

MEETING OF May 20, 2019

WARD 3 (mb)

ITEM NUMBER _____

\$ IMPACT _____

ISSUE:

New application for a privilege license for Pita Hospitality 3 LLC dba Pita Mediterranean Street Food for the sale of beer (retail pouring). Raineesh Suruni is the owner and agent applicant.

SUMMARY:

Raineesh Suruni as the registered agent for Pita Hospitality 3 LLC dba Pita Mediterranean Street Food requests a privilege license for the sale of beer (retail pouring) at 3240 South Cobb Dr. STE 1100.

BACKGROUND:

Raineesh Suruni will be the registered agent responsible for the sale of alcohol at the referenced location. Raineesh Suruni has been given a copy of the Alcoholic Beverage Ordinance and attended the mandatory alcohol awareness workshop. (Certificate attached)

STAFF RECOMMENDATION:

A background investigation conducted by the Smyrna Police Department failed to reveal information that would preclude issuance of this license. Raineesh Suruni has agreed to abide by the guidelines set forth by the City of Smyrna ordinance governing the sale of alcohol.

REQUESTED ACTION:

Approval of a privilege license for the sale of beer (retail pouring) for Pita Hospitality 3 LLC dba Pita Mediterranean Street Food with Raineesh Suruni as the registered agent.

**CITY OF SMYRNA
 BUSINESS LICENSE DEPARTMENT
 APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE
 Phone (678) 631-5321 Fax (770) 431-2814
 Web site: www.smyrnacity.com**

PLEASE TYPE APPLICATION AND ANSWER ALL QUESTIONS.

TYPE OF LICENSE: [CHECK APPROPRIATE SPACES]

LIQUOR:

NEW
 RENEWAL
 TRANSFER
 MANUFACTURER
 WHOLESALER
 PKG. BEER/WINE
 PKG. DIST. SPIRITS
 RETAIL POURING
 Restaurant
 Package Store
 Dancing/Live Ent
 Private
 Other

BEER:

NEW
 RENEWAL
 TRANSFER
 MANUFACTURER
 WHOLESALER
 PKG. BEER/WINE
 PKG. DIST. SPIRITS
 RETAIL POURING
 Restaurant
 Package Store
 Dancing/Live Ent.
 Private
 Other

WINE:

NEW
 RENEWAL
 TRANSFER
 MANUFACTURER
 WHOLESALER
 PKG. BEER/WINE
 PKG. DIST. SPIRITS
 RETAIL POURING
 Restaurant
 Package Store
 Dancing/Live Ent.
 Private
 Other

1. Legal Name of Business Pita Hospitality 3 LLC
 Operating name of the Business Pita Mediterranean Street Food
 Is the Business a: proprietorship partnership corporation foreign

2. Location 3240 South Cobb Dr Suite 1100 Smyrna GA 30080 Phone 678-653-8717

3. Is business within the designated distance of any of the following?

| | | YES | NO |
|--|----------|-----------------------|----------------------------------|
| PACKAGE DISTILLED SPIRITS | | | |
| SCHOOL | 600 FEET | <input type="radio"/> | <input checked="" type="radio"/> |
| CHURCH/PARK/PUBLIC BUILDING/ LIBRARY/RESIDENCE | 300 FEET | <input type="radio"/> | <input checked="" type="radio"/> |
| POURING DISTILLED SPIRITS | | | |
| SCHOOL | 600 FEET | <input type="radio"/> | <input checked="" type="radio"/> |
| CHURCH/PARK/PUBLIC BUILDING/ LIBRARY/RESIDENCE | 200 FEET | <input type="radio"/> | <input checked="" type="radio"/> |
| [BUILDING NO CLOSER THAN 75 FEET FROM PROPERTY LINE] | | | |
| PACKAGE WINE, MALT BEVERAGE | | | |
| SCHOOL | 600 FEET | <input type="radio"/> | <input checked="" type="radio"/> |
| CHURCH/PARK/PUBLIC BUILDING/ LIBRARY | 300 FEET | <input type="radio"/> | <input checked="" type="radio"/> |
| [EXCEPT GROCERY STORES AS DEFINED BY ORDINANCE] | | | |
| POURING WINE, MALT BEVERAGE | | | |
| SCHOOL | 600 FEET | <input type="radio"/> | <input checked="" type="radio"/> |
| CHURCH/PARK/PUBLIC BUILDING/ LIBRARY/RESIDENCE | 200 FEET | <input type="radio"/> | <input checked="" type="radio"/> |
| [BUILDING NO CLOSER THAN 75 FEET FROM PROPERTY LINE] | | | |

4. Full name of Owner Raineesh Surani

If a sole proprietor, will you manage the business full time on the premises?

