:</b> 19-APR-2019 <b>Type:</b> FORM 220

<b>Escrows</b>
<b>Escrow:</b> FEDERAL ESCROW INC, 23734 VALENCIA BLVD STE 100A VALENCIA,CALIFORNIA 91355

For a definition of codes, view our glossary.

May 1, 2019

RECEIVED  
BOARD OF SUPERVISORS  
SAN FRANCISCO

2019 MAY -3 PM 2:34

BY AK

San Francisco Board of Supervisors  
Public Safety and Neighborhood Services  
Attn: John Carroll  
1 Dr. Carlton B. Goodlett Place  
City Hall, Room 244  
San Francisco, CA 94102

Re: Request for the Determination of Public Convenience or Necessity for  
Bebidas Bananas Operations, LLC, 475 6<sup>th</sup> St., San Francisco, CA 94103  
Pending file no. 21-605447

Dear Mr. Carroll and Members of the Public Safety and Neighborhood Services Committee:

Bebidas Bananas Operations, LLC *dba* "CloudKitchens" operates commissary kitchens for delivery-only restaurants. CloudKitchens was launched in 2017 with the goal of making it easier for restaurateurs and food service vendors to succeed in today's challenging and rapidly evolving business environment. CloudKitchens licenses turn-key kitchen spaces to restaurateurs, food vendors, mobile food facilities, and caterers to operate and fulfill food orders purchased through apps, web portals, or over the phone. The food vendors hire and train their own employees to prepare the food, but CloudKitchens owns the facility, handles the facility maintenance, and facilitates the online food ordering process. This results in significant savings in real estate costs, labor costs, and operating costs for the food vendors.

CloudKitchens recently submitted an application for a Type-21 liquor license (the "Liquor License") to the Department of Alcoholic Beverage Control for the sale of alcoholic beverages for off-premises consumption from our facility set to open at 475 6<sup>th</sup> St. We believe that public convenience or necessity would be served by the issuance of the Liquor License.

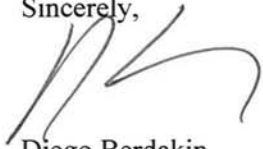
After operating our Los Angeles facility for over two years, we have experienced first-hand the positive impact CloudKitchens can have on a community. In addition to the direct benefit to the food vendors through significant cost-savings, our facilities have had a positive impact on the traffic issues and food safety challenges faced at traditional brick-and-mortar facilities. We have also helped revitalize the local neighborhood by providing convenient access to healthy food. In addition, our facility has helped to directly create an estimated 150 new jobs. We believe that these same benefits will result from our facility in San Francisco.

CloudKitchen's proposed hours of operation are 6:00 am to 2:00 am daily, but the majority of the business from our facility will be conducted during regular meal times. With respect to the issue of undue concentration of liquor licenses in the census tract, the issuance of the Liquor License at our facility will not have a negative impact on the surrounding community due to the nature of our business. As a delivery-only concept, the food vendors will be delivering food and alcoholic beverages up to 5 miles away from the facility. This facility will not resemble a liquor store in any way.

CloudKitchens is looking forward to the opportunity to assist food vendors in San Francisco with the opportunity to operate their business at a fraction of the cost, and to have a positive impact on the surrounding neighborhood in the process. We respectfully request that the Committee determine that public

convenience or necessity will be served by the issuance of the Liquor License at our facility. Thank you in advance for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read 'Diego Berdakin', with a stylized flourish at the end.

Diego Berdakin  
Managing Member

Department of Alcoholic Beverage Control  
**PLANNED OPERATION (RETAIL)**

**SECTION I - FOR ALL RETAIL APPLICANTS**

1. APPLICANT NAME(S) **Bebidas Bananas Operatives LLC** 2. LICENSE TYPE(S) **21**

3. PREMISES ADDRESS (Street number and name, city, zip code) **475 6th St. , San Francisco, CA 94103** 4. NEAREST CROSS STREET **Bryant St.**

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

Full Service Restaurant  Cafeteria/Hofbrau  Cocktail Lounge  Private Club  
 Deli or Specialty Restaurant  Comedy Club  Night Club  Veterans Club  
 Cafe/Coffee Shop  Brew Pub  Tavern  Fraternal Club  
 Bed & Breakfast  Theater  Wine Tasting Room

