




Apply for a Liquor License

19-1731

Applicant

 Isaura Pimentel
 4019321433
 patiobistropvd@gmail.com

Please select the License(s) you are applying for

Liquor Licenses

BV (Restaurant) \$2000

Are you applying for a Valet License? \$50

Yes

BX (2 AM Closing) \$500

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Food \$110

true

1-4 a.m. \$110

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Is this a transfer?

NO

Holiday \$110

true

Tobacco (Nicotine/Tobacco) \$100

true

Frozen dessert \$20

false

License Information

Is this application for a liquor license renewal?

No

Business Info:

Doing Business As (the name of the business/establishment applying for the license)

El Patio Bar and Grill

Business address where the license will be held

702 Public Street

Is a CORPORATION (INC or LLC) applying to hold this license?

Yes

Will you use social media to promote business?

No

By checking this I acknowledge that I understand it is illegal for Liquor-Licensed businesses to host bottle service or offer drink specials, and I will not promote or offer bottle service or drink specials.

true

Applicant/Owner Info:

Is the person filling out this form the principle owner of the business applying for the license?

Yes

Complete Home Address including street, city, state, and zip

587 Central Ave. Johnston, RI 02919

Phone Number

401932-1433

Secondary Contact Number

E-mail

BCI

Full Legal Name

Isaura Pimentel

Full address (current)

587 Central ave Johnston, RI 02919

Full Address (Former if at current address less than 3 years)

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Phone number

4019321433

Date of birth

2/19/1989

Gender (fill in)

female

Have you ever been arrested?

no

Have you served in any branch of the US Military?

no

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Please type the first and last name of the person filling out this application and attesting to the accuracy of all the information entered and agreed to above.

Isaura Pimentel

Information on Corporation

Corporation Name that will hold the license (please include the INC or LLC)

el patio bar and grill llc

Corporation Address

702 Public st providence, RI 02907

State of Incorporation

RI

Corporation Phone Number

4019321433

Does the Applicant Own the Premises?

Yes

Have any officers, board members, or stockholders ever been arrested or convicted of a crime?

No

Disclosure of Additional Financial Interests

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Is there anyone else who has financial or ownership interests including people or entities who have provided loans to the applicant for the purpose of this license?

No

Yearly Licenses for Billiard and Amusement Centers

Do you have an amusement center, as defined above?

No

Will your establishment have any billiard tables?

No

Tobacco Ordinances and Regulations

A person who holds a license issued under this article, or any employee or agent of same, is prohibited from selling, distributing, delivering, offering for sale, or giving away, or possessing with the intention of selling, distributing, delivering, offering for sale, or giving away tobacco products within the city to any individual that is under eighteen (18) years of age, whether said tobacco is sold, distributed or delivered in person or via vending machine.

true

A person who holds a license issued under this article, or any employee or agent of same, is prohibited from selling as a single cigarette sale, or as a sale of cigarettes by the individual piece, known as "loosies." No person who holds a license issued under this article, nor any employee or agent of same, shall: (1) Accept or redeem, offer to accept or redeem, or cause or hire any person to accept or redeem or offer to accept or redeem any coupon that provides any tobacco products without charge or for less than the listed or non-discounted price; or (2) Accept or redeem, offer to accept or redeem, or cause or hire any person to accept or redeem or offer to accept or redeem any coupon that provides any cigarettes without charge or for less than the listed or non-discounted price; or (3) Sell tobacco products to consumers through any multi-pack discounts (e.g., "buy-two-get-one-free") or otherwise provide or distribute to consumers any tobacco products without charge or for less than the listed or non-discounted price in exchange for the purchase of any other tobacco product; or (4) Sell cigarettes to consumers through any multi-pack discounts (e.g., "buy-two-get-one-free") or otherwise provide or distribute to consumers any cigarette without charge or for less than the listed or non-discounted price in exchange for the purchase of any other cigarette. It shall be unlawful for any person to sell or offer for sale any flavored tobacco product including labeled and unlabeled products to a consumer, except in a smoking bar.

true

Annual Expansion of Premises

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Type of outdoor expansion:

Patio

Provide a breakdown of the hours of expansion (ex. Mon-Fri 9-5)

Mon-Fri 4pm-10pm, Sat-Sun 4pm-11pm

I hereby agree to furnish the City of Providence with a general liability insurance policy from an approved insurer in an amount of not less than \$100,000 and naming the City of Providence, its agents, officers, and employees as additional named insureds.

true

Are you applying for an annual expansion of premises? (\$250)

Yes

Workers Compensation

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PLEASE READ AND ACKNOWLEDGE: By submitting this application I hereby certify that all employees working for this business will have completed and hold current TIPS certification as applicable and that I will meet all Workers' Compensation requirements for my business. I agree to keep and provide proof of the above to present to the City of Providence upon request

true

Valet License Applicants (\$50)

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I attest I have read all above requirements of a valet License and will be in compliance with all above regulations per City ordinance.

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true

Seating Capacity of the Establishment

Is the parking facility owned by the Applicant?

77

Yes

Days and Hours of Operation (Example: Monday - Thursday 12PM - 8 PM)

Sun-Sat 4pm-1am

Number of Valet Drivers per shift

Name of Valet Company Used (if applicable)

2

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Number of Parking Spaces Available to the Valet

10

Signature

I, the applicant, affirm that the facts contained herein are true and that any omission or nonfactual information could result in the denial of my license.

Please type the first and last name of the person filling out this application and attesting to the accuracy of all the information entered and agreed to above.

true

Isaura Pimentel