

CITY OF MUSKEGON

CITY COMMISSION MEETING

OCTOBER 23, 2007

CITY COMMISSION CHAMBERS @ 5:30 P.M.

AGENDA

- CALL TO ORDER:
- PRAYER:
- PLEDGE OF ALLEGIANCE:
- ROLL CALL:
- HONORS AND AWARDS:
 - A. Employee Service Awards. CIVIL SERVICE
- INTRODUCTIONS/PRESENTATION:
- CONSENT AGENDA:
 - A. Approval of Minutes. CITY CLERK
 - B. Rescind the Vacation of the Undeveloped Portion of Frisbie Street. PLANNING & ECONOMIC DEVELOPMENT
 - C. Vacation of a Portion of Frisbie Street. PLANNING & ECONOMIC DEVELOPMENT
 - D. Liquor License Transfer Request for Captain Jack's, LLC, 1601 Beach. CITY CLERK
 - E. Liquor License Transfer Request for Amigos, Inc., 1848 E. Sherman. CITY CLERK
 - F. Liquor License Transfer Request for AGZ, Inc., 313 W. Laketon. CITY CLERK
- PUBLIC HEARINGS:
- COMMUNICATIONS:
- CITY MANAGER'S REPORT:
- UNFINISHED BUSINESS:
- NEW BUSINESS:
 - A. MERS Health Care Savings Program Enabling Resolution. FINANCE

B. Congress of Cities Voting Delegates. CITY CLERK

❑ ANY OTHER BUSINESS:

❑ PUBLIC PARTICIPATION:

- *Reminder: Individuals who would like to address the City Commission shall do the following:*
- Fill out a request to speak form attached to the agenda or located in the back of the room.
- Submit the form to the City Clerk.
- Be recognized by the Chair.
- Step forward to the microphone.
- State name and address.
- Limit of 3 minutes to address the Commission.
- (Speaker representing a group may be allowed 10 minutes if previously registered with City Clerk.)

❑ ADJOURNMENT:

ADA POLICY: THE CITY OF MUSKEGON WILL PROVIDE NECESSARY AUXILIARY AIDS AND SERVICES TO INDIVIDUALS WHO WANT TO ATTEND THE MEETING UPON TWENTY FOUR HOUR NOTICE TO THE CITY OF MUSKEGON. PLEASE CONTACT ANN MARIE BECKER, CITY CLERK, 933 TERRACE STREET, MUSKEGON, MI 49440 OR BY CALLING (231) 724-6705 OR TDD: (231) 724-4172.

Date: October 23, 2007
To: Honorable Mayor and City Commissioners
From: Ann Marie Becker, City Clerk
RE: Approval of Minutes

SUMMARY OF REQUEST: To approve minutes for the October 8th Commission Worksession, and the October 9th Regular Commission Meeting.

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Approval of the minutes.

CITY OF MUSKEGON

CITY COMMISSION MEETING

OCTOBER 23, 2007

CITY COMMISSION CHAMBERS @ 5:30 P.M.

MINUTES

The Regular Commission Meeting of the City of Muskegon was held at City Hall, 933 Terrace Street, Muskegon, Michigan at 5:30 p.m., Tuesday, October 23, 2007.

Mayor Warmington opened the meeting with a prayer from Pastor Penny Johnson from Oak Crest Church of God after which the Commission and public recited the Pledge of Allegiance to the Flag.

ROLL CALL FOR THE REGULAR COMMISSION MEETING:

Present: Mayor Stephen Warmington, Vice Mayor Stephen Gawron, Commissioners Clara Shepherd, Lawrence Spataro, Sue Wierengo, Steven Wisneski, and Chris Carter, City Manager Bryon Mazade, City Attorney John Schrier, and City Clerk Ann Marie Becker

2007-88 HONORS AND AWARDS:

A. Employee Service Awards. CIVIL SERVICE

Civil Service Commission Chairperson, David-George Newsome, presented the Service Awards to the City employees thanking them for their years of service.

2007-89 CONSENT AGENDA:

A. Approval of Minutes. CITY CLERK

SUMMARY OF REQUEST: To approve minutes for the October 8th Commission Worksession, and the October 9th Regular Commission Meeting.

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Approval of the minutes.

B. Rescind the Vacation of the Undeveloped Portion of Frisbie Street. PLANNING & ECONOMIC DEVELOPMENT

SUMMARY OF REQUEST: Rescind the vacation of the undeveloped portion of Frisbie Street south of Palmer and west of McGraft Church.

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Staff recommends that the City Commission rescind

the vacation of the undeveloped portion of Frisbie Street south of Palmer and west of McGraft Church.

COMMITTEE RECOMMENDATION: The Planning Commission unanimously recommended rescinding the vacation at their October 16, 2007, meeting with B. Mazade and B. Smith absent.

C. Vacation of a Portion of Frisbie Street. PLANNING & ECONOMIC DEVELOPMENT

SUMMARY OF REQUEST: Request for the vacation of the east 33 ft. of the unimproved Frisbie Street, located between Block 531 and 532, City of Muskegon Revised Plat of 1903.

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Staff recommends vacation of the east 33 ft. of Frisbie Street as described in the resolution.

COMMITTEE RECOMMENDATION: The Planning Commission unanimously recommended the vacation with J. Aslakson, T. Harryman, and T. Michalski absent.

D. Liquor License Transfer Request for Captain Jack's, LLC, 1601 Beach. CITY CLERK

SUMMARY OF REQUEST: The Liquor Control Commission is seeking local recommendation on a request from Captain Jack's, LLC to transfer ownership of the 2007 Class C-SDM licensed business with Dance-Entertainment Permit, Outdoor Service (2 Areas), Drive-Up Window (without alcoholic beverage sales) and 2 Bars located at 1601 Beach Street, Pavilion Building, from BLMC Enterprises, Inc.

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Approval of the request.

F. Liquor License Transfer Request for AGZ, Inc., 313 W. Laketon. CITY CLERK

SUMMARY OF REQUEST: The Liquor Control Commission is seeking local recommendation on a request from AGZ, Inc. to transfer ownership of the 2007 Class C-SDM licensed business with Dance-Entertainment Permit located at 313 W. Laketon Avenue from The Castle Inn, Inc. (Time Out Lounge).

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Approval of the request.

Motion by Vice Mayor Gawron, second by Commissioner Carter to approve the Consent Agenda as read minus item E.

ROLL CALL: Ayes: Spataro, Warmington, Wierengo, Wisneski, Carter, Gawron, and Shepherd

Nays: None

MOTION PASSES

2007-90 ITEM REMOVED FROM THE CONSENT AGENDA:

E. Liquor License Transfer Request for Amigos, Inc., 1848 E. Sherman. CITY CLERK

SUMMARY OF REQUEST: The Liquor Control Commission is seeking local recommendation on a request from Amigos, Inc. to transfer ownership of the 2007 Class C-SDM licensed business located in escrow at 1934 Peck, Muskegon, from Sherm's Saloon, Inc. and transfer location to 1848 E. Sherman, Suite M.

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Approval contingent upon payment of personal property taxes.

Motion by Commissioner Carter, second by Commissioner Wisneski to approve the liquor license transfer request for Amigos, Inc., at 1848 E. Sherman.

ROLL VOTE: Ayes: Warmington, Wierengo, Wisneski, Carter, Gawron, Shepherd, and Spataro

Nays: None

MOTION PASSES

2007-91 NEW BUSINESS:

A. MERS Health Care Savings Program Enabling Resolution. FINANCE

SUMMARY OF REQUEST: The resolution authorizes the city to participate in the MERS Health Care Savings Program (HCSP). HCSP is a program that allows employees to set aside funds in a tax-favored account to use for post-employment medical purposes. Funds are contributed to individual employee accounts before tax withholding and are not taxed at time of withdrawal if used for eligible medical purposes.

The city benefits from adopting HCSP in two ways.

- Wages allocated to the HCSP are exempt from FICA/Medicare taxes for both employee and employer. Thus for every \$100 in salary directed to HCSP, the city (and employee) each save \$7.65 in FICA/Medicare taxes that would otherwise be paid.
- The program establishes an efficient means for employees to fund their own retiree healthcare expenses. The city provides basic retiree healthcare coverage, but there are many areas not covered. As it is unlikely the city will be extending this coverage, the HCSP is a good tool to help employees save to meet future

healthcare needs.

At this time we are recommending that the resolution be adopted so that the program is ready for use in the future. The first actual use would likely be for non-union employees as part of the 2008 salary and benefit changes (considered by the Commission in December). Some unions have expressed interest as well and we would like to have the program available for discussion in negotiations.

FINANCIAL IMPACT: Potential FICA/Medicare savings to the City.

BUDGET ACTION REQUIRED: None. The program entails no direct costs to the City (other than minor administrative costs) but may result in significant FICA/Medicare tax savings, depending on the extent to which it is adopted by employee groups.

STAFF RECOMMENDATION: Approval.

Motion by Vice Mayor Gawron, second by Commissioner Shepherd to authorize the City to participate in the MERS Health Care Savings Program.

ROLL VOTE: Ayes: Wierengo, Wisneski, Carter, Gawron, Shepherd, Spataro, and Warmington

Nays: None

MOTION PASSES

B. Congress of Cities Voting Delegates. CITY CLERK

SUMMARY OF REQUEST: To designate one of our officials who will be in attendance at the National League of Cities Annual Business Meeting to cast the City's vote; and, if possible, to designate an alternate.

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Approval.

Motion by Commissioner Carter, second by Commissioner Wierengo to appoint Commissioner Shepherd to be the voting delegate at the National League of Cities Annual Business Meeting.

ROLL VOTE: Ayes: Wisneski, Carter, Gawron, Shepherd, Spataro, Warmington, and Wierengo

Nays: None

MOTION PASSES

2007-92 ANY OTHER BUSINESS:

Commissioner Spataro stated that members of the Muskegon Turnback Committee expressed concerns reference the proposed speed limit on Muskegon and Webster Avenues. It was suggested that this be discussed further at a Worksession Meeting inviting the Turnback Committee, Nelson Neighborhood Association, and businesses.

Mayor Warmington attended the Muskegon County Land Bank Authority meeting and discussion was held reference 775 Washington.

City Manager Bryon Mazade stated that we are working with a potential developer for Edison Landing.

Motion by Commissioner Spataro, second by Commissioner Shepherd to authorize staff to accelerate the special assessment of Edison Landing if an agreement is not reached by October 30, 2007.

ROLL VOTE: Ayes: Gawron, Shepherd, Spataro, Warmington, Wierengo, Wisneski, and Carter

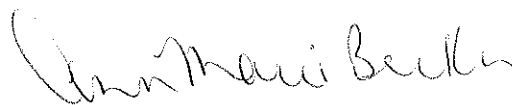
Nays: None

MOTION PASSES

PUBLIC PARTICIPATION: Various comments were heard from the public.

ADJOURNMENT: The City Commission Meeting adjourned at 6:38 p.m.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "Ann Marie Becker".

Ann Marie Becker, MMC
City Clerk

Commission Meeting Date: October 23, 2006

Date: October 12, 2007
To: Honorable Mayor and City Commissioners
From: Planning & Economic Development
RE: Rescind the Vacation of the Undeveloped portion of Frisbie Street

SUMMARY OF REQUEST:

Rescind the vacation of the undeveloped portion of Frisbie Street South of Palmer and West of McGraft Church.

FINANCIAL IMPACT:

None

BUDGET ACTION REQUIRED:

None

STAFF RECOMMENDATION:

Staff recommends that the City Commission rescind the vacation of the undeveloped portion of Frisbie Street South of Palmer and West of McGraft Church.

COMMITTEE RECOMMENDATION:

The Planning Commission unanimously recommended rescinding the vacation at their 10/16/07 meeting, with B. Mazade and B. Smith absent.

CITY OF MUSKEGON

RESOLUTION #2007-89(b)

WHEREAS, on February 28, 2006 the vacation of the unimproved portion of Frisbie Street south of Palmer was approved by the City Commission, with the condition that the vacation was not final and binding until there was full compliance with state law, including an appropriate circuit court order; and

WHEREAS, the circuit court won't issue an order using the present property description; and

WHEREAS, a staff request has been received to rescind the vacation the unimproved portion of Frisbie Street south of Palmer; and

WHEREAS, the Planning Commission held a public hearing on October 11, 2007 to consider the request and subsequently recommended the vacation be rescinded; and

WHEREAS, due notice had been give of said hearing as well as the October 23, 2007 City Commission meeting to consider the recommendation of the Planning Commission;

NOW, THEREFORE, BE IT RESOLVED that the City Commission deems it advisable for the public interest to rescind the vacation of the unimproved portion of Frisbie Street south of Palmer and west of McGraft Church.

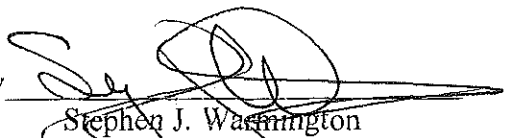
Adopted this 23 day of October, 2007.

AYES: Spataro, Warmington, Wierengo, Wisneski, Carter,
Gawron, and Shepherd

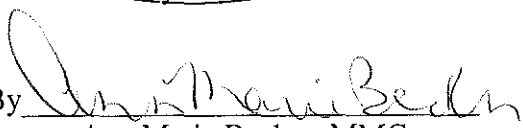
NAYES: None

ABSENT: None

By


Stephen J. Warmington
Its Mayor

By

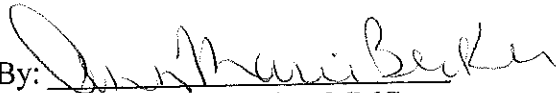

Ann Marie Becker, MMC
Its Clerk

CERTIFICATE

(Rescind the vacation of the unimproved portion of Frisbie Street south of Palmer)

I hereby certify that the foregoing constitutes a true and complete copy of a resolution adopted by the City Commission of the City of Muskegon, County of Muskegon, Michigan, at a regular meeting held on October 23, 2007.

CITY OF MUSKEGON

By: 
Ann Marie Becker, MMC
Its Clerk

Staff Report [EXCERPT]
CITY OF MUSKEGON
PLANNING COMMISSION
REGULAR MEETING

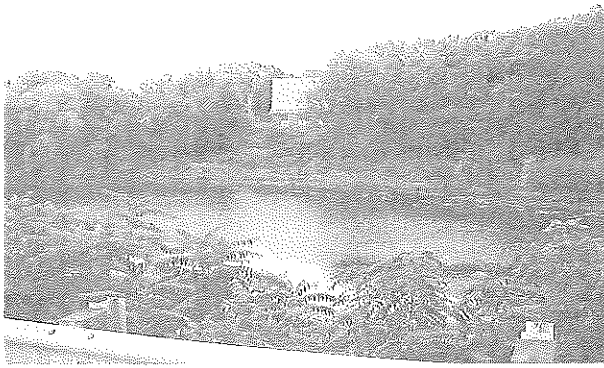
October 11, 2007

Hearing; Case 2007-38: Staff initiated request to rescind the vacation of the unimproved portion of Frisbee Street, south of Palmer and west of McGraft Church.

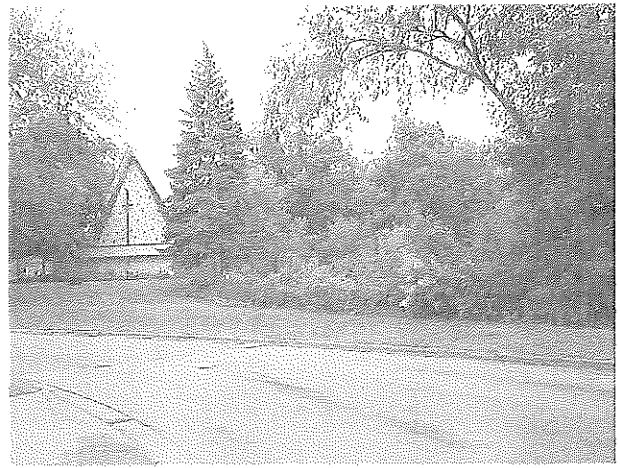
BACKGROUND

This street vacation request was originally recommended by Planning Commission for approval in February 2006, and City Commission approved it later that month. As you may recall, streets that are located within 80 feet of a body of water may only be vacated by the circuit court. With that mind, one condition of the City Commission approval was that it did “not become final and binding on the City until there has been full compliance with state law, including an appropriate circuit court order”. It was determined by the Attorney General that there must be access to McGraft Park in order for the consent judgment to be approved. Therefore, this vacation needs to be rescinded and another request with only the east 33 feet of Frisbee Street will be addressed in the next case.

Staff has received no public comments on this request.

