



# AGENDA

## CITY COUNCIL MEETING

55 West Williams Avenue Fallon, NV

May 21, 2024 at 9:00 AM

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The Honorable City Council will meet in a regularly scheduled meeting on May 21, 2024 at 9:00 a.m. in the City Council Chambers, 55 West Williams Avenue, Fallon, Nevada.

Items on the agenda may be taken out of order. The Council may combine two or more agenda items for consideration. The Council may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. Unless otherwise allowed by the City Council, public comments by an individual will be limited to three minutes.

1. Pledge of Allegiance to the Flag

2. Certification of Compliance with Posting Requirements

3. Public Comments

General in nature, not relative to any agenda items. No action may be taken on a matter raised under this item until the matter has been specifically included on an agenda as an item upon which action will be taken. **(For discussion only)**

4. Approval of Warrants **(For possible action)**

A) Accounts Payable

B) Payroll

C) Customer Deposit

5. Consideration of application by Ernestine Carmichael for a drinking establishment (on-premise) liquor license manager change for Oasis Adult Softball Association to be located at 447 North Maine Street. **(For possible action)**

6. Consideration of application by Bryan Tejeda-Talamontes for a drinking establishment (on-premise) liquor license for Uzumaki Restaurant to be located at 310 South Maine Street. **(For possible action)**

- 7.** Consideration of application by Kip Collins for a drinking establishment (on-premise) liquor license and a retail establishment (off-premise) liquor license manager change for Nevada Restaurant Services Inc. dba Dotty's Casino to be located at 2111 West Williams Ave. and 2197 Casey Road Ste 106. **(For possible action)**
  
- 8.** Consideration of application by Arturo Martinez, Jr. for a mobile food vendor license for The Snack Oasis. **(For possible action)**
  
- 9.** Consideration and possible approval of a Reversion to Acreage Map for Churchill Real Estate Investments, LLC to combine Churchill County Assessor's Parcel Numbers 001-538-01, 02, 03, 04, 05, 06, 07, and 13 into a single parcel. **(For possible action)**
  
- 10.** Fallon Police Department Monthly Report for March 2024 **(For discussion only)**
  
- 11.** Public Comments **(For discussion only)**
  
- 12.** Council and Staff Reports **(For discussion only)**
  
- 13.** Executive Session **(Closed)**
  - Discuss Litigation Matters **(For discussion only)** (NRS 241 et.seq.)
  - Negotiations with Operating Engineers Local Union No. 3 **(For discussion only)**
  - Negotiations with Fallon Peace Officers Association **(For discussion only)**

This agenda has been posted on or before 9:00 a.m. on May 16, 2024 at City Hall, District Court Building, Churchill County Office Complex, Churchill County Public Library and posted to the City's website (<https://fallonnevada.gov>) and the State of Nevada public notice website (<https://notice.nv.gov/>). Members of the public may request the supporting material for this meeting by contacting Elsie M. Lee, Deputy City Clerk, City Clerk's Office, City Hall, 55 West Williams Avenue, Fallon, Nevada, 775-423-5104. The supporting material for this meeting is also available to the public on the City's website (<https://fallonnevada.gov>) and the State of Nevada public notice website (<https://notice.nv.gov/>).

/s/ Elsie M. Lee

**NOTICE TO PERSONS WITH DISABILITIES:** Reasonable effort will be made to assist and accommodate physically handicapped persons desiring to attend the meeting. Please call the City Clerk's Office at 775-423-5104 in advance so that arrangements may be conveniently made.



## CITY OF FALLON REQUEST FOR COUNCIL ACTION

DATE SUBMITTED: May 13, 2024  
 AGENDA DATE: May 21, 2024  
 TO: The Honorable City Council  
 FROM: Elsie Lee, Deputy City Clerk  
 AGENDA ITEM TITLE: Consideration of application by Ernestine Carmichael for a drinking establishment (on-premise) liquor license manager change for Oasis Adult Softball Association to be located at 447 North Maine Street. **(For possible action)**

TYPE OF ACTION REQUESTED:

- |  |  |
|--|--|
| <input type="checkbox"/> Resolution                      | <input type="checkbox"/> Ordinance               |
| <input checked="" type="checkbox"/> Formal Action/Motion | <input type="checkbox"/> Other – Discussion Only |

RECOMMENDED COUNCIL ACTION: Motion to approve application and to issue a drinking establishment (on-premise) liquor license to Ernestine Carmichael for Oasis Adult Softball Association to be located at 447 North Maine Street.

DISCUSSION: Ernestine Carmichael, President of Oasis Adult Softball Association has made an application for a drinking establishment (on-premise) liquor license for Oasis Adult Softball Association to be located at 447 North Maine Street. A drinking establishment liquor license is a privileged license that allows the licensee to sell alcoholic beverages from a fixed and definite place of business for consumption upon the premises only.

The application has been reviewed by Police Chief Ron Wenger, Deputy City Clerk Elsie Lee, City Engineer Derek Zimney, and Deputy City Attorney Trent deBraga and has been recommended for approval.

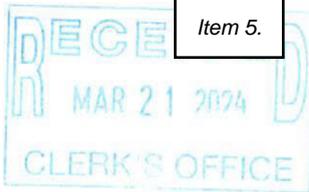
FISCAL IMPACT: Annual drinking establishment liquor license fee revenue.

FUNDING SOURCE: N/A.

PREPARED BY: Elsie Lee, Deputy City Clerk



**CITY OF FALLON CLERK'S OFFICE**  
 55 West Williams Avenue, Fallon, Nevada 89406  
 Phone: (775) 423-5104  
 Fax: (775) 423-8874



Item 5.

**LIQUOR LICENSE APPLICATION**

Application Type:  New  Owner Change  Manager Change  Location Change

Applicant Name: Carmichael Ernestine Application Date: 3/21/24  
Last First MI

Title: \_\_\_\_\_ Phone: 775-225-4529

Date of Birth: [REDACTED] Driver's License Number: [REDACTED]  
 State: NV

List all addresses in which you have resided at for the past five (5) years.

Begin/End	Physical Address	City	State	Zip
- Present	<u>1190 Yucca Ln</u>	<u>Fallon</u>	<u>NV</u>	<u>89406</u>

Business Entity Type:  Sole Proprietor  Partnership  Limited Liability Company  DBA  
 Corporation  Association  Other: \_\_\_\_\_

Business Name: Oasis Adult Softball

Business Owner(s): \_\_\_\_\_

Name	Address	Title
<u>Ernestine Carmichael</u>	<u>1190 Yucca Ln Fallon</u>	<u>President</u>

Business Address: 447 North Maine St Fallon NV 89406  
City State Zip

Provide a brief description of the portion to be occupied by the establishment for which the license is sought:  
snack bar on sight owned by city of fallon.

Is the premises to be licensed leased by the applicant?  Yes  No

Name of the owner of the premises: Fallon NV City of Fallon

Name of the owner's authorized agent, if any: \_\_\_\_\_

What type of license for which the application is made:  Retail (Off Premises)  Drinking Establishment (On Premises)

Have you owned or managed any other business?  Yes  No



# CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

If Yes, list the business(es) you have owned or managed.

Begin/End	Name	Address	City	State	Zip
May 3, 24					

Have you ever been issued a business or a liquor license?  Yes  No

If Yes, when? \_\_\_\_\_ What Agency? \_\_\_\_\_

Have you ever had a business or liquor license revoked?  Yes  No

If Yes, when? \_\_\_\_\_ What Agency? \_\_\_\_\_

Have you ever been denied a business or liquor license?  Yes  No

If Yes, when? \_\_\_\_\_ What Agency? \_\_\_\_\_

Have you received any specialized training for serving alcoholic beverages?  Yes  No

If Yes, explain: \_\_\_\_\_

Have you ever been arrested?  Yes  No

If Yes, provide the following information:

Date	Charge	Arresting Agency	Disposition

List five (5) references **not related** to you with daytime phone numbers:

Name	Phone	Relationship
Christine McManamy	217-6689	friend
Amanda Barbato	294-1192	friend
Elizabeth Blondheim	775-530-8301	friend
Lisa Allen	775-741-4762	friend
Larry Allen Sheriff Pershing	775-741-7276	friend

I declare under penalty of perjury that the foregoing is true and correct:

1. That I have received and read a copy of Chapter 5.08 of the Fallon Municipal Code – Alcoholic Beverage Sales;
2. That upon approval of a Liquor License, I will conduct the business and business establishment in accordance with the provisions of the laws of the State of Nevada, the United States, and the ordinances of the City of Fallon applicable to the conduct of business; and
3. That the above information is true and correct to the best of my knowledge and belief and that such declaration is made with the full knowledge that any failure to disclose, misstatement, or other attempt to mislead may be considered sufficient cause for denial of a business license.

*[Handwritten Signature]*  
Applicant's Signature



# CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

## AUTHORIZATION AND RELEASE

I, Ernestine Carmichael, authorize the Fallon Police Department to perform a background check and to release the results of said investigation, which may include information of a confidential or privileged nature, to the City Council in public documents and/or discussion at a public meeting.

*Ernestine Carmichael*  
Applicant's Signature

OFFICIAL USE ONLY			
City of Fallon	Approve	Approve with Conditions	Disapprove
Chief of Police	<u><i>R. Werry</i></u>	_____	_____
Engineering/Building Department	<u><i>D. S. [unclear]</i></u>	_____	_____
Attorney's Office	<u><i>[unclear]</i></u>	_____	_____
City Clerk's Office	<u><i>[unclear]</i></u>	_____	_____
Fallon/Churchill Fire Dept	<u><i>[unclear]</i></u>	_____	_____
Conditions required for approval: _____			
_____			
_____			
Recommendation for application:	<u>Approve</u>	<u>Approve with Conditions</u>	<u>Disapprove</u>

OFFICIAL USE ONLY:		
Account No.	License No.	Payment Received By:

**FALLON POLICE DEPARTMENT**

55 West Williams Avenue  
Fallon, Nevada 89406-2941  
775-423-2111  
Fax: 423-6527

Ron Wenger  
Chief of Police

April 17, 2024

On March 21, 2024, the Fallon Police Department received an application for a City Liquor License from Mrs. Ernestine Carmichael of 1190 Yucca Lane, Fallon, Nevada 89406. Mrs. Carmichael is seeking a city liquor license for the Association President change of Oasis Adult Softball, which does business at 447 North Maine Street in the City of Fallon.

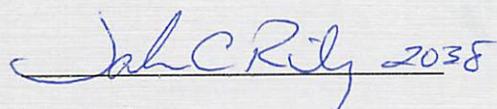
A review of Mrs. Carmichael's references was all very favorable, with all speaking very highly of Mrs. Carmichael.

I have performed a basic criminal background check which included the Fallon Police Local Database and CPClear. I found that Mrs. Carmichael has no reported criminal activity. I have concluded that Mrs. Carmichael has passed the basic background check.

Mrs. Carmichael was also provided with a copy of the applicable Fallon Municipal Codes and Nevada Revised Statutes so she could hold trainings with her on-site supervisors.

I have also provided a supplemental form in which Mrs. Carmichael signed on April 17, 2024 indicating that she understands her responsibilities as they relate to the laws regarding underage drinking.

Sincerely,

Handwritten signature of John C Riley in blue ink, with the date 2038 written at the end.

John C Riley

Captain

# Liquor License Application Interview Supplement

APPLICANT Cristine Carmichael DATE 4/17/24

BUSINESS NAME - Oasis Adult Softball ass.

I (~~will~~ will not) be the on-site supervisor. Ashley Marran / Gladys Werle

If not, the on-site supervisor will be \_\_\_\_\_

I understand that if the on-site supervisor changes, I am responsible to notify the City Clerk's Office. Initials EQ

as

I acknowledge that as the license holder, I am personally responsible for what is sold at the store. Initials EQ

I further acknowledge that as the license holder, I am responsible for alcohol sales from the business and may be held personally responsible for alcohol sales that violate any law or ordinance. Initials EQ

I have received, read and understand the Liquor and Business License requirements within the Fallon Municipal Code and agree to abide by those requirements. Initials EQ

Witness: Ronald D Wenger, Chief of Police

John C. Riley, Captain



# CITY OF FALLON

## REQUEST FOR COUNCIL ACTION

DATE SUBMITTED: May 13, 2024  
 AGENDA DATE: May 21, 2024  
 TO: The Honorable City Council  
 FROM: Elsie Lee, Deputy City Clerk  
 AGENDA ITEM TITLE: Consideration of application by Bryan Tejeda-Talamontes for a drinking establishment (on-premise) liquor license for Uzumaki Restaurant to be located at 310 South Maine Street. **(For possible action)**

**TYPE OF ACTION REQUESTED:**

- |  |  |
|--|--|
| <input type="checkbox"/> Resolution                      | <input type="checkbox"/> Ordinance               |
| <input checked="" type="checkbox"/> Formal Action/Motion | <input type="checkbox"/> Other – Discussion Only |

**RECOMMENDED COUNCIL ACTION:** Motion to approve application and to issue a drinking establishment (on-premise) liquor license to Bryan Tejeda-Talamontes for Uzumaki Restaurant to be located at 310 South Maine Street.

**DISCUSSION:** Bryan Tejeda-Talamontes, Owner of Uzumaki Restaurant has made an application for a drinking establishment (on-premise) liquor license for Uzumaki Restaurant to be located at 310 South Maine Street. A drinking establishment liquor license is a privileged license that allows the licensee to sell alcoholic beverages from a fixed and definite place of business for consumption upon the premises only.

