INTEROFFICE MEMORANDUM

TO: CHIEF CIANNI

FROM: ISABELL CHADWICK
SUBJECT: SOUTHSIDE SALOON

DATE: 08/09/2024

BACKGROUND INVESTIGATION:

DAVID OUELLETTE

Pursuant to your request, a criminal background check has been conducted on the individual(s) listed above for the purpose of liquor licensing in the City of Dickinson. Resources used included:

ND Courts City of Dickinson contacts NCIC CJIS

This search revealed the following criminal history:

NO CRIMINAL RECORDS FOUND

CITY OF DICKINSON

Applicat	ion for:	Commercial On/Off-Sale (\$3,000) Lodge or Club (\$3.000) Motel or Hotel (\$3,000) Restaurant On-Sale (\$2,500) Military Club Beer and Wine (\$700) Microbrewery Pub (\$700) Beer and Wine Concession Licenses (\$550) Distillery License (\$700) Brewer Taproom License (\$2,000) Domestic Winery License (N/A) Beer Only On-Sale License (\$700) Beer and Wine Only On-Sale License (\$1,250) Sunday Permit (All on-sale establishments must check Sunday Permit Optional only for off sale establishments. See paragraph 5, below)	
the appl	In addition to sication for such ble application o	said fees, each applicant for a new license or a transfer of a license shall, at the time of submission of issuance or transfer, pay the sum of an application fee and an issuance fee or transfer fee as a non-r transfer fee.	
The unc	lersigned hereby of any changes	applies for the license or licenses checked above, and agrees, if granted a license, to promptly advise in the information contained in this application.	
1.	BUSINESS INFORMATION: Business Name: Dave O welletti Mailing Address: 1580 11th 5t. w Street Address: Phone Number: 701-290-4243		
2.	a. Indivi	LICENSEE INFORMATION (please complete either 2.a. or 2.b. as appropriate) dual or Partnership: (s): Love Oveletti	
	Please US C b. Corpo Name Date 6 Web 2 (Attac (Attac	Attach - Occupation Record for Last rive Years itizen O/N oration: of Corporation: of Incorporation: of Incorporation: Address: oh copy of Certificate of Incorporation) oh list of each officer, director, and proposed manager indicating address, address, citizenship status, and percentage of stock ownership in ration.)	
3.	LOCATION	INFORMATION: ion of business location: Lot: 5 bdivision: South Dickers	

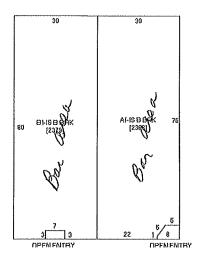
Mailin	g Address:		
City, S	tate, Zip:		
Teleph	one;		
Email:			
Zoning			
Presen	t Occupancy:		
Are Ta	ixes Current? Y/N (Please attach verification from Stark County)		
they la	attach a comprehensive site drawing, including, but not limited to: layout of the building(s) and how ay on the property, the extent of the area(s) in the building in which alcoholic beverages will be sold r served, and building and property dimensions.		
GENI	NERAL:		
a.	Name and contact information for person responsible for complying with all city ordinances and state law,		
***	behalf of this license.		
	Name: Dave Oue lette		
	Mailing Address: 1580 11 54. W		
	City/State/Zin: Nicking or ND 58601		
	behalf of this license. Name: Dave Ove Wette Mailing Address: 1580 1 55. W City/State/Zip: Dickinson, ND 5860/ Telephone: 701-290-4243 Email: Lana @ hallands big Sticks, com Attach a complete history of the applicant(s) residency, employment, and business ownership for the five		
	Finail: A O landoule Wasticks, com		
b.	Attach a complete history of the applicant(s) residency, employment, and business ownership for the five		
0.	years leading up to the date of this application.		
c.	tendent to the state of the sta		
0.	Have you ever been engaged in the sale or distribution of alcoholic beverages prior to this application? It give date and type of business and address: 465, Been + Wine w/ Budlands Big 5ticks 240 2nd 5t. 5 E Dickmen		
	Ria Stides 240 2nd st. 5E Dickinson		
	May of the the state of		
d.	Have you ever had a liquor license rejected by any municipality, state or federal authority? (Y N) If ye		
u.			
e.	Have you ever been convicted or any violation of any law of the United State or the state of North Dakote local ordinance governing the manufacture, sale, distribution or possession of alcoholic beverages? (Y If yes, give date(s) and details:		
f.	Have you ever had a liquor license for the sale of intoxicating liquor revoked or suspended for any violat or any state law or local ordinance? (Y N) If yes, give date(s) and details:		
	or any state law or local ordinance? (1 Kly) if yes, give date(s) and details.		
	The state of the s		
g,	Have you ever been indicted or convicted of a crime either in North Dakota or elsewhere? (Y /(N)) If yes give date(s) and details:		
	Attach list of names and contact information of all persons, silent, or otherwise, interested in any manner		
h.	said business, or who will have charge, management, or control of the establishment for which license is requested:		
i.	Has any person, other than applicant, any right, title, or interest in the leasehold, or in the furniture, fixtu or equipment in the premises for which license is requested?		
	(V/AN) If yes, attach list of names and contact information.		
j.	Have you any agreement or understanding or intention to have any agreement or understanding with any person, partnership or corporation to obtain for any other, or transfer to any other person this license, or obtain it for any other than the specific use of the applicant? (Y/II) If yes, please give details:		