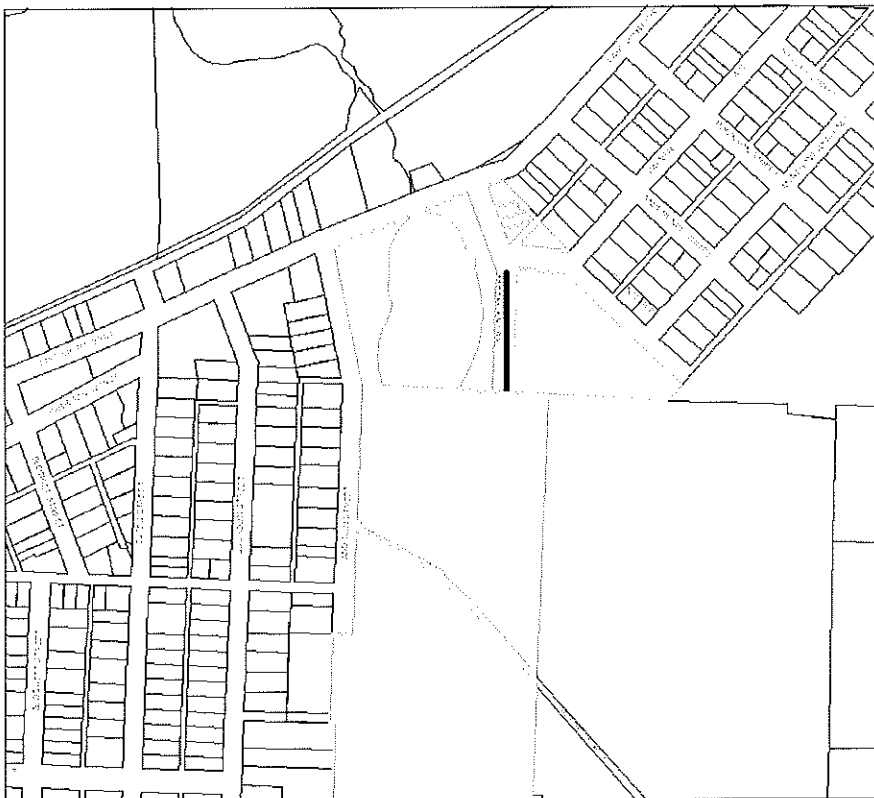


View from across Ruddiman Creek.

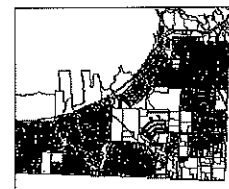


View from improved Frisbee Street.

City of Muskegon
Planning Commission
Case # 2007-38 & 39



— Selected Property
□ Affected Properties



STAFF RECOMMENDATION

Staff recommends approval of the request.

DELIBERATION

I move that vacation of the undeveloped portion of Frisbee Street be recommended to City Commission to be rescinded, due to the conditions required of the Attorney General.

Commission Meeting Date: October 23, 2007

Date: October 12, 2007
To: Honorable Mayor and City Commissioners
From: Planning & Economic Development
RE: Vacation the a Portion of Frisbee Street

SUMMARY OF REQUEST:

Request for the vacation of the east 33 ft. of the unimproved Frisbee Street, located between Block 531 and 532, City of Muskegon Revised Plat of 1903.

FINANCIAL IMPACT:

None

BUDGET ACTION REQUIRED:

None

STAFF RECOMMENDATION:

Staff recommends vacation of the east 33 ft of Frisbee Street, as described in the resolution.

COMMITTEE RECOMMENDATION:

The Planning Commission unanimously recommended the vacation, with J. Aslakson, T. Harryman, and T. Michalski absent.

CITY OF MUSKEGON

RESOLUTION #2007-89(c)

RESOLUTION TO VACATE A PORTION OF A PUBLIC STREET

WHEREAS, a petition has been received to vacate a portion of Frisbie Street, that being the East 33 feet of Frisbie Street lying south of the westerly extension of the north line of Lot 1, Block 532 in the Revised Plat of 1903 of the City of Muskegon; and

WHEREAS, the Planning Commission held a public hearing on October 11, 2007 to consider the petition and subsequently recommended the vacation; and

WHEREAS, due notice had been given of said hearing as well as the October 23, 2007 City Commission meeting to consider the recommendation of the Planning Commission;

NOW, THEREFORE, BE IT RESOLVED that the City Commission deems it advisable for the public interest to vacate and discontinue the unimproved portion of Frisbie Street described above; and

BE IT FURTHER RESOLVED, that the City Commission does hereby declare the said portion of street vacated and discontinued; and

BE IT FURTHER RESOLVED, that this Resolution shall not become final and binding on the City until there has been full compliance with state law, including an appropriate circuit court order; and

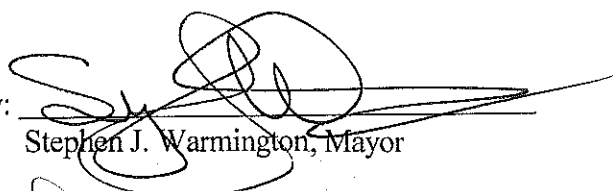
BE IT FURTHER RESOLVED, that this Resolution shall not be recorded with the Register of Deeds until all conditions are satisfied.

Adopted this 23rd day of October, 2007.

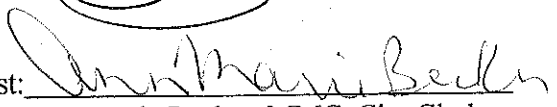
Ayes: Spataro, Warmington, Wierengo, Wisneski, Carter,
Gawron, and Shepherd

Nays: None

Absent: None

By: 

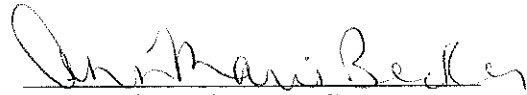
Stephen J. Warmington, Mayor

Attest: 

Ann Marie Becker, MMC, City Clerk

CERTIFICATE (Vacation of a portion of Frisbee Street)

I hereby certify that the foregoing constitutes a true and complete copy of a resolution adopted by the City Commission of the City of Muskegon, County of Muskegon, Michigan, at a regular meeting held on October 23, 2007.

A handwritten signature in cursive script, reading "Ann Marie Becker".

Ann Marie Becker, MMC
Clerk, City of Muskegon

Staff Report [EXCERPT]
CITY OF MUSKEGON
PLANNING COMMISSION
REGULAR MEETING

October 11, 2007

Hearing; Case 2007-39: Request to vacate Frisbee Street, between Block 531 and Block 532, by Ralph VanRiper, McGraft Church.

BACKGROUND

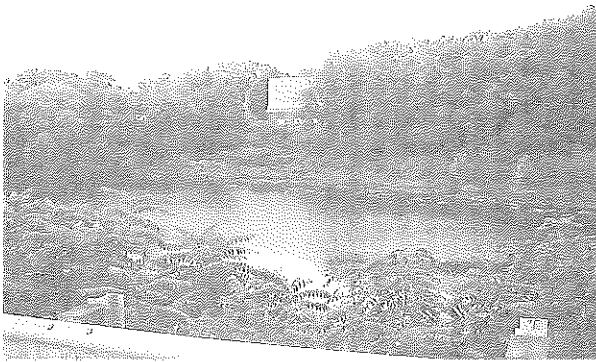
The applicant is McGraft Church. Their property abuts the platted but undeveloped portion of Frisbie Street. The church has preliminary plans to build a "Family Life Center Building", however their present property isn't large enough to accommodate the size building they would like. They initially approached the City through the Leisure Services Department to obtain a lease for a portion of McGraft Park property adjacent to their property for construction of their building. However, since McGraft Park is a "Charter Park" this is not a possibility.

This street vacation is not your ordinary street vacation request. Streets that are located within approximately 80 feet of a body of water may only be vacated by the circuit court. According to the Subdivision Control Act, Section 560.256:

Land in a subdivision dedicated to the use of the public for purposes other than pedestrian or vehicular travel, or land dedicated for a public way which is under the jurisdiction of a municipality, a portion of which public way is within 25 meters of a lake or the general course of a stream, shall not be revised, altered, or vacated except by order of the circuit court in the county in which the land is situated."

Since the church needs the additional 33 feet of this street for their addition, which would become church property if Frisbie Street is vacated, they are willing to pursue the final vacation in circuit court. In order for them to move forward with this action, approval of the vacation must be granted by City Commission. Therefore, McGraft Church is requesting the vacation of the east 33 feet of Frisbee Street only.

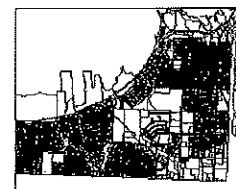
Engineering, Fire and DPW have no issues with the proposed vacation. The church has requested that no utility rights be retained, since they need to locate a portion of their building on the additional property. There are no city utilities located in the platted street right-of-way, and staff has had no response from other utilities that were notified of this request. The church accesses their utilities from the developed portion of Frisbie and Roilson Streets.



City of Muskegon
Planning Commission
Case # 2007-38 & 39



— Selected Property
□ Affected Properties



STAFF RECOMMENDATION

Staff recommends approval of the request.

DELIBERATION

I move that the vacation of the east 33 feet of that part of vacated Frisbie Street located between Block 521 and Block 532 of the Revised Plat of 1903 of the City of Muskegon, Muskegon County Michigan, which lies South of the North line of said Block 532, extended West to the West line of said Frisbie Street, be recommended to City Commission for (approval/denial), based on (compliance/lack of compliance), with the City's 1997 Master Land Use Plan.

Date: October 23, 2007
To: Honorable Mayor and City Commissioners
From: Ann Marie Becker, City Clerk
RE: Liquor License Transfer Request
Captain Jack's, LLC, 1601 Beach

SUMMARY OF REQUEST: The Liquor Control Commission is seeking local recommendation on a request from Captain Jack's, LLC to transfer ownership of the 2007 Class C-SDM licensed business with Dance-Entertainment Permit, Outdoor Service (2 Areas), Drive-Up Window (without alcoholic beverage sales) and 2 Bars located at 1601 Beach Street, Pavilion Building, from BLMC Enterprises, Inc.

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Approval of the request.

PLEASE COMPLETE ENCLOSED RESOLUTION AND RETURN
TO THE LIQUOR CONTROL COMMISSION AT ABOVE ADDRESS

2007-89(d)

Request ID #426221

9-11-07 JMB

RESOLUTION

At a Regular meeting of the City Commission
(Regular or Special) (Township Board, City or Village Council)

called to order by Mayor Warmington on October 23, 2007 at 5:30 P.M.

The following resolution was offered:

Moved by Vice Mayor Gawron and supported by Commissioner Carter

That the request from CAPTAIN JACK'S, LLC REQUESTING TO TRANSFER OWNERSHIP 2007 CLASS C
LICENSED BUSINESS, WITH DANCE-ENTERTAINMENT PERMIT, FROM BLMC ENTERPRISES, INC. LOCATED AT
PERE MARQUETTE PARK, 1601 BEACH, PAVILION BLDG., MUSKEGON MICHIGAN, 49441, MUSKEGON COUNTY

be considered for Approval
(Approval or Disapproval)

APPROVAL

Yeas: 7

Nays: 0

Absent: 0

DISAPPROVAL

Yeas: _____

Nays: _____

Absent: _____

It is the consensus of this legislative body that the application be:

Recommended for issuance
(Recommended or Not Recommended)

State of Michigan _____)

County of Muskegon _____)

I hereby certify that the foregoing is a true and complete copy of a resolution offered and

adopted by the City Commission at a Regular
(Township Board, City or Village Council) (Regular or Special)

meeting held on October 23, 2007.
(Date)

SEAL

(Signed) Ann Marie Becker
(Township, City or Village Clerk)

Ann Marie Becker, City Clerk
933 Terrace, Muskegon, MI 49440
(Mailing address of Township, City or Village)



Muskegon Police Department

Anthony L. Kleibecker
Director of Public Safety

980 Jefferson
Muskegon, Michigan
49443-0536

www.muskegonpolice.com

Phone: 231-724-6750
FAX: 231-722-5140

September 25, 2007

To: City Commission through the City Manager

From: 
Anthony L. Kleibecker, Director of Public Safety

Re: Liquor License Request – 1601 Beach Street
Muskegon, Mi 49441
Transfer of 2007 Class C-SDM licensed business

The Muskegon Police Department has received a request from the Michigan Liquor Control Commission for an investigation of applicant Captain Jack's LLC, comprised of Robert and Jennifer Osborn of 3125 Tuell NW, Grand Rapids MI.

Captain Jack's, LLC requests to transfer ownership of 2007 Class C-SDM licensed business with Dance-Entertainment Permit, Outdoor Service (2 Areas), Drive-Up Window (without alcoholic beverage sales), and 2 Bars located at 1601 Beach Street, Pavilion Building, from BLMC Enterprises, Inc. Robert and Jennifer Osborn have no experience in the alcohol service industry but are aware of the Muskegon Police Department's position on enforcing local alcohol laws and ordinances. The applicant has also been made aware of the following two websites for additional training opportunities; the Michigan Licensed Beverage Association and the Liquor Control Commission.

A check of Muskegon Police Department records and criminal history showed no reason to deny this request.

ALK/kd



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

LOCAL APPROVAL NOTICE

[Authorized by MCL 436.1501]

FOR MLCC USE ONLY

Request ID # 426221

Business ID # 199323

9-11-07 *THM*

July 25, 2007

TO: Muskegon City Council
Clerk
933 Terrace Street
PO Box 536
Muskegon, MI 49443-0536

APPLICANT: CAPTAIN JACK'S, LLC

Home Address and Telephone No. or Contact Address and Telephone No:

MEMBERS:

JENNIFER L OSBORN 3125 TUELL NW, GRAND RAPIDS MI, 49504

(B.P. 616-581-2505 H.P. 616-791-8296)

ROBERT L OSBORN (SAME) (B.P. 616-233-6211)

~~JENNIFER K BEERY 7111 COURTLAND DRIVE NE, ROCKFORD MI, 49341~~

~~(B.P. 231-755-1555 H.P. 616-706-1594)~~ *This applicant withdrew*

The MLCC cannot consider the approval of an application for a new or transfer of an on-premises license without the approval of the local legislative body pursuant to the provisions of MCL 436.1501 of the Liquor Control Code of 1998. For your information, local legislative body approval is also required for DANCE, ENTERTAINMENT, DANCE-ENTERTAINMENT AND TOPLESS ACTIVITY PERMITS AND FOR OFFICIAL PERMITS FOR EXTENDED HOURS FOR DANCE AND/OR ENTERTAINMENT pursuant to the provisions of MCL 436.1916 of the Liquor Control Code of 1998.

For your convenience a resolution form is enclosed that includes a description of the licensing application requiring consideration of the local legislative body. The clerk should complete the resolution certifying that your decision of approval or disapproval of the application was made at an official meeting. **Please return the completed resolution to the MLCC as soon as possible.**

If you have any questions, please contact the On-Premises Section of the Licensing Division at (517) 636-4634.

jr

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name: Captain Jack's, LLC

AKA Business Name (if applicable): _____

Operator/Manager's Name: _____

Business Address: 1601 Beach

Reason for Review:

New License ☐

Transfer of Ownership ☒

Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☐

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety

Approved ☒

Denied ☐

No Action Needed ☐

Income Tax

Approved ☐

Owing ☐

Amount: _____

Treasurer

Approved ☐

Owing ☐

Amount: _____

Zoning

Approved ☐

Denied ☐

Pending ZBA ☐

Clerk's

Approved ☐

Owing ☐

Amount: _____

Fire/Inspections

Approved ☐

Denied ☐

Remaining Defects ☐

Department Signature

J. L. Scher

Please return to the City Clerk's Office

RECEIVED

SEP 25 2007

MUSKEGON POLICE DEPT.
CHIEF of POLICE

To: Tony Kleibecker, Director of Public Safety

From: Det. Kurt Dykman

Date: 09-25-07

Re: Liquor License Transfer

Chief Kleibecker,

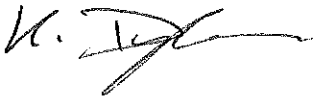
The Muskegon Police Department has received a request from the Michigan Liquor Control Commission for an investigation from applicant Captain Jack's, LLC of Muskegon, MI.

Captain Jack's, LLC. is requesting to transfer ownership of 2007 Class C-SDM licensed business with Dance-Entertainment Permit, Outdoor Service (2 Areas), Drive-Up Window (without alcoholic beverage sales), and 2 Bars, from BLMC Enterprises, Inc. located at Pere Marquette Park, 1601 Beach, Pavilion Bldg., Muskegon, Mi 49441.

Captain Jack's, LLC. is comprised of Robert and Jennifer Osborn, of 3125 Tuell NW, Grand Rapids, MI. 49504. Mr. and Mrs. Osborn have no experience in the alcohol service industry but have been made aware of the Muskegon Police Departments position on enforcing local alcohol laws and ordinances.