Supermarket  Membership Store  Service Station  Swap Meet/Flea Market  
 Liquor Store  Department Store  Convenience Market  Drive-in Dairy  
 Variety/Drug Store  Gift Shop/Florist  Convenience Market w/Gasoline  
 Other - describe: **commissary**

6. PATRON CAPACITY **100 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 *\*Sec. 23038 not applicable* 10. PARKING LOT?  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	6am	—————→					
Closing Time	2am	—————→					

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

None  Recorded Music  Juke Box  \*Other  
 \*Amplified Music  \*Live Entertainment  \*Floor/Stage Shows  Karaoke  
 Patron Dancing  Bikini/Topless/Exotic  Pool/Billiard Tables  \*Amateur/Pro Sports Events  
 Card Room  Movies  "Hot Spot"/Lottery  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? **5%**

**FOR ABC USE ONLY**

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

Department of Alcoholic Beverage Control  
**APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)**  
 ABC 211 (6/99)

State of California

*Mr. Kevin Hufford*  
 (424) 270-0736

**TO:** Department of Alcoholic Beverage Control  
 33 NEW MONTGOMERY STREET  
 SUITE 1230  
 SAN FRANCISCO, CA 94105  
 (415) 356-6500

File Number: **605447**  
 Receipt Number: **2567489**  
 Geographical Code: **3800**  
 Copies Mailed Date: **April 19, 2019**  
 Issued Date:

**DISTRICT SERVING LOCATION:** SAN FRANCISCO  
**First Owner:** **BEBIDAS BANANAS OPERATIONS LLC**  
**Name of Business:** **CLOUD KITCHEN**  
**Location of Business:** **475 6TH ST**  
**SAN FRANCISCO, CA 94103-4706**  
**County:** **SAN FRANCISCO**  
**Is Premise inside city limits?** **Yes**      Census Tract **0180.00**  
**Mailing Address:** **777 S FIGUEROA ST**  
**(If different from** **41ST FLR**  
**premises address)** **LOS ANGELES, CA 90007-5800**  
**Type of license(s):** **21**  
**Transferor's license/name:** **438061 / JUVVADI, VENKAT**      Dropping Partner: Yes \_\_\_ No X  
**DINAKER RAO**

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 BOARD OF SUPERVISORS  
 SAN FRANCISCO  
 2019 APR 24 PM 3:23  
 BY *[Signature]*

License Type	Transaction Type	Fee Type	Master	Dup	Date	Fee
21 - Off-Sale General	PREMISE TO PREMISE TRANSFER	NA	Y	0	04/19/19	\$100.00
21 - Off-Sale General	PERSON-TO-PERSON TRANSFER	NA	Y	0	04/19/19	\$1,250.00
21 - Off-Sale General	ANNUAL FEE	NA	Y	0	04/19/19	\$670.00
NA	FEDERAL FINGERPRINTS	NA	N	1	04/19/19	\$24.00
NA	STATE FINGERPRINTS	NA	N	1	04/19/19	\$39.00
<b>Total</b>						<b>\$2,083.00</b>

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: April 19, 2019  
 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)

**BEBIDAS BANANAS OPERATIONS LLC**  
 Recommend approval of ABC Type 21 license for Catering Service/Commissary use (DBA Cloud Kitchen) permitted in a SALI Zoning District per PC Sections 846.81 and 890.25. On-site food/alcohol consumption/service not permitted. Commissary use established under BPA #201802272276.  
 Monica Giacomucci, (415) 575-8714