The application has been reviewed by Police Chief Ron Wenger, Deputy City Attorney Trent deBraga, City Engineer Derek Zimney, and Deputy City Clerk Elsie Lee and has been recommended for approval.

**FISCAL IMPACT:** Annual drinking establishment liquor license fee revenue.

**FUNDING SOURCE:** N/A.

**PREPARED BY:** Elsie Lee, Deputy City Clerk





# CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

If Yes, list the business(es) you have owned or managed.

Begin/End	Name	Address	City	State	Zip

Have you ever been issued a business or a liquor license?       Yes       No  
 If Yes, when? \_\_\_\_\_ What Agency? \_\_\_\_\_

Have you ever had a business or liquor license revoked?       Yes       No  
 If Yes, when? \_\_\_\_\_ What Agency? \_\_\_\_\_

Have you ever been denied a business or liquor license?       Yes       No  
 If Yes, when? \_\_\_\_\_ What Agency? \_\_\_\_\_

Have you received any specialized training for serving alcoholic beverages?       Yes       No

If Yes, explain: \_\_\_\_\_

Have you ever been arrested?       Yes       No

If Yes, provide the following information:

Date	Charge	Arresting Agency	Disposition

List five (5) references **not related** to you with daytime phone numbers:

Name	Phone	Relationship
✓ Susan Boadella 775-217-5620	775 217 1330	Friend
claudia c casey Brianna Cervantes	775 427-7443	teesor friend
Nick casey Bryson Ahe 777-666-0239	775 427 8288	teesor friend
Homberto velazquez	<del>562 587 2380</del>	coworker
✓ Alberto Alanis (775) 450 7161	562 587 2380	

I declare under penalty of perjury that the foregoing is true and correct:

1. That I have received and read a copy of Chapter 5.08 of the Fallon Municipal Code – Alcoholic Beverage Sales;
2. That upon approval of a Liquor License, I will conduct the business and business establishment in accordance with the provisions of the laws of the State of Nevada, the United States, and the ordinances of the City of Fallon applicable to the conduct of business; and
3. That the above information is true and correct to the best of my knowledge and belief and that such declaration is made with the full knowledge that any failure to disclose, misstatement, or other attempt to mislead may be considered sufficient cause for denial of a business license.

  
 Applicant's Signature



# CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

## AUTHORIZATION AND RELEASE

I, Bryan Tejada, authorize the Fallon Police Department to perform a background check and to release the results of said investigation, which may include information of a confidential or privileged nature, to the City Council in public documents and/or discussion at a public meeting.

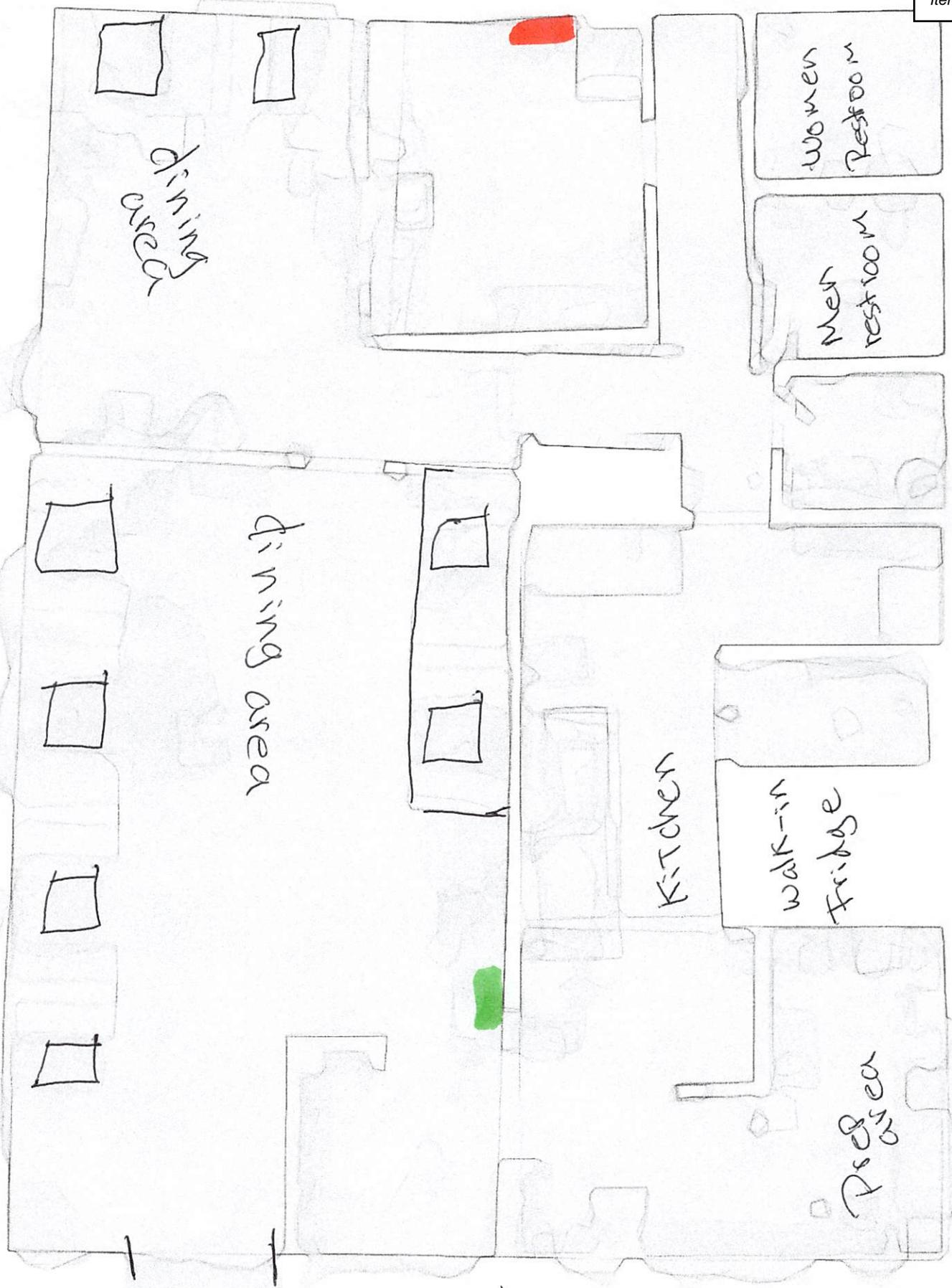
Applicant's Signature

### OFFICIAL USE ONLY

City of Fallon	Approve	Approve with Conditions	Disapprove
Chief of Police	<u>[Signature]</u>	_____	_____
Engineering/Building Department	<u>[Signature]</u>	_____	_____
Attorney's Office	<u>[Signature]</u>	_____	_____
City Clerk's Office	<u>[Signature]</u>	_____	_____
Fallon/Churchill Fire Dept	<u>[Signature]</u>	_____	_____
Conditions required for approval: _____			
_____			
_____			
Recommendation for application:	<u>Approve</u>	<u>Approve with Conditions</u>	<u>Disapprove</u>

### OFFICIAL USE ONLY:

Account No.	License No.	Payment Received By:
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■ Beer fridge  
■ Beer storage

# FALLON POLICE DEPARTMENT

55 West Williams Avenue  
Fallon, Nevada 89406-2941  
775-423-2111  
Fax: 423-6527

Ron Wenger  
Chief of Police

May 2, 2024

On April 19, 2024 the Fallon Police Department received an application for City Liquor License from Mr. Bryan Tejeda-Talamontes of 420 Pintail Drive Fallon, Nevada 89406. Mr. Tejeda-Talamontes is seeking an "on-premise" city liquor license for his new business, Uzumaki Restaurant, located at 810 South Maine Street within the City of Fallon.

A review of Mr. Tejeda-Talamontes' references were all very favorable, with all speaking very highly of him.

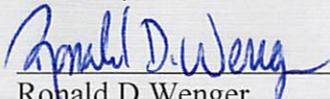
I have performed a basic criminal background check which included the Fallon Police Local Database and CPClear. I found that Mr. Tejeda-Talamontes has no known violatons of law.

On May 2, 2024 I interviewed Mr. Tejeda-Talamontes and learned that he would be responsible for restaurant and the service of alcoholic beverages.

I have also provided a supplemental form in which Mr. Tejeda-Talamontes signed, indicating that he understands his responsibilities as they relate to the laws regarding underage drinking.

I have concluded that Mr. Tejeda-Talamontes has passed a limited background check.

Sincerely,

  
\_\_\_\_\_  
Ronald D Wenger  
Chief of Police

# Liquor License Application Interview Supplement

APPLICANT Bryan Tejeda-Talamantes DATE 05/2/2024

BUSINESS NAME – Uzumaki Restaurant

810 S Maine Street Fallon, Nv 89406

I (will) be the on-site supervisor.

If not, the on-site supervisor will be BT

I understand that if the on-site supervisor changes, I am responsible to notify the City Clerk's Office. Initials \_\_\_\_\_

I acknowledge that as the license holder, I am personally responsible for what is sold at the store. Initials BT

I further acknowledge that as the license holder, I am responsible for alcohol sales from the business and may be held personally responsible for alcohol sales that violate any law or ordinance. Initials BT

I have received, read and understand the Liquor and Business License requirements within the Fallon Municipal Code and agree to abide by those requirements. Initials BT

Witness: Ronald D Wenger, Chief of Police



Pre

# CITY OF FALLON

## REQUEST FOR COUNCIL ACTION

DATE SUBMITTED: May 13, 2024  
 AGENDA DATE: May 21, 2024  
 TO: The Honorable City Council  
 FROM: Elsie Lee, Deputy City Clerk  
 AGENDA ITEM TITLE: Consideration of application by Kip Collins for a drinking establishment (on-premise) liquor license and a retail establishment (off-premise) liquor license manager change for Nevada Restaurant Services Inc. dba Dotty’s Casino to be located at 2111 West Williams Ave. and 2197 Casey Road Ste 106. **(For possible action)**

### TYPE OF ACTION REQUESTED:

- |  |  |
|--|--|
| <input type="checkbox"/> Resolution                      | <input type="checkbox"/> Ordinance               |
| <input checked="" type="checkbox"/> Formal Action/Motion | <input type="checkbox"/> Other – Discussion Only |

**RECOMMENDED COUNCIL ACTION:** Motion to approve application and to issue a drinking establishment (on-premise) liquor license and a retail establishment (off-premise) liquor license to Kip Collins for Nevada Restaurant Services Inc. dba Dotty’s Casino to be located at 2111 West Williams Ave. and 2197 Casey Road Ste 106.

**DISCUSSION:** Kip Collins, Manager of Nevada Restaurant Services Inc. dba Dotty’s Casino has made an application for a drinking establishment (on-premise) liquor license and a retail establishment (off-premise) liquor license manager change for Nevada Restaurant Services Inc. dba Dotty’s Casino to be located at 2111 West Williams Ave. and 2197 Casey Road Ste 106. A drinking establishment liquor license is a privileged license that allows the licensee to sell alcoholic beverages from a fixed and definite place of business for consumption upon the premises only. A retail liquor license is a privileged license that allows the licensee to sell alcoholic beverages from a fixed and definite place of business for consumption off of the premises only.

The application has been reviewed by Police Chief Ron Wenger, Deputy City Attorney Trent deBraga, City Engineer Derek Zimney, and Deputy City Clerk Elsie Lee and has been recommended for approval.

**FISCAL IMPACT:** Annual drinking establishment and retail establishment liquor license fee revenue.

**PREPARED BY:** Elsie Lee, Deputy City Clerk



# CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874



Item 7.

## LIQUOR LICENSE APPLICATION

Application Type:  New  Owner Change  Manager Change  Location Change

Applicant Name: Collins Kip P Application Date: 5-1-24  
Last First MI

Title: Store Manager Phone: (775) 636-5298

Date of Birth: [REDACTED] Driver's License Number: [REDACTED]

State: NV

List all addresses in which you have resided at for the past five (5) years.

Begin/End	Physical Address	City	State	Zip
2020 - Present	1058 Greenbrook Pl	Fernley	NV	89408
2009-2020	134 Priarie Ln	Fernley	NV	89408

Business Entity Type:  Sole Proprietor  Partnership  Limited Liability Company  DBA  
 Corporation  Association  Other: Dottys Casino

Business Name: NRSI.

Business Owner(s):

Name	Address	Title
Paula Esty	3645 Lossee Rd, NLV 89030	President

Business Address: 2111 1222 W. Williams Ave 3 2197 Casey RD St 106 Casino, Sell and service alcohol  
City State Zip

Provide a brief description of the portion to be occupied by the establishment for which the license is sought:  
Casino, Sell and service alcohol

Is the premises to be licensed leased by the applicant?  Yes  No

Name of the owner of the premises: Bing Wang

Name of the owner's authorized agent, if any: \_\_\_\_\_

What type of license for which the application is made:  Retail (Off Premises)  Drinking Establishment (On Premises)

Have you owned or managed any other business?  Yes  No



# CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

If Yes, list the business(es) you have owned or managed.

Begin/End	Name	Address	City	State	Zip
2019-Present	Dottys Casino	1222 W. William Ave	Fallon	NV	89406

Have you ever been issued a business or a liquor license?  Yes  No  
 If Yes, when? 12/31/2024 What Agency? City of Fallon

Have you ever had a business or liquor license revoked?  Yes  No  
 If Yes, when? \_\_\_\_\_ What Agency? \_\_\_\_\_

Have you ever been denied a business or liquor license?  Yes  No  
 If Yes, when? \_\_\_\_\_ What Agency? \_\_\_\_\_

Have you received any specialized training for serving alcoholic beverages?  Yes  No  
 If Yes, explain: Alcohol Awareness Training -23091922

Have you ever been arrested?  Yes  No

If Yes, provide the following information:

Date	Charge	Arresting Agency	Disposition

List five (5) references not related to you with daytime phone numbers:

Name	Phone	Relationship
David Barnes	7758150608	Supervisor
Ed Roberts	7752248321	Friend
Karry Banner	7752710283	Friend
Marsha Black	5412319013	Friend
Angela Ponce	7754372723	Friend

I declare under penalty of perjury that the foregoing is true and correct:

1. That I have received and read a copy of Chapter 5.08 of the Fallon Municipal Code – Alcoholic Beverage Sales;
2. That upon approval of a Liquor License, I will conduct the business and business establishment in accordance with the provisions of the laws of the State of Nevada, the United States, and the ordinances of the City of Fallon applicable to the conduct of business; and
3. That the above information is true and correct to the best of my knowledge and belief and that such declaration is made with the full knowledge that any failure to disclose, misstatement, or other attempt to mislead may be considered sufficient cause for denial of a business license.

Applicant's Signature



# CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

## AUTHORIZATION AND RELEASE

I, Collins Kip P, authorize the Fallon Police Department to perform a background check and to release the results of said investigation, which may include information of a confidential or privileged nature, to the City Council in public documents and/or discussion at a public meeting.

Applicant's Signature

OFFICIAL USE ONLY		
10 Print Card	<u>N/A</u>	Spillman Entry <u>5/7/24</u>
Photo	<u>N/A</u>	 Recommended by Chief of Police or Designee
Local records	<u>5/7/24</u>	
NCJIS	<u>N/A</u>	Not Recommended by Chief of Police or Designee
Municipal Code	<u>5/7/24</u>	
Fee	\$	
<b>REVIEWED BY:</b>		
City of Fallon Engineering/Building Department		Date: <u>5/13/24</u>
City of Fallon Chief of Police		Date: <u>5/7/24</u>
City of Fallon/Churchill County Fire Dept.		Date: <u>5-13-24</u>
City of Fallon Attorney's Office		Date:

OFFICIAL USE ONLY:		
Account No.	License No.	Payment Received By:

# FALLON POLICE DEPARTMENT

55 West Williams Avenue  
Fallon, Nevada 89406-2941  
775-423-2111  
Fax: 423-6527

Ron Wenger  
Chief of Police

May 7, 2024

On May 1, 2024 the Fallon Police Department received an application for City Liquor License from Mr. Kip Collins of 1058 Greenbrook Place in Fernley, Nevada 89408. Mr. Collins is seeking an "on-premise" and "Off-Premise" city liquor license as the store manager for two Dotty's Casino locations at, 2111 West Williams Avenue and 2197 Casey Road Suite #106 within the City of Fallon.

A review of Mr. Collins' references were all very favorable, with all speaking very highly of him.

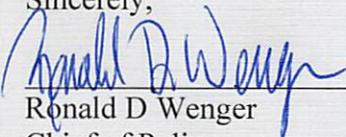
I have performed a basic criminal background check which included the Fallon Police Local Database and CPClear. I found that Mr. Collins has no known violation or convictions of law.

On May 7, 2024 I interviewed Mr. Collins and learned that he would be responsible for both business' and the sales and service of alcoholic beverages.

I have provided a supplemental form in which Mr. Collins signed, indicating that he understands his responsibilities as they relate to the laws regarding underage drinking. Additionally, I have provided Mr. Collins with a printed copy of section 5.20 of the Fallon Municipal Code which relates to the responsibility of serving alcoholic beverages.

I have concluded that Mr. Collins has passed a limited background check.

Sincerely,

  
\_\_\_\_\_  
Ronald D Wenger  
Chief of Police

# Liquor License Application Interview Supplement

APPLICANT Kip Collins DATE 05/7/2024

BUSINESS NAME – Dotty's Casino

2111 PW  
1222 W Williams Ave Fallon, Nv 89406

2127 CASEY Rd. Suite #106 Fallon, NV 89406 PW

I (will)/will not) be the on-site supervisor. Kim scott@casey rd

If not, the on-site supervisor will be ANGELA PONCE@w.williams

I understand that if the on-site supervisor changes, I am responsible to notify the City Clerk's Office. Initials K

I acknowledge that as the license holder, I am personally responsible for what is sold at the store. Initials K

I further acknowledge that as the license holder, I am responsible for alcohol sales from the business and may be held personally responsible for alcohol sales that violate any law or ordinance. Initials K

I have received, read and understand the Liquor and Business License requirements within the Fallon Municipal Code and agree to abide by those requirements. Initials K

  
Witness: Ronald D Wenger, Chief of Police



# CITY OF FALLON

## REQUEST FOR COUNCIL ACTION

DATE SUBMITTED: May 14, 2024  
 AGENDA DATE: May 21, 2024  
 TO: The Honorable City Council  
 FROM: Elsie Lee, Deputy City Clerk  
 AGENDA ITEM TITLE: Consideration of application by Arturo Martinez, Jr. for a mobile food vendor license for The Snack Oasis. **(For possible action)**

**TYPE OF ACTION REQUESTED:**

Resolution	Ordinance
<input checked="" type="checkbox"/> Formal Action/Motion	Other

**POSSIBLE COUNCIL ACTION:** Motion to approve application and to issue a mobile food vendor license to Arturo Martinez, Jr. for The Snack Oasis.

**DISCUSSION:** Arturo Martinez, Jr., owner of The Snack Oasis has made an application for a mobile food vendor license for The Snack Oasis. A mobile food vendor license is a privileged license that allows the licensee to sell food from a motor vehicle, or other type of food service conveyance, for human consumption and which is used to sell and dispense food or beverages to customers.

The application has been reviewed by Deputy City Attorney Trent deBraga, City Engineer Derek Zimney, Chief Ron Wenger, and Deputy City Clerk Elsie Lee and has been recommended for approval with conditions.

**FISCAL IMPACT:** Annual mobile food vendor license fee revenue.

**FUNDING SOURCE:** N/A.

**PREPARED BY:** Elsie Lee, Deputy City Clerk

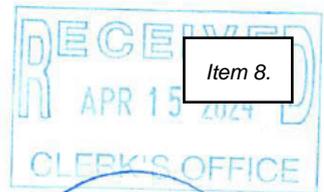


# CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874



Item 8.

## MOBILE FOOD VENDOR LICENSE APPLICATION

Application Type:  New  Renewal  Modify

Applicant Name: Martinez, Arturo Jr.  
Last First MI

Application Date: 03/21/24

Title: The Snack Oasis

Phone: 619-990-2420

Email: Artmtzjr@gmail.com

Address: 2797 Ponderosa Pl, Unit B, Fallon, NV 89406

Date of Birth: [REDACTED]

Driver's License Number: [REDACTED]  
Texas

Driver's License State: \_\_\_\_\_

Business Entity Type:  Sole Proprietor  Partnership  Limited Liability Company  DBA  
 Corporation  Association  Other: \_\_\_\_\_

Business Name: The Snack Oasis

### Business Owner(s):

Name	Address	Title
Arturo Martinez Jr	2797 Ponderosa Pl, Unit B, Fallon, NV 89406	Owner
Vicky Martinez	2797 Ponderosa Pl, Unit B, Fallon, NV 89406	Co-Owner

Business Address (if applicable): 920 W Williams Ave, Fallon, NV 89406  
City State Zip

Name of owner's authorized agent, if any: \_\_\_\_\_

Provide a description of the selling methods to be used and the nature of the products or services to be offered:

This will be a food trailer, offering mainly snow cones or shaved ice. Will be providing over 30 flavors of syrups. Concessions will also be available such as nachos, hot dogs, mini pancakes (dessert). Specialty snowcones will be advertised as well.

I am looking to park outside the old walmart parking lot where the dollar tree and Big 5 are located. I have already obtained permission by The Oasis Academy for that.

Concessions will be available to go only, no tables or chairs will be presented

Have you owned or managed any other business?  Yes  No

If Yes, list the business(es) you have managed:

Begin/End	Name	Address	City	State	Zip



# CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

Have you ever been issued a business or mobile food vendor license?

Yes  No

If Yes, when? \_\_\_\_\_

What Agency? \_\_\_\_\_

Have you ever had a business or mobile food vendor license revoked?

Yes  No

If Yes, when? \_\_\_\_\_

What Agency? \_\_\_\_\_

Have you ever been denied a business or mobile food vendor license?

Yes  No

If Yes, when? \_\_\_\_\_

What Agency? \_\_\_\_\_

Have you ever been arrested?  Yes  No

If Yes, provide the following information:

Date	Charge	Arresting Agency	Disposition

### Vehicle Information (to be used for mobile vending):

Year of Vehicle	Make	Model	Plate Number
2019	EMPI	CARGO-	93221Y

A copy of a valid, unexpired Nevada vehicle registration, if applicable, must be submitted with this application.

### Health Permit:

A copy of proof of Nevada State Division health permit must be submitted with this application.

### State of Nevada Department of Taxation:

Proof of filing with the State of Nevada Department of Taxation must be submitted with this application.

I declare under penalty of perjury that the foregoing is true and correct:

1. That I have received and read a copy of Chapter 5.60 of the Fallon Municipal Code- Mobile Food Vendors.
2. That upon approval of a mobile food vendor license, I will conduct the business and business establishment in accordance with the provisions of the laws of the State of Nevada, the United States, and the ordinances of the City of Fallon applicable to the conduct of business; and
3. That the above information is true and correct to the best of my knowledge and belief and that such declaration is made with full knowledge that any failure to disclose, misstatement, or other attempt to mislead may be considered sufficient cause for denial of a mobile food vendor license.

Applicant's Signature



# CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406

Phone: (775) 423-5104

Fax: (775) 423-8874

## AUTHORIZATION AND RELEASE

I, Arturo Martinez, authorize the Fallon Police Department to perform a background check and to release the results of said investigation, which may include information of a confidential or privileged nature, to the City Council in public documents and/or discussion at a public meeting.

[Signature]  
Applicant's Signature

OFFICIAL USE ONLY			
City of Fallon	Approve	Approve with Conditions	Disapprove
Chief of Police	<u>[Signature]</u>	_____	_____
Engineering/Building Department	<u>[Signature]</u>	_____	_____
Attorney's Office	_____	<u>[Signature]</u>	_____
City Clerk's Office	_____	<u>[Signature]</u>	_____
Fallon/Churchill Fire Dept	<u>[Signature]</u>	_____	_____
Conditions required for approval:	<u>Obtain all necessary health permits from Central Nevada Health District.</u>		
Recommendation for application:	<u>Approve</u>	<u>Approve with Conditions</u>	<u>Disapprove</u>

OFFICIAL USE ONLY:		
Account No.	License No.	Payment Received By:



STATE OF NEVADA SALES TAX PERMIT
DEPARTMENT OF TAXATION

Item 8.

Taxpayer ID: 1045016039-002
Correspondence ID: 2400016572551
Date: 3/29/2024

SNACK OASIS THE
2797 PONDEROSA PL, UNIT B
FALLON, NV 89406

THIS PERMIT:
IS NOT TRANSFERABLE TO ANY OTHER PERSON.
IS VOID IF ALTERED.
IS NOT ISSUED IN LIEU OF ANY LOCALLY
REQUIRED BUSINESS LICENSE, PERMIT OR
REGISTRATION.

Is authorized to collect Nevada sales tax at the following location if
different from above.

Permit Location:
SNACK OASIS THE
9220 W WILLIAMS
FALLON, NV 89406

MUST BE DISPLAYED IN PUBLIC VIEW AT PERMIT LOCATION

(Detach Here)

Attached is your Nevada Sales Tax Permit.

A single number, the TID (Taxpayer Identification Number), identifies a taxpayer for MOST tax types. Please use your TID and LOC (Location Number) on resale certificates, in correspondence or telephone calls to the Department.

Based on your estimated monthly taxable receipts as stated on the Nevada Business Registration Supplemental application, your filing frequency will be Monthly.

As stated on the application, your business start date is 4/1/2024, making your first remittance due on or before 5/31/2024

The Department of Taxation has forms, publications and information available via internet at https://tax.nv.gov.

The Department of Taxation is providing businesses with the ability to view and manage their accounts via the internet through its interactive website, NevadaTax, located at https://nevadatanv.gov/. Businesses can file tax returns, make payments, and view financials associated with their Sales and Use Tax account, Modified Business Tax account, and Business License account.

A business must first register and receive a username and password before NevadaTax will allow access to view and manage accounts. If you are already registered to use NevadaTax, this tax type will be added to your existing account.

Your business should use the following Pre-approved NevadaTax Activation Code when registering to use NevadaTax: Pre-approved NevadaTax Activation Code: FEA5249C-91BD-4EA0-A8E4-1ACFE858EBE9

The Nevada Sales Tax Permit has been issued pursuant to an application duly filed and payment of prescribed fees. This Sales Tax Permit is subject to the provisions of Nevada Revised Statutes 372, 374, and 377. This Sales Tax Permit shall be considered valid unless canceled, suspended or revoked for good cause in accordance with Title 32.

DISTRICT OFFICE LOCATIONS

Table with 3 columns: CARSON CITY MAIN OFFICE, RENO OFFICE, LAS VEGAS OFFICE. Each column contains address and phone information.

In the event of an address change, please notify the Department of Taxation immediately in order to direct any correspondence to your new address.



Department of Motor Vehicles  
555 Wright Way  
Carson City, NV 89711-0625  
(775) 684-4368

3-Year Registration  
**2027** EXPIRES  
3/13/2027

LICENSE NUMBER <b>93221Y</b>	YEAR <b>2019</b>	MAKE <b>EMPI</b>	TYPE <b>2W</b>	CYL	MSRP <b>2900.00</b>	FUEL <b>0</b>	AXLE <b>1</b>	DECLARED WEIGHT <b>0</b>	UNLADEN WEIGHT <b>1200</b>	
VEHICLE IDENTIFICATION NUMBER <b>7F81E121XKD004655</b>			MODEL NAME/LENGTH <b>CARGO-</b>				COUNTY BASED <b>CHURCHILL</b>			
ISSUE DATE <b>3/13/2024</b>	FLEET NUMBER	UNIT NUMBER	FARM/RANCH VEHICLE <b>N</b>	DECAL NUMBER <b>93221Y</b>	PLATE BACKGROUND <b>HOME MEANS NEVADA</b>					



MARTINEZ,ARTURO JR (REGD)

MARTINEZ,ARTURO  
2797 PONDEROSA PL UNIT B  
FALLON NV 89406-4119



Instructions for applying the decal to the rear license plate are on the reverse of this form.

PLATES AND REGISTRATION MUST BE RETURNED WHEN NOT OPERATING THE VEHICLE  
Form NVREG04 175763209 - 3036 - 11600

# Central Nevada Health District

## Temporary Food Service Establishment Permit

Issued to: The Snack Oasis LLC

Managed by:

Event:

Location:

Dates of Operation: 6/8/2024 thru 6/8/2024

City:

Permit #: T24-022

State:

Be it known this temporary food service establishment is hereby authorized to operate during this event in Churchill County, State of Nevada and is subject to the provisions of the Central Nevada Health District Sanitation Ordinance.



CENTRAL NEVADA  
HEALTH DISTRICT

*Daren Winkelman*

Public Health Administrator

THIS PERMIT IS NOT TRANSFERABLE AND MUST BE PROMINENTLY DISPLAYED

# FALLON POLICE DEPARTMENT

55 West Williams Avenue  
Fallon, Nevada 89406-2941  
775-423-2111  
Fax: 423-6527

Ron Wenger  
Chief of Police

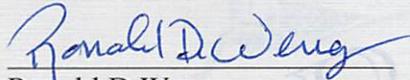
April 18, 2024

This letter certifies that Mr. Arturo Martinez Jr and Mrs. Vicki Martinez, of 2797 Ponderosa Place in Fallon, Nevada 89406, owner of "The Snack Oasis LLC" have completed application and have passed the limited background check, including a local records check and CPClear Database check, for operating a mobile food vending truck/trailer within the City of Fallon.

Mr. and Mrs. Martinez plan on pulling their mobile trailer to locations within the city and to special events to prepare and sell snow cone and snack type foods.

Additionally, I have met with Mr. and Mrs. Martinez and discussed Fallon Municipal Code 5.60 which specifically lists the laws regarding Mobile Food Vending platforms. I reviewed the ordinance with Mr. and Mrs. Martinez and they confirmed they understood their limitations and responsibilities as owner/operators of the business.

Sincerely,



Ronald D Wenger  
Chief of Police

# Mobile Food Vender License Application Interview Supplement

APPLICANT Arturo and Vicki Martinez

DATE 04/18/2024

BUSINESS NAME – The Snack Oasis 2797 Ponderosa Place Fallon, Nv 89405

I (will/will not) be the on-site supervisor.

If not, the on-site supervisor will be \_\_\_\_\_

I understand that if the on-site supervisor changes, I am responsible to notify the City Clerk’s Office. Initials VM, AM

I acknowledge that as the license holder, I am personally responsible for what is sold from the mobile store. Initials VM, AM

I further acknowledge that as the license holder, I am responsible for the business and may be held personally responsible for any violations of law or ordinance. Initials VM, AM

I have received, read and understand the Mobile Food Vender and Business License requirements within the Fallon Municipal Code and agree to abide by those requirements. Initials VM, AM

Witness: Ronald D Wenger, Chief of Police



# CITY OF FALLON

## REQUEST FOR COUNCIL ACTION

DATE SUBMITTED: May 14, 2024  
 AGENDA DATE: May 21, 2024  
 TO: The Honorable City Council  
 FROM: Derek Zimney, City Engineer  
 AGENDA ITEM TITLE: Consideration and possible approval of a Reversion to Acreage Map for Churchill Real Estate Investments, LLC to combine Churchill County Assessor’s Parcel Numbers 001-538-01, 02, 03, 04, 05, 06, 07, and 13 into a single parcel. **(For possible action)**

**TYPE OF ACTION REQUESTED:**

- Resolution
- Formal Action/Motion
- Ordinance
- Other – Discussion Only

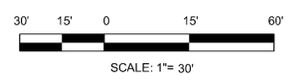
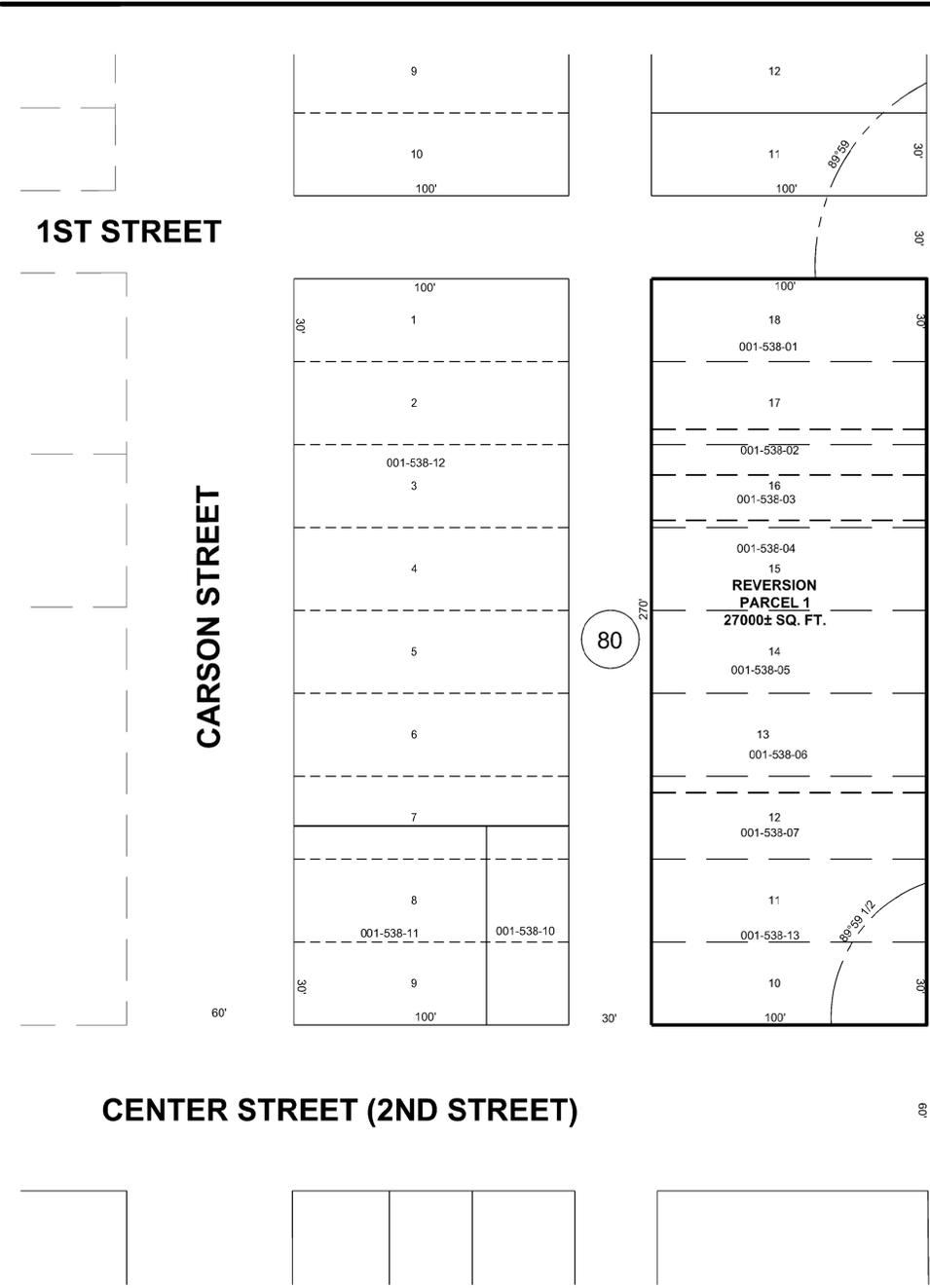
**POSSIBLE COUNCIL ACTION:** Motion to approve a Reversion to Acreage Map for Churchill Real Estate Investments, LLC to combine Churchill County Assessor’s Parcel Numbers 001-538-01, 02, 03, 04, 05, 06, 07, and 13 into a single parcel.

**DISCUSSION:** Churchill Real Estate Investments, LLC, owners of Churchill County Assessor’s Parcel Numbers 001-538-01, 02, 03, 04, 05, 06, 07, and 13 have made application and submitted a map to combine these parcels into a single parcel. This Reversion to Acreage Map will create a single 27,000 +/- square foot parcel. These parcels are located within C-2 zoning and approval will meet City of Fallon Municipal Code requirements for C-2 zoning. Access to the new parcel will be off South Maine Street. Any development or improvements to these parcels shall be required to meet all applicable City of Fallon standards and requirements.

**FISCAL IMPACT:** N/A

**FUNDING SOURCE:** N/A.

**PREPARED BY:** Derek Zimney, City Engineer



**BASIS OF BEARINGS**

THE BASIS OF BEARINGS FOR THIS PLAT IS THE MAP OF THE WILLIAMS TRACT, FALLON, CHURCHILL CO. NV, FILE NO. 615, RECORDED OCTOBER 18, 1904 IN THE OFFICE OF THE CHURCHILL COUNTY RECORDER, STATE OF NEVADA

**CLERK-TREASURER CERTIFICATE**

THE UNDERSIGNED, ON BEHALF OF THE CHURCHILL COUNTY CLERK-TREASURER, DOES HEREBY CERTIFY THAT:

- (1) ALL PROPERTY TAXES ON THE LAND FOR THE FISCAL YEAR HAVE BEEN PAID,
- (2) THERE ARE NO LIENS AGAINST ANY OF THE LANDS IN THE LAND DEVELOPMENT FOR UNPAID TAXES OF THE STATE, COUNTY, SPECIAL ASSESSMENT, AND
- (3) THAT THE FULL AMOUNT OF ANY DEFERRED PROPERTY TAXES FOR THE CONVERSION OF THE PROPERTY FROM DEFERRED TAX STATUS HAS BEEN PAID.

DATE \_\_\_\_\_ TITLE \_\_\_\_\_ PRINTED NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

APNs: 001-538-01 through 07 and 001-538-13

**LEGEND**

- REVERTED PARCEL LINE
- ADJACENT PARCEL LINE
- - - - - ORIGINAL LOT LINE PER FILE NO. 615 - TO REMAIN
- - - - - ORIGINAL LOT LINE PER FILE NO. 615 TO BE REVERTED
- - - - - DEED LINE TO BE REVERTED

**REVERSION PARCEL 1 DESCRIPTION**

ALL THAT CERTAIN PARCEL SITUATE WITHIN A PORTION OF LOT ONE (1) OF SECTION THIRTY-ONE (31), TOWNSHIP NINETEEN (19) NORTH, RANGE TWENTY-NINE (29) EAST, MOUNT DIABLO MERIDIAN, CITY OF FALLON, CHURCHILL COUNTY, NEVADA, BEING ALL OF LOTS 10 THROUGH 18 OF BLOCK 80 AS SHOWN ON MAP OF THE WILLIAMS TRACT, FALLON, FILED OCTOBER 18, 1904 AS FILE NO. 615 IN THE OFFICE OF THE CHURCHILL COUNTY RECORDER, CHURCHILL COUNTY, NEVADA, SAID PARCEL BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING at the southeast corner of said Block 80, being on the intersection of the right-of-ways of Maine Street and Center Street (2<sup>nd</sup> Street);

THENCE leaving said right-of-way of Maine Street, along the southerly line of said Lot 10, block 80, being coincident with the northerly right-of-way of Center Street (2<sup>nd</sup> Street), North 89°59'30" West, 100.00 feet to the southwest corner of said Lot 10, Block 80, being on the easterly line of a 30' alley as shown on said Williams Tract;

THENCE leaving said northerly right-of-way line, along said easterly alley line, North 00°00'00" East, 270.00 feet to the northwest corner of said Lot 18, Block 80, being on the southerly right-of-way line of 1<sup>st</sup> Street;

THENCE leaving said easterly alley line, along the northerly line of said Lot 18, Block 80, being coincident with said southerly right-of-way, South 89°59'00" East, 100.00 feet to the northeast corner of said Lot 18, Block 80, being on the above mentioned westerly right-of-way of Maine Street and being on the easterly line of said Block 80;

THENCE leaving said southerly right-of-way line, along said easterly Block line, being coincident with said westerly right-of-way line, South 00°00'00" East, 270.00 feet to the POINT OF BEGINNING.

SAID REVERSION PARCEL CONTAINS 27000± SQUARE FEET OF LAND, MORE OR LESS.