k.	Have you interest whatsoever, directly or indirectly, in any other liquor or alcoholic beverage establishment
	either wholesale or retail in North Dakota or any another state? (Y) N) If yes, attach list of business names and addresses of establishments.
	Have you or any licensees listed on this application been convicted of a Felony or any other alcohol related
I.	Have you or any licensees listed on this application been convicted of a Felony or any other account related windstion of criminal or traffic law? No *Yes
	violation of criminal or traffic law? No *Yes* *If yes, please provide date, location (State & City) and description of the
	offense:
	If
m.	Will you be engaged in any other form of business other than that to be covered by this license? (Y N) If yes, please attach description of other business, including employer if that applies.
n.	The applicant hereby does expressly consent that any person(s) duly authorized by the city of Dickinson may
11.	enter upon the premises described in this application at any reasonable hour of the day or night including all
	hours in which the establishment is occupied, and at such times they shall have free access to all portions of
	the property comprising the licensed premises for the purpose of inspecting such premises for any possible
	violation of laws of the state of North Dakota or ordinances of the city of Dickinson regardless whether said laws pertain to the sales of alcoholic beverages. Such access shall be permitted without necessity of a search
	warrant,
Ο,	Applicant acknowledges that this license, if granted includes the ability to open business on Sunday and
	therefore the business must collect and submit to the state of North Dakota the Hospitality Tax (Restaurant
	and Lodging)
p.	Applicant acknowledges that if this is an application for a restaurant related license, at least 50% of sales of the business must be in the form of prepared food.
О	The applicant hereby acknowledges that if this license is idle for more than six months in any 12 month
q.	period the City will revoke said license and offer it for public sale.
r.	The applicant hereby acknowledges that this license is not transferable nor may the ownership change by
	more than 25% without prior approval of the city of Dickinson.
s. t.	Please attach the names and contact information of three local business references. The applicant hereby acknowledges that by signing this application he/she/they admit that the information
١.	contained in this application is true and accurate to the best of their knowledge.
u.	The applicant hereby acknowledges that they shall cooperate to the fullest extent in obtaining a complete
	background investigation concerning any persons involved with the individual applicant or the applicant's
	organization.
	The undersigned represents and warrants that the hospitality tax imposed under Section 35.125 of the
	Dickinson City Code has been and will continue to be collected to qualify the licensee as a qualified
	alcoholic beverage licensee for purposes of Sections 4.08.270 and 4.08.280 of the Dickinson City Code
	authorizing Event permits and Sunday permits. (This paragraph is not applicable to applicants who have no
	applied for a Sunday permit)
	the state of the same of the s
	Dated this 5 day of September , 20 24
	,
	Individual or Partnership Application:
	Aland mellet
	Applicant Signature(s)
	Applicant Signature(s)
	Corporation:
	Corporation.
	D. Handa Claratura
	President's Signature

5.

Alberta h

BLT-1912



Sketch of Pin 1190-0100-0500

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Cl. Con Edwarding