A check of MPD records and Criminal History showed no reason to deny this request.

Respectfully submitted,



Det. Kurt Dykman

data/common/liquor/captain jack's



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

9-11-07
THA
426221

POLICE INVESTIGATION REQUEST

[Authorized by MCL 436.1201(4)]

July 25, 2007

Muskegon Police Department
Chief of Police
980 Jefferson Street, PO Box 536
Muskegon, MI 49443-0536

Request ID #426221

Applicant: CAPTAIN JACK'S, LLC REQUESTING TO TRANSFER OWNERSHIP 2007 CLASS C-SDM LICENSED BUSINESS, WITH DANCE-ENTERTAINMENT PERMIT, OUTDOOR SERVICE (2 AREAS), DRIVE-UP WINDOW (WITHOUT ALCOHOLIC BEVERAGE SALES) AND 2 BARS, FROM BLMC ENTERPRISES, INC. LOCATED AT PERE MARQUETTE PARK, 1601 BEACH, PAVILION BLDG., MUSKEGON MICHIGAN, 49441, MUSKEGON COUNTY

Please make an investigation of the application. If you do not believe that the applicants are qualified for licensing, give your reasons in detail. Complete the Police Inspection Report on Liquor License Request, LC-1800, or for Detroit police, the Detroit Police Investigation of License Request, LC-1802. If there is not enough room on the front of the form, you may use the back.

Forward your report, along with fingerprint cards (if requested) and \$30.00 for each card to the Michigan Liquor Control Commission.

If you have any questions, contact the appropriate unit (On Premises, Off Premises or Manufacturers & Wholesalers) at (517) 322-1400.

jr



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

POLICE INVESTIGATION REPORT

[Authorized by MCL 436.1217 and R 436.1105; MAC]

FOR MLCC USE ONLY

Request ID # 426221

Business ID # 199323

9-11-07 (PAGE 1 OF 2)

7/11/11

Please conduct your investigation as soon as possible, complete all four sections of this report and return the completed report and fingerprint cards to the MLCC

LICENSEE/APPLICANT NAME, BUSINESS ADDRESS AND LICENSING REQUEST:

CAPTAIN JACK'S, LLC REQUESTING TO TRANSFER OWNERSHIP 2007 CLASS C-SDM LICENSED BUSINESS, WITH DANCE-ENTERTAINMENT PERMIT, OUTDOOR SERVICE (2 AREAS), DRIVE-UP WINDOW (WITHOUT ALCOHOLIC BEVERAGE SALES) AND 2 BARS, FROM BLMC ENTERPRISES, INC. LOCATED AT PERE MARQUETTE PARK, 1601 BEACH, PAVILION BLDG., MUSKEGON MICHIGAN, 49441, MUSKEGON COUNTY

Section 1. APPLICANT INFORMATION

APPLICANT #1: JENNIFER L OSBORN
3125 TUELL NW
GRAND RAPIDS, MI 49504
(B.P. 616-581-2505 H.P. 616-791-8296)

APPLICANT #2: ROBERT L OSBORN
(SAME)
(B.P. 616-233-6211)

DATE FINGERPRINTED: 9-20-07

DATE FINGERPRINTED: 9-20-07

DATE OF BIRTH:
Is the applicant a U.S. Citizen: ☒ Yes ☐ No*

DATE OF BIRTH:
Is the applicant a U.S. Citizen: ☒ Yes ☐ No*

*Does the applicant have permanent Resident Alien status?
☐ Yes ☐ No*

*Does the applicant have permanent Resident Alien status?
☐ Yes ☐ No*

*Does the applicant have a Visa? Enter status:

*Does the applicant have a Visa? Enter status:

Attach the fingerprint card and \$30.00 for each card and mail to the Michigan Liquor Control Commission

ARREST RECORD: ☐ Felony ☐ Misdemeanor

Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)

ARREST RECORD: ☐ Felony ☐ Misdemeanor

Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)

Section 2. INVESTIGATION OF BUSINESS AND ADDRESS TO BE LICENSED

Does applicant intend to have dancing, entertainment, topless activity, or extended hours permit?

☐ No ☒ Yes, complete LC-1636

Are gas pumps on the premises or directly adjacent? ☒ No ☐ Yes, explain relationship:

Section 3. LOCAL AND STATE CODES AND ORDINANCES, AND GENERAL RECOMMENDATIONS

Will the applicant's proposed location meet all appropriate state and local building, plumbing, zoning, fire, sanitation and health laws and ordinances, if this license is granted? ☒ Yes ☐ No

If you are recommending approval subject to certain conditions, list the conditions: (attach a signed and dated report if more space is needed)

Section 4. RECOMMENDATION

From your investigation:

1. Is this applicant qualified to conduct this business if licensed? ☒ Yes ☐ No
2. Is the proposed location satisfactory for this business? ☒ Yes ☐ No
3. Should the Commission grant this request? ☒ Yes ☐ No
4. If any of the above 3 questions were answered no, state your reasons: (Attach a signed and dated report if more space is needed)

Signature (Sheriff or Chief of Police)

Date

MUSKEGON POLICE DEPARTMENT



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

POLICE INVESTIGATION REPORT
[Authorized by MCL 436.1217 and R 436.1105; MAC]

FOR MLCC USE ONLY

Request ID # 426221

Business ID # 199323

9-11-07 (PAGE 2 OF 2)

Please conduct your investigation as soon as possible, complete all four sections of this report and return the completed report and fingerprint cards to the MLCC

LICENSEE/APPLICANT NAME, BUSINESS ADDRESS AND LICENSING REQUEST:

CAPTAIN JACK'S, LLC REQUESTING TO TRANSFER OWNERSHIP 2007 CLASS C-SDM LICENSED BUSINESS, WITH DANCE-ENTERTAINMENT PERMIT, OUTDOOR SERVICE (2 AREAS), DRIVE-UP WINDOW (WITHOUT ALCOHOLIC BEVERAGE SALES) AND 2 BARS, FROM BLMC ENTERPRISES, INC. LOCATED AT PERE MARQUETTE PARK, 1601 BEACH, PAVILION BLDG., MUSKEGON MICHIGAN, 49441, MUSKEGON COUNTY

Section 1. APPLICANT INFORMATION

APPLICANT #1: JENNIFER K BEERY
7111 COURTLAND DRIVE NE
ROCKFORD, MI 49341
(B.P. 231-755-1555 H.P. 616-706-1594)

APPLICANT #2:

DATE FINGERPRINTED:

DATE FINGERPRINTED:

DATE OF BIRTH:

Is the applicant a U.S. Citizen: ☐ Yes ☐ No*

DATE OF BIRTH:

Is the applicant a U.S. Citizen: ☐ Yes ☐ No*

*Does the applicant have permanent Resident Alien status?
☐ Yes ☐ No*

*Does the applicant have permanent Resident Alien status?
☐ Yes ☐ No*

*Does the applicant have a Visa? Enter status:

*Does the applicant have a Visa? Enter status:

Attach the fingerprint card and \$30.00 for each card and mail to the Michigan Liquor Control Commission

ARREST RECORD: ☐ Felony ☐ Misdemeanor

Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)

ARREST RECORD: ☐ Felony ☐ Misdemeanor

Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)

Section 2. INVESTIGATION

Does applicant intend to have dancing, entertainment, or live music?

☐ No ☐ Yes, complete LC-1636

Are gas pumps on the premises or directly adjacent to the premises?

ADDRESS TO BE LICENSED

Indicate hours of operation:

Plain relationship:

Section 3. LOCAL AND STATE COMPLIANCE

Will the applicant's proposed location meet all applicable local, state, and ordinances, if this license is granted?

If you are recommending approval subject to conditions, list them here:

ADDITIONAL GENERAL RECOMMENDATIONS

Building, plumbing, zoning, fire, sanitation and health laws

Other comments: (attach a signed and dated report if more space is needed)

Section 4. RECOMMENDATION

From your investigation:

1. Is this applicant qualified to conduct this business if licensed? ☐ Yes ☐ No
2. Is the proposed location satisfactory for this business? ☐ Yes ☐ No
3. Should the Commission grant this request? ☐ Yes ☐ No
4. If any of the above 3 questions were answered no, state your reasons: (Attach a signed and dated report if more space is needed)

x

Signature (Sheriff or Chief of Police)

Date

MUSKEGON POLICE DEPARTMENT



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

LAW ENFORCEMENT RECOMMENDATION

[Authorized by MCL 436.1916, R 436.1105(2)(d) and R 436.1403]

FOR MLCC USE ONLY

Request ID # 426221

Business ID # 199323

9-11-07 JMA

July 25, 2007

TO: MUSKEGON POLICE DEPARTMENT

Re: CAPTAIN JACK'S. LLC

We have received a request from the above licensee for the type of permit indicated below. Please make an investigation and submit your report and/or recommendation to the offices of the MLCC at the above address. Questions about this request should be directed to the MLCC Licensing Division at (517) 322-1400.

☐ OFFICIAL PERMIT FOR EXTENDED HOURS OF OPERATION FOR: _____
Weekdays _____ A.M. to _____ A.M.
Sundays _____ A.M. to _____ A.M./P.M.

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

NOTE: If the applicant is requesting two separate extended hours permits and the permits are for **different hours** you must complete the box below. If additional space is needed please use reverse side of this form.

☐ OFFICIAL PERMIT FOR EXTENDED HOURS OF OPERATION FOR: _____
Weekdays _____ A.M. to _____ A.M.
Sundays _____ A.M. to _____ A.M./P.M.

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☒ DANCE PERMIT

☒ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☒ ENTERTAINMENT PERMIT

☒ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☐ TOPLESS ACTIVITY PERMIT

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

426221
9-11-07
JMA

☒ OUTDOOR SERVICE (2 AREAS)

☒ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☐ PARTICIPATION PERMIT

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☒ ADDITIONAL BAR PERMIT (FOR A TOTAL OF 2 BARS)

☒ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☒ OTHER DRIVE-UP WINDOW (WITHOUT ALCOHOLIC BEVERAGE SALES)

☒ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

Signed:

[Signature]

Signature and Title

Muskegon Police Department

Anthony Kleibacker, Director of Public Safety

Print Name and Title

Date: 9-25-07

jr

XXXXXX
YOUR RECEIPT
THANK YOU
CALL AGAIN
XXXXXX
LI QUOR 250.00
ITEM CT 1
CHECK
250.00
03:29AM 10-26-2007
8026 LINDA

9-91-720 1029

OSBORN ASSOCIATES
1400 PLAINFIELD NE
GRAND RAPIDS, MI 49505

Sept 20, 07

PAY TO THE ORDER OF State of Mich \$ 60.00
Sixty and 00/100 DOLLARS

NATIONAL CITY

FOR _____

⑆072000915⑆ 984522791 1029

BLUE CLASSIC

Security Features
Included.
Details on Back.

9-91-720 1030

OSBORN ASSOCIATES
1400 PLAINFIELD NE
GRAND RAPIDS, MI 49505

Sept 20, 07

PAY TO THE ORDER OF City of Muskegon \$ 250.00
two hundred fifty + 00/100 DOLLARS

NATIONAL CITY

FOR _____

⑆072000915⑆ 984522791 1030

BLUE CLASSIC

Security Features
Included.
Details on Back.

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name: Captain Jack's, LLC

AKA Business Name (if applicable): _____

Operator/Manager's Name: _____

Business Address: 1601 Beach

Reason for Review:

New License ☐

Transfer of Ownership ☒

Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☐

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety

Approved ☐

Denied ☐

No Action Needed ☐

Income Tax

Approved ☒

Owing ☐

Amount: _____

Treasurer

Approved ☐

Owing ☐

Amount: _____

Zoning

Approved ☐

Denied ☐

Pending ZBA ☐

Clerk's

Approved ☐

Owing ☐

Amount: _____

Fire/Inspections

Approved ☐

Denied ☐

Remaining Defects ☐

Department Signature



Please return to the City Clerk's Office

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name:

Captain Jack's, LLC

AKA Business Name (if applicable):

Operator/Manager's Name:

Business Address:

1601 Beach

Reason for Review:

New License ☐

Transfer of Ownership ☒

Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☐

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other

Deadline for receipt of all information:

Public Safety

Approved ☐

Denied ☐

No Action Needed ☐

Income Tax

Approved ☐

Owing ☐

Amount: _____

Treasurer

Approved ☒

Owing ☐

Amount: _____

Zoning

Approved ☐

Denied ☐

Pending ZBA ☐

Clerk's

Approved ☐

Owing ☐

Amount: _____

Fire/Inspections

Approved ☐

Denied ☐

Remaining Defects ☐

Department Signature

[Signature] 09/17/07

Please return to the City Clerk's Office

☐ FAXED RECEIVED ☐

SEP 17 2007

☐ APPROVED POSTED ☐
CITY OF MUSKEGON TREASURY

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name: Captain Jack's, LLC

AKA Business Name (if applicable): _____

Operator/Manager's Name: _____

Business Address: 1601 Beach

Reason for Review:

New License ☐

Transfer of Ownership ☒

Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☐

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety

Approved ☐

Denied ☐

No Action Needed ☐

Income Tax

Approved ☐

Owing ☐

Amount: _____

Treasurer

Approved ☐

Owing ☐

Amount: _____

Zoning

Approved ☒

Denied ☐

Pending ZBA ☐

Clerk's

Approved ☐

Owing ☐

Amount: _____

Fire/Inspections

Approved ☐

Denied ☐

Remaining Defects ☐

Department Signature

[Signature]

Please return to the City Clerk's Office

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name: Captain Jack's, LLC

AKA Business Name (if applicable): _____

Operator/Manager's Name: _____

Business Address: 1601 Beach

Reason for Review:

New License ☐ Transfer of Ownership ☒ Dance Permit ☐

Drop/Add Name on License ☐ Transfer Location ☐

Drop/Add Stockholder Name ☐ New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety Approved ☐ Denied ☐ No Action Needed ☐

Income Tax Approved ☐ Owing ☐ Amount: _____

Treasurer Approved ☐ Owing ☐ Amount: _____

Zoning Approved ☐ Denied ☐ Pending ZBA ☐

Clerk's Approved ☐ Owing ☐ Amount: _____

Fire/Inspections Approved ☒ Denied ☐ Remaining Defects ☐

approval pending

liquor license inspection

Department Signature Maji Mital

Please return to the City Clerk's Office

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name: Captain Jack's, LLC

AKA Business Name (if applicable): _____

Operator/Manager's Name: _____

Business Address: 1601 Beach

Reason for Review:

New License ☐ Transfer of Ownership ☒ Dance Permit ☐

Drop/Add Name on License ☐ Transfer Location ☐

Drop/Add Stockholder Name ☐ New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety Approved ☐ Denied ☐ No Action Needed ☐

Income Tax Approved ☐ Owing ☐ Amount: _____

Treasurer Approved ☐ Owing ☐ Amount: _____

Zoning Approved ☐ Denied ☐ Pending ZBA ☐

Clerk's Approved ☐ Owing ☐ Amount: _____

Fire/Inspections Approved ☐ Denied ☐ Remaining Defects ☐

Department Signature [Signature]

Please return to the City Clerk's Office

Affirmative Action
(231)724-6703
FAX (231)722-1214

Assessor
(231)724-6708
FAX (231)726-5181

Cemetery
(231)724-6783
FAX (231)726-5617

City Manager
(231)724-6724
FAX (231)722-1214

Civil Service
(231)724-6716
FAX (231)724-4405

Clerk
(231)724-6705
FAX (231)724-4178

Comm. & Neigh.
Services
(231)724-6717
FAX (231)726-2501

Engineering
(231)724-6707
FAX (231)727-6904

Finance
(231)724-6713
FAX (231)724-6768

Fire Department
(231)724-6792
FAX (231)724-6985

Income Tax
(231)724-6770
FAX (231)724-6768

Info. Technology
(231)724-4126
FAX (231)722-4301

Inspection Services
(231)724-6715
FAX (231)728-4371

Leisure Services
(231)724-6704
FAX (231)724-1196

Mayor's Office
(231)724-6701
FAX (231)722-1214

Planning/Zoning
(231)724-6702
FAX (231)724-6790

Police Department
(231)724-6750
FAX (231)722-5140

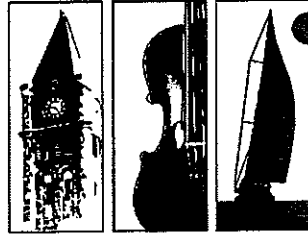
Public Works
(231)724-4100
FAX (231)722-4188

Treasurer
(231)724-6720
FAX (231)724-6768

Water Billing
(231)724-6718
FAX (231)724-6768

Water Filtration
(231)724-4106
FAX (231)755-5290

MUSKEGON



West Michigan's Shoreline City
www.shorelinecity.com

October 17, 2007

Ms. Bonnie Witt, President
Beachwood/Bluffton Neighborhood Assoc.
2261 Surfwood
Muskegon, MI 49441

Dear Ms. Witt:

We have received a letter from the Liquor Control Commission reference a request from Captain Jack's LLC to transfer ownership of the Class C-SDM licensed business located at 1601 Beach Street from BLMC Enterprises, Inc. A Class C license permits the sale of beer, wine, or liquor for consumption on the licensed premises; and a SDM license permits the sale of beer and wine for consumption off the premises. On Tuesday, October 23, 2007, the City Commission will review this request and determine whether or not it should be recommended for approval.

