



CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

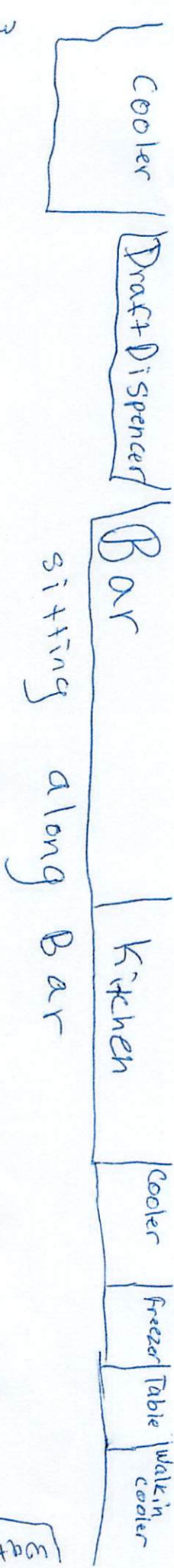
CABARET LICENSE APPLICATION

Application Type:	<input type="checkbox"/> New	<input type="checkbox"/> Owner Change	<input checked="" type="checkbox"/> Manager Change	<input type="checkbox"/> Location Change
Application Duration:	<input type="checkbox"/> Annual (Per calendar year - \$400 annual fee)		<input type="checkbox"/> Temporary (Not to exceed 48 hours - \$200 fee)	
Name:	<u>Somal</u>	<u>Brisa</u>	<u>T</u>	Application Date: <u>01-07-2026</u>
	Last	First	MI	
Title:	<u>Owner</u>		Phone: <u>775-225-3535</u>	
Business Entity Type:	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partnership	<input checked="" type="checkbox"/> Limited Liability Company	<input checked="" type="checkbox"/> DBA
	<input type="checkbox"/> Corporation	<input type="checkbox"/> Association	<input type="checkbox"/> Other: _____	
Business Name:	<u>Anchor LLC DBA Boozy Lion Bar and Grill</u>			
Business Owner(s): Name				Title
<u>Brisa Taily Somal Garcia</u>				<u>Owner</u>
Business Location: <u>30 E. Center St.</u>				<u>Fallon</u>
				<u>NV</u>
				<u>89406</u>
				City State Zip
Room Description (Attach Floorplan): <u>Attached</u>				
Specific description of live entertainment, attach additional pages if necessary (i.e., DJ, karaoke, live band, etc.):				
<u>We Will be doing Special Events on Holiday's, etc</u>				
<u>as well as Karaoke nights and sometimes DJ / Live Music</u>				
<u>For open mic nights</u>				

I declare under penalty of perjury that the foregoing is true and correct:

1. That no person not named in the application shall be directly or indirectly interested in the business to be conducted under such license;
2. That each and every person designated in this application is of legal age and a citizen or lawful resident of the United States;
3. That the general public shall have access to the premises during all hours in which business is conducted;
4. That the building specifications of said premises are attached hereto and made a part of this application.
5. That I have received and read a copy of Chapter 5.12 of the Fallon Municipal Code – Cabarets and Drinking Establishments;
6. That upon approval of a Cabaret License, I will conduct the business and business establishment in accordance with the provisions of the laws of the State of Nevada, the United States, and the ordinances of the City of Fallon applicable to the conduct of business; and
7. That the above information is true and correct to the best of my knowledge and belief and that such declaration is made with the full knowledge that any failure to disclose, misstatement, or other attempt to mislead may be considered sufficient cause for denial of a business license.

Brisa Somal
Applicant



Window

Entrance

Window
Seating area

Seating area
DJ area/Karaoke

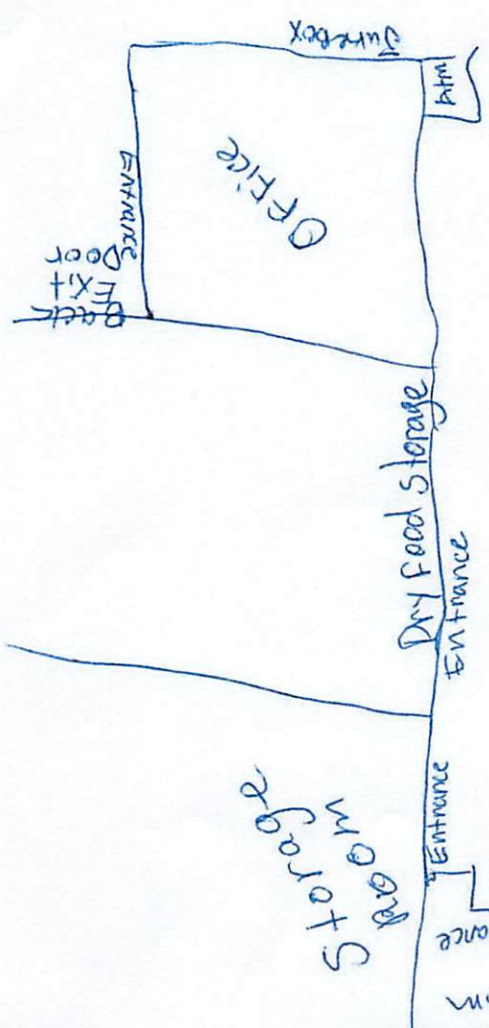
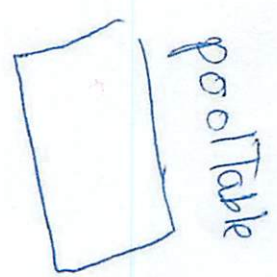
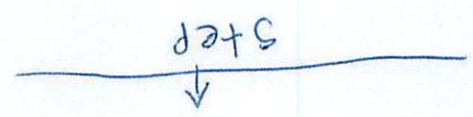
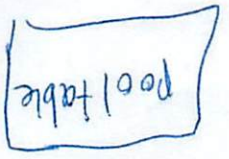
Seating area

Seating area

Dance area

Seating area

Open floor
floor plan



Back door
Storage



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Privilege License Supplemental Approval Form

Application Date: 1/7/2026

Applicant: Brisa Somal Garcia

Business: Anchor LLC dba Boozy Lion Bar and Grill

License Type: Cabaret License

Application Type: ☐ New ☐ Owner Change ☐ Name Change ☒ Manager Change ☐ Location Change

OFFICIAL USE ONLY

City of Fallon	Approve	Approve with Conditions	Disapprove
Chief of Police	<u>DTB</u>		
Chief of Staff	<u>[Signature]</u>		
Engineering/Building Department	<u>[Signature]</u>		
Attorney's Office	<u>[Signature]</u>		
City Clerk's Office	<u>[Signature]</u>		
Fallon/Churchill Fire Dept	<u>[Signature]</u>		
Conditions required for approval: _____			
Committee recommendation for application: <u>Approved</u> <u>Approved with Conditions</u> <u>Disapproved</u>			

OFFICIAL USE ONLY:

Account No.

License No.

Payment Received By: