AGENDA

CITY COUNCIL SPECIAL MEETING

55 West Williams Avenue Fallon, NV

December 05, 2025 at 9:00 AM

The Honorable City Council will meet in a special meeting on December 5, 2025 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. Consideration of application by Colleen Tschumperlin for a drinking establishment (on-premise) liquor license and a retail establishment (off-premise) liquor license for Bites and Bottles LLC to be located at 65 South Maine Street. **(For possible action)**

5. Public Comments **(For discussion only)**

6. Council and Staff Reports **(For discussion only)**

This agenda has been posted on or before 9:00 a.m. on December 2, 2025 at City Hall, City's website (https://fallonnevada.gov) and the State of Nevada public notice website (https://notice.nv.gov/).

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/) or by contacting Elsie Lee, Deputy City Clerk, City Clerk's Office, City Hall, 55 West Williams Avenue, Fallon, Nevada, 775-423-5104

/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:	December 1, 2025
AGENDA DATE:	December 5, 2025
TO:	The Honorable City Council
FROM:	Elsie Lee, Deputy City Clerk
AGENDA ITEM TITLE:	Consideration of application by Colleen Tschumperlin for a drinking establishment (on-premise) liquor license and a retail establishment (off-premise) liquor license for Bites and Bottles LLC to be located at 65 South Maine Street. **(For possible action)**

TYPE OF ACTION REQUESTED:

- ☐ Resolution
- ☐ Ordinance
- ☒ Formal Action/Motion
- ☐ 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 Colleen Tschumperlin for Bites and Bottles LLC to be located at 65 South Maine Street.

DISCUSSION: Colleen Tschumperlin, Owner of Bites and Bottles LLC has made an application for a drinking establishment (on-premise) liquor license and a retail establishment (off-premise) liquor license for Bites and Bottles LLC to be located at 65 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. 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 Daniel Babiarz, Chief of Staff Bob Erickson, 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

LIQUOR LICENSE APPLICATION

Application Type: ☐ New ☒ Owner Change ☐ Manager Change ☐ Location Change

Applicant Name: Tschumperlin, Colleen J. (Last / First / MI) Application Date: 11-25-25

Title: Owner Phone: (760) 445-3675

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
7/2021 - Present	710 W A St	Fallon	NV	89406
6/2003-7/2021	1008 Hanson Ln	Ramona	CA	92065

Business Entity Type: ☐ Sole Proprietor ☐ Partnership ☒ Limited Liability Company ☐ DBA ☐ Corporation ☐ Association ☐ Other:

Business Name: Bites and Bottles

Business Owner(s):

Name	Address	Title
Colleen Tschumperlin	710 W A St	Owner
Bron Tschumperlin	710 W A St	Owner

Business Address: 65 S 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: (Attach drawing of layout)
Restaurant serving paninis, charcuterie boards, wine, mead, ciders, and sodas.

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

Name of the owner of the premises: Danny Burroughs

Name of the owner's authorized agent, if any: Rogne Realty

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

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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
Wende Steele	707-396-3822	Friend
Dave Steele	775-471-3920	Friend
Jaime Sammons	775-342-9463	Friend
Chasity Mills	775-857-9165	Friend
Bradley Bennett	775-427-1569	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.

