LIQUOR LICENSE PUBLIC CONVENIENCE OR NECESSITY REFERRAL

TO:	Planning Departme Phone No. (415) 55		DATE: September 2, 2020 AP Block/Lot Nos.: 3726/118 Zoning: 85-X MUG Quad: SE Planning Team Record No.:		
TO:	Police Department Inspector Georgia S Phone No. (415) 55	•			
Neigh	e submit your respon borhood Services C regular meeting in O	ommittee will ten		•	
PLEA Public	ASE EMAIL YOUR R C Safety and Neighbor john.carr	orhood Services (September 18, 20 Committee Clerk. Phone No: 554 -		
Applicant name: Tawfiq Fayez Jodeh					
Business name:		Tony Baloney's			
Application address:		1098 Howard Street San Francisco, CA 94103			
Applicant contact info:		David J. Villa-Lobos, Licensing Agent CLA Consulting P.O. Box 642201 San Francisco, CA. 94164 415.921.4192 david_villalobos@sbcglobal.net			
PLANNING REVIEW: Approval Denial					
Plann	ing Staff Contact:				
	Please print r	eview comn	nents on a tr	ailing page.	
POL	ICE REVIEW:	☐ Appr	oval 🗌 D	enial	
Please print review comments in a trailing report.					

Attn: San Francisco Board of Supervisors 1 Dr. Carlton B. Goodlett Place San Francisco, CA. 94102

Re: Tony Baloney's (Type 21 Application) 1098 Howard Street San Francisco, CA. 94103

Dear Honorable Board of Supervisors,

Our business (Tony Baloney's) serves as a public convenience and necessity as we've served the neighborhood for almost 30 years and acted as a place of both convenience and gathering for residents and local employees alike. We understand what the community needs and have adjusted our business to continue to serve our customers best as San Francisco and the SOMA have changed over the years.

Adding a liquor license to our business will allow us to better serve our customers' needs especially in a time where people need to be able to go to one local shop to have their essential needs met rather than multiple locations. If approved we plan on dedicating approximately ten percent of our space to high end craft beers, local wines and only very high-end distilled spirits. We humbly ask for your support.

Thank you most Sincerely.

Aminah Joudeh Tony Baloney's (415)697–9397

Hours of Operation: 9:am to 9:pm

David J. Villa-Lobos, Licensing Agent CLA Consulting P.O. Box 642201 San Francisco, CA. 94164 415.921.4192 david_villalobos@sbcglobal.net

ZONING AFFIDAVIT

Instructions to the Applicant: Complete Items 1 - 14. Sign and date the form and submit it to ABC.