You are being sent this notice because the City Commission would like to know how the Neighborhood Association feels and would appreciate any comments that they may have. You may send these comments to 933 Terrace, Muskegon, MI 49440 or attend the City Commission Meeting on October 23, 2007, at 5:30 p.m. in the Commission Chambers.

If you have any questions, please feel free to contact me at 724-6705.

Sincerely,

Linda Potter
Deputy Clerk

Affirmative Action
(231)724-6703
FAX (231)722-1214

Assessor
(231)724-6708
FAX (231)726-5181

Cemetery
(231)724-6783
FAX (231)726-5617

City Manager
(231)724-6724
FAX (231)722-1214

Civil Service
(231)724-6716
FAX (231)724-4405

Clerk
(231)724-6705
FAX (231)724-4178

Comm. & Neigh.
Services
(231)724-6717
FAX (231)726-2501

Engineering
(231)724-6707
FAX (231)727-6904

Finance
(231)724-6713
FAX (231)724-6768

Fire Department
(231)724-6792
FAX (231)724-6985

Income Tax
(231)724-6770
FAX (231)724-6768

Info. Technology
(231)724-4126
FAX (231)722-4301

Inspection Services
(231)724-6715
FAX (231)728-4371

Leisure Services
(231)724-6704
FAX (231)724-1196

Mayor's Office
(231)724-6701
FAX (231)722-1214

Planning/Zoning
(231)724-6702
FAX (231)724-6790

Police Department
(231)724-6750
FAX (231)722-5140

Public Works
(231)724-4100
FAX (231)722-4188

Treasurer
(231)724-6720
FAX (231)724-6768

Water Billing
(231)724-6718
FAX (231)724-6768

Water Filtration
(231)724-4106
FAX (231)755-5290



October 17, 2007

Robert and Jennifer Osborn
3125 Tuell NW
Grand Rapids, MI 49504

Dear Mr. & Mrs. Osborn:

This letter is to inform you that your liquor license request to transfer the 2007 Class C-SDM licensed business at 1601 Beach Street, Muskegon, will be presented to the City Commission on October 23, 2007. This meeting begins at 5:30 p.m. and is located in the City Commission Chambers, 933 Terrace, Muskegon, MI.

This request has also been sent to the Beachwood/Bluffton Neighborhood Association for their comments. It is Commission practice to let the Neighborhood Association know of any liquor license requests that are located within their boundaries. This allows for comments from the people who live there and not just from the owners of the business' who are located there.

Sincerely,

Linda Potter
Deputy Clerk

Affirmative Action
(231)724-6703
FAX (231)722-1214

Assessor
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FAX (231)726-5181

Cemetery
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City Manager
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FAX (231)722-1214

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FAX (231)724-4405

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FAX (231)724-4178

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FAX (231)726-2501

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Income Tax
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FAX (231)724-6768

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FAX (231)724-6790

Police Department
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FAX (231)722-5140

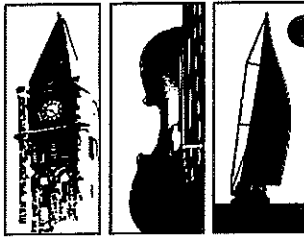
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(231)724-6720
FAX (231)724-6768

Water Billing
(231)724-6718
FAX (231)724-6768

Water Filtration
(231)724-4106
FAX (231)755-5290

MUSKEGON



West Michigan's Shoreline City
www.shorelinecity.com

October 26, 2007

Liquor Control Commission
7150 Harris
PO Box 30005
Lansing, MI 48909-7505

REF: Req ID #426221
Jennifer L. Osborn &
Robert L. Osborn
1601 Beach
Muskegon, MI 49441

To Whom It May Concern:

Enclosed is the Resolution, Form LC-1800, Form LC-1636, print cards and check for Jennifer and Robert Osborn. This was recommended for approval by the City Commission at their October 23, 2007, City Commission Meeting.

Please do not hesitate to call me at (231) 724-6705 if you have any questions.

Sincerely,

Linda Potter
Deputy Clerk

enc.

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$
 Certified Fee
 Return Receipt Fee
 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)
 Total Postage & Fees \$

Postmark: MUSKEGON, MI 49440-9998
 Date: MAR 26 2007

Sent To LCC for 2007-89(d) + (f)
+ 2007-90(c)
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

PS Form 3811, June 2002 See Reverse for Instructions

4E28 04E8 4000 0010 9002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Liquor Control Commission
 7150 Harris
 PO Box 30005
 Lansing, MI 48909-7505

2. Article Number

(Transfer from service label)

7006 0100 0004 8340 8234

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

MAILED & DELIVERED SERVICE
 OCT 29 2007

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Date: October 23, 2007
To: Honorable Mayor and City Commissioners
From: Ann Marie Becker, City Clerk
RE: Liquor License Transfer Request
AGZ, Inc., 313 W. Laketon

SUMMARY OF REQUEST: The Liquor Control Commission is seeking local recommendation on a request from AGZ, Inc. to transfer ownership of the 2007 Class C-SDM licensed business with Dance-Entertainment Permit located at 313 W. Laketon Avenue from The Castle Inn, Inc. (Time Out Lounge).

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Approval of the request.



Muskegon Police Department

Anthony L. Kleibecker
Director of Public Safety

980 Jefferson
Muskegon, Michigan
49443-0536

www.muskegonpolice.com

Phone: 231-724-6750
FAX: 231-722-5140

October 12, 2007

To: City Commission through the City Manager

From: 
Anthony L. Kleibecker, Director of Public Safety

Re: Liquor License Request – 313 W. Laketon Avenue
Transfer of 2007 SDM Licensed Business with Dance-Entertainment Permit

The Muskegon Police Department has received a request from the Michigan Liquor Control Commission for an investigation from applicant AGZ, Inc. which is comprised of Scott Miller of 3147 Lakeshore Drive, Muskegon, MI.

AGZ, Inc. requests to transfer ownership of 2007 Class C-SDM licensed business with Dance-Entertainment Permit from The Castle Inn, Inc. located at 313 W. Laketon Ave, Muskegon, Mi. Mr. Miller has experience in the alcohol service industry and is aware of the Muskegon Police Department's position on enforcing local alcohol laws and ordinances. The applicant has also been made aware of the following two websites for additional training opportunities; the Michigan Licensed Beverage Association and the Liquor Control Commission.

A check of Muskegon Police Department records and criminal history showed no reason to deny this request.

ALK/kd

mailed 9.14.07 AA



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

FOR MLCC USE ONLY

Request ID # 427882

Business ID # 200113

LOCAL APPROVAL NOTICE

[Authorized by MCL 436.1501]

August 16, 2007

TO: Muskegon City Council
Clerk
933 Terrace Street, PO Box 536
Muskegon, MI 49443-0536

APPLICANT: AGZ, INC.

Home Address and Telephone No. or Contact Address and Telephone No:

STOCKHOLDER:
SCOTT M MILLER 3147 LAKESHORE DRIVE, MUSKEGON MI, 49441
(B.P. 231-744-3900 H.P. 231-206-3405)

The MLCC cannot consider the approval of an application for a new or transfer of an on-premises license without the approval of the local legislative body pursuant to the provisions of MCL 436.1501 of the Liquor Control Code of 1998. For your information, local legislative body approval is also required for DANCE, ENTERTAINMENT, DANCE-ENTERTAINMENT AND TOPLESS ACTIVITY PERMITS AND FOR OFFICIAL PERMITS FOR EXTENDED HOURS FOR DANCE AND/OR ENTERTAINMENT pursuant to the provisions of MCL 436.1916 of the Liquor Control Code of 1998.

For your convenience a resolution form is enclosed that includes a description of the licensing application requiring consideration of the local legislative body. The clerk should complete the resolution certifying that your decision of approval or disapproval of the application was made at an official meeting. **Please return the completed resolution to the MLCC as soon as possible.**

If you have any questions, please contact the On-Premises Section of the Licensing Division at (517) 636-4634.

jr

PLEASE COMPLETE ENCLOSED RESOLUTION AND RETURN

TO THE LIQUOR CONTROL COMMISSION AT ABOVE ADDRESS

mail 9-14-07
AN

2007-89(f)

Request ID #427882

RESOLUTION

At a Regular meeting of the City Commission
(Regular or Special) (Township Board, City or Village Council)

called to order by Mayor Warmington on October 23, 2007 at 5:30 P.M.

The following resolution was offered:

Moved by Vice Mayor Gawron and supported by Commissioner Carter

That the request from AGZ, INC. REQUESTING TO TRANSFER OWNERSHIP 2007 CLASS C LICENSED BUSINESS, WITH DANCE-ENTERTAINMENT PERMIT FROM THE CASTLE INN, INC. LOCATED AT 313 W LAKETON, MUSKEGON MICHIGAN, 49441, MUSKEGON COUNTY

be considered for Approval
(Approval or Disapproval)

APPROVAL

DISAPPROVAL

Yeas: 7

Yeas: _____

Nays: 0

Nays: _____

Absent: 0

Absent: _____

It is the consensus of this legislative body that the application be:

Recommended for issuance
(Recommended or Not Recommended)

State of Michigan _____)

County of Muskegon _____)

I hereby certify that the foregoing is a true and complete copy of a resolution offered and

adopted by the City Commission at a Regular
(Township Board, City or Village Council) (Regular or Special)

meeting held on October 23, 2007.
(Date)

SEAL

(Signed) Ann Marie Becker
(Township, City or Village Clerk)
Ann Marie Becker, City Clerk
933 Terrace, Muskegon, MI 49440
(Mailing address of Township, City or Village)

RECEIVED

OCT 12 2007

MUSKEGON POLICE DEPT.
CHIEF of POLICE

To: Tony Kleibecker, Director of Public Safety

From: Det. Kurt Dykman

Date: 10-12-07

Re: Liquor License Transfer

Chief Kleibecker,

The Muskegon Police Department has received a request from the Michigan Liquor Control Commission for an investigation from applicant AGZ, Inc. of 313 W. Laketon Ave., Muskegon, MI.

AGZ, Inc. requests to transfer ownership of 2007 Class C-SDM licensed business with Dance-Entertainment Permit from The Castle Inn, Inc. located at 313 W. Laketon Ave, Muskegon, Mi. AGZ, Inc. is comprised of Scott Miller of 3147 Lakeshore Drive, Muskegon, MI. Mr. Miller does have experience in the alcohol serving industry and had been made aware of the police department's position of enforcing local alcohol laws and ordinances.

A check of MPD records and Criminal History showed no reason to deny this request.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'K. Dykman', with a horizontal line extending to the right.

Det. Kurt Dykman

data/common/liquor/AGZ

mailed 9-14-07
AA



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

POLICE INVESTIGATION REQUEST

[Authorized by MCL 436.1201(4)]

RECEIVED

August 16, 2007

SEP 18 2007

Muskegon Police Department
Chief of Police
980 Jefferson Street, PO Box 536
Muskegon, MI 49443-0536

MUSKEGON POLICE DEPT.
CHIEF of POLICE

Request ID #427882

Applicant: AGZ, INC. REQUESTING TO TRANSFER OWNERSHIP 2007 CLASS C-SDM LICENSED BUSINESS, WITH DANCE-ENTERTAINMENT PERMIT FROM THE CASTLE INN, INC. LOCATED AT 313 W LAKETON, MUSKEGON MICHIGAN, 49441, MUSKEGON COUNTY

Please make an investigation of the application. If you do not believe that the applicants are qualified for licensing, give your reasons in detail. Complete the Police Inspection Report on Liquor License Request, LC-1800, or for Detroit police, the Detroit Police Investigation of License Request, LC-1802. If there is not enough room on the front of the form, you may use the back.

Forward your report, along with fingerprint cards (if requested) and \$30.00 for each card to the Michigan Liquor Control Commission.

If you have any questions, contact the appropriate unit (On Premises, Off Premises or Manufacturers & Wholesalers) at (517) 322-1400.

jr

XXXXXXXXXXXXXXXXXXXX
YOUR RECEIPT
THANK YOU
CALL AGAIN
XXXXXXXXXXXXXXXXXXXX
LIQUOR 250.00
ITEM CT 1
CHECK
250.00
08-51A110-26-2007
8027 LINDA

SCOTT M. MILLER 3147 LAKESHORE DR. PH. 231-755-0557 MUSKEGON, MI 49441		9-91742 720 4018160921	2086
DATE <u>10-12-07</u>			
PAY TO THE ORDER OF <u>State of Michigan</u>		\$ <u>30.00</u>	
<u>thirty & 00/100</u>		DOLLARS	
National City www.nationalcity.com National City Bank of Michigan/Illinois Kalamazoo, Michigan			
MEMO _____		<u>[Signature]</u> MP	
⑆072000915⑆ 4018160921⑈ 2086			

SCOTT M. MILLER 3147 LAKESHORE DR. PH. 231-755-0557 MUSKEGON, MI 49441		9-91742 720 4018160921	2085
DATE <u>10-12-07</u>			
PAY TO THE ORDER OF <u>City of Muskegon</u>		\$ <u>250.00</u>	
<u>Two hundred Fifty & 00/100</u>		DOLLARS	
National City www.nationalcity.com National City Bank of Michigan/Illinois Kalamazoo, Michigan			
MEMO _____		<u>[Signature]</u> MP	
⑆072000915⑆ 4018160921⑈ 2085			

Affirmative Action
(231)724-6703
FAX (231)722-1214

Assessor
(231)724-6708
FAX (231)726-5181

Cemetery
(231)724-6783
FAX (231)726-5617

City Manager
(231)724-6724
FAX (231)722-1214

Civil Service
(231)724-6716
FAX (231)724-4405

Clerk
(231)724-6705
FAX (231)724-4178

Comm. & Neigh.
Services
(231)724-6717
FAX (231)726-2501

Engineering
(231)724-6707
FAX (231)727-6904

Finance
(231)724-6713
FAX (231)724-6768

Fire Department
(231)724-6792
FAX (231)724-6985

Income Tax
(231)724-6770
FAX (231)724-6768

Info. Technology
(231)724-4126
FAX (231)722-4301

Inspection Services
(231)724-6715
FAX (231)728-4371

Leisure Services
(231)724-6704
FAX (231)724-1196

Mayor's Office
(231)724-6701
FAX (231)722-1214

Planning/Zoning
(231)724-6702
FAX (231)724-6790

Police Department
(231)724-6750
FAX (231)722-5140

Public Works
(231)724-4100
FAX (231)722-4188

Treasurer
(231)724-6720
FAX (231)724-6768

Water Billing
(231)724-6718
FAX (231)724-6768

Water Filtration
(231)724-4106
FAX (231)755-5290



October 26, 2007

Liquor Control Commission
7150 Harris
PO Box 30005
Lansing, MI 48909-7505

REF: Req ID #427882
AGZ, Inc.
313 W. Laketon
Muskegon, MI 49441

To Whom It May Concern:

Enclosed is the Resolution, Form LC-1800, Form LC-1636, print card and check for Scott M. Miller. This was recommended for approval by the City Commission at their October 23, 2007, City Commission Meeting.

Please do not hesitate to call me at (231) 724-6705 if you have any questions.

Sincerely,

Linda Potter
Deputy Clerk

enc.

U.S. Postal Service[™]
CERTIFIED MAIL[™] RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$
 Certified Fee
 Return Receipt Fee
 Restricted Delivery Fee
 (Endorsement Required)
 Total Postage & Fees \$

Postmark: MUSKEGON, MI 49440-9998

Sent to LCC for 2007-89(d) + (f)
+ 2007-90 (c)
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

PS Form 3811, June 2002 See Reverse for Instructions

4E28 04E8 4000 0070 9002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Liquor Control Commission
 7150 Harris
 PO Box 30005
 Lansing, MI 48909-7505

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

MAIL & DELIVERY SERVICE

OCT 29 2007

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☐ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7006 0100 0004 8340 8234

mailed 9-14-07
AA



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

FOR MLCC USE ONLY

Request ID # 427882

Business ID # 200113

POLICE INVESTIGATION REPORT

[Authorized by MCL 436.1217 and R 436.1105; MAC]

Please conduct your investigation as soon as possible, complete all four sections of this report and return the completed report and fingerprint cards to the MLCC

LICENSEE/APPLICANT NAME, BUSINESS ADDRESS AND LICENSING REQUEST:

AGZ, INC. REQUESTING TO TRANSFER OWNERSHIP 2007 CLASS C-SDM LICENSED BUSINESS, WITH DANCE-ENTERTAINMENT PERMIT FROM THE CASTLE INN, INC. LOCATED AT 313 W LAKETON, MUSKEGON MICHIGAN, 49441, MUSKEGON COUNTY

Section 1.