THE BASIS OF BEARINGS FOR THIS DESCRIPTION IS THE MAP OF THE WILLIAMS TRACT, FALLON, FILED OCTOBER 18, 1904 AS FILE NO. 615 IN THE OFFICE OF THE CHURCHILL COUNTY RECORDER, CHURCHILL COUNTY, NEVADA

Prepared by:  
Lumos & Associates, Inc.  
David C. Crook, PLS 10836  
178 South Maine Street  
Fallon, NV 89406

**SURVEYOR'S CERTIFICATE**

I, DAVID C. CROOK, A PROFESSIONAL LAND SURVEYOR LICENSED IN THE STATE OF NEVADA, AS AGENT FOR LUMOS AND ASSOCIATES, INC., CERTIFY THAT:

- 1) THE LANDS SURVEYED LIE WITHIN A PORTION OF THE NORTHWEST 1/4 OF SECTION 31, T.19 N., R.29 E., M.D.M., CITY OF FALLON, CHURCHILL COUNTY, NEVADA AND THIS PLAT WAS COMPLETED ON \_\_\_\_\_ AT THE INSTANCE OF CHURCHILL REAL ESTATE INVESTMENT, LLC.
- 2) THIS PLAT COMPLIES WITH APPLICABLE STATUTES OF THIS STATE AND ANY LOCAL ORDINANCES IN EFFECT ON THE DATE THAT THE SURVEY WAS COMPLETED AND THE SURVEY WAS CONDUCTED IN ACCORDANCE WITH CHAPTER 625 OF THE NEVADA ADMINISTRATIVE CODE.
- 3) THIS MAP HAS BEEN PREPARED FROM INFORMATION FROM MAP OF THE WILLIAMS TRACT, FALLON, CHURCHILL CO. NV, FILE NO. 615, RECORDED OCTOBER 18, 1904 IN THE OFFICE OF THE CHURCHILL COUNTY RECORDER, STATE OF NEVADA.
- 4) I ASSUME NO RESPONSIBILITY FOR THE EXISTENCE OF THE MONUMENTS OR FOR THE CORRECTNESS OF OTHER INFORMATION SHOWN OR COPIED FROM MAP FILE NO. 615.

FOE REVISION ONLY

DAVID C. CROOK, P.L.S.  
NEVADA CERTIFICATE No. #10836



**ENGINEER'S CERTIFICATE**

I, DEREK ZIMNEY, CERTIFY THAT I HAVE EXAMINED THIS MAP CONSISTING OF ONE (1) SHEET, AND THAT THE PROVISIONS AND ORDINANCES APPLICABLE HAVE BEEN COMPLIED WITH AND THAT I AM SATISFIED THAT THIS MAP IS TECHNICALLY CORRECT.

CITY ENGINEER \_\_\_\_\_ DATE \_\_\_\_\_

**CITY OF FALLON**

APPROVED AND ACCEPTED BY THE CITY COUNCIL OF THE CITY OF FALLON, COUNTY OF CHURCHILL, STATE OF NEVADA, THIS \_\_\_ DAY OF \_\_\_\_\_, 2024

MAYOR \_\_\_\_\_ DATE \_\_\_\_\_

ATTEST: FALLON CITY CLERK \_\_\_\_\_ DATE \_\_\_\_\_

**OWNER'S CERTIFICATE**

THIS IS TO CERTIFY THAT THE UNDERSIGNED, CHURCHILL REAL ESTATE INVESTMENTS, LLC IS THE OWNER OF THE TRACT OF LAND REPRESENTED ON THIS PLAT AND HAS CONSENTED TO THE PREPARATION AND RECORDATION OF THIS PLAT AND THAT THE SAME IS EXECUTED IN COMPLIANCE WITH AND SUBJECT TO THE PROVISIONS OF N.R.S. CHAPTER 278, AND THAT THIS PLAT IS FOR THE PURPOSE OF THE REVERSION TO ACREAGE OF THE LOTS SHOWN HEREON.

CHURCHILL REAL ESTATE INVESTMENTS, LLC

D. SCOTT TATE, MANAGER \_\_\_\_\_ DATE \_\_\_\_\_

STATE OF \_\_\_\_\_ } s.s.  
COUNTY OF \_\_\_\_\_

THIS INSTRUMENT WAS ACKNOWLEDGED BEFORE ME ON \_\_\_\_\_

BY D. SCOTT TATE, AS MANAGER OF CHURCHILL REAL ESTATE INVESTMENTS, LLC, PERSONALLY APPEARED BEFORE ME, A NOTARY PUBLIC, WHO ACKNOWLEDGED THAT THEY EXECUTED THE ABOVE INSTRUMENT.

NOTARY PUBLIC \_\_\_\_\_  
(MY COMMISSION EXPIRES \_\_\_\_\_)

**RECORDER'S CERTIFICATE**

FILE NO. \_\_\_\_\_  
FILED FOR RECORD AT THE REQUEST OF LUMOS & ASSOCIATES ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_ AT \_\_\_\_\_ MINUTES PAST \_\_\_\_\_ IN THE MAP FILES OF CHURCHILL COUNTY, NEVADA.

FEES: \_\_\_\_\_  
CHURCHILL COUNTY RECORDER \_\_\_\_\_

TITLE \_\_\_\_\_ PRINT NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**REVERSION TO ACREAGE**  
FOR  
**CHURCHILL REAL ESTATE INVESTMENTS, LLC**

LOTS 10 THROUGH 18, BLOCK 80, MAP OF THE W.W. WILLIAMS TRACT, FILE NO. 615,  
SITUATE WITH A PORTION OF LOT 1 (NW 1/4) OF SECTION 31, TOWNSHIP 19 NORTH, RANGE 29 EAST, M.D.M.

CITY OF FALLON      CHURCHILL COUNTY      STATE OF NEVADA

178 SOUTH MAINE STREET  
FALLON, NV 89406  
TEL (775) 423-2188

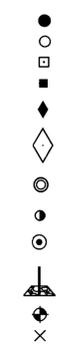
Drawn By : DCC  
Sheet : 1 of 1  
Job No. : 11181.000  
Drawing No.: 11181000SURVEY.DWG

**REFERENCE DOCUMENTS**

- (R1) MAP OF THE WILLIAMS TRACT, FALLON, FILED OCTOBER 18, 1904 AS FILE NO. 615 IN THE OFFICE OF THE CHURCHILL COUNTY RECORDER, CHURCHILL COUNTY, NEVADA.
- (R2) DEED, DOCUMENT NO. 374877 IN THE OFFICIAL RECORDS OF CHURCHILL COUNTY, NEVADA.
- (R3) GRANT, BARGAIN, SALE DEED, FILED JANUARY 31, 2006 AS DOCUMENT NO. 378647 IN THE OFFICIAL RECORDS OF CHURCHILL COUNTY, NEVADA.
- (R4) GRANT, BARGAIN, SALE DEED, FILED DECEMBER 23, 2011 AS DOCUMENT NO. 424633 IN THE OFFICIAL RECORDS OF CHURCHILL COUNTY, NEVADA.
- (R5) GRANT, BARGAIN, SALE DEED, FILED JANUARY 31, 2017 AS DOCUMENT NO. 439088 IN THE OFFICIAL RECORDS OF CHURCHILL COUNTY, NEVADA.
- (R6) GRANT, BARGAIN, SALE DEED, FILED OCTOBER 17, 2014 AS DOCUMENT NO. 443178 IN THE OFFICIAL RECORDS OF CHURCHILL COUNTY, NEVADA.

**COPIES NOTE**

IN ACCORDANCE WITH NEVADA REVISED STATUTES 247 AND 239, TO OBTAIN AN OFFICIAL COPY OF THIS MAP, CONTACT THE CHURCHILL COUNTY RECORDER.





# CITY OF FALLON

## REQUEST FOR COUNCIL ACTION

---

DATE SUBMITTED: May 3, 2024  
 AGENDA DATE: May 21, 2024  
 TO: The Honorable City Council  
 FROM: Ronald D. Wenger, Chief of Police  
 AGENDA ITEM TITLE: Fallon Police Department Monthly Report for March 2024 (**For discussion only**)

**TYPE OF ACTION REQUESTED:**

- |                      |   |
|----------------------|---|
| Resolution           | Ordinance   |
| Formal Action/Motion | <input checked="" type="checkbox"/> Other – Discussion Only |

POSSIBLE COUNCIL ACTION: For Review Only

DISCUSSION: (Attachment, if necessary)

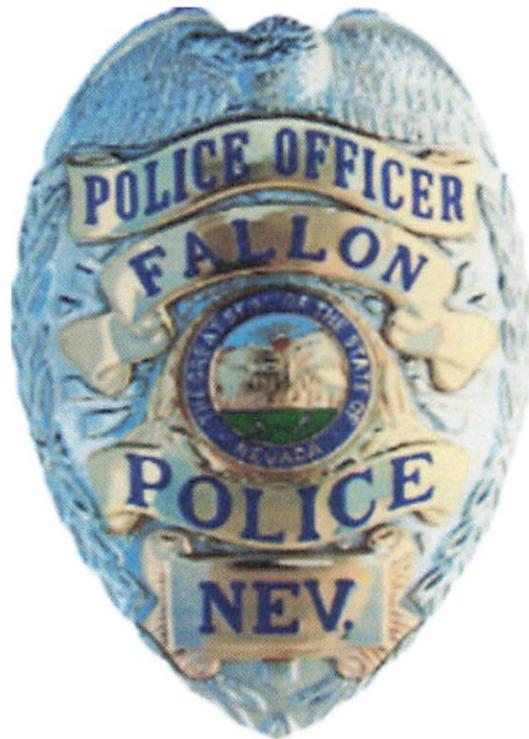
FISCAL IMPACT: None

FUNDING SOURCE: N/A.

PREPARED BY: Emily Rasmussen

PRESENTED TO COUNCIL BY: Chief Ron Wenger

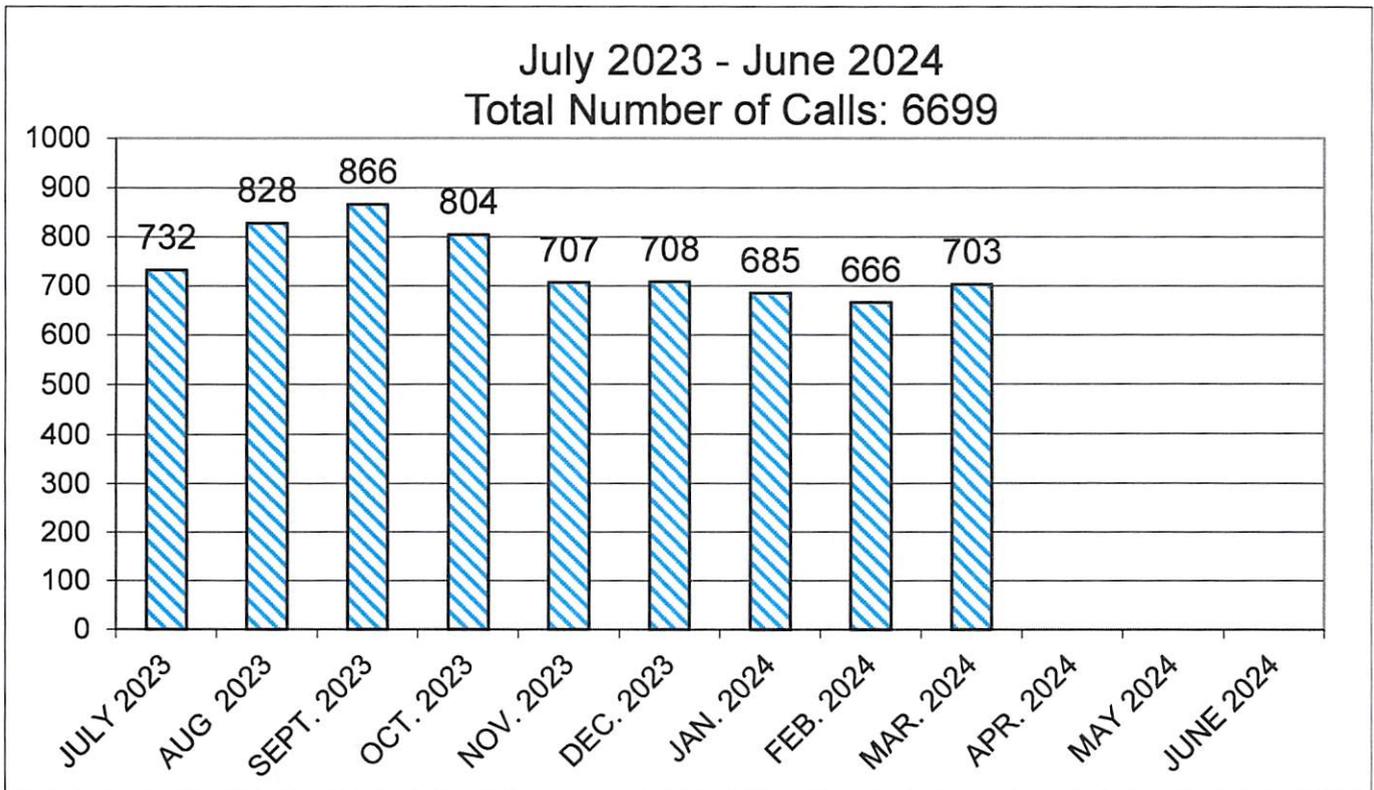
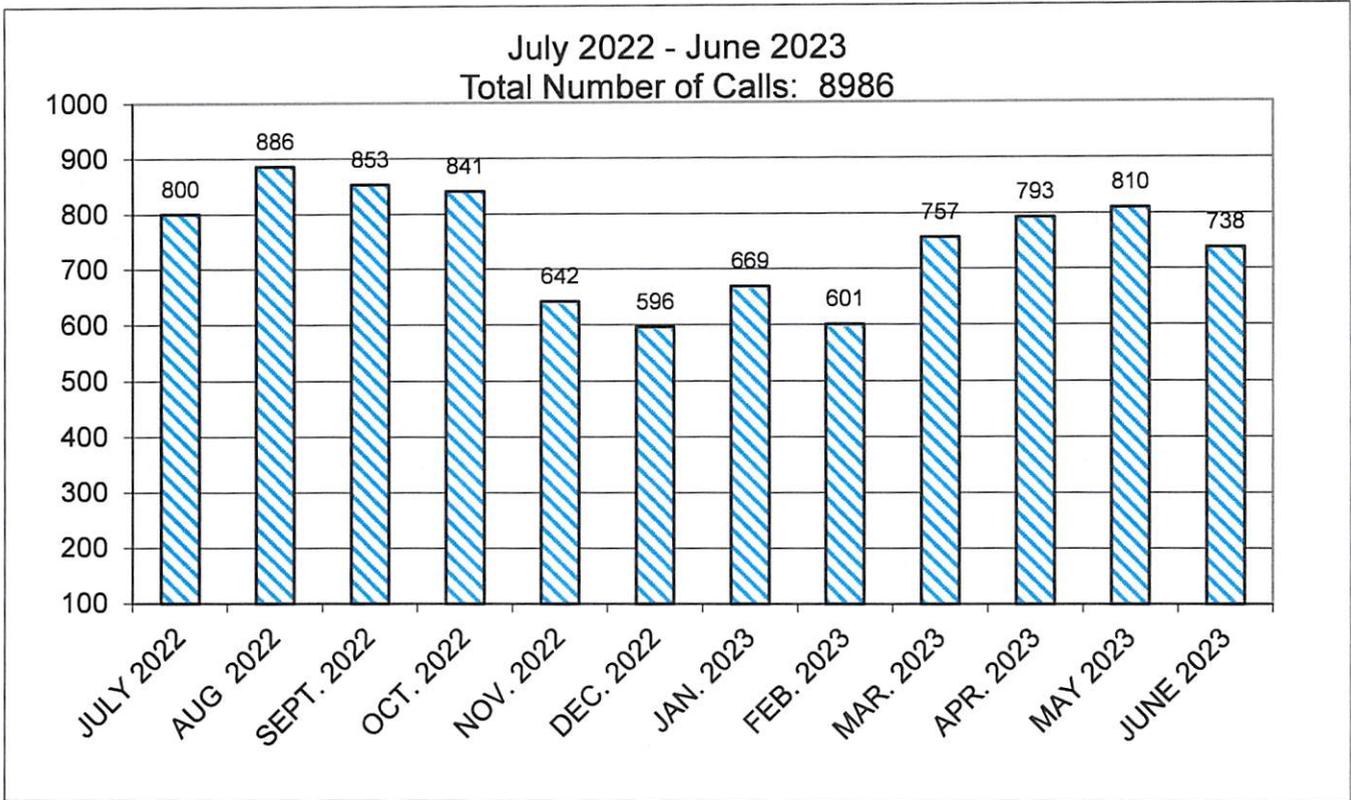
# MONTHLY ACTIVITY REPORT