APPLICANT(S) NAME (Last, first, middle) Jodeh, Tawfiq, Fayez			ř	
2. PREMISES ADDRESS (Street number and name, city, zip code)				OF PROPERTY (Obtain from
1098 Howard Street, Sa	an Francisc	o, CA 94103	3726/11	
4. TYPE OF LICENSE APPLIED FOR 21 Off-Sale General	5. UPGRADE OF LICENSED Yes	PRIVILEGES	6. CURRENT LICENS None	SE TYPE AT THIS LOCATION, IF ANY
7. TYPE OF BUSINESS (i.e., restaurant, mini-mart, gas station, etc.)		8. ARE THE PREMIS	ES INSIDE THE CITY LIMITS?
Deli			Yes	No
For answers to Questions 9 - 14, conto	act your local city	OR county plannin	g department	t (if inside the city
limits, contact city planning; if outside				
9. HOW ARE APPLICANT PREMISES ZONED? STATE TYPE (i.e.	, "C" commercial, "R" residentia	I, etc.)		
10. DOES ZONING PERMIT INTENDED USE?	 IS A CONDITIONAL USE (If yes, please attach copy) 		12. IF YES, DATE YO	OU FILED APPLICATION FOR C.U.P.
Yes	Yes	No		
13. NAME OF PLANNER CONTACTED AT PLANNING DEPARTME	INT .		14. PLANNER'S PHO	NE NUMBER
Under the penalty of perjury, I declare	the information i	n this affidavit is true	e to the best o	of my knowledge.
15. APPLICANT'S SIGNATURE (One signature will suffice)			16. DATE SIGNED	
THA				
11	FOR DEPARTM	ENT USE ONLY		
	IF APPROVED, EFFECTIVE D		FILE NUMBER	
C.U.P. Approved				
C.U.P. Denied	DATE DENIED			
C.U.F. Derlied	OFNEDAL IN	FORMATION		
	GENERAL IN	22.570.300.000.000.000.000		
•Section 23790 of the Business and Profession				e exercise of those rights
that ABC may not issue a retail license contr		and privileges at a time prior to the effective date of the zoning ordinance may continue operation under the		
zoning ordinance. This form will help us deter				eration under the
your proposed business is properly zoned for a beverage sales.	aconone	following conditions:		
beverage sales.	(a) The premises retain the same type of retail liquor license within a license classification.			
•A conditional use permit (CUP) (Item 11) is			ted continuously without	
zoning permit granted after an individual revie		substantial change in mode or character of operation.		
land-use has been made. CUP's are used in sit	For purposes of this subdivision, a break in continuous			
the proposed use may create hardships or haza	rds to	operation does not include:		
neighbors and other community members who	(1) A closure for not more than 30 days for purposes of			
be affected by the proposed use. The ABC dis	repair, if that repair does not change the nature of the			
not make a final recommendation on your lice	licensed premises and does not increase the square footage			
until after the local CUP review process has be	of the business used for the sale of alcoholic beverages.			
If the local government denies the CUP, ABC	(2) The closure for restoration of premises rendered totally			
your license application.		or partially inaccess		
23700 Zoning ordinances No retail license	shall be issued	accident, if the resto		
23790. Zoning ordinances. No retail license so for any premises which are located in any term		footage of the business used for the sale of alcoholic		
exercise of the rights and privileges conferred	beverages.			
is contrary to a valid zoning ordinance of any				

