



**AGENDA**  
**CITY COUNCIL MEETING**  
**55 West Williams Avenue Fallon, NV**  
**December 03, 2024 at 9:00 AM**

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The Honorable City Council will meet in a regularly scheduled meeting on December 3, 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 Melanie Ludlow for a mobile food vendor license for Fizz'n. **(For possible action)**
6. Consideration of application by Joshua Williams for an on-premise drinking establishment liquor license for Krab Kings Fallon LLC to be located at 40 E. Center Street. **(For possible action)**

7. Consideration of application by Whyntee Fain for an on-premises drinking establishment liquor license for Grey Area Productions dba: Troys Double Shot Bar & Catering, a mobile bar and beverage service, based at 2955 Rice Road, Fallon Nevada... **(For possible action)**
8. Public Comments **(For discussion only)**
9. Council and Staff Reports **(For discussion only)**

This agenda has been posted on or before 9:00 a.m. on November 26, 2024 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

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DATE SUBMITTED: November 22, 2024  
 AGENDA DATE: December 3, 2024  
 TO: The Honorable City Council  
 FROM: Elsie Lee, Deputy City Clerk  
 AGENDA ITEM TITLE: Consideration of application by Melanie Ludlow for a mobile food vendor license for Fizz’n. **(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 Melanie Ludlow for Fizz’n.

**DISCUSSION:** Melanie Ludlow, owner of Fizz’n has made an application for a mobile food vendor license for Fizz’n. 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 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 mobile food vendor license fee revenue.

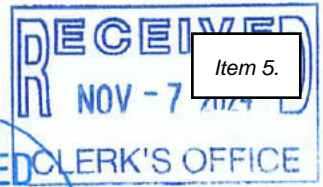
**FUNDING SOURCE:** N/A.

**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 5.

## MOBILE FOOD VENDOR LICENSE APPLICATION

Application Type:  New  Renewal  Modify

Applicant Name: Ludlow Melanie  
Last First MI

Application Date: 9/24/24

Title: Fizz'n (owner)

Phone: 775 276 8618

Email: meleniebunker@gmail.com

Address: 1160 Rosewood Dr.

Date of Birth:

Driver's License Number:

Driver's License State:

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

Business Name: Fizz'n

### Business Owner(s):

Name	Address	Title
Melanie Ludlow	1160 Rosewood Dr.	owner

Business Address (if applicable): 1160 Rosewood Dr. 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:

(part-time) small mobile snack trailer selling soda, baked goods & popcorn at pop up locations in city & county (with owner's permission)  
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
<u>7/1/2023</u>	<u>Sierra Financial</u>	<u>601-D S Maine St</u>	<u>Fallon</u>	<u>NV</u>	<u>89406</u>

NAME # 2212.3 4



# 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
2009	Honda	Pilot	252ZTP

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

### Health Permit:

A copy of proof of Central Nevada Health District 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, Melanie Ludlow, 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		_____	_____
Engineering/Building Department		_____	_____
Attorney's Office		_____	_____
City Clerk's Office		_____	_____
Fallon/Churchill Fire Dept		_____	_____
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:

CERTIFICATE OF FICTITIOUS BUSINESS NAME

\*\*THIS CERTIFICATE EXPIRES 5 YEARS FROM FILE DATE\*\*



NEW



RENEWAL OR REPLACE EXISTING

FILED

SEP 20 2024

LINDA POTTERY, Clerk  
By [Signature]

STATE OF NEVADA )  
                          ) ss.  
COUNTY OF CHURCHILL )

(PRIOR RELATED FILING NUMBER)

I / We hereby certify that I / We are conducting a mobile food trailer

business in the City of Fallon and / or the County of Churchill, State of Nevada, under a designation not showing the name(s) of the person(s) interested in conducting or carrying on said business in the City of Fallon and/or the County of Churchill, State of Nevada, under the designation not showing the name(s) of the person(s) interested in carrying on such business under the fictitious name of:

Ludlow Enterprises LLC dba FiZZ'n  
(FICTITIOUS BUSINESS NAME)

1160 Rosewood Dr Fallon NV 89406  
(BUSINESS STREET ADDRESS) 775 276 8618  
(BUSINESS PHONE/EMAIL)

The name(s) of the person(s) interested in or carrying on such business:

(1) Melanie Ludlow  
(NAME OF INTERESTED PARTY - TYPE/PRINT)  
1160 Rosewood Dr  
(BUSINESS OR RESIDENCE ADDRESS)  
Fallon NV 89406  
(CITY, STATE, ZIP)

(3) \_\_\_\_\_  
(NAME OF INTERESTED PARTY - TYPE/PRINT)  
\_\_\_\_\_  
(BUSINESS OR RESIDENCE ADDRESS)  
\_\_\_\_\_  
(CITY, STATE, ZIP)

(2) \_\_\_\_\_  
(NAME OF INTERESTED PARTY - TYPE/PRINT)  
\_\_\_\_\_  
(BUSINESS OR RESIDENCE ADDRESS)  
\_\_\_\_\_  
(CITY, STATE, ZIP)

(4) \_\_\_\_\_  
(NAME OF INTERESTED PARTY - TYPE/PRINT)  
\_\_\_\_\_  
(BUSINESS OR RESIDENCE ADDRESS)  
\_\_\_\_\_  
(CITY, STATE, ZIP)

SIGNATURE OF: OWNER, PARTNER OR AUTHORIZED OFFICER AND TITLE

(1) [Signature] owner  
(2) \_\_\_\_\_

(3) \_\_\_\_\_  
(4) \_\_\_\_\_

STATE OF NEVADA )  
                          ) ss.  
COUNTY OF CHURCHILL )

On this 20<sup>th</sup> day of September, 2024, before me personally appeared Melanie Ludlow

known to me to be the person(s) described in and who executed the foregoing instrument, who acknowledged to me that she executed the same freely and voluntarily, and for the uses and purposes therein stated.

In witness whereof I have hereunto set my hand and affixed my official seal this 20<sup>th</sup> day of September 2024

[Signature]  
Notary Public/Deputy County Clerk  
Churchill County, Nevada

# Central Nevada Health District

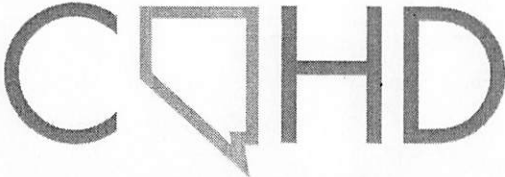
## Food Establishment Health Permit

*Issued To*

Fizz'N  
1160 Rosewood DR  
Fallon, NV 89406

Be it known this Mobile Units facility is licensed to operate in Churchill County, State of Nevada and is subject to the provisions of the Central Nevada Health District Sanitation Ordinance.

Issuance Date 10/11/2024  
Expiration Date 10/31/2025  
Permit Number 24-300



CENTRAL NEVADA  
HEALTH DISTRICT

*Dären Winkelman*

Public Health Administrator

THIS PERMIT IS NOT TRANSFERABLE AND MUST BE PROMINENTLY DISPLAYED





STATE OF NEVADA CONSUMER USE TAX PERMIT
DEPARTMENT OF TAXATION

Item 5.

Taxpayer ID: 1044589760-001
Correspondence ID: 2300016043340
Date: 09/12/2023

LUDLOW ENTERPRISES LLC
SIERRA FINANCIAL
309 E JOHN ST STE 2
CARSON CITY NV 89706-3071

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.

Permit Location:
SIERRA FINANCIAL
601 S MAINE ST STE D
FALLON NV 89406-3800

Is registered as a Consumer and not authorized to make
purchases for resale.

(Detach Here)

Attached is your Nevada Consumer Use 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 annual.

As stated on the application, your business start date is 07/01/2023, making your first remittance due on or before 01/31/2024.

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 http://nevadatax.nv.gov/. Businesses can file tax returns, make payments, and view financials associated with their Sales and Use Tax, Modified Business Tax accounts, as well as make payments for other tax types.

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: 12F4BC27-7E68-4FCD-B6CD-EBE7AE3B4062.