March 2024

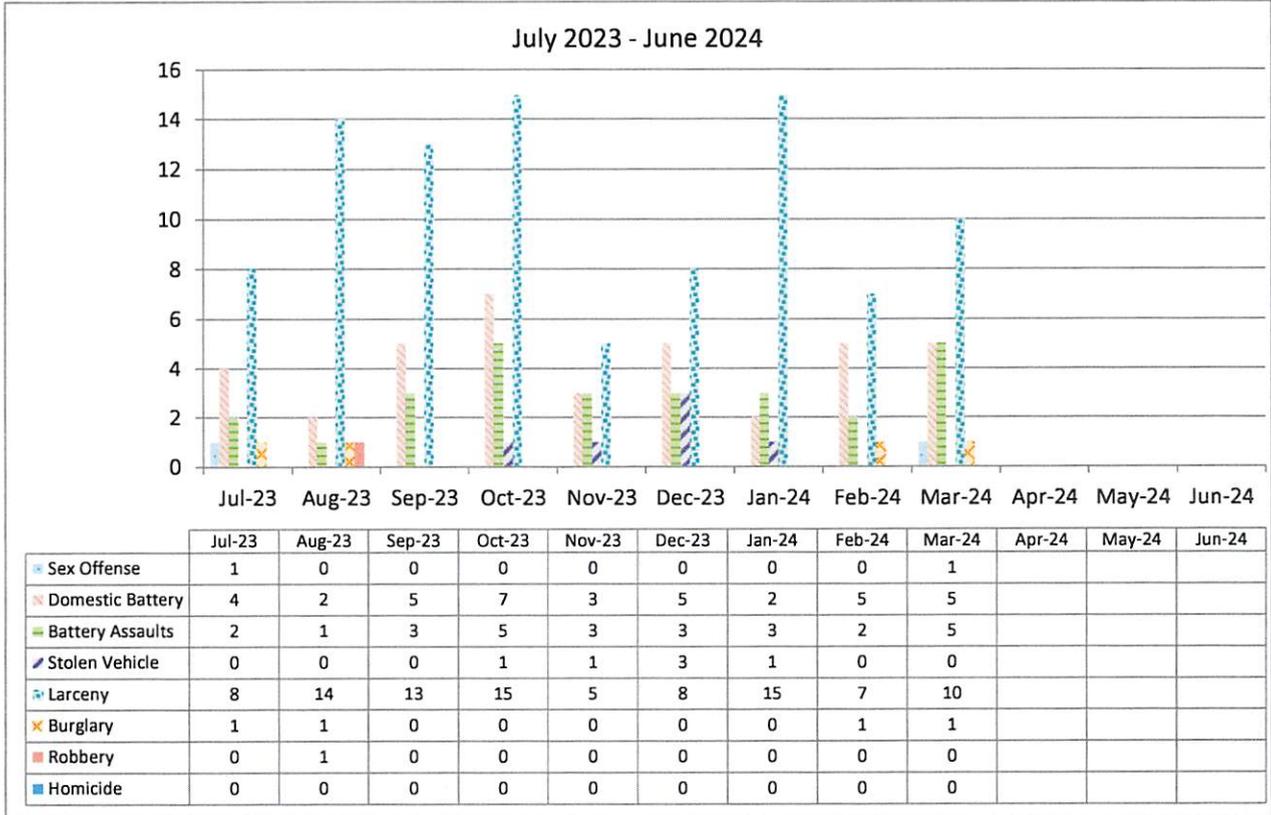
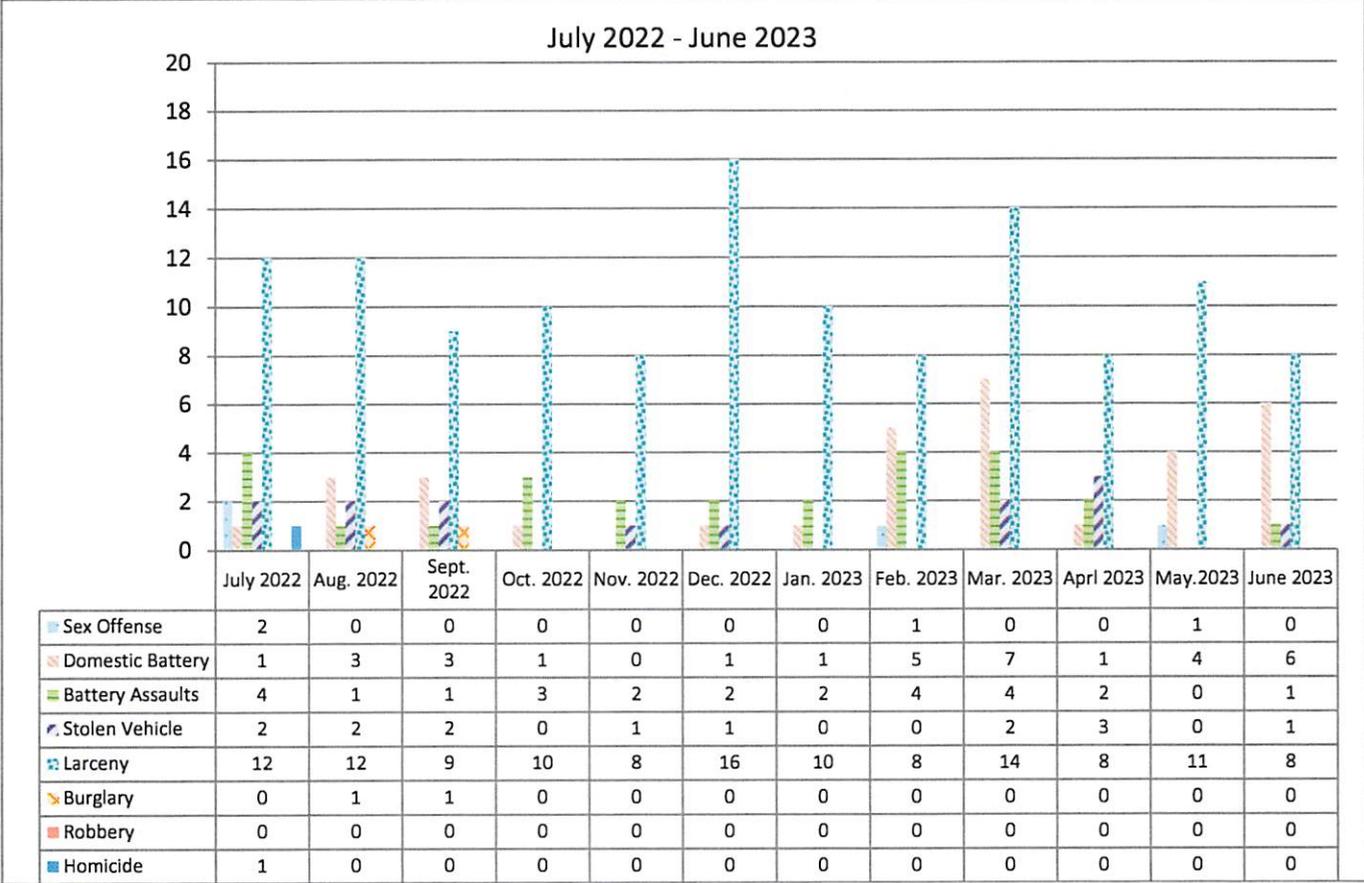
# Calls for Service / Total Incidents Reported

Item 10.