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	/ ABC					
1. APPLICANT'S NAME TO de	ch, Tawfig for	42				
2. PREMISES ADDRESS (Street number and name 1098	e. city, zig/code)	Francisco, CA	94/03 3. LICEN	SE TYPE		
TYPE OF BUSINESS Full Service Restaurant	Hofbrau/Cafeteria	Cocktail Lounge	Privo	ato Club		
Deli or Specialty Restaurant	Comedy Club	Night Club		Private Club Veterans Club		
	Brew Pub	Tavern: Beer	H			
Cafe/Coffee Shop Bed & Breakfast:		Tavern: Beer & Wine		Fraternal Club		
Wine only All	Theater	Tavern: Beer & Wine	vvine	Wine Tasting Room		
Sypermarket	Membership Store	Service Station Swap Meet/Flea Market		p Meet/Flea Market		
Liquor Store	Department Store	Convenience Market		Drive-in Dairy		
Drug/Variety Store	Florist/Gift Shop	Convenience Market w/		N. OF ALISOPORTER #		
Other - describe:						
5. COUNTY POPULATION	6. TOTAL NUMBER OF LICENSES IN	COUNTY	7. RATIO OF LICENSES TO F	POPULATION IN COUNTY		
883.869		On-Sale Off-Sale	1,132	On-Sale Loff-Sale		
8. CENSUS TRACT NUMBER	9. NO. OF LICENSES ALLOWED IN	CENSUS TRACT	10. NO. OF LICENSES EXIST	TING IN CENSUS TRACT		
0/76.01	6	On-Sale Off-Sale	7	On-Sale Voff-Sale		
No, the number of existing licenses 12. DOPS LAW ENFORCEMENT AGENCY MAINT Yes (Go to Item #13) 13. CRIME REPORTING DISTRICT NUMBER	AIN CRIME STATISTICS? No (Go to Item #20)	G DISTRICTS	15. TOTAL NUMBER OF OFF	FENSES IN ALL REPORTING DISTRICTS		
13. CRIME REPORTING DISTRICT NUMBER	14. TOTAL NUMBER OF REPORTING	14. TOTAL NUMBER OF REPORTING DISTRICTS		15. TOTAL NUMBER OF OFFENSES IN ALL REPORTING DISTRICTS		
16. AVERAGE NO. OF OFFENSES PER DISTRICT	17. 120% OF AVERAGE NUMBER O	17. 120% OF AVERAGE NUMBER OF OFFENSES		18. TOTAL NUMBER OF OFFENSES IN REPORTING DISTRICT		
19 IS THE PREMISES LOCATED IN A HIGH CRIM reporting districts within the jurisdiction of the loc es, the total number of offenses in No, the total number of offenses in 20. CHECK THE BOX THAT APPLIES (check only	cal law enforcement agency) In the reporting district equals or ex the reporting district is lower than	ceeds the total number in ite		rted crimes as determined from all crime		
a. If "No" is checked in both item on this issue. Advise the applicant b. If "Yes" is checked in either iter retail license issued for a hotel, mother manufacturer's license, or wire application or as soon as possible.	It to bring this completed form to A m #11 or item #19, and the applica otel or other lodging establishment negrower's license, advise the app	BC when filing the application into its applying for a non-retail as defined in Section 25503	n. license, a retail bona fid .16(b) B&P, or a retail lic	de public eating place license, a cense issued in conjuction with a		
c. If "Yes" is checked in either iter sale beer license, an on-sale beer to the local governing body, or its ABC in order to process the applic	designated subordinate officer or bation.	e, or an on-sale general (pub body to have them complete	lic premises) license, ad	lvise the applicant to take this form		
FOR DEPARTMENT USE ONLY	unac runo.		1			
PREPARED BY (Name of Department Employee)	A		- Marin and States			
ABC-245 (rev. 01-11)						

PART 2 - TO BE COMPLETED E	BY THE APPLICANT (If b	ox #20b is checked)			
necessity would be served by the	Based on the information on the reverse, the Department may approve your application if you can show that public convenience or essity would be served by the issuance of the license. Please describe below the reasons why issuance of another license is justified in area. You may attach a separate sheet or additional documention, if desired. Do <i>not</i> proceed to Part 3.				
		212	1 100	<u> </u>	
	** 255 cm	-4			
100					
				•	
22. APPLICANT SIGNATURE			23. DATE SIGNED	*	
PART 3 - TO BE COMPLETED B	Y LOCAL OFFICIALS (If	hov #20c is checked)			
The applicant named on the reversan over-concentration of licenses and over-concentration of licenses and code). Sections 23958 and 23958 governing body of the area in which cays of notification of a completed Please complete items #24 to #30 etter on official letterhead stating of the complete items.	application that public co below and certify or affix whether or not the issuand	nvenience or necessity v an official seal, or attach ce of the applied for licen	vould be served by the issuand a copy of the Council or Board ise would serve as a public con	ce. d resolution or a signed nvenience or necessity.	
24. WILL PUBLIC CONVENIENCE OR NECESSIT	TY BE SERVED BY ISSUANCE OF TO	HIS ALCOHOLIC BEVERAGE LICEN	NSF2	*	
Yes	No	The second secon	e Attached (i.e., letter, resolution,	etc.)	
25. ADDITIONAL COMMENTS, IF DESIRED (may	include reasons for approval or denia	al of public convenience or necessity):		
439	1	1974		46	
NEV CONTRACTOR		9 201		67.75	
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
The second secon					
and the state of the state of	And the second second				
6. CITY/COUNTY OFFICIAL NAME	27. CITY/COUNTY OFFICIAL	TITLE	28. CITY/COUNTY OFFICIAL PH	ONE NUMBER	
9. CITY/COUNTY OFFICIAL SIGNATURE			30. DATE SIGNED		