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**OFFICE OF THE MAYOR**



**JOE A. SMITH**  
MAYOR  
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CITY HALL  
P.O. BOX 5757  
NORTH LITTLE ROCK, ARKANSAS 72119-5757  
website: www.nlr.ar.gov

**MEMORANDUM**

TO: Members of the North Little Rock City Council  
FROM: Glinda Craigmyle *GC*  
DATE: May 24, 2016  
SUBJECT: Alcoholic Beverages Permit Request

For your information, I have enclosed a copy of the *Assignment and Comments of Officials* form from the State of Arkansas, Alcoholic Beverage Control Division.

The following applicant has applied for a new on premises restaurant wine and retail beer permit:

Juan M. Alvarez  
La Casa Real  
3700 JFK Blvd.  
North Little Rock, AR

Please note the 15 day comment period referred to in the final paragraph of the *Comment* page.

Thank you.

Attachments

FILED \_\_\_\_\_ A.M. 3:15 P.M.  
BY Glinda - Mayor's Ofc.  
DATE 5-24-16  
Diane Whitbey, City Clerk and Collector  
North Little Rock, Arkansas  
RECEIVED by Sussery

# ASSIGNMENT

D6J003-D6L013



**Date Received:** 04/29/2016

**Date Assigned:** 05/18/2016

**Applicant:** JUAN M. ALVAREZ

**D.O.B:** 06/24/1966

**Green Card Number (Permanent Resident Alien):**

**Home Address:** 9300 Northedge Road, Little Rock, AR, 72227

**Home Phone:**                      **Business Phone :** 501-219-4689      **Cell Phone:** 501-658-8800

**Trade Name:** LA CASA REAL

**Former Trade Name:**

**Business Address :** 3700 JFK Blvd., North Little Rock                      **County** Pulaski

**Type Of Investigation:** Restaurant Beer and Wine (Combo) - New #06388

**Dancing, if requested:**

**Comments / Remarks :**

**Copies Of Assignment and Comment Form Mailed to:** Mayor Patrick H. Hays & City Council  
Danny Bradley, Chief of Police  
Sheriff Charles "Doc" Holladay  
Mr. Larry Jegley

**Assigned to Investigator:** \_\_\_\_\_

**Stockholders / Partners / LLC Members:**



ALCOHOLIC BEVERAGE CONTROL DIVISION  
COMMENTS OF PUBLIC OFFICIALS

APPLICANT'S NAME: JUAN M. ALVAREZ

TYPE OF APPLICATION: Restaurant Beer & Wine (Combo) - New

BUSINESS NAME: LA CASA REAL

BUSINESS ADDRESS: 3700 JFK Blvd., North Little Rock, AR, 72116

DATE OF APPLICATION: 04/29/2016

NAME OF PUBLIC OFFICIAL: \_\_\_\_\_

TITLE OF OFFICIAL: \_\_\_\_\_

OFFICIAL MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE : \_\_\_\_\_

SIGNATURE OF OFFICIAL: \_\_\_\_\_ DATE: \_\_\_\_\_

NAME OF AGENCY OR COURT: \_\_\_\_\_

Do you have any objections to the issuance of this permit? \_\_\_\_\_  
( Yes or No )

If yes, please explain your objections below:

To ensure your comments are available at the time this application is considered by the Director, please complete and return this form to ABC Administration, 1515 West 7th Street, Suite 503, Little Rock, AR 72201, within fifteen (15) days of receipt. In compliance with the Freedom of Information Act, this Comment Form will become a matter of public record. **Pursuant to ACA 3-2-103, a national fingerprint based background check will be, or has been, conducted. At ACICs request, do not run your own criminal history check through ACIC.**

*Handwritten signature/initials*

*Handwritten: e-File 7-17*  


STATE OF ARKANSAS  
ALCOHOLIC BEVERAGE CONTROL DIVISION

APPLICATION TO SELL RESTAURANT BEER  
AND WINE (ON PREMISES ONLY)

New \_\_\_\_\_  
Replacement \_\_\_\_\_  
Permit No. \_\_\_\_\_

I, or we, do hereby make application to the State of Arkansas for a permit to sell beer and wine on the premises of a restaurant and do hereby submit answers to the following questions under oath:

IF CORPORATION/LLC, GIVE NAME \_\_\_\_\_ FEIN# 81-1605101

NAME OF APPLICANT Juan M Alvarez

HOME ADDRESS 9300 Northedge rd. Little Rock AR. 72227 Pulaski  
Street Address City Zip County

TRADE NAME OF BUSINESS La Casa Real FORMER NAME La Casa Real

ADDRESS OF BUSINESS 3700 John FK Blvd. N. Little Rock 72116  
Street Address City Zip County

Is proposed location inside or outside the city limits? inside

Is your establishment primarily engaged in the business of serving food to the public prepared for consumption on the premises? Yes

Are you the owner of the proposed premises? No Do you have the premises leased? Yes

If so, give name and address of owner Paul Stathakis 13408 Westgate Court, Orland Park, Illinois 60462

Does anyone now hold a permit at this location? NO If so, give name, type and permit number(s) of same \_\_\_\_\_

Do you or any other person interested in this permit hold any other type of alcoholic beverage permit? NO

If so, give name, place and permit number(s) \_\_\_\_\_

Will there be dancing on the premises? NO

Dance Space NO x \_\_\_\_\_

2016 APR 29 4 24 PM RECEIVED  
2016 APR 5 12:40 PM RECEIVED