CJ Dachumpelin
Applicant's Signature

CITY OF FALLON CLERK'S OFFICE

55 West Williams Avenue, Fallon, Nevada 89406
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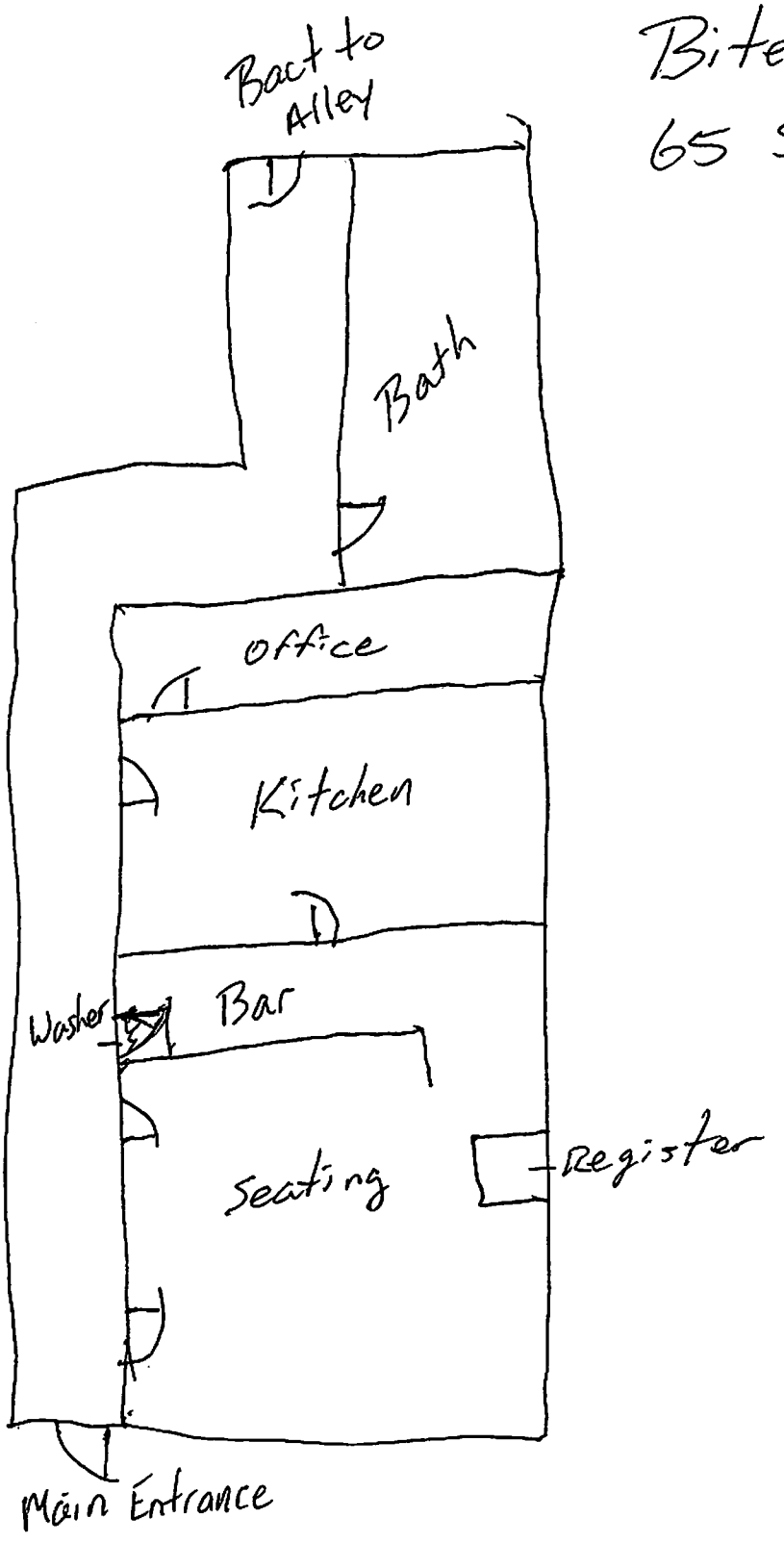
AUTHORIZATION AND RELEASE

I, Colleen Tschumperlin, 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.

C Tschumperlin
Applicant's Signature

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

Bites & Bottles
65 S Main St.



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

Daniel Babiarz
Chief of Police

November 26, 2025

This letter certifies that Colleen J. Tschumperlin, Bites and Bottles, located at 65 South Maine Street, Fallon, NV 89406, has completed and passed her background check for a liquor license.

Additionally, I have met with the applicant regarding components of the Fallon Municipal Code concerning alcoholic beverage sales, as well as her responsibilities as the holder of the liquor license.

Furthermore, there is a supplemental form that specifically addresses the operation of the business, including identifying the on-site manager, and acknowledgments from the applicant indicating understanding that she may be held personally responsible for improper business practices.

Sincerely,

Daniel Babiarz
Chief of Police

Liquor License Application Interview Supplement

APPLICANT: Tschumperlin, Colleen **DATE 11/26/2025**

BUSINESS NAME: Bites and Bottles, 65 South Maine Street, Fallon, NV 89406

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 for notifying the City Clerk's Office. Initials CT

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

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 CT

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 CT

Witness: Daniel Babiarz, Chief of Police

CITY OF FALLON CLERK'S OFFICE

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Privilege License Supplemental Approval Form

Application Date: 11/25/2025

Applicant: Colleen Tschumplerlin

Business: Bites and Bottles, LLC

License Type: Liquor License (Retail & Drinking Establishment)

Application Type: ☐ New ☑ Owner Change ☐ Name Change ☐ Manager Change ☐ Location Change

OFFICIAL USE ONLY

City of Fallon	Approve	Approve with Conditions	Disapprove
Chief of Police			
Chief of Staff			
Engineering/Building Department			
Attorney's Office			
City Clerk's Office			
Fallon/Churchill Fire Dept			

Conditions required for approval: _____

Committee recommendation for application: Approved Approved with Conditions Disapproved

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