Yes No

Social Security Number [redacted] Date of Birth 7-20- [redacted]

Are you a Citizen of the United States? Yes No Birthplace India

Current Address 2971 Oshields Ct SW City/State Marietta / GA Zip 30060

Home Telephone [redacted] Number of years at present address 3 years

Drivers License Number and State GA

What has been your occupation for the past five (5) years? Give detailed list Restaurant Owner - 2 years
Underwriter for Auto Insurance - 2 years Unemployed - 1 year

If a partnership, attach list showing each partner owning 10% or more, with address, telephone number, date of birth, and social security number.

If a corporation, provide corporate address, phone number & name of Chief Executive Officer

Federal Tax ID # 82-2466039 State of Incorporation GA

Is this a new business in Smyrna? Yes No If yes, date business will begin in Smyrna

Is this a transfer or change of ownership? Yes No Effective date

If yes, enclose a copy of the sales contract, closing statement.

Has owner ever had an alcoholic beverage license revoked in Smyrna or other jurisdiction?
 Yes No If yes, attach full details.

5. Full name of Manager (as Applicant)

Social Security Number [redacted] Date of Birth 7-20- [redacted]

Are you a Citizen of the United States? Yes No Birthplace

Current Address 2971 Oshields Ct SW City/State Marietta / GA Zip 30060

Home Telephone 678-770-4118 Number of years at present address 3 years

Do you reside in Cobb County? Yes No If yes, how long 3 years

Previous address 505 Summerwalk Pkwy Tucker GA 30084

Number of years at previous address 3 Drivers License Number and State GA

What has been your occupation for the past five (5) years? Give detailed list Restaurant Owner - 2 years
Underwriter for Auto Insurance - 2 years Unemployed - 1 year

Manager's employment date with owner October 2017

Has the manager (as applicant):

(a) Been adjudicated as incompetent or insane, or been deemed to have insufficient mental capacity to conduct the business for which the application is made? Yes No

(b) Been discharged from any military service under dishonorable conditions? Yes No

(c) Within a five-year period immediately preceding the date of application, been arrested or convicted of violating any laws, ordinances, or regulations regulating such business? (The term "conviction" shall include an adjudication of guilt, a plea of guilty or nolo contendere or the forfeiture of bond when charged with a crime.) Yes No

If there was an arrest, are charges still pending? Yes No

(d) Within a five-year period preceding the date of application, been convicted for any felony charged under any of the laws of the several states or of the United States? Yes No (The term "conviction" shall include an adjudication of guilt, a plea of guilty or nolo contendere or the forfeiture of bond when charged with a crime.) If there was an arrest, are charges are still pending? Yes No

(e) Within a three-year period preceding the application, been convicted of more than one misdemeanor, including traffic violations, involving the use or abuse of any alcoholic beverage, opiate or drug? Yes No (The term "conviction" shall include an adjudication of guilt, a plea of guilty or nolo contendere or the forfeiture of bond when charged with a crime.) If there was an arrest, are charges still pending? Yes No

(f) Been currently placed on parole from any governing authority? Yes No

Has any license authorizing the sale of alcoholic beverages at the location for which the present license is sought:

(g) Been declared to be under suspension, at the date the application is filed? Yes No

(h) Been revoked within six months of the date that the application is filed? Yes No

If yes to any of the above questions, please attach full detail.

7. Do you own the land and building on which this business is to operate? Yes No

Date Purchased

Amount Paid

If not, list the terms of the lease; including the manner in which the rent is determined, to whom and at what intervals it is paid.

Attach a copy of the lease and any other pertinent documents.

8. How is the proposed location zoned? _____

Attach copy of zoning certification from the City of Smyrna (Community Development 770-319-5387).

9. If this is an application for an original license, attach proof of adequate parking facilities as per the City of Smyrna zoning requirements (Community Development 770-319-5387).

