

**City of Palmer**  
**Action Memorandum No. 16-012**

**Subject:** City Council Statement of Non-objection to Liquor License #1195, for Iron Horse Liquor, Located at 606 South Alaska Street, Palmer

**Agenda of: January 26, 2016**

**Council Action:** No objection

**Originator Information:**

**Originator:** City Clerk  
**Date:** January 5, 2016      **Requested agenda date:** January 26, 2016

**Department Information √:**

Route to:	Department Director:	Signature:	Date:
_____	Community Development	_____	_____
_____	Finance	_____	_____
_____	Public Safety	_____	_____
_____	Public Works	_____	_____

**Approved for presentation by:**

	Signature:	Remarks:
City Manager	<u></u>	_____
City Attorney	<u></u>	_____
City Clerk	<u></u>	_____

**Certification of Funds:**

Total amount of funds listed in this legislation: \$ 0

This legislation (√):

Has no fiscal impact       Creates a positive impact in the amount of: \$ \_\_\_\_\_  
 Creates a negative impact in the amount of: \$ \_\_\_\_\_

Funds are (√):

Budgeted      Line item(s): \_\_\_\_\_  
 Not budgeted      Affected line item(s): \_\_\_\_\_

General fund unassigned balance (after requested budget modification): \$ \_\_\_\_\_

Enterprise unrestricted net position (after requested budget modification): \$ \_\_\_\_\_

Director of Finance Signature: 

**Attachment(s):**

- Review Form

**Summary statement:** The owner of Iron Horse Liquor has applied for renewal of their liquor license. State law requires local governing bodies to review requests pertaining to liquor licenses within their municipalities. The City may voice a non-objection or may file a protest to a request.

**Administration recommendation:** Authorize Action Memorandum 16-012.

# City of Palmer • Liquor License Review Form

**BUSINESS NAME:** Iron Horse Liquor

**OWNER:** Iron Horse Liquor, Inc.

**LICENSE TYPE:** Package Store

**LOCATION:** 606 S Alaska Street

*Route to: Department of Finance*

## *Department of Finance*

Sales Tax Current: √  Yes  No

If no, explain:

Utilities Current: √  Yes  No

If no, explain:

Special Assessments Current: √  Yes  No

If no, explain:

Other Comments:

  
\_\_\_\_\_  
Director, Department of Finance

12/29/15

\_\_\_\_\_  
Date

*Route to: Department of Community Development*

## *Department of Community Development*

Code Compliant: √  Yes  No

If no, explain:

Other Comments:

  
\_\_\_\_\_  
Director, Department of Community Development

12/29/2016

\_\_\_\_\_  
Date

**Route to: Department of Public Safety**

**Department of Public Safety**

Code Compliant:  Yes

No

If no, explain: \_\_\_\_\_  
\_\_\_\_\_

Other Comments: \_\_\_\_\_  
\_\_\_\_\_

 \_\_\_\_\_ 12-29-15  
Director, Department of Public Safety \_\_\_\_\_ Date

**Route to: City Manager's Office**

Other Comments: \_\_\_\_\_  
\_\_\_\_\_

 \_\_\_\_\_ 1-4-16  
City Manager \_\_\_\_\_ Date

**FORWARD TO COUNCIL FOR AGENDA OF: January 26, 2016**

**Route to: CLERK'S OFFICE**