

CITY OF PALM DESERT

CITY CLERK DEPARTMENT

INTEROFFICE MEMORANDUM

To: BUILDING AND SAFETY DIVISION AND PLANNING DIVISION

MICHELLE NANCE, DEPUTY CITY CLERK

From:

Date: June 18, 2024

Subject: **APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S) BY:** Shake Shack #1529 73199 El Paseo Ste A Palm Desert, CA 92260-4230

A copy of the subject ABC License Application is attached for your review and recommendation to the City Council or to another department(s) for further action. A response is required. Please mark the appropriate response below and return to my office by Tuesday, June 25, 2024.

Responding Department:	Building and Safety	Date:	June 18, 2024

Response:

 $|\checkmark|$ No comment – okay to present to City Council.

Refer to

- related comments (attach additional sheets, if necessary):

Other – Additional comments (attach additional sheets, if necessary):



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A copy of the subject ABC License Application is attached for your review and recommendation to the City Council or to another department(s) for further action. A response is required. Please mark the appropriate response below and return to my office by Tuesday, June 25, 2024.

Responding Department: Development Services: Planning Date: August 14, 2024

Response:

 $|\checkmark|$ No comment – okay to present to City Council.

(attach additional sheets, if necessary):

Refer to

_____ - related comments

Other – Additional comments (attach additional sheets, if necessary):

TO:Department of Alcoholic 34-160 GATEWAY DR. STE 120 PALM DESERT, CA 922 (760) 324-2027		e Control File Number: 659816 Receipt Number: 2905480 Geographical Code: 3318 Copies Mailed Date: June 13, 2024 Issued Date:					
DISTRICT SERVING LOCA	TION: PALM DESERT	PALM DESERT					
First Owner:	SHAKE SHACK	SHAKE SHACK CALIFORNIA LLC SHAKE SHACK #1529 73199 EL PASEO STE A PALM DESERT, CA 92260-4230					ALM DESE
Name of Business:	SHAKE SHACK						
Location of Business:	STE A						
County	RIVERSIDE	RIVERSIDE				AM 7:	100
Is Premises inside city limits	Yes		Census Tract: 04		0451.17		22
Mailing Address:(If different from premises address)	225 VARICK ST STE 301 NEW YORK, NY						
Type of license(s):	41		Dropping Partner: Yes		Yes	No	_
Transferor's license/name:							
License Type 41 - On-Sale Beer And Wine - Eating	Transaction Type ORI	Master Y	Secondary LT And Count				
Application Fee	Transaction Description ADD PRIMARY LICENSE TYPE ANNUAL FEE	Fee Code NA NA	<u>Dup</u> 0 0	Date 06/13/24 06/13/24	<u>Fee</u> \$1,065.00 \$530.00		
				Total	\$1,595.00		

Have you ever been convicted of a felony? No

Have you ever violated any provisions of the Alcoholic Beverage Control Act, or regulations of the Department pertaining to the Act? No

STATE OF CALIFORNIA County of RIVERSIDE

Date: June 13, 2024

Applicant Name(s)

SHAKE SHACK CALIFORNIA LLC