10. Do you, your spouse, any family members, or any of the other owners, partners, or stockholders have an interest in a retail liquor store(s)? Yes No If so, state the number of stores and where each store is located.

11. Have you, your spouse, partner or stockholder any financial interest in the wholesale liquor business? Yes No If yes, give details.

12. If this is a previously licensed location, give the amount of alcohol sales for the previous (12) months and state the dates used in computing the gross sales. Indicate gross sales for beer, wine and liquor separately.

N/A

13. Please initial here that you have received a copy of the City of Smyrna Alcoholic Beverage Ordinance RS


14. Are you familiar with the City of Smyrna ordinances and state and federal laws and regulations governing the operation of this type of business? Yes No

15. Are you aware you are required to apply for a State license? Yes No
Contact the Georgia Department of Revenue Alcohol Division at 404-417-4900.

CITY OF SMYRNA
BUSINESS LICENSE DEPARTMENT
APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE
Phone (678) 631-5321 Fax (770) 431-2814
Web site: www.smyrnacity.com

GEORGIA, COBB COUNTY


I, Raineesh Surani, BEING DULY SWORN TO LAW, DO SWEAR THAT THE STATEMENTS MADE BY ME IN THE ABOVE AND FOREGOING APPLICATION ARE TRUE, AND NO FALSE, OR FRAUDULENT STATEMENT IS MADE HEREIN AND SUCH STATEMENTS WERE MADE IN ORDER TO PROCURE THE GRANTING OF A LICENSE.

Raineesh Surani 
Signature of Owner (type name before signing)

Signature and title of person other than Owner completing this application

Phone Number: Work:  Home:

Signature of Managing Applicant (type name before signing)

Raineesh Surani 

Signature and title of person other than Applicant completing this application

Phone Number: Work: Home:

Sworn to and subscribed before me

This _____ day of _____ 20_____

Notary Public

FINGERPRINTED AT SMYRNA POLICE DEPARTMENT:

Date


RECEIVED IN CITY OF SMYRNA BUSINESS LICENSE DEPARTMENT BY:



Date

3/25/19

CITY OF SMYRNA
BUSINESS LICENSE DEPARTMENT
APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE
Phone (678) 631-5321 Fax (770) 431-2814
Web site: www.ci.smyrna.ga.us

1. Legal Name of Business: Pita Hospitality 3 LLC
2. Location: 3240 South Cobb Dr suite 1100 Smyrna GA 30080 Phone: 
3. Name of Applicant: Ruineesh Surani

CERTIFICATION BY BUILDING INSPECTOR

I have inspected the premises referenced above and certify the location meets all minimum requirements of the Smyrna Building Code.


Chief Building Inspector

Date 4/3/2019

CERTIFICATION BY FIRE MARSHAL

I have inspected the premises referenced above and certify the location meets all minimum requirements of the City of Smyrna Fire Prevention Code.


Fire Marshal

Date 4/3/19

CERTIFICATION BY TAX CLERK

I certify the ad valorem taxes for the above referenced property have been paid and there are no outstanding liens.

Tax Clerk

OK

Date

Training Institute for Responsible Vendors, Inc.

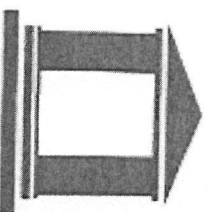
certifies that


Raineesh Naseembhoyi Surani

has successfully completed training in our RASS Workshop thus
entitling them to all the rights and privileges appertaining thereto .

In witness thereof the undersigned have affixed their names
this 21st day of March, 2019

Seal




President

CITY OF SMYRNA

PRIVILEGE LICENSE APPLICATION SUMMARY

DATE: 04/29/2018 MAYOR AND COUNCIL: 05/15/2019

TYPE OF LICENSES REQUESTED: BEER (RETAIL POURING)

