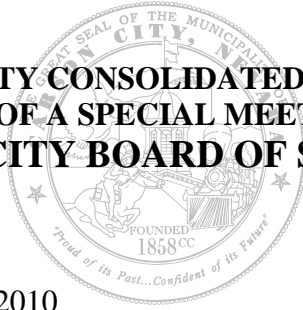


**CARSON CITY CONSOLIDATED MUNICIPALITY
NOTICE OF A SPECIAL MEETING OF THE
CARSON CITY BOARD OF SUPERVISORS**



Day: Tuesday
Date: November 23, 2010
Time: Beginning at 9:00 A.M.
Location: Community Center, Sierra Room
851 East William Street
Carson City, Nevada

Agenda

- 1. Call to Order**
- 2. Roll Call**
- 3. Pledge of Allegiance**
- 4. Adoption of Agenda**
- 5. Public Comments and Discussion:**

The public is invited at this time to comment on and discuss any topic that is relevant to, or within the authority of, the Carson City Board of Supervisors, the Carson City Liquor and Entertainment Board, the Carson City Redevelopment Authority and the Carson City Board of Health (Boards). In order for members of the public to participate in the Boards' consideration of an agenda item, the Boards strongly encourage members of the public to comment on an agenda item during the item itself. No action may be taken on a matter raised under public comment unless the item has been specifically included on the agenda as an item upon which action may be taken.

6. Public Works - Business License

Action to approve the transfer of the gaming license for Slotworld, Inc. dba Golden Nickel (Gaming License #10-2065) to 444 E. William St., Ste 8, Carson City. *(Jennifer Pruitt)*

Staff Summary: All gaming license transfer requests are to be reviewed by the Board of Supervisors per CCMC 4.14.050. Slotworld, Inc. dba Golden Nickel is applying to transfer the gaming license from 1325 S. Carson St. to 444 E. William St., Ste 8. The name of the business has also changed from Smoke Shop to the Golden Nickel. Staff is recommending approval.

7. Action to Adjourn

.....
Copies of information related to the above items can be viewed at the reference desk at the Carson City Public Library.
.....

Titles of agenda items are intended to identify specific matters. If you desire detailed information concerning any subject matter itemized within this agenda, you are encouraged to call the responsible agency or the City Manager's Office. You are encouraged to attend this meeting and participate by commenting on any agenda item.

.....
"Notice to persons with disabilities: Members of the public who are disabled and require special assistance or accommodations at the meeting are requested to notify the City Manager's Office in writing at 201 North Carson Street, Carson City, NV, 89701, or by calling (775)887-2100 at least 24 hours in advance."
.....

This agenda and backup information are available on the City's website at
www.carson.org

.....
This notice has been posted at the following locations:
Community Center • 851 East William Street
Public Safety Complex • 885 East Musser Street
City Hall • 201 North Carson Street
Carson City Library • 900 North Roop Street
Business Resource & Innovation Center (BRIC) 108 East Proctor

Date: November 16, 2010

**City of Carson City
Agenda Report**

Date Submitted: November 15, 2010

Agenda Date Requested: November 23, 2010

Time Requested: 10 minutes

To: Board of Supervisors and Mayor

From: Business License, Public Works

Subject Title: Action to approve the transfer of the gaming license for Slotworld, Inc. dba Golden Nickel (Gaming License #10-2065) to 444 E. William St., Ste 8, Carson City. (Jennifer Pruitt)

Staff Summary: All gaming license transfer requests are to be reviewed by the Board of Supervisors per CCMC 4.14.050. Slotworld, Inc. dba Golden Nickel is applying to transfer the gaming license from 1325 S. Carson St. to 444 E. William St., Ste 8. The name of the business has also changed from Smoke Shop to the Golden Nickel. Staff is recommending approval.

Type of Action Requested:

Resolution

Ordinance

Formal Action/Motion

Other (Specify)

Does This Action Require A Business Impact Statement: Yes No

Recommended Board Action: I move to approve the transfer of the gaming license for Slotworld, Inc. dba Golden Nickel (Gaming License #10-2065) to 444 E. William St., Ste 8, Carson City. (Jennifer Pruitt)

Explanation for Recommended Board Action: The Board of Supervisors has the authority to approve gaming license transfers pursuant to CCMC 4.14.050.

