Dear Board of Supervisors,

I am requesting a PC or N determination letter. Below is the requested information:

- 1. Applicant Information:
 - o Name: Yan Juan Ao
 - Preferred Contact: Raymond Wu
 - o Phone Number: (415) 518-8899
 - o Email: raymondwu514@gmail.com
- 2. Business Information:
 - Name: Xing Ye Trading
 - o Address: 1262 Stockton St. San Francisco, CA 94133
- 3. Mailing Address: Same as above
- 4. License Type: Alcohol License 21 (Transfer)
- 5. Hours of Operation:
 - o Mon: 8 am 6 pm
 - o Tue: 8 am 6 pm
 - Wed: 8 am 6 pm
 - o Thu: 8 am 6 pm
 - o Fri: 8 am 6 pm
 - Sat: 8 am 6 pm
 - Sun: 8 am 6 pm
- 6. Filing with Department of Alcoholic Beverage Control:
 - Applicant filed directly with ABC on July 29, 2019 with license seller and
 McGovern Escrow Services.
- 7. 30 Day Notice:
 - Applicant started the 30 day notice on August 6, 2019 and completed on September 5, 2019.
- 8. Explanation for Public Convenience or Necessity:
 - Xing Ye Trading will serve as a public convenience as a continuation of the previous alcoholic license owner, whose business was directly across from Xing Ye Trading and has now retired. Furthermore, Xing Ye Trading sells groceries on a prominent spot in Chinatown. Ownership of the license for Xing Ye Trading will allow residents of the area an ease of access to alcoholic beverages alongside their groceries.

Thank you,

9/5/19

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	3C			
1. APPLICANT'S NAME	7	•		
XING YE TRADING INC				
2. PREMISES ADDRESS (Street number and name, city			•	3. LICENSE TYPE
1262 Stockton St San Francis 4. TYPE OF BUSINESS	co, CA 94133-4312			21
Full Service Restaurant	Hofbrau/Cafeteria	Cocktail Lounge	₩.	Private Club
Deli or Specialty Restaurant	Comedy Club	Night Club		Veterans Club
Cafe/Coffee Shop	Brew Pub	Tavern: Beer		Fraternal Club
Bed & Breakfast:	Theater	Tavern: Beer & Wine		Wine Tasting Room
Wine only All				·
Supermarket	Membership Store	Service Station		Swap Meet/Flea Market
Liquor Store	Department Store	X 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		i	LICENSES TO POPULATION IN COUNTY
5,592/883,963		On-Sale Off-Sale	1,133	On-Sale X Off-Sale
8. CENSUS TRACT NUMBER	9. NO. OF LICENSES ALLOWED IN C			ICENSES EXISTING IN CENSUS TRACT
107	4	On-Sale X Off-Sale	11 .	On-Sale X Off-Sale
11. IS THE ABOVE CENSUS TRACT OVERCONCENTR X Yes, the number of existing licenses ex	i i	ratio of licenses to population in the	census tract e	ceed the ratio of licenses to population for the entire county?)
No, the number of existing licenses is le	ower 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		UMBER OF OFFENSES IN ALL REPORTING DISTRICTS
138 16. AVERAGE NO. OF OFFENSES PER DISTRICT	654 17. 120% OF AVERAGE NUMBER OF	OFFENSES	55,022	UMBER OF OFFENSES IN REPORTING DISTRICT
84.13	100.8	· ·	185	
19. IS THE PREMISES LOCATED IN A HIGH CRIME RE	PORTING DISTRICT? (i.e., has a 20% g	greater number of reported crimes that		number of reported crimes as determined from all crime
reporting districts within the jurisdiction of the local law X Yes, the total number of offenses in the		eeds the total number in iter	n #17	
No, the total number of offenses in the				
20. CHECK THE BOX THAT APPLIES (check only one b		<i>i</i> .		
a. If "No" is checked in both item #11 on this issue. Advise the applicant to I				and no additional information will be needed
retail license issued for a hotel, motel of	or other lodging establishment a ower's license, advise the <i>appli</i>	is defined in Section 25503.	16(b) B&P,	etail bona fide public eating place license, a or a retail license issued in conjuction with a e completed form to ABC when filing the
sale beer license, an on-sale beer and	wine (public premises) license, anated subordinate officer or bo	or an on-sale general (publi	ic premises	ne license, an off-sale general license, an on-) license, advise the <u>applicant to take this form</u> he completed form will need to be provided to
Governing Body/Designated Subordinal	te Name: Board of Sur	pervisors		
OR DEPARTMENT USE ONLY			· · · · · · · · · · · · · · · · · · ·	
REPARED BY (Name of Department Employee)	**************************************	11)	
jm		\mathcal{U}		
ABC-245 (rev. 01-11)		•		·

