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	BC			
1. APPLICANT'S NAME				
H STREET MARKET, INC				
2. PREMISES ADDRESS (Street number and name, cit	3. LICENSE TYPE			
645 H ST STE B CHULA VIS	TA CA 91910		1	20
Full Service Restaurant	Hofbrau/Cafeteria	Cocktail Lounge	Private 0	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 Wine Tasting Room	
Wine only All				•
Supermarket	Membership Store	Service Station	Swap Meet/Flea Market	
Liquor Store	Department Store	Convenience Market	Drive-in	Dairy
Drug/Variety Store	Florist/Gift Shop	Convenience Market w/	**************************************	- s ,
Other - describe:				
5. COUNTY POPULATION	6. TOTAL NUMBER OF LICENSES IN C	COUNTY	7. RATIO OF LICENSES TO POPL	JLATION IN COUNTY
3,288,612	N/A	On-Sale Off-Sale	1591	On-Sale Off-Sale
8. CENSUS TRACT NUMBER	9. NO. OF LICENSES ALLOWED IN CE		10. NO. OF LICENSES EXISTING	
125.01	2	On-Sale X Off-Sale	2	On-Sale X Off-Sale
11. IS THE ABOVE CENSUS TRACT OVERCONCENT	RATED WITH LICENSES? (i.e., does the r	atio of licenses to population in the	census tract exceed the ratio of licer	
X Yes, the number of existing licenses e				
No, the number of existing licenses is	lower 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		15. TOTAL NUMBER OF OFFENSES IN ALL REPORTING DISTRICTS	
125.01	53		8698	
16. AVERAGE NO. OF OFFENSES PER DISTRICT	17. 120% OF AVERAGE NUMBER OF OFFENSES		18. TOTAL NUMBER OF OFFENSES IN REPORTING DISTRICT	
164.01 19. IS THE PREMISES LOCATED IN A HIGH CRIME R	164.1X120%=196.92	reater number of reported crimes th	281/171.2% an the average number of reported crimes as determined from all crime	
reporting districts within the jurisdiction of the local la	aw enforcement agency)			rimes as determined from all crime
X Yes, the total number of offenses in the	e reporting district equals or exce	eds the total number in iter	m #17	
No, the total number of offenses in the	reporting district is lower than th	e total number in item #17		
20. CHECK THE BOX THAT APPLIES (check only one				
a. If "No" is checked in both item #11 on this issue. Advise the applicant to	and item #19, Section 23958.4 bring this completed form to ABC	B&P does not apply to this a C when filing the application	application, and no additions	al information will be needed
b. If "Yes" is checked in either item #	11 or item #10 and the applicant	is applying for a non-retail	licence a minil have fide as	LP P
retail license issued for a hotel, motel	or other lodging establishment a	s defined in Section 25503.	16(b) B&P, or a retail licens	se issued in conjuction with a
beer manufacturer's license, or wineg	rower's license, advise the <i>applic</i>	ant to complete Section 2	and bring the completed forr	n to ABC when filing the
application or as soon as possible the	ιτεαπετ.			
X c. If "Yes" is checked in either item #:	11 on itam #10 on of the annuling	t t		
c. If " <u>Yes</u> " is checked in either item # sale beer license, an on-sale beer and	d wine (public premises) license.	or an on-sale general (bub	peer and wine license, an of lic premises) license, advise	f-sale general license, an on-
to the local governing body, or its des	<u>ignated subordinate officer or bo</u>	dy to have them complete	Section 3. The completed for	orm will need to be provided to
ABC in order to process the application	on.			
Governing Body/Designated Subordina	ate Name:			
FOR DEPARTMENT USE ONLY				
PREPARED BY (Name of Department Employee)	The state of the s			

PART 2 - TO BE COMPLETED	BY THE APPLICANT (If box	#20b is checked)		
21. Based on the information of necessity would be served by the this area. You may attach a sep	ne issuance of the license. Plea	ase describe below the rea	on if you can show that public convenience of sons why issuance of another license is just of proceed to Part 3.	or tified in
Now.				
and the control and all a grant open and a grant of the control and a grant open and a gran				

b				
22. APPLICANT SIGNATURE			23. DATE SIGNED	
PART 3 - TO BE COMPLETED	BY LOCAL OFFICIALS (If bo	x #20c is checked)		
The applicant named on the reve an over-concentration of license Code). Sections 23958 and 239 governing body of the area in wh days of notification of a complete Please complete items #24 to #3 letter on official letterhead stating	erse is applying for a license to s and/or a higher than average 158.4 of the Business and Profe iich the applicant premises are ed application that public conve 30 below and certify or affix an g whether or not the issuance of	sell alcoholic beverages a crime rate as defined in S essions Code requires the located, or its designated enience or necessity would official seal, or attach a cop of the applied for license wo	t a premises where undue concentration exi- ection 23958.4 of the Business and Professi Department to deny the application unless th subordinate officer or body, determines with be served by the issuance. by of the Council or Board resolution or a sig ould serve as a public convenience or neces	sts (i.e., ions ne local in 90 gned ssity
			,	,.
24. WILL PUBLIC CONVENIENCE OR NECES Yes	SITY BE SERVED BY ISSUANCE OF THIS A		ched (i.e., letter, resolution, etc.)	
25. ADDITIONAL COMMENTS, IF DESIRED (m			cried (i.e., letter, resolution, etc.)	
Ç	,	public deliveries of Heddedky).		
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	WHAT CO.	-		
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RAMBANA, & BANTON, JAKO T. LAKA TOP TO ARTICLE TO THE STATE OF THE STA				
		2		

26. CITY/COUNTY OFFICIAL NAME	27. CITY/COUNTY OFFICIAL TITI	LE	28. CITY/COUNTY OFFICIAL PHONE NUMBER	
M. Vanca	SGT.		619 - 691 - 505 9	
29. CITY/COUNTY OFFICIAL SIGNATURE	772		30. DATE SIGNED	
04.6	'		7/16/20	
ABC-245 REVERSE (rev. 01-11)				***************************************