APPLICANT INFORMATION

APPLICANT #1: SCOTT M MILLER
3147 LAKESHORE DRIVE
MUSKEGON, MI 49441
(B.P. 231-744-3900 H.P. 231-206-3405)

APPLICANT #2:

DATE FINGERPRINTED: 10-12-07

DATE FINGERPRINTED:

DATE OF BIRTH: 12-8-70

Is the applicant a U.S. Citizen: ☐ Yes ☐ No*

DATE OF BIRTH:

Is the applicant a U.S. Citizen: ☐ Yes ☐ No*

*Does the applicant have permanent Resident Alien status?
☐ Yes ☐ No*

*Does the applicant have permanent Resident Alien status?
☐ Yes ☐ No*

*Does the applicant have a Visa? Enter status:

*Does the applicant have a Visa? Enter status:

****Attach the fingerprint card and \$30.00 for each card and mail to the Michigan Liquor Control Commission****

ARREST RECORD: ☐ Felony ☐ Misdemeanor

Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)

ARREST RECORD: ☐ Felony ☐ Misdemeanor

Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)

Section 2.

INVESTIGATION OF BUSINESS AND ADDRESS TO BE LICENSED

Does applicant intend to have dancing, entertainment, topless activity, or extended hours permit?

☐ No ☒ Yes, complete LC-1636

Are gas pumps on the premises or directly adjacent? ☒ No ☐ Yes, explain relationship:

Section 3.

LOCAL AND STATE CODES AND ORDINANCES, AND GENERAL RECOMMENDATIONS

Will the applicant's proposed location meet all appropriate state and local building, plumbing, zoning, fire, sanitation and health laws and ordinances, if this license is granted? ☒ Yes ☐ No

If you are recommending approval subject to certain conditions, list the conditions: (attach a signed and dated report if more space is needed)

Section 4.

RECOMMENDATION

From your investigation:

1. Is this applicant qualified to conduct this business if licensed? ☒ Yes ☐ No
2. Is the proposed location satisfactory for this business? ☒ Yes ☐ No
3. Should the Commission grant this request? ☒ Yes ☐ No
4. If any of the above 3 questions were answered no, state your reasons: (Attach a signed and dated report if more space is needed)

[Signature]
Signature (Sheriff or Chief of Police)

10-12-07
Date

MUSKEGON POLICE DEPARTMENT

mailed 9.14.07
AD



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

FOR MLCC USE ONLY

Request ID # 427882

Business ID # 200113

LAW ENFORCEMENT RECOMMENDATION

[Authorized by MCL 436.1916, R 436.1105(2)(d) and R 436.1403]

August 16, 2007

TO: MUSKEGON POLICE DEPARTMENT

Re: AGZ, INC.

We have received a request from the above licensee for the type of permit indicated below. Please make an investigation and submit your report and/or recommendation to the offices of the MLCC at the above address. Questions about this request should be directed to the MLCC Licensing Division at (517) 322-1400.

☐ OFFICIAL PERMIT FOR EXTENDED HOURS OF OPERATION FOR: _____
Weekdays _____ A.M. to _____ A.M. _____
Sundays _____ A.M. to _____ A.M./P.M. _____

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

NOTE: If the applicant is requesting two separate extended hours permits and the permits are for **different hours** you must complete the box below. If additional space is needed please use reverse side of this form.

☐ OFFICIAL PERMIT FOR EXTENDED HOURS OF OPERATION FOR: _____
Weekdays _____ A.M. to _____ A.M. _____
Sundays _____ A.M. to _____ A.M./P.M. _____

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☒ DANCE PERMIT

☒ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☒ ENTERTAINMENT PERMIT

☒ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☐ TOPLESS ACTIVITY PERMIT

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

mailed 9-14-07
AA

Law Enforcement Recommendation (continued)

Page 2

August 16, 2007

☐ OUTDOOR SERVICE

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☐ PARTICIPATION PERMIT

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☐ ADDITIONAL BAR PERMIT

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

☐ OTHER

☐ Recommended ☐ Recommended, subject to final inspection ☐ Not Recommended

Signed:

x *J. L. Klebecker*

Signature and Title
Muskegon Police Department

Anthony Klebecker, Director of Public Safety
Print Name and Title

Date: 10-12-07

jr

9-18-07
07-189

LIQUOR LICENSE REVIEW FORM

Business Name: AGZ, Inc.

AKA Business Name (if applicable): _____

Operator/Manager's Name: Scott M. Miller

Business Address: 313 W. Laketon

Reason for Review:

New License ☐ Transfer of Ownership ☒ Dance Permit ☐

Drop/Add Name on License ☐ Transfer Location ☐

Drop/Add Stockholder Name ☐ New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety Approved ☒ Denied ☐ No Action Needed ☐

Income Tax Approved ☐ Owing ☐ Amount: _____

Treasurer Approved ☐ Owing ☐ Amount: _____

Zoning Approved ☐ Denied ☐ Pending ZBA ☐

Clerk's Approved ☐ Owing ☐ Amount: _____

Fire/Inspections Approved ☐ Denied ☐ Remaining Defects ☐

Department Signature J. L. Shuler 10-12-07

Please return to the City Clerk's Office

9-18-07

LIQUOR LICENSE REVIEW FORM

Business Name: AGZ, Inc.

AKA Business Name (if applicable): _____

Operator/Manager's Name: Scott M. Miller

Business Address: 313 W. Laketon

Reason for Review:

New License ☐ Transfer of Ownership ☒ Dance Permit ☐

Drop/Add Name on License ☐ Transfer Location ☐

Drop/Add Stockholder Name ☐ New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety Approved ☐ Denied ☐ No Action Needed ☐

Income Tax Approved ☒ Owing ☐ Amount: _____

Treasurer Approved ☐ Owing ☐ Amount: _____

Zoning Approved ☐ Denied ☐ Pending ZBA ☐

Clerk's Approved ☐ Owing ☐ Amount: _____

Fire/Inspections Approved ☐ Denied ☐ Remaining Defects ☐

Department Signature 

Please return to the City Clerk's Office

9-18-07

LIQUOR LICENSE REVIEW FORM

Business Name: AGZ, Inc.

AKA Business Name (if applicable): _____

Operator/Manager's Name: Scott M. Miller

Business Address: 313 W. Laketon

Reason for Review:

New License ☐

Transfer of Ownership ☒

Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☐

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety

Approved ☐

Denied ☐

No Action Needed ☐

Income Tax

Approved ☐

Owing ☐

Amount: _____

Treasurer

Approved ☒

Owing ☐

Amount: _____

Zoning

Approved ☐

Denied ☐

Pending ZBA ☐

Clerk's

Approved ☐

Owing ☐

Amount: _____

Fire/Inspections

Approved ☐

Denied ☐

Remaining Defects ☐

☐ FAXED ☐ RECEIVED ☐

OCT 16 2007

☐ APPROVED ☐ POSTED
CITY OF MUSKEGON TREASURY

Department Signature

[Signature] 10/17/07

Please return to the City Clerk's Office

9-18-07

LIQUOR LICENSE REVIEW FORM

Business Name: AGZ, Inc.

AKA Business Name (if applicable): _____

Operator/Manager's Name: Scott M. Miller

Business Address: 313 W. Laketon

Reason for Review:

New License ☐

Transfer of Ownership ☒

Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☐

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety

Approved ☐

Denied ☐

No Action Needed ☐

Income Tax

Approved ☐

Owing ☐

Amount: _____

Treasurer

Approved ☐

Owing ☐

Amount: _____

Zoning

Approved ☒

Denied ☐

Pending ZBA ☐

Clerk's

Approved ☐

Owing ☐

Amount: _____

Fire/Inspections

Approved ☐

Denied ☐

Remaining Defects ☐

Department Signature

M. A. Carter

Please return to the City Clerk's Office

9-18-07

LIQUOR LICENSE REVIEW FORM

Business Name: AGZ, Inc.

AKA Business Name (if applicable): _____

Operator/Manager's Name: Scott M. Miller

Business Address: 313 W. Laketon

Reason for Review:

New License ☐

Transfer of Ownership ☒

Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☐

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety

Approved ☐

Denied ☐

No Action Needed ☐

Income Tax

Approved ☐

Owing ☐

Amount: _____

Treasurer

Approved ☐

Owing ☐

Amount: _____

Zoning

Approved ☐

Denied ☐

Pending ZBA ☐

Clerk's

Approved ☐

Owing ☐

Amount: _____

Fire/Inspections

Approved ☒

Denied ☐

Remaining Defects ☐

Approval pending
Liquor License Inspection

Department Signature _____

Please return to the City Clerk's Office

9-18-07

LIQUOR LICENSE REVIEW FORM

Business Name: AGZ, Inc.

AKA Business Name (if applicable): _____

Operator/Manager's Name: Scott M. Miller

Business Address: 313 W. Laketon

Reason for Review:

New License ☐ Transfer of Ownership ☒ Dance Permit ☐

Drop/Add Name on License ☐ Transfer Location ☐

Drop/Add Stockholder Name ☐ New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety Approved ☐ Denied ☐ No Action Needed ☐

Income Tax Approved ☐ Owing ☐ Amount: _____

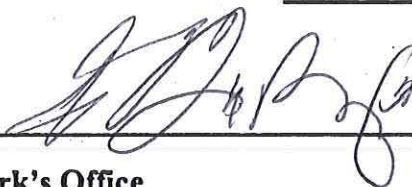
Treasurer Approved ☐ Owing ☐ Amount: _____

Zoning Approved ☐ Denied ☐ Pending ZBA ☐

Clerk's Approved ☐ Owing ☐ Amount: _____

Fire/Inspections Approved ☐ Denied ☐ Remaining Defects ☐

Department Signature



Please return to the City Clerk's Office

Affirmative Action
(231)724-6703
FAX (231)722-1214

Assessor
(231)724-6708
FAX (231)726-5181

Cemetery
(231)724-6783
FAX (231)726-5617

City Manager
(231)724-6724
FAX (231)722-1214

Civil Service
(231)724-6716
FAX (231)724-4405

Clerk
(231)724-6705
FAX (231)724-4178

Comm. & Neigh.
Services
(231)724-6717
FAX (231)726-2501

Engineering
(231)724-6707
FAX (231)727-6904

Finance
(231)724-6713
FAX (231)724-6768

Fire Department
(231)724-6792
FAX (231)724-6985

Income Tax
(231)724-6770
FAX (231)724-6768

Info. Technology
(231)724-4126
FAX (231)722-4301

Inspection Services
(231)724-6715
FAX (231)728-4371

Leisure Services
(231)724-6704
FAX (231)724-1196

Mayor's Office
(231)724-6701
FAX (231)722-1214

Planning/Zoning
(231)724-6702
FAX (231)724-6790

Police Department
(231)724-6750
FAX (231)722-5140

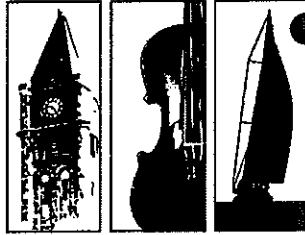
Public Works
(231)724-4100
FAX (231)722-4188

Treasurer
(231)724-6720
FAX (231)724-6768

Water Billing
(231)724-6718
FAX (231)724-6768

Water Filtration
(231)724-4106
FAX (231)755-5290

MUSKEGON



West Michigan's Shoreline City
www.shorelinecity.com

October 17, 2007

Mr. Scott Miller
3147 Lakeshore Drive
Muskegon, MI 49441

Dear Mr. Miller:

This letter is to inform you that your liquor license request to transfer the 2007 Class C-SDM licensed business from The Castle Inn, Inc. located at 313 W. Laketon Avenue, Muskegon, will be presented to the City Commission on October 23, 2007. This meeting begins at 5:30 p.m. and is located in the City Commission Chambers, 933 Terrace, Muskegon, MI.

This request has also been sent to the Marsh Field Neighborhood Association for their comments. It is Commission practice to let the Neighborhood Association know of any liquor license requests that are located within their boundaries. This allows for comments from the people who live there and not just from the owners of the business' who are located there.

Sincerely,

Linda Potter
Deputy Clerk

Affirmative Action
(231)724-6703
FAX (231)722-1214

Assessor
(231)724-6708
FAX (231)726-5181

Cemetery
(231)724-6783
FAX (231)726-5617

City Manager
(231)724-6724
FAX (231)722-1214

Civil Service
(231)724-6716
FAX (231)724-4405

Clerk
(231)724-6705
FAX (231)724-4178

Comm. & Neigh.
Services
(231)724-6717
FAX (231)726-2501

Engineering
(231)724-6707
FAX (231)727-6904

Finance
(231)724-6713
FAX (231)724-6768

Fire Department
(231)724-6792
FAX (231)724-6985

Income Tax
(231)724-6770
FAX (231)724-6768

Info. Technology
(231)724-4126
FAX (231)722-4301

Inspection Services
(231)724-6715
FAX (231)728-4371

Leisure Services
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Mayor's Office
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Police Department
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Water Billing
(231)724-6718
FAX (231)724-6768

Water Filtration
(231)724-4106
FAX (231)755-5290



October 17, 2007

Mrs. Ann Martin, President
Marsh Field Neighborhood Assoc.
1782 McIlwraith
Muskegon, MI 49442

Dear Mrs. Martin:

We have received a letter from the Liquor Control Commission reference a request from AGZ, Inc. to transfer ownership of the Class C-SDM licensed business located at 313 W. Laketon from The Castle Inn, Inc. A Class C license permits the sale of beer, wine, or liquor for consumption on the licensed premises; and a SDM license permits the sale of beer and wine for consumption off the premises. On Tuesday, October 23, 2007, the City Commission will review this request and determine whether or not it should be recommended for approval.

You are being sent this notice because the City Commission would like to know how the Neighborhood Association feels and would appreciate any comments that they may have. You may send these comments to 933 Terrace, Muskegon, MI 49440 or attend the City Commission Meeting on October 23, 2007, at 5:30 p.m. in the Commission Chambers.

If you have any questions, please feel free to contact me at 724-6705.

Sincerely,

Linda Potter
Deputy Clerk

Date: October 23, 2007
To: Honorable Mayor and City Commissioners
From: Ann Marie Becker, City Clerk
RE: Liquor License Transfer Request
Amigos, Inc., 1848 E. Sherman,

SUMMARY OF REQUEST: The Liquor Control Commission is seeking local recommendation on a request from Amigos, Inc. to transfer ownership of the 2007 Class C-SDM licensed business located in escrow at 1934 Peck, Muskegon, from Sherm's Saloon, Inc. and transfer location to 1848 E. Sherman, Suite M.

FINANCIAL IMPACT: None.

BUDGET ACTION REQUIRED: None.

STAFF RECOMMENDATION: Approval contingent upon payment of personal property taxes.

MM 9-13-07

Request ID # 422640

2007-90(e)

RESOLUTION

At a Regular meeting of the City Commission
(Regular or Special) (Township Board, City or Village Council)

called to order by Mayor Warmington on October 23, 2007 at 5:30 P.M.