The Nevada Consumer Use Tax Permit has been issued pursuant to an application duly filed and payment of prescribed fees, if any. This Consumer Use Tax Permit is subject to the provisions of Nevada Revised Statute 360. This Consumer Use Tax Permit shall be considered valid unless canceled, suspended or revoked for good cause in accordance with Title 32.

If you have questions concerning the permit please call our Department's Call Center at (866) 962-3707

DISTRICT OFFICE LOCATIONS

Table with 4 columns: CARSON CITY MAIN OFFICE, LAS VEGAS OFFICE, HENDERSON OFFICE, RENO OFFICE. Each column contains address and contact information for that office.



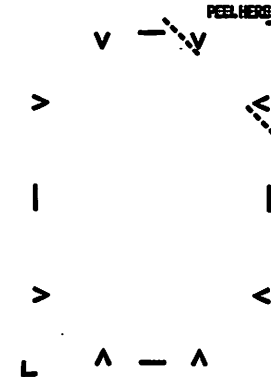
Department of Motor Vehicles  
555 Wright Way  
Carson City, NV 89711-0625  
(775) 684-4368

**2025** EXPIRES  
2/28/2025

LICENSE NUMBER <b>252ZTP</b>	YEAR <b>2009</b>	MAKE <b>HOND</b>	TYPE <b>T4W</b>	CYL <b>6</b>	MSRP <b>39955.00</b>	FUEL <b>G</b>	AXLE <b>2</b>	DECLARED WEIGHT <b>5999</b>	UNLADEN WEIGHT <b>4608</b>	
VEHICLE IDENTIFICATION NUMBER <b>5FNYP48949B041080</b>			MODEL NAME/LENGTH <b>PILOT TOURING</b>				COUNTY BASED <b>CHURCHILL</b>			
ISSUE DATE <b>2/29/2024</b>	FLEET NUMBER	UNIT NUMBER	FARM/RANCH VEHICLE <b>N</b>	DECAL NUMBER <b>252ZTP</b>	PLATE BACKGROUND <b>HOME MEANS NEVADA</b>					

LUDLOW, MELANIE BUNKER (REGD)

LUDLOW, MELANIE BUNKER  
1160 ROSEWOOD DR  
FALLON NV 89406-5217



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 175332195 - 3088 - 9354

# FALLON POLICE DEPARTMENT

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


Ron Wenger  
Chief of Police

November 18, 2024

This letter certifies that Ms. Melanie Ludlow, of 1160 Rosewood Drive, Fallon Nevada 89406, owner of “Fizz’n” Mobile Food Trailer has completed application and has passed the limited background check, including a local records check, CPClear and DMV Database checks, for operating a mobile food vending truck/trailer within the City of Fallon.

I have interviewed Ms Ludlow about the laws regarding Mobile Food Venders and have provided her with a copy of the Fallon Municipal Code pertaining to these laws. Ms. Ludlow has indicated on her application that she has reviewed chapter 5.60 of the Fallon Municipal Code which specifically lists the laws regarding Mobile Food Vending platforms.

Sincerely,

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

**Mobile Food Vender License Application Interview Supplement**

APPLICANT Melanie Ludlow

DATE 11/18/2024

BUSINESS NAME – “Fizz’n”

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 *ML*

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

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 *ML*

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 *ML*

  
Witness: Ronald D Wenger, Chief of Police



# CITY OF FALLON

## REQUEST FOR COUNCIL ACTION

DATE SUBMITTED: November 22, 2024  
 AGENDA DATE: December 3, 2024  
 TO: The Honorable City Council  
 FROM: Elsie Lee, Deputy City Clerk  
 AGENDA ITEM TITLE: Consideration of application by Joshua Williams for an on-premise drinking establishment liquor license for Krab Kings Fallon LLC to be located at 40 E. Center Street. **(For possible action)**

**TYPE OF ACTION REQUESTED:**

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

**POSSIBLE COUNCIL ACTION:** Motion to approve application and to issue an on-premise drinking establishment liquor license to Joshua Williams for Krab Kings Fallon LLC to be located at 40 E. Center Street.