NEW APPLICATION: YES OWNERSHIP YES AGENT YES

NAME OF BUSINESS: PITA HOSPITALITY 3 LLC

dba PITA MEDITERRANEAN STREET FOOD

PLACE OF BUSINESS: 3240 SOUTH COBB DRIVE STE 1100

SMYRNA, GA 30080

AGENT: RAINEESH SURUNI

HOME ADDRESS: 2971 OSHIELDS CT SW

MARIETTA GA 30060

CITIZENSHIP YES

POLICE REPORT: DATE REQUESTED 03/25/19 RECEIVED 04/02/19

RESULTS: INVESTIGATION FAILED TO REVEAL INFORMATION THAT WOULD
PRECLUDE ISSUANCE OF THIS LICENSE

TYPE OF BUILDING MASONRY

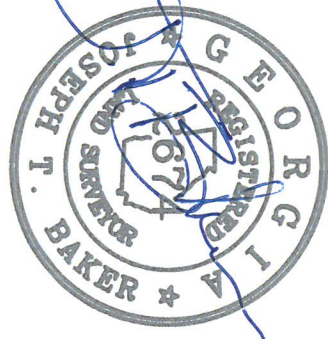
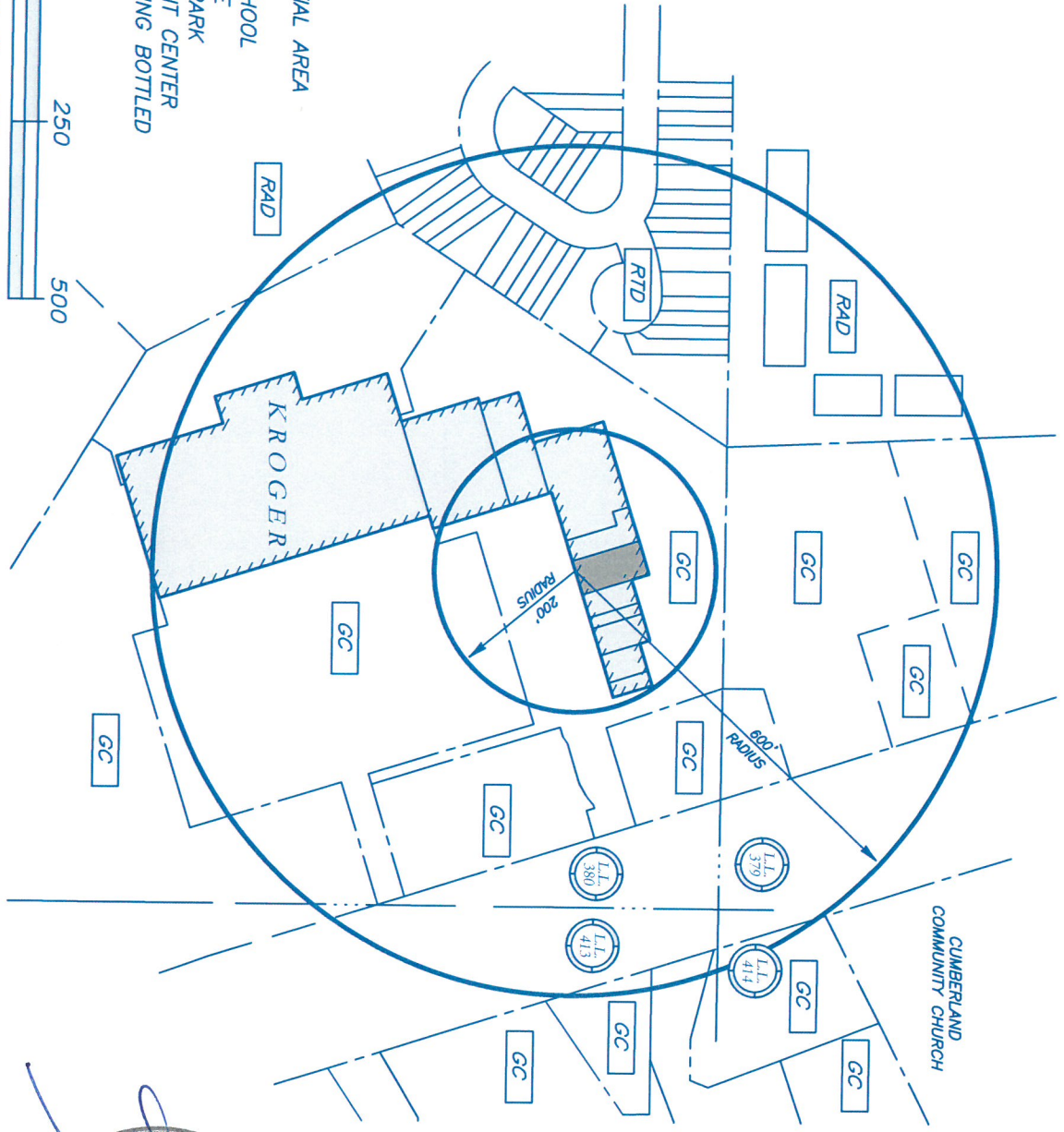
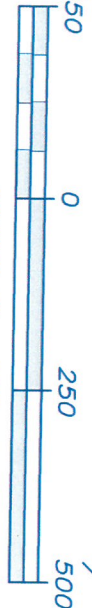
DISTANCE MET: SCHOOL YES CHURCH YES LIBRARY YES PARK YES