The following resolution was offered:

Moved by Commissioner Carter and supported by Commissioner Wisneski

That the request to TRANSFER OWNERSHIP OF 2007 CLASS C LICENSED BUSINESS, LOCATED IN ESCROW AT 1934 PECK, MUSKEGON, MI 49441, MUSKEGON COUNTY, FROM SHERM'S SALOON, INC. TO AMIGOS, INC. (A KENTUCKY CORPORATION); AND TRANSFER LOCATION TO 1848 E. SHERMAN, SUITE M, MUSKEGON, MI 49442, MUSKEGON COUNTY.

be considered for Approval
(Approval or Disapproval)

APPROVAL

Yeas: 7

Nays: 0

Absent: 0

DISAPPROVAL

Yeas: _____

Nays: _____

Absent: _____

It is the consensus of this legislative body that the application be:

Recommended for issuance
(Recommended or Not Recommended)

State of Michigan _____)

County of Muskegon _____)

I hereby certify that the foregoing is a true and complete copy of a resolution offered and

adopted by the City Commission at a Regular
(Township Board, City or Village Council) (Regular or Special)

meeting held on October 23, 2007.
(Date)

SEAL

(Signed) Ann Marie Becker
(Township, City or Village Clerk)

Ann Marie Becker, City Clerk
933 Terrace, Muskegon, MI 49440
(Mailing address of Township, City or Village)



Muskegon Police Department

Anthony L. Kleibecker
Director of Public Safety

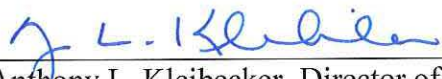
980 Jefferson
Muskegon, Michigan
49443-0536

www.muskegonpolice.com

Phone: 231-724-6750
FAX: 231-722-5140

October 12, 2007

To: City Commission through the City Manager

From: 
Anthony L. Kleibecker, Director of Public Safety

Re: Liquor License Request – 1848 E. Sherman Blvd.
Transfer of 2007 Class C-SDM Licensed Business

The Muskegon Police Department has received a request from the Michigan Liquor Control Commission for an investigation from applicant Amigos, Inc. (A Kentucky Corporation). Amigos, Inc. is comprised of Alfonso Soto of Paducah Kentucky.

Amigos, Inc. requests to transfer ownership of 2007 Class C-SDM licensed business located in escrow at 1934 Peck, Muskegon, Mi from Sherm's Saloon, Inc. and transfer location to 1848 E. Sherman, Suite M, Muskegon, MI. The applicant has been made aware of the following two websites for additional training opportunities; the Michigan Licensed Beverage Association and the Liquor Control Commission.

A check of Muskegon Police Department records and criminal history showed no reason to deny this request.

ALK/kd



Brp- fye
Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

LOCAL APPROVAL NOTICE

[Authorized by MCL 436.1501]

FOR MLCC USE ONLY

Request ID # 422640

Business ID # 198073

September 7, 2007

TO: MUSKEGON CITY COMMISSION
933 TERRACE STREET
PO BOX 536
MUSKEGON, MI 49443-0536

RECEIVED

SEP 17 2007

MUSKEGON
CITY MANAGER'S OFFICE

APPLICANT: AMIGOS, INC. (A KENTUCKY CORPORATION)

Home Address and Telephone No. or Contact Address and Telephone No.:

ALFONSO SOTO, 301 PALISADES CIRCLE, PADUCAH, KY 42001
H(270)841-0201/B(270)575-0151

The MLCC cannot consider the approval of an application for a new or transfer of an on-premises license without the approval of the local legislative body pursuant to the provisions of MCL 436.1501 of the Liquor Control Code of 1998. For your information, local legislative body approval is also required for DANCE, ENTERTAINMENT, DANCE-ENTERTAINMENT AND TOPLESS ACTIVITY PERMITS AND FOR OFFICIAL PERMITS FOR EXTENDED HOURS FOR DANCE AND/OR ENTERTAINMENT pursuant to the provisions of MCL 436.1916 of the Liquor Control Code of 1998.

For your convenience a resolution form is enclosed that includes a description of the licensing application requiring consideration of the local legislative body. The clerk should complete the resolution certifying that your decision of approval or disapproval of the application was made at an official meeting. **Please return the completed resolution to the MLCC as soon as possible.**

If you have any questions, please contact the On-Premises Section of the Licensing Division as (517) 636-4634.

**PLEASE COMPLETE ENCLOSED RESOLUTION AND RETURN
TO THE LIQUOR CONTROL COMMISSION AT ABOVE ADDRESS**

RECEIVED

OCT 12 2007

MUSKEGON POLICE DEPT.
CHIEF of POLICE

To: Tony Kleibecker, Director of Public Safety

From: Det. Kurt Dykman

Date: 10-12-07

Re: Liquor License Transfer

Chief Kleibecker,

The Muskegon Police Department has received a request from the Michigan Liquor Control Commission for an investigation from applicant Amigos, Inc. (A Kentucky Corporation).

Amigos, Inc. requests to transfer ownership of 2007 Class C-SDM licensed business located in escrow at 1934 Peck, Muskegon, MI from Sherm's Saloon, Inc. and transfer location to 1848 E. Sherman, Suite M, Muskegon, MI. Amigos, Inc. is comprised of Alfonso Soto of Paducah Kentucky.

A check of MPD records and Criminal History showed no reason to deny this request.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'K. Dykman', with a horizontal line extending to the right.

Det. Kurt Dykman

data/common/liquor/Amigos



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

POLICE INVESTIGATION REPORT

[Authorized by MCL 436.1217 and R 436.1105; MAC]

FOR MLCC USE ONLY

Request ID # 422640

Business ID # 198073

Please conduct your investigation as soon as possible, complete all four sections of this report and return the completed report and fingerprint cards to the MLCC

LICENSEE/APPLICANT NAME, BUSINESS ADDRESS AND LICENSING REQUEST:

AMIGOS, INC. (A KENTUCKY CORPORATION) REQUESTS TO TRANSFER OWNERSHIP OF 2007 CLASS C-SDM LICENSED BUSINESS, LOCATED IN ESCROW AT 1934 PECK, MUSKEGON, MI 49441, MUSKEGON COUNTY, FROM SHERM'S SALOON, INC.; AND TRANSFER LOCATION TO 1848 E. SHERMAN, SUITE M, MUSKEGON, MI 49442, MUSKEGON COUNTY.

Section 1. APPLICANT INFORMATION

APPLICANT #1:
ALFONSO SOTO - STOCKHOLDER
301 PALISADES CIRCLE
PADUCAH, KY 42001
H(270)841-0201/B(270)575-0151

APPLICANT #2:

DATE FINGERPRINTED: **NO FINGERPRINTS REQUIRED**

DATE FINGERPRINTED:

DATE OF BIRTH: 11-8-65

Is the applicant a U.S. Citizen: ☒ Yes ☐ No*

DATE OF BIRTH:

Is the applicant a U.S. Citizen: ☐ Yes ☐ No*

*Does the applicant have permanent Resident Alien status?

☐ Yes ☐ No*

*Does the applicant have permanent Resident Alien status?

☐ Yes ☐ No*

*Does the applicant have a Visa? Enter status:

*Does the applicant have a Visa? Enter status:

****Attach the fingerprint card and \$30.00 for each card and mail to the Michigan Liquor Control Commission****

ARREST RECORD: ☐ Felony ☐ Misdemeanor

Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)

ARREST RECORD: ☐ Felony ☐ Misdemeanor

Enter record of all arrests & convictions (attach a signed and dated report if more space is needed)

Section 2. INVESTIGATION OF BUSINESS AND ADDRESS TO BE LICENSED

Does applicant intend to have dancing, entertainment, topless activity, or extended hours permit?

☒ No ☐ Yes, complete LC-1636

Are gas pumps on the premises or directly adjacent? ☒ No ☐ Yes, explain relationship:

Section 3. LOCAL AND STATE CODES AND ORDINANCES, AND GENERAL RECOMMENDATIONS

Will the applicant's proposed location meet all appropriate state and local building, plumbing, zoning, fire, sanitation and health laws and ordinances, if this license is granted? ☒ Yes ☐ No

If you are recommending approval subject to certain conditions, list the conditions: (attach a signed and dated report if more space is needed)

Section 4. RECOMMENDATION

From your investigation:

1. Is this applicant qualified to conduct this business if licensed?

☒ Yes ☐ No

2. Is the proposed location satisfactory for this business?

☒ Yes ☐ No

3. Should the Commission grant this request?

☒ Yes ☐ No

4. If any of the above 3 questions were answered no, state your reasons: (Attach a signed and dated report if more space is needed)

X J L. Schleicher
Signature (Sheriff or Chief of Police)

10-12-07
Date

MUSKEGON POLICE DEPARTMENT

AMIGOS, INC
DBA LOS AMIGOS
1848 EAST SHERMAN BLVD., SUITE M
MUSKEGON, MI 49442
(231) 737-5010

FLAGSTAR BANK, FSB
MUSKEGON, MI 49444
74-7185/2724

1291

9/28/2007

PAY TO THE ORDER OF MUSKEGON POLICE DEPARTMENT

\$ **250.00

Two Hundred Fifty and 00/100***** DOLLARS

MUSKEGON POLICE DEPARTMENT

MEMO

ALFONSO SOTO-- INVESTIGATION

Amigos

MP

⑈001291⑈ ⑆272471852⑆ 581682269⑈

XXXXXXXXXXXXXXXXXXXX
YOUR RECEIPT
THANK YOU
CALL AGAIN
XXXXXXXXXXXXXXXXXXXX
LIQUOR 250.00
ITEM CT 1
CHECK
250.00
09:14AM 10-26-2007
8029 LINDA

MM 9-13-07



Michigan Department of Labor & Economic Growth
MICHIGAN LIQUOR CONTROL COMMISSION (MLCC)
7150 Harris Drive, P.O. Box 30005
Lansing, Michigan 48909-7505

POLICE INVESTIGATION REQUEST

[Authorized by MCL 436.1201(4)]

September 7, 2007

MUSKEGON POLICE DEPARTMENT
CHIEF OF POLICE
980 JEFFERSON STREET, PO BOX 536
MUSKEGON, MI 49443-0536

Request ID #: 422640

Applicant:

AMIGOS, INC. (A KENTUCKY CORPORATION) REQUESTS TO TRANSFER OWNERSHIP OF 2007 CLASS C-SDM LICENSED BUSINESS, LOCATED IN ESCROW AT 1934 PECK, MUSKEGON, MI 49441, MUSKEGON COUNTY, FROM SHERM'S SALOON, INC.; AND TRANSFER LOCATION TO 1848 E. SHERMAN, SUITE M, MUSKEGON, MI 49442, MUSKEGON COUNTY.

Please make an investigation of the application. If you do not believe that the applicants are qualified for licensing, give your reasons in detail. Complete the Police Inspection Report on Liquor License Request, LC-1800, or for Detroit police, the Detroit Police Investigation of License Request, LC-1802. If there is not enough room on the front of the form, you may use the back.

Forward your report, along with fingerprint cards (if requested) and \$30.00 for each card to the Michigan Liquor Control Commission.

If you have any questions, contact the appropriate unit (On Premises, Off Premises or Manufacturers & Wholesalers) at (517) 322-1400.

sfs

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name: Amigos, Inc.

AKA Business Name (if applicable): Transfer from Sherm's Saloon, 1934 Peck

Operator/Manager's Name: Alfonso Soto

Business Address: 1848 E. Sherman, Suite M

Reason for Review:

New License ☐ Transfer of Ownership ☒ Dance Permit ☐

Drop/Add Name on License ☐ Transfer Location ☒

Drop/Add Stockholder Name ☐ New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety Approved ☒ Denied ☐ No Action Needed ☐

Income Tax Approved ☐ Owing ☐ Amount: _____

Treasurer Approved ☐ Owing ☐ Amount: _____

Zoning Approved ☐ Denied ☐ Pending ZBA ☐

Clerk's Approved ☐ Owing ☐ Amount: _____

Fire/Inspections Approved ☐ Denied ☐ Remaining Defects ☐

Department Signature J. L. Schubert 10-12-07

Please return to the City Clerk's Office

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name: Amigos, Inc.

AKA Business Name (if applicable): Transfer from Sherm's Saloon, 1934 Peck

Operator/Manager's Name: Alfonso Soto

Business Address: 1848 E. Sherman, Suite M

Reason for Review:

New License ☐

Transfer of Ownership ☒

Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☒

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety

Approved ☐

Denied ☐

No Action Needed ☐

Income Tax

Approved ☒

Owing ☐

Amount: _____

Treasurer

Approved ☐

Owing ☐

Amount: _____

Zoning

Approved ☐

Denied ☐

Pending ZBA ☐

Clerk's

Approved ☐

Owing ☐

Amount: _____

Fire/Inspections

Approved ☐

Denied ☐

Remaining Defects ☐

Department Signature



Please return to the City Clerk's Office

9-17-07

LIQUOR LICENSE REVIEW FORM

☐ FAXED ☐ RECEIVED ☐

SEP 18 2007

Business Name: Amigos, Inc.

☐ APPROVED ☐ POSTED
CITY OF MUSKEGON TREASURY

AKA Business Name (if applicable): Transfer from Sherm's Saloon, 1934 Peck

Operator/Manager's Name: Alfonso Soto

Business Address: 1848 E. Sherman, Suite M

Reason for Review:

New License ☐

Transfer of Ownership ☒

Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☒

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety Approved ☐ Denied ☐ No Action Needed ☐

Income Tax Approved ☐ Owing ☐ Amount: _____

Treasurer Approved ☐ Owing ☒ Amount: SEE ATTACHED TAX NOTICE.

Zoning Approved ☐ Denied ☐ Pending ZBA ☐

Clerk's Approved ☐ Owing ☐ Amount: _____

Fire/Inspections Approved ☐ Denied ☐ Remaining Defects ☐

Department Signature W. Soto 9/18/07

Please return to the City Clerk's Office

**CITY OF MUSKEGON
DELINQUENT TAX NOTICE**

CITY OF MUSKEGON TREASURER
933 TERRACE STREET
PO BOX 536
MUSKEGON MI 49443-0536
231-724-6720

WWW.MUSKEGON-MI.GOV

SHERMS SALOON

1934 PECK ST
MUSKEGON MI 49441

PROPERTY INFORMATION

Property Number: 24-900-251-2390-00
School Dist: MUSKEGON PUBLIC SCHOOLS
Property Address:

1934 PECK ST
MUSKEGON MI 49441

LEGAL DESCRIPTION:

PERSONAL PROPERTY 1934 PECK ST

DELINQUENT TAXES DUE

	TOTAL DUE	TOTAL DUE	TOTAL DUE	
	IF PAID BY	IF PAID BY	IF PAID BY	
TAX YEAR	TAX DUE	08/31/07	09/30/07	10/31/07
2006	189.54	208.05	209.95	211.84

paid

TOTAL	189.54	208.05	209.95	211.84
-------	--------	--------	--------	--------

THIS IS A DELINQUENT PERSONAL OR SPECIFIC PROPERTY TAX FOR THE YEAR SHOWN. PLEASE PAY THE AMOUNT DUE IN ORDER TO AVOID ADDITIONAL PENALTIES AND INTEREST. MAKE CHECKS PAYABLE TO THE CITY OF MUSKEGON AND MAIL TO: CITY TREASURER, P.O. BOX 536, MUSKEGON, MI 49443-0536. YOU CAN ALSO PAY IN PERSON AT THE MUSKEGON CITY HALL, 933 TERRACE STREET, MUSKEGON, MICHIGAN.

THIS NOTICE IS FOR THE WINTER SEASON PROPERTY TAXES AND IS PAYABLE TO THE CITY OF MUSKEGON TREASURER. THANK YOU FOR YOUR ATTENTION TO THIS MATTER.

Please detach along perforation. Keep the top portion for your records.

Pay this tax to:

PLEASE RETURN THIS PORTION WITH YOUR PAYMENT. THANK YOU.

CITY OF MUSKEGON TREASURER
933 TERRACE STREET
PO BOX 536
MUSKEGON MI 49443-0536

Delinquent Tax for Property Number:
24-900-251-2390-00

TAXPAYER NOTE: Are your name & mailing address correct?
If not, please make corrections below. Thank You.

Property Address:
1934 PECK ST
MUSKEGON MI 49441

SHERMS SALOON

1934 PECK ST
MUSKEGON MI 49441

Due if paid by 08/31/07	208.05
Due if paid by 09/30/07	209.95
Due if paid by 10/31/07	211.84

Make check payable to:
CITY OF MUSKEGON TREASURER

Amount Remitted: _____

AMIGOS, INC
DBA LOS AMIGOS
1848 EAST SHERMAN BLVD., SUITE M
MUSKEGON, MI 49442
(231) 737-5010

FLAGSTAR BANK, FSB
MUSKEGON, MI 49444
74-7185/2724

1320

10/24/2007

PAY TO THE
ORDER OF

CITY OF MUSKEGON

\$**211.84

Two Hundred Eleven and 84/100*****

DOLLARS

CITY OF MUSKEGON
PO BOX 1825
MUSKEGON, MI 48099-1825

Kyma G. Shultz MP

MEMO

personal property tax

⑈001320⑈ ⑆272471852⑆ 581682269⑈

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name: Amigos, Inc.

AKA Business Name (if applicable): Transfer from Sherm's Saloon, 1934 Peck

Operator/Manager's Name: Alfonso Soto

Business Address: 1848 E. Sherman, Suite M

Reason for Review:

New License ☐

Transfer of Ownership ☒

Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☒

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety

Approved ☐

Denied ☐

No Action Needed ☐

Income Tax

Approved ☐

Owing ☐

Amount: _____

Treasurer

Approved ☐

Owing ☐

Amount: _____

Zoning

Approved ☒

Denied ☐

Pending ZBA ☐

Clerk's

Approved ☐

Owing ☐

Amount: _____

Fire/Inspections

Approved ☐

Denied ☐

Remaining Defects ☐

Department Signature _____

Please return to the City Clerk's Office

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name: Amigos, Inc.