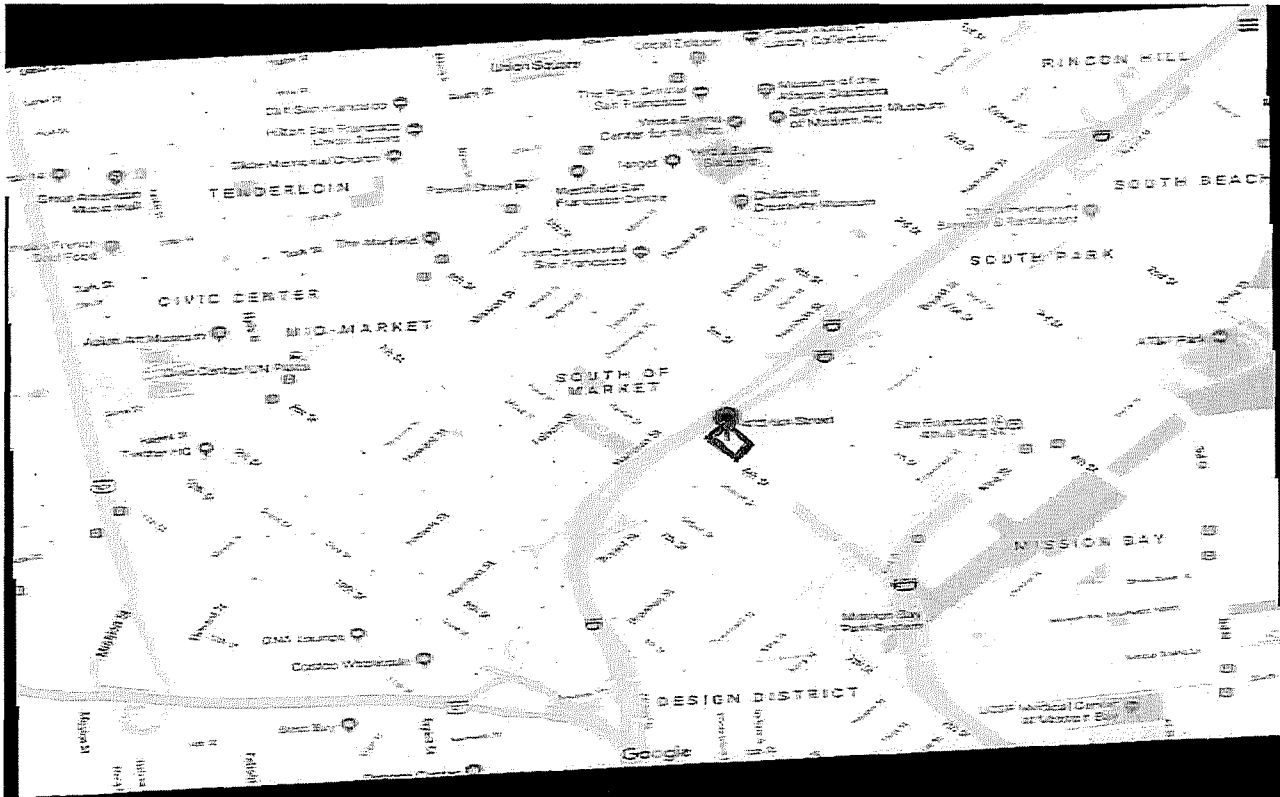
# SUPPLEMENTAL DIAGRAM

### Instructions to Applicant:

Draw a sketch of the area on which the licensed premises is or will be located. Show adjacent structures and nearest cross streets. *If this is an event for a daily license, catering authorization or miscellaneous use, show the area where sales and consumption of alcoholic beverages will occur. Post a copy of this diagram with Daily License, Catering Authorization or Event Authorization where the event is held. Sales and consumption of alcoholic beverages must be confined to the area designated in the diagram and supervised to prevent violations of the Alcoholic Beverage Control Act.*

1. APPLICANT NAME (Last, first, middle) <b>Bebidas Bananas Operativos LLC</b>	2. LICENSE TYPE <b>21</b>
3. PREMISES ADDRESS (Street number and name, city, zip code) <b>475 6th St. , San Francisco, CA 94103</b>	4. NEAREST CROSS STREET <b>Bryant St.</b>

### DIAGRAM



RECEIVED  
 APR 15 2019  
 Department of Alcoholic Beverage Control  
 License Division

I have read the above instructions and I declare under penalty of perjury that the above diagram is true and correct.