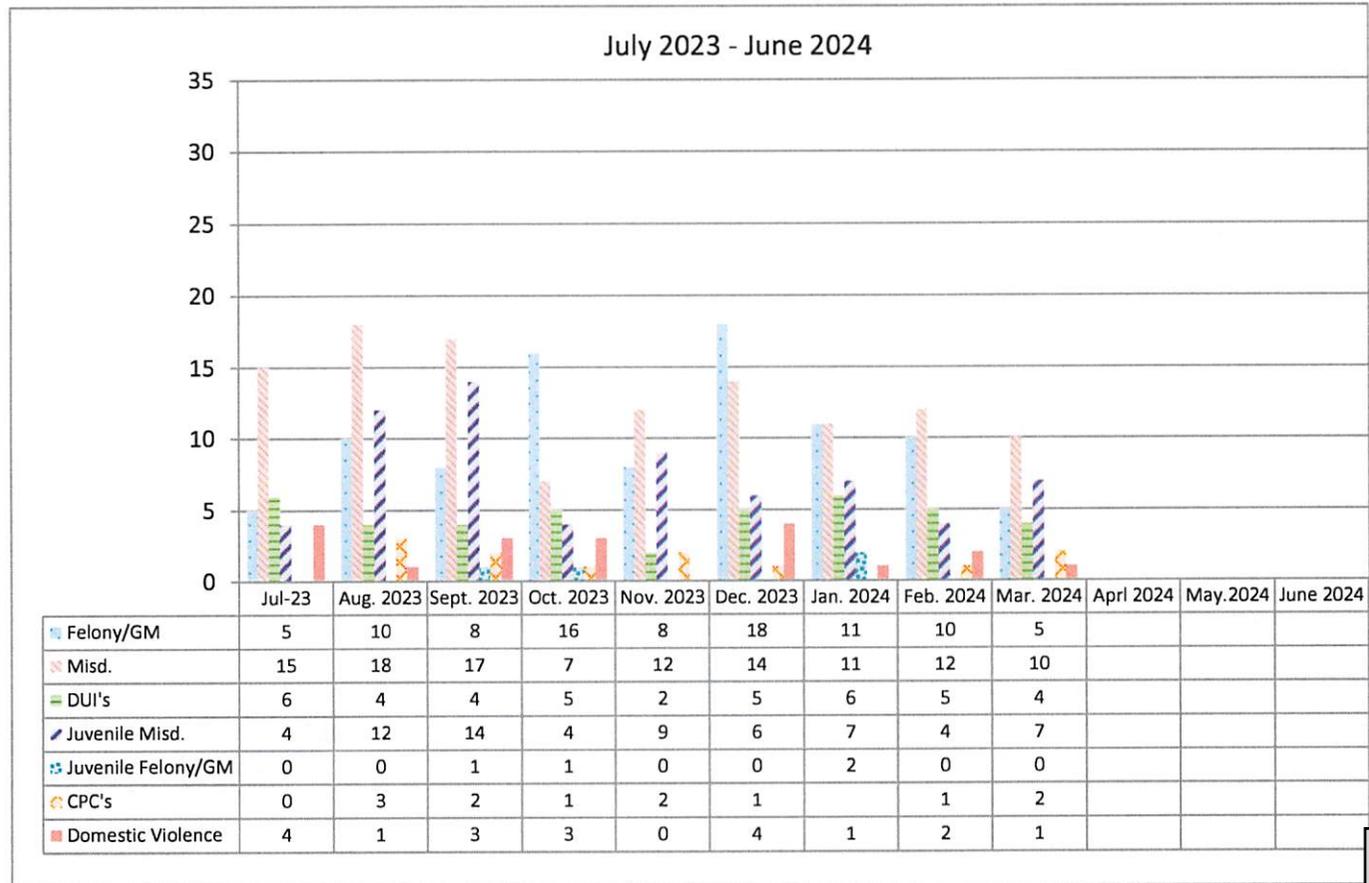
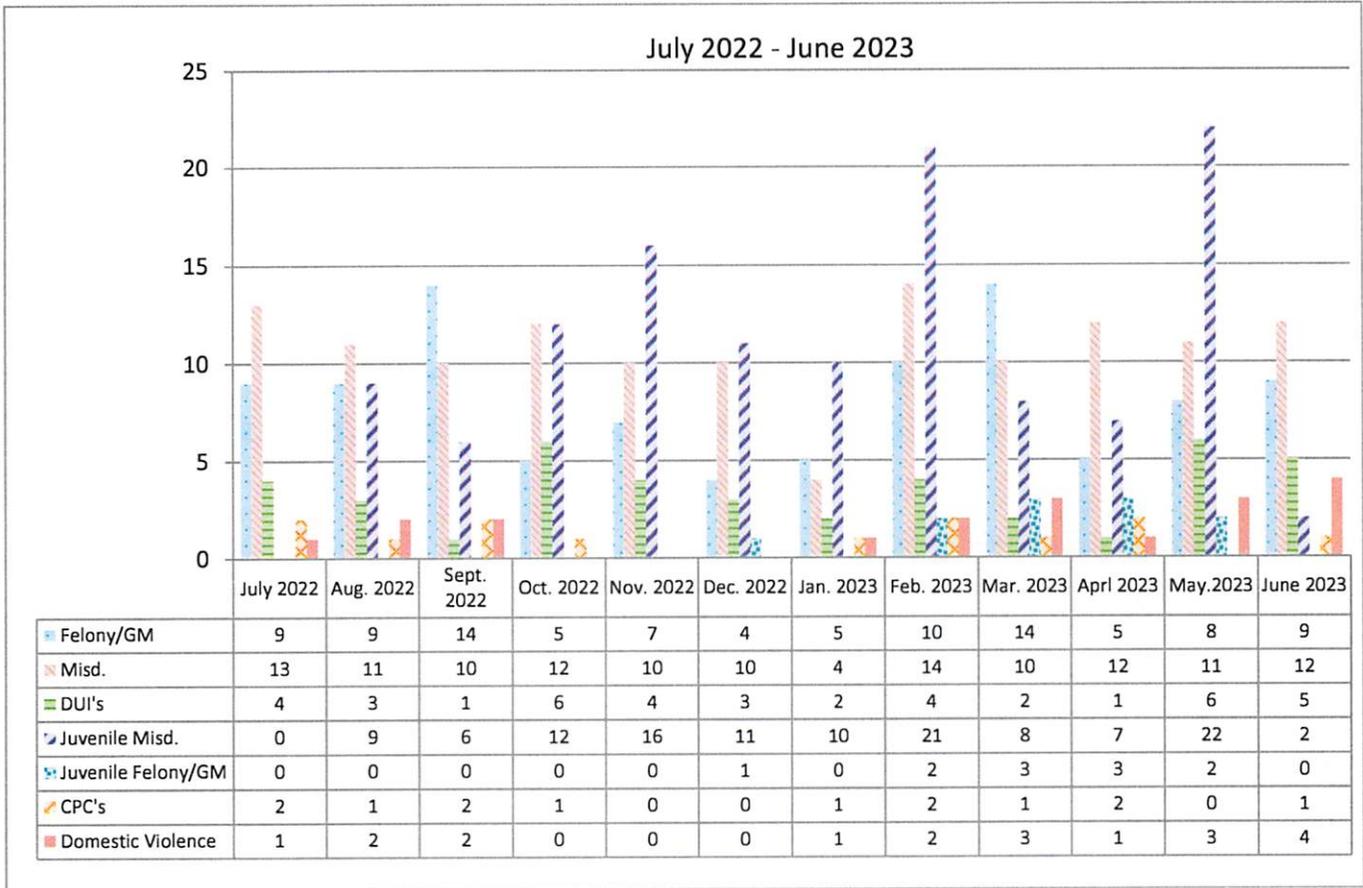
# Crime Summary

Item 10.



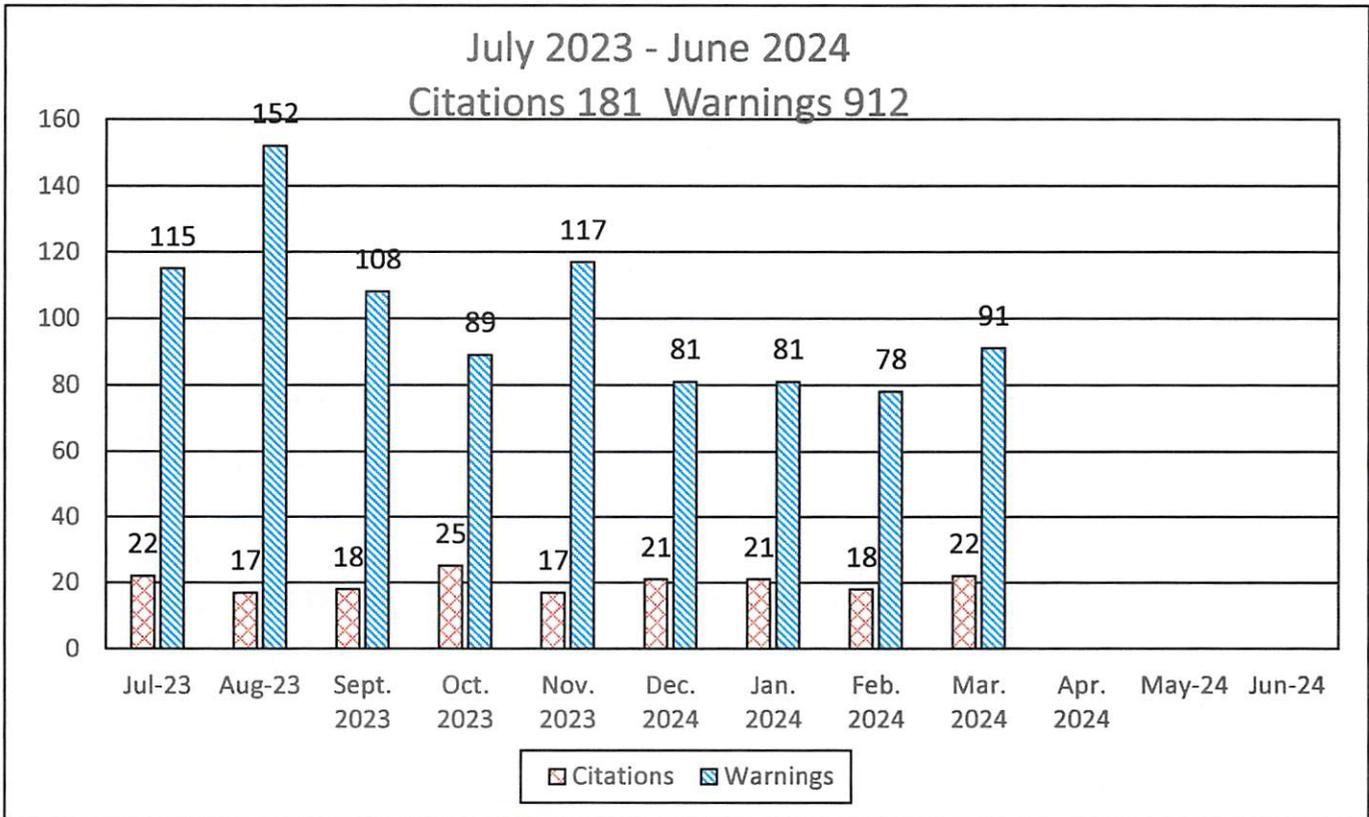
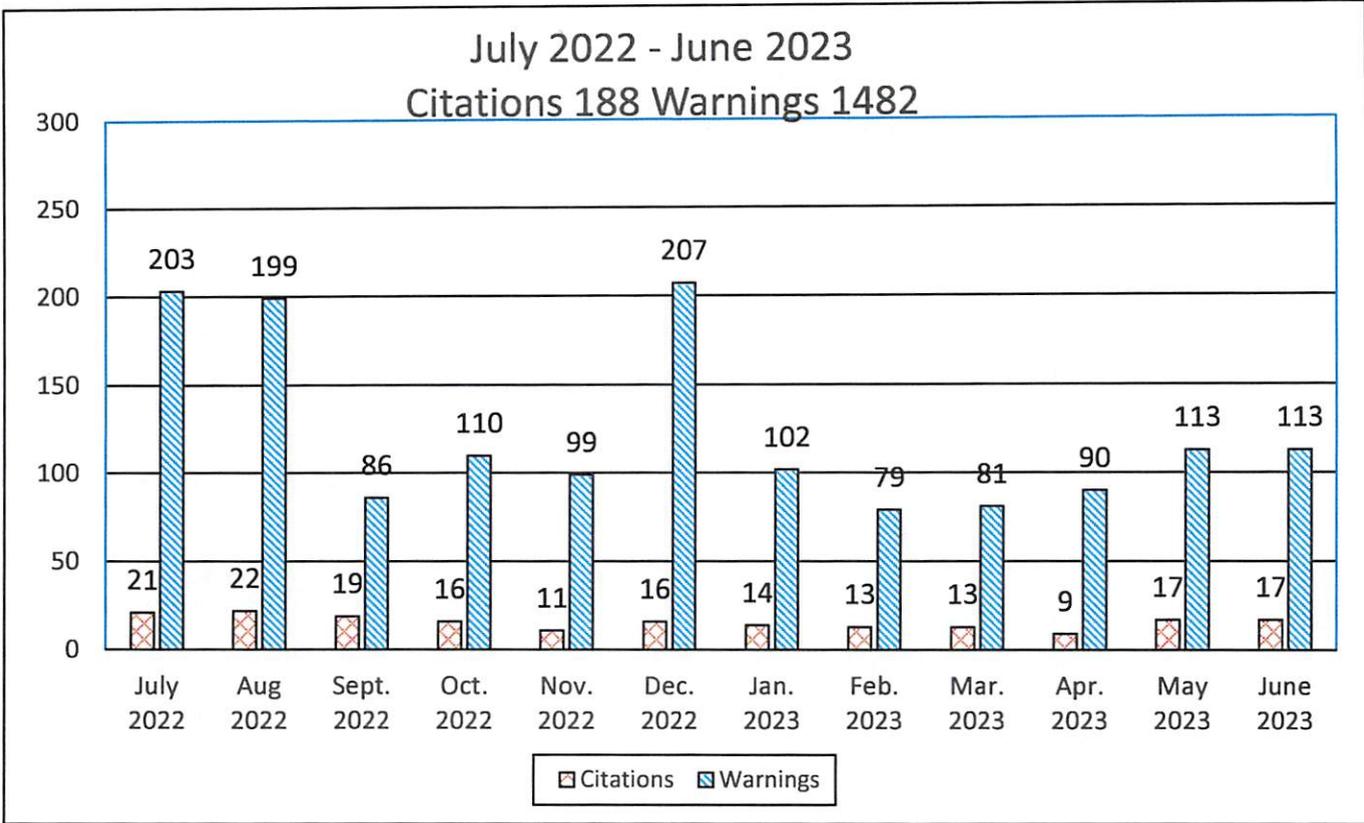
# Arrest Summary

Item 10.

