



CITY OF PALM DESERT

CITY CLERK DEPARTMENT

INTEROFFICE MEMORANDUM

To: BUILDING AND SAFETY DIVISION AND PLANNING DIVISION

From: MICHELLE NANCE, DEPUTY CITY CLERK

Date: November 25, 2025

Subject: **APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S) BY:**
One El Paseo Restaurant 74225 Highway 111 Ste B Palm Desert, CA 92260-4143

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, December 2, 2025.

Responding Department: Development Services: Planning **Date:** January 6, 2026

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):



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Responding Department: _____ **Date:** _____

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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: **674978**
 Receipt Number: **3061748**
 Geographical Code: **3318**
 Copies Mailed Date: **November 19, 2025**
 Issued Date:

DISTRICT SERVING LOCATION: **PALM DESERT**

First Owner: **PALM DESERT RESTAURANT B LLC**

Name of Business: **ONE EL PASEO RESTAURANT**

Location of Business: **74225 HIGHWAY 111
 STE B
 PALM DESERT, CA 92260-4143**

County **RIVERSIDE**

Is Premises inside city limits **Yes** Census Tract: **0451.17**

Mailing Address:(If different from premises address)

Type of license(s): **47** Dropping Partner: Yes No

Transferor's license/name: **632187 / J'S DELI LLC**

<u>License Type</u>	<u>Transaction Type</u>	<u>Master</u>	<u>Secondary LT And Count</u>		
47 - On-Sale General Eating Place	PER	Y			

<u>License Type</u>	<u>Transaction Description</u>	<u>Fee Code</u>	<u>Dup</u>	<u>Date</u>	<u>Fee</u>
Application Fee	ISSUE TEMPORARY PERMIT	NA	1	11/19/25	\$100.00
Application Fee	FEDERAL FINGERPRINTS	NA	2	11/19/25	\$48.00
Application Fee	STATE FINGERPRINTS	NA	2	11/19/25	\$78.00
Application Fee	PERSON TO PERSON TRF	NA	0	11/19/25	\$1,525.00
47 - On-Sale General Eating Plac	ANNUAL FEE	P40	0	11/19/25	\$1,505.00
Total					\$3,256.00

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: November 19, 2025

Applicant Name(s)

PALM DESERT RESTAURANT B LLC

RECEIVED
 CLERK'S OFFICE
 PALM DESERT, CA
 2025 NOV 25 PM 12:30