AKA Business Name (if applicable): Transfer from Sherm's Saloon, 1934 Peck

Operator/Manager's Name: Alfonso Soto

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Dance Permit ☐

Drop/Add Name on License ☐

Transfer Location ☒

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

Public Safety Approved ☐ Denied ☐ No Action Needed ☐

Income Tax Approved ☐ Owing ☐ Amount: _____

Treasurer Approved ☐ Owing ☐ Amount: _____

Zoning Approved ☐ Denied ☐ Pending ZBA ☐

Clerk's Approved ☐ Owing ☐ Amount: _____

Fire/Inspections Approved ☒ Denied ☐ Remaining Defects ☐

approved pending

liquor license inspection

Department Signature Majis Mutea

Please return to the City Clerk's Office

9-17-07

LIQUOR LICENSE REVIEW FORM

Business Name: Amigos, Inc.

AKA Business Name (if applicable): Transfer from Sherm's Saloon, 1934 Peck

Operator/Manager's Name: Alfonso Soto

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Drop/Add Name on License ☐

Transfer Location ☒

Drop/Add Stockholder Name ☐

New Entertainment Permit ☐

Other _____

Deadline for receipt of all information: _____

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Income Tax Approved ☐ Owing ☐ Amount: _____

Treasurer Approved ☐ Owing ☐ Amount: _____

Zoning Approved ☐ Denied ☐ Pending ZBA ☐

Clerk's Approved ☐ Owing ☐ Amount: _____

Fire/Inspections Approved ☒ Denied ☐ Remaining Defects ☐

Department Signature [Signature]

Please return to the City Clerk's Office

Affirmative Action
(231)724-6703
FAX (231)722-1214

Assessor
(231)724-6708
FAX (231)726-5181

Cemetery
(231)724-6783
FAX (231)726-5617

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Public Works
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FAX (231)722-4188

Treasurer
(231)724-6720
FAX (231)724-6768

Water Billing
(231)724-6718
FAX (231)724-6768

Water Filtration
(231)724-4106
FAX (231)755-5290



October 17, 2007

Mr. Alfonso Soto
301 Palisades Circle
Paducah, KY 42001

Dear Mr. Soto:

This letter is to inform you that your liquor license request to transfer the 2007 Class C-SDM licensed business from Sherm's Saloon, Inc., 1934 Peck to 1848 E. Sherman, Muskegon, will be presented to the City Commission on October 23, 2007. This meeting begins at 5:30 p.m. and is located in the City Commission Chambers, 933 Terrace, Muskegon, MI. All departments with the exception of the Treasurer's Office are recommending approval of the transfer. The Treasurer shows personal property taxes in the amount of \$211.84 still owing.

This request has also been sent to the East Muskegon Neighborhood Association for their comments. It is Commission practice to let the Neighborhood Association know of any liquor license requests that are located within their boundaries. This allows for comments from the people who live there and not just from the owners of the business' who are located there.

Sincerely,

Linda Potter
Deputy Clerk

Affirmative Action
(231)724-6703
FAX (231)722-1214

Assessor
(231)724-6708
FAX (231)726-5181

Cemetery
(231)724-6783
FAX (231)726-5617

City Manager
(231)724-6724
FAX (231)722-1214

Civil Service
(231)724-6716
FAX (231)724-4405

Clerk
(231)724-6705
FAX (231)724-4178

Comm. & Neigh.
Services
(231)724-6717
FAX (231)726-2501

Engineering
(231)724-6707
FAX (231)727-6904

Finance
(231)724-6713
FAX (231)724-6768

Fire Department
(231)724-6792
FAX (231)724-6985

Income Tax
(231)724-6770
FAX (231)724-6768

Info. Technology
(231)724-4126
FAX (231)722-4301

Inspection Services
(231)724-6715
FAX (231)728-4371

Leisure Services
(231)724-6704
FAX (231)724-1196

Mayor's Office
(231)724-6701
FAX (231)722-1214

Planning/Zoning
(231)724-6702
FAX (231)724-6790

Police Department
(231)724-6750
FAX (231)722-5140

Public Works
(231)724-4100
FAX (231)722-4188

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Water Filtration
(231)724-4106
FAX (231)755-5290



October 17, 2007

Ms. Jacqueline Vines, President
East Muskegon Neighborhood Assoc.
1335 Amity Avenue
Muskegon, MI 49442

Dear Ms. Vines:

We have received a letter from the Liquor Control Commission reference a request from Amigos, Inc. to transfer ownership of the Class C-SDM licensed business located in escrow at 1934 Peck to 1848 E. Sherman. A Class C license permits the sale of beer, wine, or liquor for consumption on the licensed premises; and a SDM license permits the sale of beer and wine for consumption off the premises. On Tuesday, October 23, 2007, the City Commission will review this request and determine whether or not it should be recommended for approval.

You are being sent this notice because the City Commission would like to know how the Neighborhood Association feels and would appreciate any comments that they may have. You may send these comments to 933 Terrace, Muskegon, MI 49440 or attend the City Commission Meeting on October 23, 2007, at 5:30 p.m. in the Commission Chambers.

If you have any questions, please feel free to contact me at 724-6705.

Sincerely,

Linda Potter
Deputy Clerk

Affirmative Action
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FAX (231)722-1214

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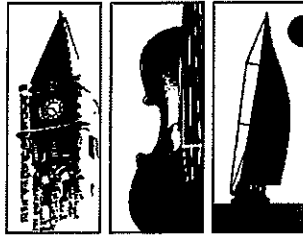
Public Works
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(231)724-6720
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Water Billing
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FAX (231)724-6768

Water Filtration
(231)724-4106
FAX (231)755-5290

MUSKEGON



West Michigan's Shoreline City
www.shorelinecity.com

October 26, 2007

Liquor Control Commission
7150 Harris
PO Box 30005
Lansing, MI 48909-7505

REF: Req ID #422640
Amigos, Inc.
1848 E. Sherman, Suite M
Muskegon, MI 49442

To Whom It May Concern:

Enclosed is the Resolution and Form LC-1800 for Alfonso Soto. This was recommended for approval by the City Commission at their October 23, 2007, City Commission Meeting.

Please do not hesitate to call me at (231) 724-6705 if you have any questions.

Sincerely,

Linda Potter
Deputy Clerk

enc.

Date: October 23, 2007

To: Honorable Mayor and City Commissioners

From: Finance Director

RE: MERS Health Care Savings Program Enabling Resolution

SUMMARY OF REQUEST: The attached resolution authorizes the city to participate in the MERS Health Care Savings Program (HCSP). HCSP is a program that allows employees to set aside funds in a tax-favored account to use for post-employment medical purposes. Funds are contributed to individual employee accounts before tax withholding and are not taxed at time of withdrawal if used for eligible medical purposes.

The city benefits from adopting HCSP in two ways:

- Wages allocated to the HCSP are exempt from FICA/Medicare taxes for both employee and employer. Thus for every \$100 in salary directed to HCSP, the city (and employee) each save \$7.65 in FICA/Medicare taxes that would otherwise be paid.
- The program establishes an efficient means for employees to fund their own retiree healthcare expenses. The city provides basic retiree healthcare coverage, but there are many areas not covered. As it is unlikely the city will be extending this coverage, the HCSP is a good tool to help employees save to meet future healthcare needs.

At this time we are recommending that the resolution be adopted so that the program is ready for use in the future. The first actual use would likely be for non-union employees as part of the 2008 salary and benefit changes (considered by the Commission in December). Some unions have expressed interest as well and we would like to have the program available for discussion in negotiations.

FINANCIAL IMPACT: Potential FICA/Medicare savings to the city.

BUDGET ACTION REQUIRED: None. The program entails no direct costs to the city (other than minor administrative costs) but may result in significant FICA/Medicare tax savings, depending on the extent to which it is adopted by employee groups.

STAFF RECOMMENDATION: Approval.

COMMITTEE RECOMMENDATION: None.



The Health Care Savings Program is an employer-sponsored program that provides a tax-favored medical savings account to individual employees to help cover the costs of post employment health care.

MERS Health Care Savings Program Works Like This

Employer and employee groups work together to design the contribution structure using any combination of the four types of contributions:

- Tax-Free Basic Employer
- Tax-Free Mandatory Salary Reductions
- Tax-Free Leave Conversion
- Post-Tax Voluntary Employee Contributions

Individual employee accounts are invested and grow tax-free in the MERS Total Market Fund and Portfolio.

When an employee leaves employment or retires, the savings account is available for tax-free reimbursement of medical expenses, including health insurance premiums for the employee and eligible dependents.

Investments

Assets in the Health Care Savings Program are invested in the MERS Total Market Fund. For up-to-date information on the portfolio, please visit our Web site at www.mersofmich.com.

Account Availability

Employees, their spouse, and legal dependents are eligible for immediate medical reimbursements when the employee:

- Meets the vesting cycle (if applicable), and
- While collecting a disability benefit from any public pension plan, or
- While on medical leave for six months or longer, or
- Upon separation from employment

Reimbursement Claims Processing

There are two ways that reimbursements are made:

- Eligible member submits a "Reimbursement Claim Form" with the receipt of the expense
- Funds are deposited directly into member's account, typically within three business days
- mySourceCard™
- This MasterCard® debit card transfers funds from the member's Health Care Savings Program account directly to qualified providers with no out-of-pocket cost and no need to file a claim for reimbursement

Tax-Free Reimbursable Examples

- | | | | |
|--------------------------------|-----------------------------|------------------------------|-----------------------------|
| - Ambulance | - Dermatologist | - Medicare | - Substance Abuse Treatment |
| - Artificial Limb | - Diagnostic Devices | - Nursing Services | - Wheelchair |
| - Back Support | - Eyewear | - Orthodontia (braces) | - X-ray |
| - Chiropractor | - Eye Surgery | - Oxygen | |
| - Contact Lenses and Solutions | - Health Insurance Premiums | - Physical Therapy | |
| - Deductibles and Co-Payments | - Hearing Services | - Physician | |
| - Dental Services | - Insulin Treatments | - Smoking Cessation Programs | |
| | - Long-term Care | | |

A complete list of medical expenses can be found on the MERS Web site at www.mersofmich.com/hcsp.htm

Service

MERS focuses on quality service, timely communications, and reliable information. Through the HCSP Employee Online Portal, members have access to the following services:

- Inquire regarding account balance, transactions, contributions, etc.
- Review highlights of the program
- View and print various administrative forms
- Contact MERS with specific questions about your account

Please feel free to contact us toll-free at (800) 767-6377 or by e-mail at hcsp@mersofmich.com.



How do employees benefit from the program?

The Health Care Savings Program allows employees to set aside money in their employee accounts to cover the ever increasing costs of health insurance or medical expenses after termination from public service. While deferred compensation plans or retirement accounts provide a tax-deferred benefit, amounts paid out (other than post-tax contributions) are considered taxable income.

Under the Health Care Savings Program, amounts contributed are tax-free (as are earnings) and no taxes are paid on amounts paid out since they must be used to reimburse health insurance premiums or used to cover out-of-pocket medical expenses. This tax advantage could result in significant savings to participants and their families.

What is my group's contribution structure in the program?

If you are a union employee, please consult your Collective Bargaining Agreement. If you are a non-union employee, please consult your personnel policy. Contact your employer with any questions on your group's contribution structure.

About MERS

MERS is a statewide public employee retirement system that administers pension plans and insurance programs; and manages a \$5.8 billion investment portfolio.

MERS members consist of: cities, community mental health boards, counties, hospitals, libraries, medical care facilities, road commissions, townships, villages and other governmental entities. MERS members total 685 municipalities and more than 70,000 individual members and retirees.

MERS Insurance Services

(800) 767-6377

www.mersofmich.com



Municipal Employees' Retirement System of Michigan

1134 Municipal Way
Lansing, MI 48917

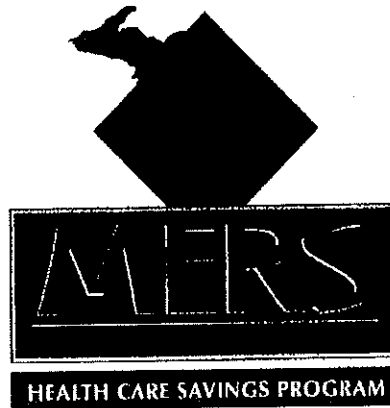
(517) 703-9030

This publication contains a summary description of MERS benefits, policies or procedures. MERS has made every effort to ensure that the information provided is accurate and up to date. Where the publication conflicts with the relevant Plan Document, the Plan Document controls. Figures as of December 31, 2006.



What Employees Need to Know





**HEALTH CARE SAVINGS PROGRAM
UNIFORM RESOLUTION**

CITY OF MUSKEGON
(Participating Employer)

**Municipal Employees' Retirement System of Michigan
1134 Municipal Way
Lansing, MI 48917
517-703-9030**

Restated: March 13, 2007
(Adopted: May 14, 2003, amended
August 11, 2004, restated November
15, 2005)

UNIFORM RESOLUTION ADOPTING THE MERS HEALTH CARE SAVINGS PROGRAM

(Excluding Plans Governed by Internal Revenue Code Section 401(h))

WHEREAS, the Municipal Employees' Retirement System ("MERS") Plan Document of 1996, effective October 1, 1996, authorized the Municipal Employees' Retirement Board ("Board") to establish additional programs including but not limited to defined benefit and defined contribution program (MERS Plan Document Section 36(2)(a)); MCL 38.1536(2)(a));

WHEREAS, the Board has authorized MERS' establishment of the health care savings program ("HCSP" or "Program"), which a participating municipality or court, or another eligible public employer that is a political subdivision of the State which constitutes a "municipality" under MERS Plan Document Section 2B(4); MCL 38.1502b(2) ("Eligible Employer"), may adopt for its Eligible Employees;

WHEREAS, MERS has been determined by the Internal Revenue Service to be a tax-qualified "governmental plan" and trust under section 401(a) of the Internal Revenue Code of 1986, and all trust assets within MERS reserves are therefore exempt from taxation under Code section 501(a) (IRS Letter of Favorable Determination dated June 15, 2005).

WHEREAS, the Board has established a governmental trust (the "Trust Fund") to hold the assets of the HCSP, which Trust Fund shall be administered under the discretion of the Board as fiduciary, directly by (or through a combination of) MERS or MERS' duly-appointed Program Administrator;

WHEREAS, 1999 PA 149, the Public Employee Health Care Fund Investment Act, MCL 38.1211 *et seq.* ("PA 149") provides for the creation by a public corporation of a public employee health care fund, and its administration, investment, and management, in order to accumulate funds to provide for the funding of health benefits for retirees and beneficiaries;

WHEREAS, a separate MERS health care trust fund created under PA 149 also constitutes a governmental trust established by a public corporation ("municipality") as an Eligible Employer, provided that all such employers shall be the State of Michigan, its political subdivisions, and any public entity the income of which is excluded from gross income under Section 115 of the Internal Revenue Code; provided further, that the PA 149 trust shall not accept assets from any defined benefit health account established under Section 401(h) of the Internal Revenue Code;

WHEREAS, the Board acts as investment fiduciary for the pooled assets of each MERS participating municipality and court enrolled in MERS defined benefit programs, Health Care Savings Program, the Retiree Health Funding Vehicle, and the Investment Services Pool Program, on whose behalf MERS performs all plan administration and investment functions, and such participating municipalities and courts have full membership, representation and voting rights at the Annual Meeting as provided under Plan Section 45; MCL 38.1545.

WHEREAS, the Board also acts as investment fiduciary for those participating employers who are non-MERS participating municipalities and courts that have adopted the

MERS Health Care Savings Program, Retiree Health Funding Vehicle, or Investment Service Pool Program, and such entities are not accorded membership, representation or voting rights provided to MERS participating municipalities and courts at the Annual meeting under Plan Section 45; MCL 38.1545.

WHEREAS, adoption of this Uniform Resolution and Participation Agreement (the "Uniform Resolution") by each Eligible Employer is necessary and required in order that the benefits available under the MERS HCSP may be extended;

- It is expressly agreed and understood as an integral and nonseverable part of extension or continuation of coverage under this HCSP Resolution that Section 43B of the MERS Plan Document shall not apply to this Uniform Resolution Adopting MERS HCSP, the Participation Agreement, the Trust Plan Document, the Trust Agreement, and their administration or interpretation.
- In the event any alteration of the language, terms or conditions stated in this Uniform Resolution Adopting MERS HCSP is made or occurs, under MERS Plan Document Section 43B or other plan provision or other law, it is expressly recognized that MERS and the Board, as fiduciary of the MERS Plan and its trust reserves, and whose authority is nondelegable, shall have no obligation or duty: to administer (or to have administered) the Trust; or to continue administration by the Program Administrator or by MERS directly.