**DISCUSSION:** Joshua Williams, owner of Krab Kings Fallon LLC has made application for a drinking establishment liquor license for Krab Kings Fallon LLC at 40 E. Center 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 Deputy City Attorney Trent deBraga, City Engineer Derek Zimney, Chief Ron Wenger, 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
MAY 23	TIGER SUSHT	40 E CENTER ST FALLON NV	FALLON	NV	89406

Have you ever been issued a business or a liquor license?  Yes  No  
 If Yes, when? 2023 What Agency? CHURCHILL COUNTY

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:

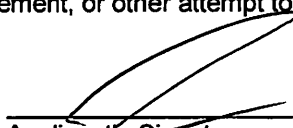
Date	Charge	Arresting Agency	Disposition
JAN 23	DIDNT RENEW REGISTRATION	FERNLEY	

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

Name	Phone	Relationship
BRIANNA VALDEZ	651 697 2998	FRIEND
PRISCILLA PONCE	775 276 8984	FRIEND
ATOM NGYUEN	213 357 7303	FRIEND
GILBER JAVIER	619 771 5193	FRIEND
JOHNES MENDOZA	254 338 9242	FRIEND

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

- That I have received and read a copy of Chapter 5.08 of the Fallon Municipal Code – Alcoholic Beverage Sales;
- 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
- 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, JOSHUA JAMES WILLIAMS, 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		_____	_____
Engineering/Building Department		_____	_____
Attorney's Office		_____	_____
City Clerk's Office		_____	_____
Fallon/Churchill Fire Dept		_____	_____
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:



# Liquor License Application Interview Supplement

APPLICANT Joshua Williams DATE 11/14/2024

BUSINESS NAME – Krab Kingz

40 E Center Street Fallon, Nv 89406

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

If not, the on-site supervisor will be VICTORIA SIMMONS

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

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

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 JW

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 JW

  
Witness: Ronald D Wenger, Chief of Police

# FALLON POLICE DEPARTMENT

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

Ron Wenger  
Chief of Police

November 14, 2024

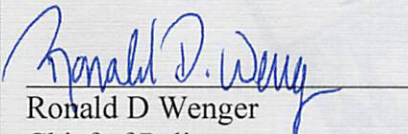
On November 5, 2024 the Fallon Police Department received an application for City Liquor License from Mr. Joshua Williams of 650 North Maine Street #308 in Fallon, Nevada 89406. Mr. Williams is the co-owner of Krab Kingz Fallon LLC and is seeking a city liquor license to sell On Premise at his restaurant located at 40 East Center Street within the City limits of Fallon Nevada.