Applicable Statute, Code, Policy, Rule or Regulation: CCMC 4.14.050

Fiscal Impact: N/A

Explanation of Impact: N/A


Funding Source: N/A

Alternatives: 1) Refer back to the Business License Division, or
2) Deny

Supporting Material: 1) Carson City License Application

Prepared By: Lena Tripp, Senior Permit Technician

Reviewed By:



(Public Works Director)

Date: 11/8/10



(City Manager)

Date: 11/8/10



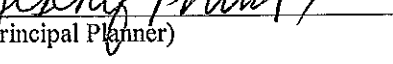
(District Attorney's Office)

Date: 11/8/10



(Sheriff)

Date: 11/8/10



(Principal Planner)

Date: 11.8.2010

Board Action Taken:

Motion: _____

- 1) _____
- 2) _____

Aye/Nay

(Vote Recorded By)



CARSON CITY LICENSE APPLICATION

Please type or print in black ink; Incomplete or illegible applications will not be accepted. Applications must bear an original signature

Busin
10 2015
2065
Submittal Date: 11-14-2010

1	<input type="checkbox"/> New Business	<input checked="" type="checkbox"/> Change of Location/Mailing	<input type="checkbox"/> Change of Name	<input type="checkbox"/> Change of Corporate Officer	<input type="checkbox"/> Other	
2	Type of License(s)	<input type="checkbox"/> Business	<input type="checkbox"/> Short-Term	<input checked="" type="checkbox"/> Gaming	<input type="checkbox"/> Liquor	
3	Type of Entity	<input type="checkbox"/> Sole Proprietor	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Non-Profit
4	Entity Name Slot World, Inc		Business Opening Date 10-29-10			
5	Business Name (DBA) Golden Nickel		EIN # 88-0233638			
6	Business Address 444 E. William #8		City Carson City	State NV	Zip Code 89701	
7	Mailing Address 3879 Highway 50 E. CCNV		City Carson City	State NV	Zip Code 89701	
8	Corporate Phone 775-882-7568	Business Phone Same	Cellular Phone 775-742-6199	Business Fax 775-882-8670		
9	E-mail Address slotworld-casino.com					

12 Owner(s), Manager(s), or other Principal(s) attach additional pages if required

Last, First, MI Small, John, D	Percent Owned 30	Title Chair	Date of Birth 2-3-29	SSN 544-26-2618	
Residence Address (Street) 1641 FAIRWAY		City, State, Zip CARSON CITY, NV 89701		Residence Telephone 882-2324	
Last, First, MI Smeath, Jeffry	Percent Owned 20	Title President	Date of Birth 10-29-68	SSN 530-46-9778	
Residence Address (Street) 1564 Truckee Dr		City, State, Zip Carson City, NV 89701		Residence Telephone 885-8188	
Last, First, MI Taylor, Steve R	Percent Owned 24.5	Title Secretary	Date of Birth 4-5-53	SSN 530-44-6169	
Residence Address (Street) 2200 Sun Chaser Ct		City, State, Zip Reno, NV 89511		Residence Telephone 851-1090	
Manager/Liquor Manager		<input type="checkbox"/> On-Site <input type="checkbox"/> Off-Site	Contact Phone Number		
Residence Address (Street)		City, State, Zip			

Pursuant to NRS 244.33507 and 42 U.S.C. Sec. 666, you are required to provide your social security number on the application for a license, permit, or certificate for the purpose of determining whether or not you have failed to comply with a subpoena or warrant relating to a proceeding to determine the paternity of a child or to establish or enforce an obligation for the support of a child or you are in arrears in the payment for the support of one or more children

