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Please respond to: (650) 363-4753

May 1, 2015

Via email

Ms. Linda Lopez, Chair
North Fair Oaks Community Council
c/o Irving Torres
Office of San Mateo County Supervisor
Warren Slocum
400 County Center
Redwood City, CA 94063

Re: Request for North Fair Oaks Community Council Recommendation re Request for Certificate of Public Convenience or Necessity re 2694 Middlefield Road, Redwood City, CA 94063

Dear Ms. Lopez:

This office represents the San Mateo County Planning and Building Department and, from time to time, we are asked to assist in coordinating the County's response to requests from those seeking licenses from the State Department of Alcoholic Beverage Control for certificates of public convenience or necessity. Specifically, in cases where a certain threshold of such licenses has already been exceeded, the operator must receive from the local governmental agency with land use regulatory jurisdiction over the area in question a certificate that the public convenience or necessity would be served by issuance of such a license.

As reflected on the attached form, Launchpad Inc., doing business as Man Crates, seeks such a certificate from the County in connection with the proposed sale of alcoholic beverages at their facility located at 2694 Middlefield Road, in the unincorporated Redwood City area. As part of the process for consideration of such a request, the County seeks the recommendation of the North Fair Oaks Community Council. Because of the relatively short period of time in which the County has to respond

May 1, 2015 Page 2

to this request, I am asking that you provide me the Council's recommendation by return mail at the above address as soon as possible after your meeting on May 28, 2015.

Thank you for your assistance and please do not hesitate to contact me with any questions or comments regarding this matter.

Sincerely,

JOHN C. BEIERS, COUNTY COUNSEL

By:

Melissa D. Andrikopoulos, Deputy

JCB:MDA

Enclosure(s): Launchpad Inc. application

cc: John Beiers and John Nibbelin, Office of the County Counsel

Steve Monowitz and Tiare Pena, Planning and Building Department

Maggie Cruz, Man Crates

INFORMATION AND INSTRUCTIONS -

SECTION 23958.4 B&P

ABC-245 (rev. 01-11)

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 LAUNCH PART I	ne Which will	1 Do Busin	ness in	California as	Man Ci	ates			
2. PREMISES ADDRESS (Street number and name, 2694 Midd)	efield Rd, S	te F, Red	wood a	California as ity, CA 3. LICENSE TYPH	E				
4. TYPE OF BUSINESS Full Service Restaurant	Hofbrau/Cafeteria	Cocktail L		94063 Private Clu					
H	Comedy Club	Night Club		/ / Frivate Club					
Deli or Specialty Restaurant		H		Veterans Club					
Cafe/Coffee Shop	Brew Pub	Tavern: E		Fraternal Club					
Bed & Breakfast:	Theater	[] Tavern: E	Beer & Wine	Wine Tasting Room					
Wine only All									
Supermarket	Membership Store	Service S	ation	Swap Meet/Flea Market					
Liquor Store	Department Store	Convenie	nce Market	Drive-in Dairy					
Drug/Variety Store	Florist/Gift Shop	Florist/Gift Shop Convenience Market w/Gasoline							
Other - describe:									
5. COUNTY POPULATION	6. TOTAL NUMBER OF LICENSE	S IN COUNTY		7. RATIO OF LICENSES TO POPULA	TION IN COUNTY				
743,193	1479	On-Sale	Off-Sale	Land Control of the C	On-Sale	Off-Sale			
8. CENSUS TRACT NUMBER	9. NO. OF LICENSES ALLOWED			10. NO. OF LICENSES EXISTING IN					
G/05	TO A TODAY WITH A DESIGNATION OF THE PARTY O	On-Sale	Off-Sale	4	On-Sale	off-Sale			
11. IS THE ABOVE CENSUS TRACT OVERCONCER Yes, the number of existing licenses			population in the	census tract exceed the ratio of license	s to population for t	the entire county?)			
No, the number of existing licenses is									
12. DOES LAW ENFORCEMENT AGENCY MAINTAI		VCG							
Yes (Go to Item #13)	No (Go to Item #20)								
13. CRIME REPORTING DISTRICT NUMBER	14. TOTAL NUMBER OF REPORTING DISTRICTS Unincorporated area			15. TOTAL NUMBER OF OFFENSES IN ALL REPORTING DISTRICTS					
16. AVERAGE NO. OF OFFENSES PER DISTRICT	17. 120% OF AVERAGE NUMBE	17. 120% OF AVERAGE NUMBER OF OFFENSES			18. TOTAL NUMBER OF OFFENSES IN REPORTING DISTRICT				
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									
8									
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 # on this issue. Advise the applicant	11 <u>and</u> item #19, <u>Section 239</u>				information wil	l be needed			
b. If " <u>Yes</u> " is checked in either item retail license issued for a hotel, mot beer manufacturer's license, or wine application or as soon as possible ti	el or other lodging establishme egrower's license, advise the	nent as defined in S	Section 25503.	.16(b) B&P, or a retail license	issued in conju	iction with a			
					858				
c. If " <u>Yes</u> " is checked in either item sale beer license, an on-sale beer a to the local governing body, or its de ABC in order to process the applica	and wine (public premises) lice esignated subordinate officer	ense, or an on-sale	e general (pub	lic premises) license, advise the	ne applicant to	take this form			
	/	With Con	noil	Pour or Cum	mi ida	nel			
Governing Body/Designated Subordinate Name:									
FOR DEPARTMENT USE ONLY PREPARED BY (Name of Department Employee)									
FREFARED BY (Name of Department Employee)	VE								

PART 2 - TO BE COMPLETED E	BY THE APPLICANT	(If box #20b is check	(ed)	
21. Based on the information on necessity would be served by the	the reverse, the Dep issuance of the licer	artment may approve ynse. Please describe t	your application below the reas	on if you can show that public convenience or ons why issuance of another license is justified in
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22. APPLICANT SIGNATURE				23. DATE SIGNED
PART 3 TO BE COMPLETED E				1 180 1 100 100 100
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24. WILL PUBLIC CONVENIENCE OR NECESS	SITY BE SERVED BY ISSUANI	CE OF THIS ALCOHOLIC BEVEF	RAGE LICENSE?	
Yes	No			ched (i.e., letter, resolution, etc.)
25. ADDITIONAL COMMENTS, IF DESIRED (m	ay include reasons for approva	If or denial of public convenience	or necessity):	
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26. CITY/COUNTY OFFICIAL NAME	27. CITY/COUNTY C	DEE[CIAL TITLE		20. CITY/COUNTY OFFICIAL DUONE NUMBER
20. OH HOOGHT FOFFICIAL NAME	ZI. CITT/COUNTY	ACTION TITLE		28. CITY/COUNTY OFFICIAL PHONE NUMBER
29 CITY/COUNTY OFFICIAL SIGNATURE	1		150	30 DATE SIGNED
ABC-245 REVERSE (rev. 01-11)				
ADO-240 ALVERGE (IEV. UI-II)				