



CITY OF PALM DESERT

CITY CLERK DEPARTMENT

INTEROFFICE MEMORANDUM

To: BUILDING AND SAFETY DIVISION AND PLANNING DIVISION

From: MICHELLE NANCE, DEPUTY CITY CLERK

Date:

Subject: **APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S) BY:**

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 _____

Responding Department: _____ **Date:** _____

Response:

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):



CITY OF PALM DESERT

CITY CLERK DEPARTMENT

INTEROFFICE MEMORANDUM

To: BUILDING AND SAFETY DIVISION AND PLANNING DIVISION

From: MICHELLE NANCE, DEPUTY CITY CLERK

Date: December 17, 2024

Subject: **APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S) BY:**
MAA Palm Desert Hospitality Inc. Springhill Suites 72322 Highway 111 Palm Desert, CA

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 Thursday, December 26, 2024.

Responding Department: Building and Safety **Date:** December 18, 2024

Response:

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):

APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

ABC 211 (6/99)

TO:Department of Alcoholic Beverage Control
34-160 GATEWAY DR.
STE 120
PALM DESERT, CA 92211
(760) 324-2027

File Number: **665308**
Receipt Number: **2957082**
Geographical Code: **3318**
Copies Mailed Date: **December 9, 2024**
Issued Date:

DISTRICT SERVING LOCATION: **PALM DESERT**

First Owner: **MAA PALM DESERT HOSPITALITY INC**

Name of Business: **SPRINGHILL SUITES**

Location of Business: **72322 HIGHWAY 111
PALM DESERT, CA 92260-2747**

County **RIVERSIDE**

Is Premises inside city limits **Yes** Census Tract: **0451.03**

Mailing Address:(If different from premises address) **445 HOTEL CIR S
SAN DIEGO, CA 92108-3402**

Type of license(s): **70** Dropping Partner: Yes ___ No ___

Transferor's license/name:

<u>License Type</u>	<u>Transaction Type</u>	<u>Master</u>	<u>Secondary LT And Count</u>		
70 - On-Sale General Restrictive Servi	ORI	Y			
<u>License Type</u>	<u>Transaction Description</u>	<u>Fee Code</u>	<u>Dup</u>	<u>Date</u>	<u>Fee</u>
Application Fee	ADD PRIMARY LICENSE TYPE	NA	0	12/09/24	\$7,060.00
Application Fee	FEDERAL FINGERPRINTS	NA	0	12/09/24	\$0.00
Application Fee	STATE FINGERPRINTS	NA	0	12/09/24	\$0.00
70 - On-Sale General Restrictive	ANNUAL FEE	P40	0	12/09/24	\$1,450.00
Total					\$8,510.00

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: December 9, 2024

Applicant Name(s)

MAA PALM DESERT HOSPITALITY INC

2024 DEC 16 AM 10:00
CITY CLERK'S OFFICE
PALM DESERT, CA