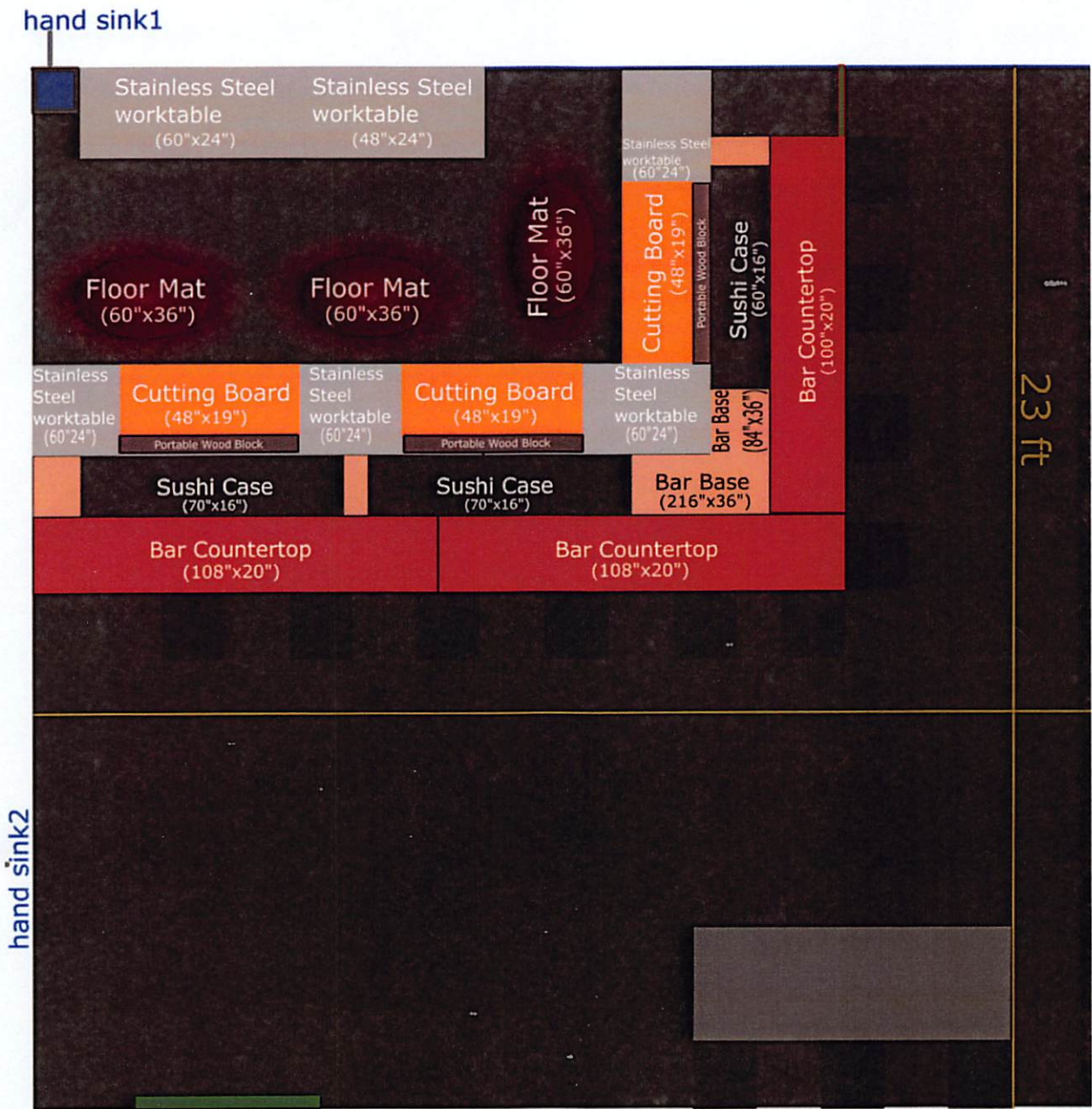
A review of Mr. Williams' references were all very favorable, with all speaking very highly of him.

I have performed a basic criminal background check which included the Fallon Police Local Database and CPClear. I found no criminal violations of law.

On November 4, 2024 I interviewed Mr. Williams about his application. I have provided a supplemental form in which Mr. Williams signed, indicating he understands his responsibilities as they relate to the laws regarding underage drinking.

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

  
Ronald D Wenger  
Chief of Police





# CITY OF FALLON

## REQUEST FOR COUNCIL ACTION

DATE SUBMITTED: November 22, 2024  
 AGENDA DATE: December 3, 2024  
 TO: The Honorable City Council  
 FROM: Elsie Lee, Deputy City Clerk  
 AGENDA ITEM TITLE: Consideration of application by Whyntee Fain for an on-premises drinking establishment liquor license for Grey Area Productions dba: Troys Double Shot Bar & Catering, a mobile bar and beverage service, based at 2955 Rice Road, Fallon Nevada... **(For possible action)**

**TYPE OF ACTION REQUESTED:**

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

**POSSIBLE COUNCIL ACTION:** Motion to approve application and to issue a conditional on-premises drinking establishment liquor license for the purpose of special events or private parties only to Whyntee Fain for Grey Area Productions dba: Troys Double Shot Bar & Catering, a mobile bar and beverage service, based at 2955 Rice Road, Fallon Nevada...