WHEREAS, concurrent with this HCSP Uniform Resolution, and as a continuing obligation, this governing body has completed, approved, and submitted to MERS documents necessary for participation in and implementation of the HCSP. This obligation applies to any documents deemed necessary to the operation of the Trust by the Program Administrator;

NOW, THEREFORE, BE IT RESOLVED that the governing body adopts (or readopts) the MERS HCSP as provided below.

SECTION 1. HCSP PARTICIPATION

EFFECTIVE OCTOBER 23, 2007, the MERS HCSP is hereby adopted by the CITY OF MUSKEGON
(MERS municipality or court or other eligible employer)

CONTRIBUTIONS. Basic Employer contributions, Mandatory Salary Reduction Contributions, Mandatory Leave Conversion Contributions, and Post-tax Employee Contributions, shall be remitted pursuant to MERS by the Eligible Employer, and credited to the Eligible Employer's separate fund within the MERS Trust Fund. Employer contributions may be made as a percentage of salary and/or by a specified dollar amount.

INVESTMENT of funds accumulated and held in the Health Care Savings Program Trust Fund shall be held in a separate reserve and invested on a pooled basis by MERS subject to

the Public Employee Retirement System Investment Act ("PERSIA"), 1965 PA 314, as provided by MERS Plan Document Section 39; MCL 38.1539, and PA 149.

THE ELIGIBLE EMPLOYER shall abide by the terms of the HCSP, including all investment, administration, and service agreements, and all applicable provisions of the Code and other law. It is affirmed that no assets from any defined benefit health account established under Section 401(h) of the Internal Revenue Code shall be transferred to, or accepted by, MERS.

SECTION 2. IMPLEMENTATION DIRECTIONS FOR MERS AS HCSP INVESTMENT FIDUCIARY AND TRUSTEE

- (A) The governing body of this Eligible Employer desires that all assets placed in its MERS HCSP Trust Fund (as a sub-fund within all pooled HCSP trust funds with MERS) be administered by MERS, which shall act as investment fiduciary with all powers provided under Public Employee Retirement System Investment Act, pursuant to PA 149, all applicable provisions of the Internal Revenue Code and other relevant law.
- (B) The governing body desires, and MERS upon its approval of this Resolution agrees, that all funds accumulated and held in the MERS HCSP Trust Fund shall be invested and managed by MERS within the collective and commingled investment of all HCSP funds held in trust for all Eligible Employers.
- (C) All monies in the MERS HCSP Trust Fund (and any earnings thereon, positive or negative) shall be held and invested for the sole purpose of paying health care benefits for the exclusive benefit of "Eligible Employees" who shall constitute "qualified persons" who have retired or separated from employment with the Eligible Employer, and for any expenses of administration, and shall not be used for any other purpose, and shall not be distributed to the State.
- (D) The Eligible Employer will fund on a defined contribution, individual account, basis its MERS HCSP Trust sub-fund to provide funds for health care benefits for "Eligible Employees" who shall constitute "qualified persons." Participation in and any coverage under HCSP shall not constitute nor be construed to constitute an "accrued financial benefit" under Article 9 Section 24 of the Michigan Constitution of 1963.
- (E) The Eligible Employer designates and incorporates as "Eligible Employees" who shall constitute "qualified persons" under this HCSP Resolution those who are "Eligible Employees as defined in the HCSP Participation Agreement under this HCSP.
- (F) CITY OF MUSKEGON FINANCIAL DIRECTOR (Use title of official, not name) shall be the Eligible Employer's HCSP Coordinator; shall designate in writing the "qualified persons" on whose behalf trust fund monies shall be made available under any MERS (or non-MERS) retiree health care benefit program, including, but not limited to, MERS HCSP, or MERS Premier Health; receive necessary

reports, notices, etc.; shall act on behalf of the Eligible Employer; and may delegate any administrative duties relating to the Fund to appropriate departments.

- (G) Fees and Expenses for the MERS HCSP are contained in Addendum A to this Resolution.

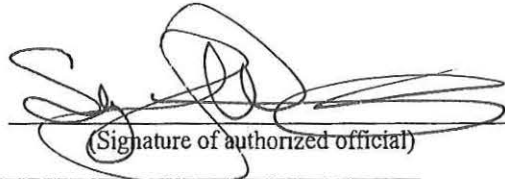
SECTION 3. EFFECTIVENESS OF THIS HCSP UNIFORM RESOLUTION

This Resolution shall have no legal effect until a certified copy of this adopting Resolution shall be filed with MERS, and MERS determines that all necessary requirements under MERS Plan Document Section 36(2)(a), 1999 PA 149 and other relevant laws, and this Resolution have been met. Upon MERS' determination that all necessary documents have been submitted, MERS shall record its formal approval upon this Resolution, and return a copy to the Eligible Employer's HCSP Coordinator as identified above.

In the event an amendatory resolution or other action by the Eligible Employer is required by MERS, such Resolution or action shall be deemed effective as of the date of the initial Resolution or action where concurred in by this governing body and MERS (and the Program Administrator if necessary). Section 54 of the MERS Plan Document shall apply to this Resolution and all acts performed under its authority. The terms and conditions of this Resolution supersede and stand in place of any prior resolution, and its terms are controlling.

I hereby certify that the above is a true copy of the Uniform Resolution Adopting The MERS Health Care Savings Program, adopted at the official meeting held by the governing body of this municipality:

On October 23, 2007



(Signature of authorized official)

Please send MERS fully executed copy of:

1. This HCSP Uniform Resolution;
2. Participation Agreement;
3. Certified minutes stating Governing Body approval; and
4. Union contract language and/or personnel policy.

**RECEIVED AND APPROVED BY THE MUNICIPAL EMPLOYEES'
RETIREMENT SYSTEM OF MICHIGAN**

Dated: _____, 20____
(Authorized MERS signatory)

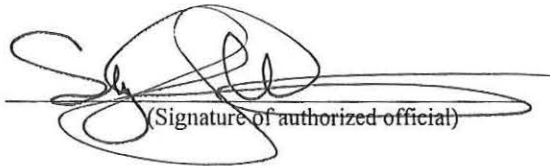
ADDENDUM A

Fees and Expenses for the MERS HCSP are as follows:

(a) The administrative fee is \$25 per year and 50 basis points (50 hundredths of 1 percent). The basis point fee will be applied by MERS to the fair market value of assets determined as of the first business day of each month. The fees will be deducted from the individual's account. A quarterly statement will be provided following each quarter.

(b) The administrative fee is separate from and does not include underlying investment management expenses netted from all MERS trust funds under investment on a daily valuation basis.

Dated: October 26, 20 07



(Signature of authorized official)

Mayor

(Title)

**RECEIVED AND APPROVED BY THE MUNICIPAL EMPLOYEES'
RETIREMENT SYSTEM OF MICHIGAN**

Dated: _____, 20 _____

(Authorized MERS HCSP signatory)

Date: October 23, 2006
To: Honorable Mayor and City Commissioners
From: Ann Marie Becker, City Clerk
RE: Congress of Cities Voting Delegates

SUMMARY OF REQUEST: To designate one of our officials who will be in attendance at the National League of Cities Annual Business Meeting to cast the City's vote; and, if possible, to designate an alternate.

FINANCIAL IMPACT: None

BUDGET ACTION REQUIRED: None

STAFF RECOMMENDATION: Approval.

To strengthen
and promote
cities as centers
of opportunity,
leadership, and
governance.



**National League
of Cities**

1301 Pennsylvania Ave., N.W.
Washington, DC 20004-1763

202-626-3000

Fax: 202-626-3043

www.nlc.org

2007 Officers

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Mayor
Indianapolis, Indiana

First Vice President

Cynthia McCollum
Council Member
Madison, Alabama

Second Vice President

Kathleen Novak
Mayor
Northglenn, Colorado

Immediate Past President

James C. Hunt
Councilmember
Clarksburg, West Virginia

Executive Director

Donald J. Borut

September 28, 2007

MEMORANDUM

TO: Direct Member Cities

FROM: Donald J. Borut, Executive Director

SUBJECT: Congress of Cities Voting Delegates

The National League of Cities Annual Business Meeting will be held on Saturday, November 17, 2007, at the conclusion of the Congress of Cities and Exposition in New Orleans. As a direct member city, your city is entitled to vote at this meeting. Based on population, each member city casts between one and twenty votes. The number of votes for each population range can be found on the table on the reverse of this memorandum.

To be eligible to cast a city's vote, a voting delegate and alternate must be officially designated by the city using the enclosed credentials form. This form will be forwarded to NLC's Credentials Committee. NLC bylaws expressly prohibit voting by proxy. City elected officials should be made aware of this request so that decisions can be made as to who will be the voting delegate and alternate(s).

At the Congress of Cities, the voting delegate must pick up the city's voting card at the credentials booth before the Annual Business Meeting and must be present at the Annual Business Meeting to cast the city's vote. Alternates should also visit the credentials booth before the meeting to pick up their stickers which identify them as alternate voting delegates. The credentials booth will be open throughout the Congress of Cities.

Please return the completed form to NLC by fax at 202-626-3043 on or before October 31, 2007, and keep the original for your own files. If you have any questions or concerns, contact Ken Rosenfeld, NLC policy manager, at rosenfeld@nlc.org or 202-626-3027.

Thank you.

Past Presidents: Clarence E. Anthony, Mayor, South Bay, Florida • John DeStefano, Jr., Mayor, New Haven, Connecticut • Brian J. O'Neill, Councilman, Philadelphia, Pennsylvania • **Directors:** R. Michael Amyx, Executive Director, Virginia Municipal League • Susan Burgess, Mayor Pro Tem, Charlotte, North Carolina • Thomas Carlson, Mayor, Springfield, Missouri • Susan Cave, Executive Director, Ohio Municipal League • Deborah Denard Delgado, Councilwoman, Hattiesburg, Mississippi • Joseph Donaldson, Mayor, Flagstaff, Arizona • Pat Eklund, Council Member, Novato, California • Ted Ellis, Mayor, Bluffton, Indiana • Makia Epie, Council Member, Cedar Hill, Texas • Margaret Finlay, Councilmember, Duarte, California • Rene Flowers, Councilmember, St. Petersburg, Florida • John Franklin, Councilmember, Chattanooga, Tennessee • Gary Graham, Mayor, O'Fallon, Illinois • Donald A. Groesser, Mayor, Ralston, Nebraska • Jeanne Harris, Councilmember, Vancouver, Washington • Daun S. Hester, Council Member, Norfolk, Virginia • Charles Hughes, Councilman-At-Large, Gary, Indiana • Steven Jeffrey, Executive Director, Vermont League of Cities and Towns • Michael E. Johnson, Council Member, Phoenix, Arizona • Martin Jones, Council Member, Conyers, Georgia • Jennifer L. Kim, Council Member, Austin, Texas • Daisy W. Lynum, Commissioner, Orlando, Florida • Margaret Mahery, Executive Director, Tennessee Municipal League • Cynthia Mangini, Councilman-At-Large, Enfield, Connecticut • Marcia Marcoux, Councilmember, Rochester, Minnesota • Henry Marraffa, Jr., Councilman, Gaithersburg, Maryland • Tom Ed McHugh, Executive Director, Louisiana Municipal Association • Darryl Moss, Mayor, Creedmoor, North Carolina • James Perkins, Jr., Mayor, Selma, Alabama • Daniel Pocek, Mayor, Bedford, Ohio • Richard Radcliffe, Councilman, Greenacres, Florida • Lynn Rex, Executive Director, League of Nebraska Municipalities • Julie Aberg Robison, Council Member-At-Large, Cary, North Carolina • Shirley Scott, Council Member, Tucson, Arizona • Anne Sinclair, Council Member, Columbia, South Carolina • Walter Skowron, Council Member, Loveland, Colorado • Connie Sprynczynatyk, Executive Director, North Dakota League of Cities • Ken Strobeck, Executive Director, League of Arizona Cities and Towns • Lynne Whalen, Council Woman, Casper, Wyoming • Dennis Zine, Councilman, Los Angeles, California

CREDENTIALS FORM

NATIONAL LEAGUE OF CITIES · 2007 CONGRESS OF CITIES · NEW ORLEANS, LOUISIANA

At the Annual Business Meeting on Saturday, November 17, 2007, each direct member city of NLC is entitled to cast from one to 20 votes based upon the city's population per the 2000 census, through its designated voting delegate. Please indicate below your city and state, voting delegate and alternate(s), and sign and date the form. The form should be faxed to NLC at 202-626-3043, by the October 31, 2007 deadline.

The official voting delegate and alternate(s) for the city/town of:

City of Muskegon,

(type or print the name of your city/town and state)

VOTING DELEGATE:

1. Clara Shepherd

NAME

Commissioner

TITLE

ALTERNATE VOTING DELEGATE(S):

2. None

NAME

TITLE

3. None

NAME

TITLE

**FOR OFFICE USE ONLY
(DO NOT WRITE IN THIS SPACE)**

Voting card issued to:

(signature)

Votes: _____

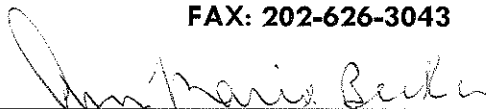
1 _____ 2 _____ 3 _____

PLEASE SIGN AND FAX THIS FORM TO NLC BY OCTOBER 31, 2007

ATTENTION: ERIKA HAMILTON, POLICY ASSISTANT

FAX: 202-626-3043

Signature (city representative):



Title: City Clerk

Date: October 24, 2007

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October 10, 2007

To: Muskegon City Commissioners
City Hall 933 Terrace Ave.
Muskegon, MI. 49440

From: Mr. Joe N. Childrey
1381 Hillcrest Ct.
Muskegon, MI. 49442

Re: Excessive Speed-Disregard for the Marquette Neighborhood.

Hillcrest Court: Excessive Speed

1. People are driving in excess of 45 mph in an area of less than ¼ mile from Home Street to Lawrence Street.
2. We have a school bus that comes each morning approximately 7:30A.M., to take a short cut to Wesley School, but there are no children along Hillcrest or Lawrence Street that take the bus.
3. The entire area was poured in slabs and to hear these heavy vehicles is literally tearing up the street, which wasn't designed for heavy vehicles, nor heavy traffic.
4. Check Wesley avenue to see existing damage incurred by the existing bus traffic.

Recommendation: Speed bumps to slow down the traffic.

Home Street: Excessive Speed- Going North and South.

1. Going South on Home Street to Apple Avenue, there are a number of individuals that use Home Street from Marquette and Creston Avenue who violate the law, when there are four signs posted that specifically state that one should not make a left hand turn at Apple Avenue going East. This is a constant violation, and the signs now posted are totally ignored.

2.

2. Going North on Home Street from Apple Avenue to Hillcrest Court, when you put your turn signal on for a left turn to Hillcrest Court, their vehicles speeding and tail-gating, and blowing for you to get out of their way while you're trying to make a left turn going West on Hillcrest Court to my home.

Recommendation: Home street is less than ¼ miles, wasn't designed for heavy traffic and strongly need speed bumps or enforcement of the existing laws to enforce the speed and traffic weight for the existing slabs.

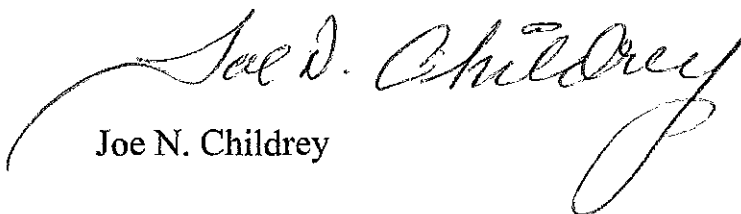
Creston Street: This street is used along with Roberts Street as a short cut to Apple avenue from Marquette Street and beyond, this entire area was made in slabs and wasn't designed for heavy vehicles nor excessive traffic and speeding vehicles in a residential neighborhood.

Recommendations: Speed bumps to slow down the speed of traffic and enforce the speed in a residential area, along with weight restrictions.

Apple Avenue East: Often times you cannot make a left hand turn to Home Street, because people have you blocked going to the area of the Secretary of State Office, Dollar store, ect. Many times there are people illegally making a left hand turn going East on Apple Avenue from Home Street, which prevent one from making the turn going North on Home Street.

This area need to monitored, before a serious accident occurred.

Your attention will be grateously appreciated:


Joe N. Childrey