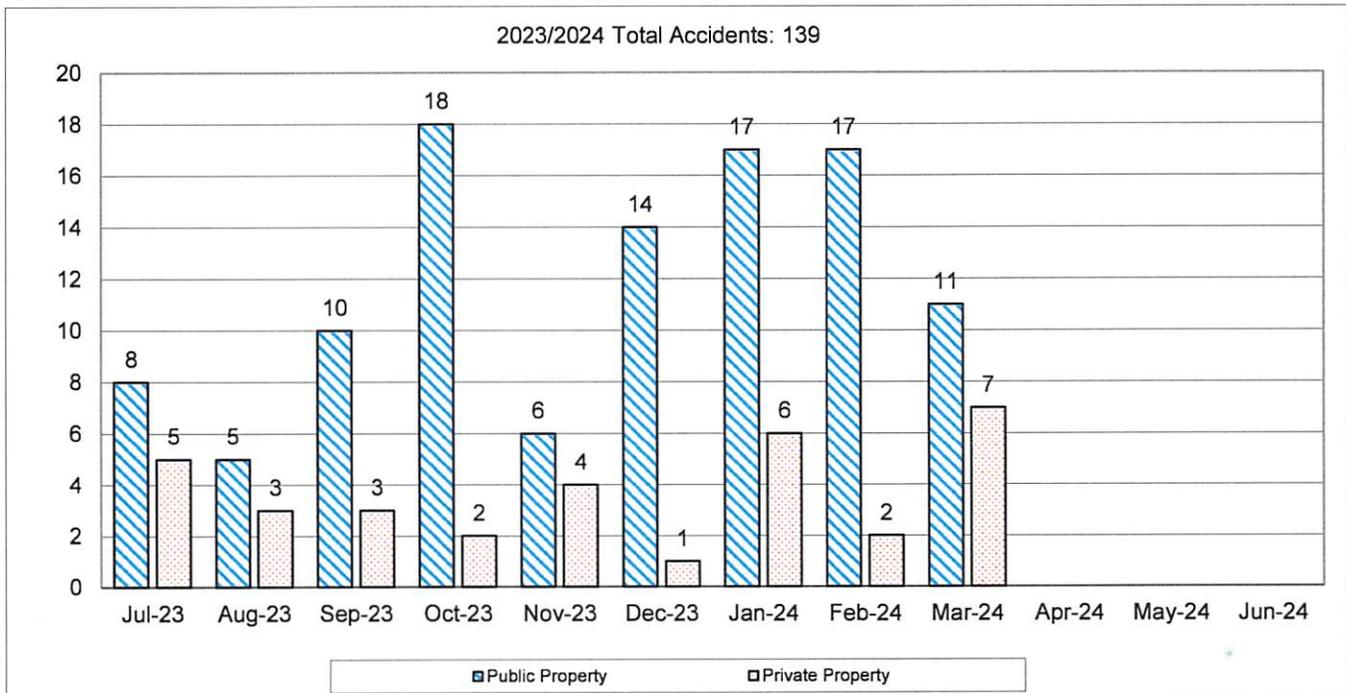
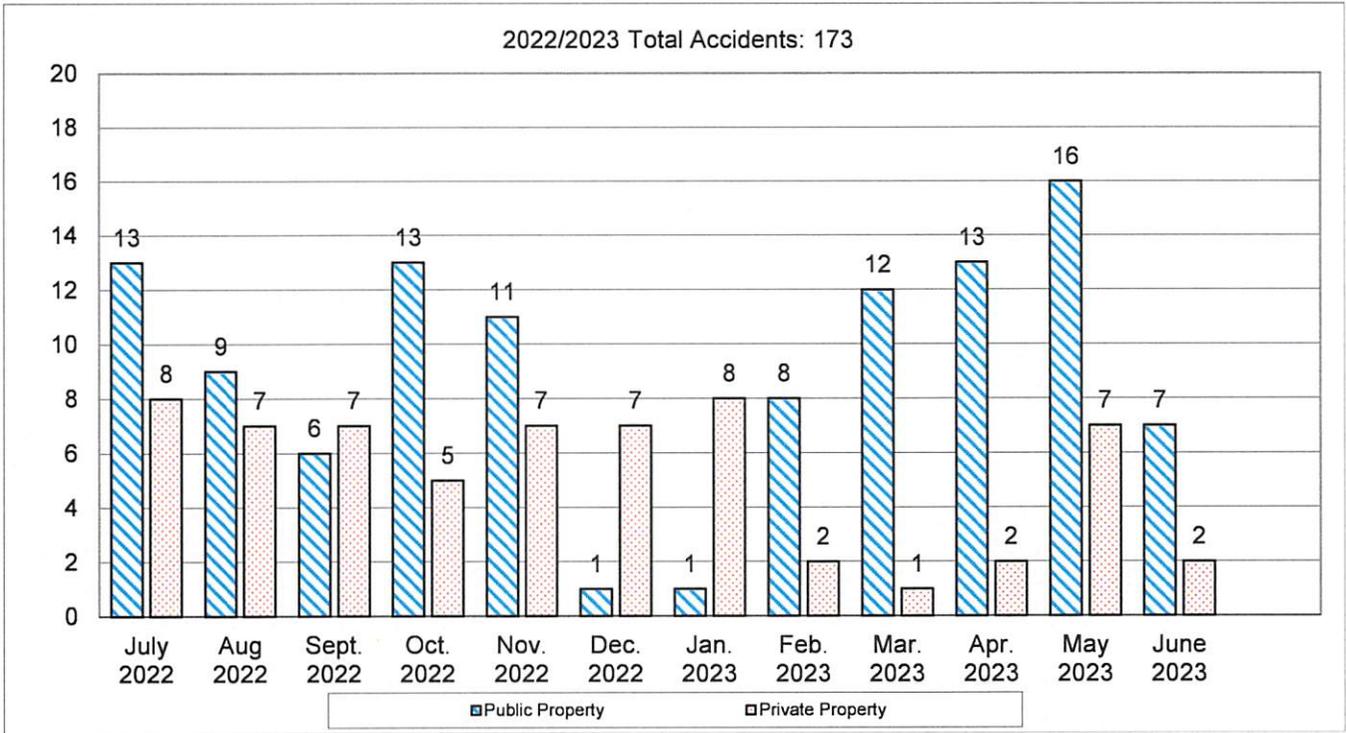


# Moving Citations Traffic Warnings

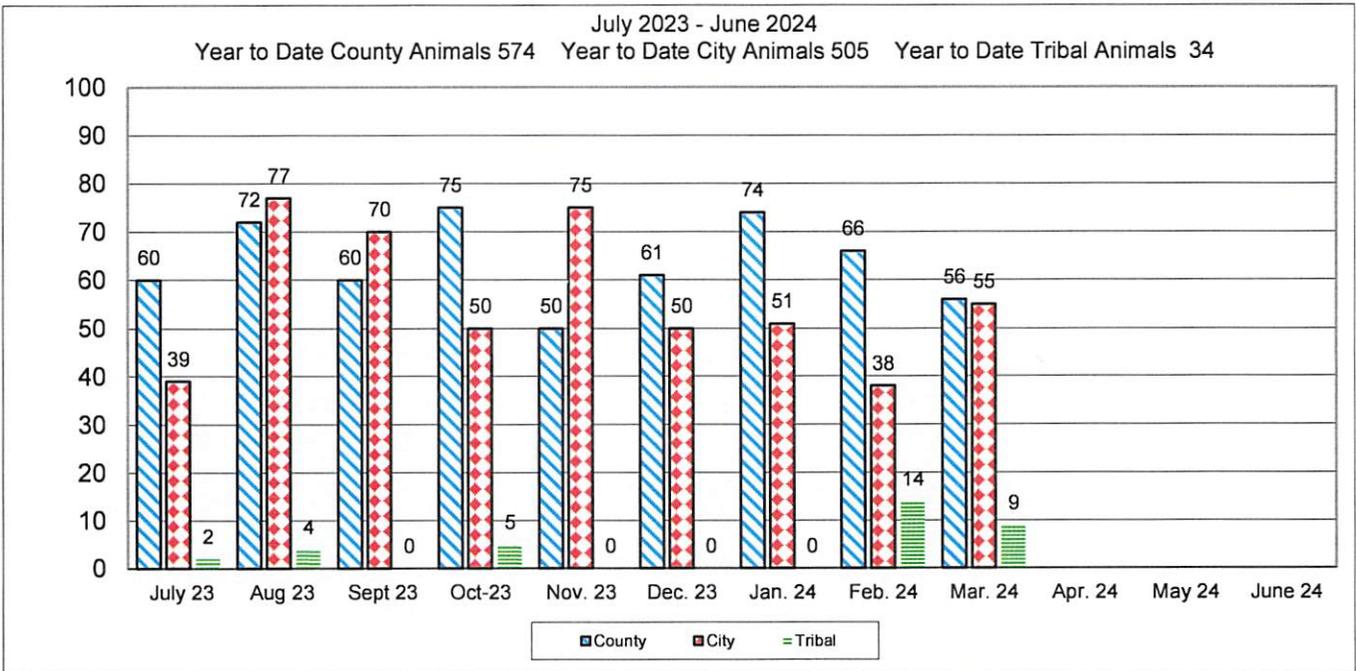
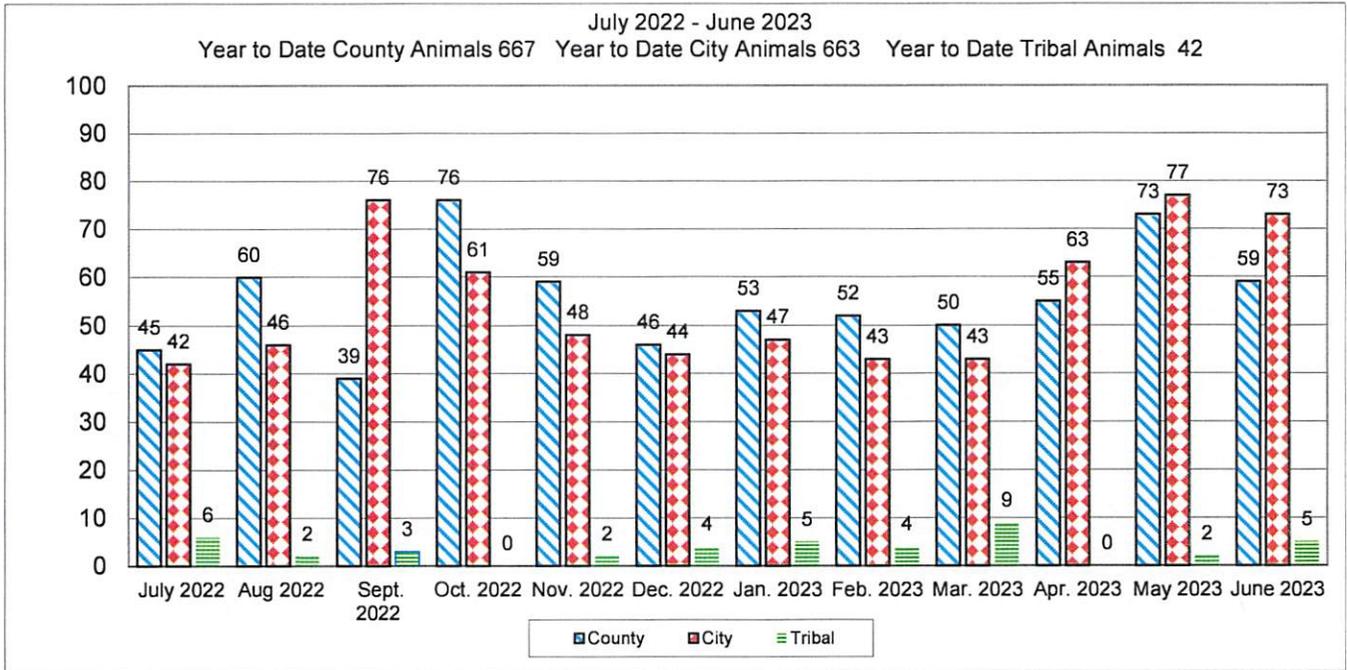
Item 10.



# Traffic Accidents



### Animal Shelter Services



**Fallon Police Department  
Activities / Special Events  
March 2024**

**ASSISTANCE**

During the month of March, we provided no (0) hotel rooms.

**INDOCTRINATION**

During the month of March, there was one (1) indoctrination at NAS Fallon.

**VOLUNTEERS IN POLICE SERVICES**

March 2024 the Fallon Police VIPs volunteered ninety-five (95.5) hours to the agency.

**OTHER PUBLIC RELATIONS**

During March officers conducted special detail for the following:

- On March 5<sup>th</sup>, 2024, officers provided traffic control for a fountain dye.
- On March 7<sup>th</sup>, 2024, Sergeant Bernard read to students at Lahontan Elementary School.
- On March 27<sup>th</sup>, 2024, Officer Edwards attended the Career Fair at the Fallon Youth Club.

**BREAKDOWN OF ARRESTS**

During the month of March, the Police Department had twenty-nine (29) total arrests:

- Of the four (4) felony arrests, three (3) were felony warrant arrests.
- There was one (1) gross misdemeanor warrant arrest.
- Of the ten (10) misdemeanor arrests, six (6) were misdemeanor warrant arrests.
- There were seven (7) juvenile arrests, all seven (7) were misdemeanor arrests.

**Fallon Police Department**  
**Citizen Survey Results**  
**March 2024**

When you contacted the Police Department, how satisfied were you with the ability of the dispatcher or employee that assisted you?

<b>VERY SATISFIED</b>	<b>SATISFIED</b>	<b>DISSATISFIED</b>	<b>NO OPINION</b>
3	1		

Were you satisfied with the courtesy and concern shown by the dispatcher or employee?

<b>VERY SATISFIED</b>	<b>SATISFIED</b>	<b>DISSATISFIED</b>	<b>NO OPINION</b>
3	1		

Are you satisfied with the Police Department's response time?

<b>VERY SATISFIED</b>	<b>SATISFIED</b>	<b>DISSATISFIED</b>	<b>NO OPINION</b>
4			

Regarding your most recent contact, please rate the Officer in the following areas:

Officer name (s) Sgt. Schumann & Ofc. Itskin

Dispatcher (s) \_\_\_\_\_

	<b>VERY SATISFIED</b>	<b>SATISFIED</b>	<b>DISSATISFIED</b>	<b>NO OPINION</b>
<b>Concern</b>	4			
<b>Courtesy</b>	4			
<b>Knowledge</b>	4			
<b>Problem Solving Ability</b>	4			
<b>Professional Conduct</b>	4			

Overall, how satisfied are you with the Fallon Police Department?

<b>VERY SATISFIED</b>	<b>SATISFIED</b>	<b>DISSATISFIED</b>	<b>NO OPINION</b>
3	1		

**Fallon Police Department**  
**March 2024**

**Citizen Survey Comments**

- I was out of town and received notification from my home security system about movement in my driveway. Sgt. Schumann responded and called me swiftly with an update. I'm impressed with the prompt service and professionalism.
- The officer was very kind & patient.



## Activity Report for March 2024

<b>Total Service Hours</b>	<b>95.5</b>
<b>Training Hours</b>	<b>0</b>
<b>Helping Hand Contacts</b>	<b>16</b>
<b><i>Vin Inspections</i></b>	<b>3</b>
<b><u>Other Assignments:</u></b> <b><i>Helping Hand</i></b>	<b><i>10.0 hours</i></b>