**DISCUSSION:** Whyntee Fain, owner of Grey Area Productions dba: Troys Double Shot Bar & Catering, a mobile bar and beverage service, has made application for an on-premises drinking establishment liquor license for Grey Area Productions dba: Troys Double Shot Bar & Catering based at 2955 Rice Road, Fallon Nevada., for special events and private parties. 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. Because the applicant is seeking an on-premises liquor license for the purposes of special events or private parties only, staff recommends a conditional on-premises drinking establishment liquor license that allows the applicant to sell liquor at special events and private parties only.

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.

**FISCAL IMPACT:** Annual drinking 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

nicole  
nicole  
why?

If Yes, list the business(es) you have owned or managed.					
Begin/End	Name	Address	City	State	Zip
2007-2008	Big Horn	1720 W. Williams	Fallon	NV	89406
2022 - Present	Fallon Family Medicine Clinic	1077 New River Pkwy	Fallon	NV	89406
2016 - Present	The Hair Affair	1730 W. Williams	Fallon	NV	89406

Have you ever been issued a business or a liquor license?  Yes  No  
 If Yes, when? 2006, Plus All Temporaries <sup>40 years</sup> What Agency? City, Churchill Co

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: owned a bar establishment, trained years ago, out of Reno.

Have you ever been arrested?  Yes  No  
 If Yes, provide the following information:

Date	Charge	Arresting Agency	Disposition
2010	[REDACTED]	[REDACTED]	Community Service

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

Name	Phone	Relationship
Theresa Buchanan	775-217-4757	Friend
Jerry Nunez	775-302-6185	Friend
Ginger Numphrey (DQ) Kayla Carey	775-423-4277	Employer Friend
Lana Navag Tyler Carey	775-426-8483	Employer/friend
Reynaldo Navag Alda Bunker	775-426-8864	Employer/friend

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

- That I have received and read a copy of Chapter 5.08 of the Fallon Municipal Code – Alcoholic Beverage Sales;
- 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
- 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.

Diana Rogre 775-842-3572  
 Stacy Ponce 775-223-0067

Why? [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, Whytnee Fair, 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.

Whytnee Fair  
Applicant's Signature

OFFICIAL USE ONLY		
10 Print Card _____	Spillman Entry _____	<u>Small D. Wong</u> Recommended by Chief of Police or Designee
Photo _____		
Local records _____ <u>RW</u>		Not Recommended by Chief of Police or Designee
NCJIS _____ <u>RW N/A</u>		
Municipal Code _____ <u>RW</u>		
Fee \$ _____		
REVIEWED BY:		
City of Fallon Engineering/Building Department _____	<u>RW</u>	Date: <u>11/22/24</u>
City of Fallon Chief of Police _____	<u>Small D. Wong</u>	Date: <u>11/4/24</u>
City of Fallon/Churchill County Fire Dept. _____	<u>[Signature]</u>	Date: <u>11-21-24</u>
City of Fallon Attorney's Office _____	<u>[Signature]</u>	Date: <u>11-23-24</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

November 4, 2024

On September 20, 2024 the Fallon Police Department received an application for City Liquor License from Ms. Whytnee Fain of 342 Crystal Court in Fallon, Nevada 89406. Ms. Fain is the co-owner of Grey Area Productions DBA Troy's Double Shot Bar and Catering and is seeking a city liquor license to sell On Premise at Special Events within the City limits of Fallon Nevada.

A review of Ms. Fain's references were all very favorable, with all speaking very highly of her.

I have performed a basic criminal background check which included the Fallon Police Local Database and CPClear. I found no criminal violations of law.

On November 4, 2024 I interviewed Ms. Fain about her application. I have provided a supplemental form in which Ms. Fain signed, indicating she understands her responsibilities as they relate to the laws regarding underage drinking.

I have concluded that Ms. Fain has passed a limited background check.



Ronald D Wenger  
Chief of Police



# Liquor License Application Interview Supplement

APPLICANT Whytnee Fain DATE 11/4/2024

BUSINESS NAME – Grey Area Productions DBA

Troy's Double Shot Event Bar and Catering

342 Crystal Ct Fallon, Nv 89406

I (will) be the on-site supervisor.

If not, the on-site supervisor will be Nicole Mayer

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

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

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 WF

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 WF

Witness: Ronald D Wenger, Chief of Police