ART 2 - TO BE COMPLETE					•		
Based on the information ecessity would be served by is area. You may attach a se	the issuance of the I	icense. Please descri	be below the reas	ons why issu	ance of another l	convenience o icense is justi	or fied in
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	•		•	•			
	<u> </u>		•		•		
APPLICANT SIGNATURE				23. DATE SIGNE	:D		
		·	• ,				
RT 3 - TO BE COMPLETED	BY LOCAL OFFIC	CIALS (If box #20c is o	checked)				
e applicant named on the re over-concentration of licens de). Sections 23958 and 23 verning body of the area in v ys of notification of a comple ease complete items #24 to f er on official letterhead stati	verse is applying for es and/or a higher the	a license to sell alcoh	olic beverages at as defined in Se	a premises w ction 23958.4	here undue cond of the Business	centration exist and Profession	sts (i.e., ons
de). Sections 23958 and 23 verning body of the area in v	1958.4 of the Busine which the applicant r	ss and Professions Co premises are located, o	de requires the D rits designated s	epartment to ubordinate of	deny the applica	tion unless the ermines within	e local n 90
ys of notification of a complete sase complete items #24 to #	ted application that #30 below and certif	public convenience or v or affix an official sea	necessity would b il, or attach a cop	e served by y of the Coun	the issuance. cil or Board reso	lution or a sig	ned
er on official letterhead stati	ng whether or not th	e issuance of the appli	ed for license woi	úld serve as a	a public convenie	nce or necess	sity.
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WILL PUBLIC CONVENIENCE OR NECE	SSITY BE SERVED BY ISSU	JANCE OF THIS ALCOHOLIC BE	VERAGE LICENSE?				
WILL PUBLIC CONVENIENCE OR NECE	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
Yes	No		See Attac	hed (i.e., letter	, resolution, etc.)		
m.	No '(may include reasons for app		See Attac		y OFFICIAL PHONE NUI	WBER	
Yes ADDITIONAL COMMENTS, IF DESIRED CITY/COUNTY OFFICIAL NAME	No '(may include reasons for app	roval or denial of public convenie	See Attac	28. CITY/COUNT	Y OFFICIAL PHONE NUI	WBER	
Yes ADDITIONAL COMMENTS, IF DESIRED	No '(may include reasons for app	roval or denial of public convenie	See Attac		Y OFFICIAL PHONE NUI	WBER	
Yes ADDITIONAL COMMENTS, IF DESIRED CITY/COUNTY OFFICIAL NAME	No '(may include reasons for app	roval or denial of public convenie	See Attac	28. CITY/COUNT	Y OFFICIAL PHONE NUI	MBER	
Yes ADDITIONAL COMMENTS, IF DESIRED CITY/COUNTY OFFICIAL NAME CITY/COUNTY OFFICIAL SIGNATURE	No '(may include reasons for app	roval or denial of public convenie	See Attac	28. CITY/COUNT	Y OFFICIAL PHONE NUI	MBER	
Yes ADDITIONAL COMMENTS, IF DESIRED CITY/COUNTY OFFICIAL NAME CITY/COUNTY OFFICIAL SIGNATURE	No '(may include reasons for app	roval or denial of public convenie	See Attac	28. CITY/COUNT	Y OFFICIAL PHONE NUI	MBER	

Department of Alcoholic Beverage Control

TO: Department of Alcoholic Beverage Control

33 NEW MONTGOMERY STREET

SAN FRANCISCO, CA 94105

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)

STE 1230

(415) 356-6500

File Number: 608352

Receipt Number: 2587534

Geographical Code: 3800

Copies Mailed Date: July 29, 2019

Issued Date:

DISTRICT SERVING LOCATION: SAN FRANCISCO

First Owner:

XING YE TRADING INC

Name of Business:

Location of Business:

1262 STOCKTON ST

SAN FRANCISCO, CA 94133-4312

County:

SAN FRANCISCO

Is Premises inside city limits?

Mailing Address:(If different

from

premises address)

Type of license(s):

21

Yes

Dropping Partner:

Census Tract:

State of California

Transferor's license/name:

269583 / LAU, JENNIFER SOON

<u>License Type</u> 21 - Off-Sale General	Transaction Type PER/PRM	<u>Master</u> Y	Secondary LT And Count			
License Type	Transaction Description	Fee Code	Dup	<u>Date</u>	<u>Fee</u>	
Application Fee	STATE FINGERPRINTS	NA	2	07/29/19	\$78.00	
Application Fee	DBL TRF: PREMISES AND PERSON	NA	0	07/29/19	\$1,250.00	
Application Fee	FEDERAL FINGERPRINTS	NA	2	07/29/19	\$48.00	
21 - Off-Sale General	ANNUAL FEE	NA	. 0	07/29/19	\$670.00	
				Total	\$2,046.00	

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

STATE OF CALIFORNIA

County of SAN FRANCISCO

Date: July 29, 2019

Applicant Name(s)

XING YE TRADING INC