APPLICANT SIGNATURE 	DATE SIGNED <b>3-14-19</b>
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### FOR ABC USE ONLY

CERTIFIED CORRECT (Signature)	PRINTED NAME <b>Diego Berdakin</b>	INSPECTION DATE
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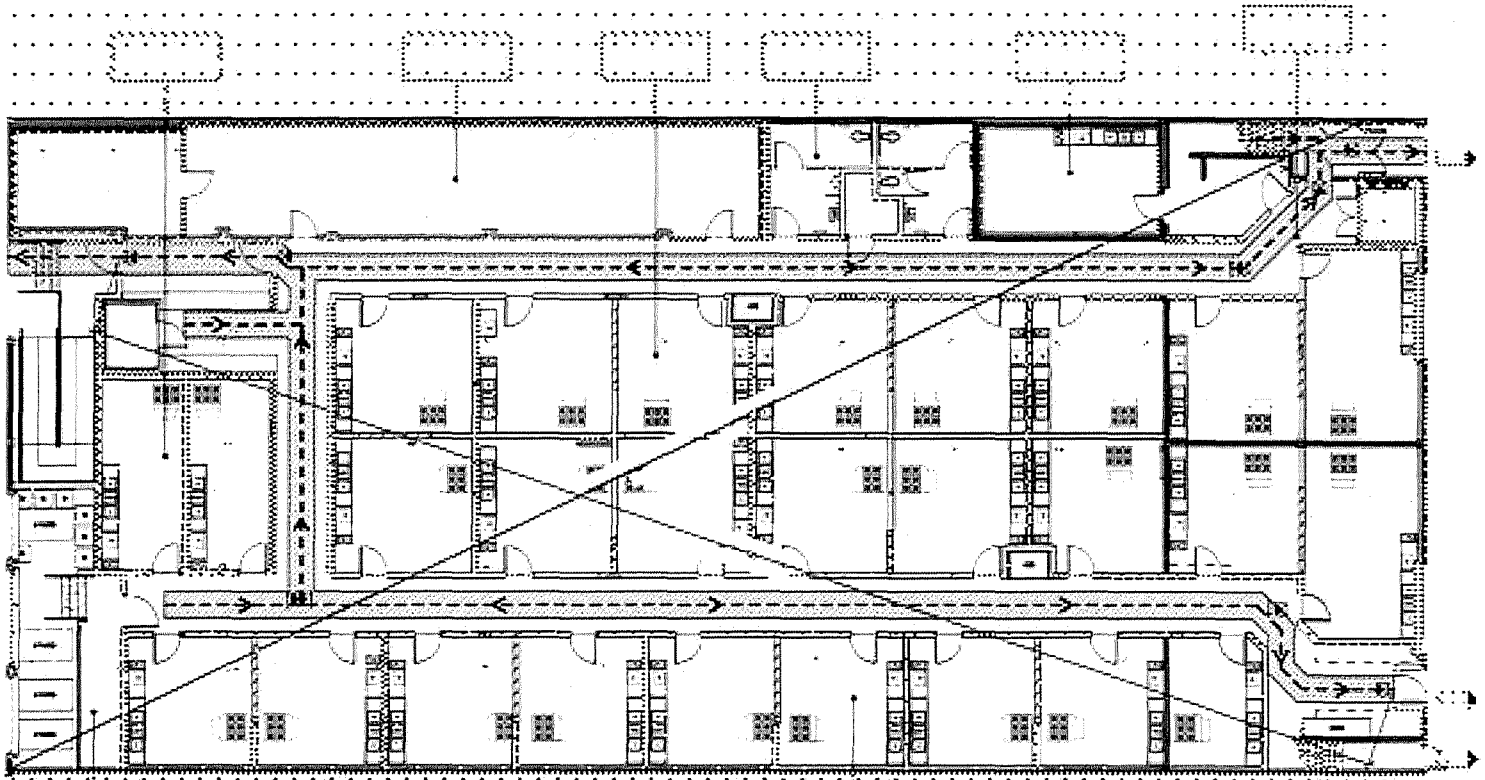
Department of Alcoholic Beverage Control  
**LICENSED PREMISES DIAGRAM (RETAIL)**

State of California

1. APPLICANT NAME (Last, first, middle) Bebidas <i>Beverages Operations LLC</i>	2. LICENSE TYPE 21
3. PREMISES ADDRESS (Street number and name, city, zip code) 475 6th St. , San Francisco, CA 94103	4. NEAREST CROSS STREET Bryant 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**



RECEIVED

APR 15 2019

*Dept of Alcoholic Beverage Control*

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) <i>[Signature]</i>	DATE SIGNED 3-14-19
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**FOR ABC USE ONLY**

CERTIFIED CORRECT (Signature)	PRINTED NAME	INSPECTION DATE
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