MAP FURNISHED: YES

ADVERTISED: 5/10/19 & 05/17/19

COMMENTS: TAXES PAID

- > 200' TO RESIDENTIAL AREA
- > 600' TO CHURCH
- > 1870' TO PUBLIC SCHOOL
- > 600' TO DAY CARE
- > 600' TO PUBLIC PARK
- > 600' TO TREATMENT CENTER
- > 778' TO STORE SELLING BOTTLED LIQUOR



SURVEY FOR ALCOHOLIC BEVERAGE LICENSE FOR
RAINESH SURANI
 LOCATED IN LAND LOT 380 OF THE 17TH DISTRICT
 2ND SECTION, CITY OF SMYRNA, COBB COUNTY, GA
 3240 SOUTH COBB DRIVE, SUITE 1100, SMYRNA, GA

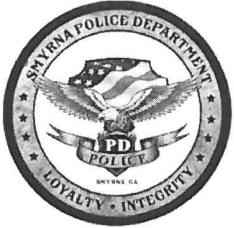
SURVEYS PLUS, INC.
 3565 SOUTH COBB DR., S.E.
 SMYRNA, GEORGIA 30080
 PHONE: (770) 444-9736
 www.surveysplusinc.com

Call County Surveyor

| | |
|------------|-----------|
| JOB NO. | 5254 |
| DRAWN BY | JBD |
| CHECKED BY | JTB |
| DATE | 3-1-19 |
| FIELD DATE | 2-27-19 |
| SCALE | 1" = 250' |

| REVISIONS | DATE |
|-----------|------|
| | |
| | |
| | |
| | |

"Policing with a Purpose"



Smyrna Police Department

Chief of Police
David Lee

2646 Atlanta RD SE
Smyrna, GA 30080-2118
Phone: 770-434-9481
Fax: 678-631-5005

Deputy Chief
Robert L. Harvey



Date: 4/2/19
To: Tammi Jones, City Administrator
From: David Lee, Chief of Police
Lt. Doug Copeland, Office of Professional Standards
Subject: Application for Alcohol License
Applicant: Raineesh Surani

This applicant, **RAINEESH SURANI** is the manager of the business listed below and has submitted an application with the business license office to obtain an alcohol beverage license, issued to, **3240 South Cobb Dr SE Suite 1100.**

The business name is **PITA STREET FOOD.**

The business is incorporated under the name **PITA STREET FOOD.**

A background check was conducted on this applicant. There was nothing in his background within the criminal history requirements of City of Smyrna Ordinance 6-51 that would prohibit him from holding the license as long as he meets all the other requirements of the ordinances that regulate this type of business.

CC: Terri Graham, City Clerk
Jim Cox, Business License
File

APPLICATION FOR PRIVILEGE LICENSE

I have made application at the Business License Office of the City of Smyrna, Georgia for Pita Hospitality 3 LLC dba Pita Mediterranean Street Food located at 3240 S Cobb Dr STE 1100, Smyrna, Georgia, requesting privilege licenses for the sale of beer (retail pouring). This application will be heard before the Mayor & Council for the City of Smyrna, 2800 King Street, Smyrna, Georgia on May 20, 2019 at 7:00 p.m. All concerned persons are hereby notified.

Raineesh Suruni.
Licensee

Pita Hospitality 3 LLC
Dba Pita Mediterranean Street Food
2995 Atlanta Road
STE 300
Smyrna, Georgia 30080

Ads to Run May 10, 2019 and May May 17, 2019