13 Describe in detail the activity of your business
Gaming - Fifty to Sixty slots.

14 Type of Liquor License Applying for (If applicable)

<input type="checkbox"/> Tavern/Bar	<input type="checkbox"/> Dining Room w/Beer and Wine Only	<input type="checkbox"/> Packaged Liquor	<input type="checkbox"/> Dining Room w/Hard Liquor	<input type="checkbox"/> Combo (On-Premise & Pkg)	<input type="checkbox"/> General Wholesale
-------------------------------------	---	--	--	---	--

15 Catering Additional Wet Bars _____ Will there be an Interim Management Agreement?
No

16 List number of slot machines (If applicable) List number of table games (If applicable)

<input type="checkbox"/> 1 cent 6	<input type="checkbox"/> Multi 22	<input type="checkbox"/> Craps _____	<input type="checkbox"/> Baccarat _____
<input type="checkbox"/> 5 cent 14	<input type="checkbox"/> Poker _____	<input type="checkbox"/> Roulette _____	<input type="checkbox"/> Race Book _____
<input type="checkbox"/> 25 cent 6	<input type="checkbox"/> Mega Buck _____	<input type="checkbox"/> Twenty-One _____	<input type="checkbox"/> Sports Book _____
<input type="checkbox"/> 1.00 2		<input type="checkbox"/> Keno _____	<input type="checkbox"/> Poker _____

17 If this application is for a change of business name, location, or ownership, list the previous name, address, and owner below
SlotWorld, INC dba Smoke Shop 1325 S. Carson St. Carson City NV

18 Check One

I am not subject to a court order for the support of a child

I am subject to a court order for the support of one or more children and am in compliance with a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to order

I am subject to a court order for the support of one or more children and am not in compliance with a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to order

Miscellaneous Information	Please answer this section if your business is <i>located</i> in Carson City. If you are unsure of your answer or are installing signage, contact the Planning Division at (775) 887-2180	
	Is your business location zoned for this type of business <i>Yes</i>	Has a Special Use Permit been obtained for this business location <i>Yes</i>
	Will you be installing any outdoor signs <i>Yes</i>	Are there any existing signs of the property <i>Yes</i>
	Will there be any outside storage (If yes, please explain items being stored and how being screened) <i>No</i>	
	Will any commercial vehicles be used for this business (If yes, please describe size, type, and location of storage) <i>No</i>	
	Please list the quantities, types, and storage location of any chemicals or hazardous materials that will be used for this business <i>None</i>	

Rules and Regulations	<p>I, the undersigned understand that I cannot operate my business until my license is actually issued by this office indicating approval by all necessary city departments</p> <ul style="list-style-type: none"> • If any changes are made after completing said license application this office must be notified immediately and an updated is required. • A business license, liquor license, and/or gaming license are issued to a given owner at a SPECIFIC LOCATION and are NON-TRANSFERRABLE to a different owner or different location • Non-payment of annual and quarterly business license, liquor license, and/or gaming license fees by the due date will result in applied penalties and is grounds for the revocation of the license. • Any exception to any of the above is considered a violation of the Carson City Municipal Code and is subject to citation <p>I hereby certify that the above information is correct to the best of my knowledge and belief. I understand that failure to complete this form truthfully is an act of perjury.</p>
	<p>Applicant's Signature <u><i>Jeffrey Anestti</i></u> Date <u><i>10-28-10</i></u></p>

FEE STRUCTURE		FEE	LICENSE TOTAL FEES
Business License Fee			Business License Annual Fee:
Square Footage			Business License Pro-rated Fee:
Number of Employees			Business License Application/Update Fee: <i>25.00</i>
Health Fee			Liquor License Annual Fee:
Number of Rental Units			Liquor License Pro-rated Fee:
Number of Coin Operated Machines			Liquor License Application Fee:
Number of Slot Machines			Liquor License Investigation Fee:
TOTAL FEES DUE: <i>70.00</i>			Gaming License Quarterly Fee:
Payment Type	<i>CH# 10789</i>		Gaming License Application Fee: <i>25.00</i>
Received By	<i>SI</i>	Date <i>11-1-2010</i>	Fictitious Name Fee: <i>20.00</i>
Date Applicant Fingerprinted	By	File #	Health Pre-Inspection Fee: