

# LIQUOR LICENSE PUBLIC CONVENIENCE OR NECESSITY REFERRAL

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

**DATE:** March 2, 2021  
**AP Block/Lot Nos.:** 1203/002  
**Zoning:** RH-3  
**Quad:** NW Team  
**Record No.:** \_\_\_\_\_

**TO:** Police Department  
Inspector Georgia Sawyer  
Phone No. (415) 553-9550

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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 April of 2021.

**PLEASE EMAIL YOUR RESPONSE BY** March 19, 2021, 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:** Lucinda's Deli and More, LLC

**Business name:** Lucinda's Deli & More

**Application address:** 535 Scott Street  
San Francisco, CA 94117

**Applicant contact info:** David Villa-Lobos  
CLA Consulting  
415-921-4192  
[david\\_villalobos@sbcglobal.net](mailto:david_villalobos@sbcglobal.net)

**PLANNING REVIEW:** ☐ Approval ☐ Denial

Planning Staff Contact: \_\_\_\_\_

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

**POLICE REVIEW:** ☐ Approval ☐ Denial

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

RECEIVED  
BOARD OF SUPERVISORS  
SAN FRANCISCO

2021 MAR 21 PM 3:35

Attn: San Francisco Board of Supervisors  
City and County of San Francisco, Ca.

Re: 535 Scott Street (dba: Lucinda's Deli & More)  
San Francisco, Ca. 94117


BY \_\_\_\_\_

**Type 20**

Dear Honorable San Francisco Board of Supervisors,

My name is Ryan Chinchilla. I am the owner of Lucinda's Deli and More. I opened my business on memorial day of 2020 during the first few months of shelter in place. It began with just me as the only employee and through hard work and good luck my business has grown to include a few employees now. There is no doubt that the added revenue from the type 20 liquor license will help grow my business and in turn help me hire more employees. The added revenue will also help me fill out the market with more groceries and essential items so people can have more options to shop safely at. I think it goes without saying that California would also greatly appreciate the extra tax revenue too. It's been a tough year for small businesses but I hope to defy the odds by continuing to grow and provide a high quality product in a safe environment. I think that's something every neighborhood could use.

Respectfully



RYAN CHINCHILLA

David J. Villa-Lobos, Licensing Agent  
CLA Consulting  
P.O. Box 642201  
San Francisco, Ca. 94164

**DAVID VILLA-LOBOS**  
Licensing-Permitting Specialist SF  
david\_villalobos@sbcglobal.net

**CLA CONSULTING**

Specializing In SF Liquor Licensing

P.O. Box 642201  
San Francisco, CA. 94164

415-921-4192  
415-559-6627

415. 921.4192

David\_villalobos@sbcglobal.net

## INFORMATION AND INSTRUCTIONS -

## SECTION 23958.4 B&amp;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

LUCINDAS DELI AND MORE

## 2. PREMISES ADDRESS (Street number and name, city, zip code)

535 SCOTT ST SAN FRANCISCO, CA 94117-2324

## 3. LICENSE TYPE

20

## 4. TYPE OF BUSINESS

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> Full Service Restaurant                 | <input type="checkbox"/> Hofbrau/Cafeteria | <input type="checkbox"/> Cocktail Lounge     | <input type="checkbox"/> Private Club      |
| <input checked="" 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: Beer        | <input type="checkbox"/> Fraternal Club    |
| <input type="checkbox"/> Bed & Breakfast:                        | <input type="checkbox"/> Theater           | <input type="checkbox"/> Tavern: Beer & Wine | <input type="checkbox"/> Wine Tasting Room |
| <input type="checkbox"/> Wine only <input type="checkbox"/> All  |  |  |  |

- |   |  |  |  |
|---|--|--|--|
| <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"/> Drug/Variety Store | <input type="checkbox"/> Florist/Gift Shop | <input type="checkbox"/> Convenience Market w/Gasoline |  |
| <input type="checkbox"/> Other - describe:  |  |  |  |

## 5. COUNTY POPULATION

3,778/883,869

## 6. TOTAL NUMBER OF LICENSES IN COUNTY

On-Sale ☐ Off-Sale ☐ 1,132 On-Sale ☐ Off-Sale ☒

## 7. RATIO OF LICENSES TO POPULATION IN COUNTY

## 8. CENSUS TRACT NUMBER

164

## 9. NO. OF LICENSES ALLOWED IN CENSUS TRACT

3

## 10. NO. OF LICENSES EXISTING IN CENSUS TRACT

5

On-Sale ☐ Off-Sale ☒ On-Sale ☐ 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?)

- ☒ 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?

- ☒ Yes (Go to Item #13)
- ☐ No (Go to Item #20)

## 13. CRIME REPORTING DISTRICT NUMBER

642

## 14. TOTAL NUMBER OF REPORTING DISTRICTS

654

## 15. TOTAL NUMBER OF OFFENSES IN ALL REPORTING DISTRICTS

55,022

## 16. AVERAGE NO. OF OFFENSES PER DISTRICT

84.13

## 17. 120% OF AVERAGE NUMBER OF OFFENSES

100.8

## 18. TOTAL NUMBER OF OFFENSES IN REPORTING DISTRICT

209

## 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)

- ☒ 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

## 20. 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 filing 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 conjunction 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 "Yes" is checked in either item #11 or item #19, and the applicant is applying for an off-sale beer and wine license, an off-sale general license, an on-sale beer license, an on-sale beer and wine (public premises) license, or an on-sale general (public premises) license, advise the applicant to take this form 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

## FOR DEPARTMENT USE ONLY

PREPARED BY (Name of Department Employee)

jm

**PART 2 - TO BE COMPLETED BY THE APPLICANT (If box #20b is checked)**

21. Based on the information on the reverse, the Department may approve your application if you can show that public convenience or necessity would be served by the issuance of the license. Please describe below the reasons why issuance of another license is justified in this area. You may attach a separate sheet or additional documentation, if desired. Do *not* proceed to Part 3.

**22. APPLICANT SIGNATURE**

23. DATE SIGNED

**PART 3 - TO BE COMPLETED BY LOCAL OFFICIALS (If box #20c is checked)**

The applicant named on the reverse is applying for a license to sell alcoholic beverages at a premises where undue concentration exists (i.e., an over-concentration of licenses and/or a higher than average crime rate as defined in Section 23958.4 of the Business and Professions Code). Sections 23958 and 23958.4 of the Business and Professions Code requires the Department to deny the application unless the local governing body of the area in which the applicant premises are located, or its designated subordinate officer or body, determines within 90 days of notification of a completed application that public convenience or necessity would be served by the issuance. Please complete items #24 to #30 below and certify or affix an official seal, or attach a copy of the Council or Board resolution or a signed letter on official letterhead stating whether or not the issuance of the applied for license would serve as a public convenience or necessity.

24. WILL PUBLIC CONVENIENCE OR NECESSITY BE SERVED BY ISSUANCE OF THIS ALCOHOLIC BEVERAGE LICENSE?

Yes	No	See Attached (i.e., letter, resolution, etc.)

25. ADDITIONAL COMMENTS, IF DESIRED (may include reasons for approval or denial of public convenience or necessity):

26. CITY/COUNTY OFFICIAL NAME

27. CITY/COUNTY OFFICIAL TITLE

28. CITY/COUNTY OFFICIAL PHONE NUMBER

29. CITY/COUNTY OFFICIAL SIGNATURE

30. DATE SIGNED