

PURSUANT TO CALIFORNIA BUSINESS AND PROFESSIONS CODE SECTIONS 23958 AND 23858.4

There is no Filing Fee for this application

INSTRUCTIONS

ALL APPLICATIONS MUST INCLUDE THE FOLLOWING ITEMS:

- 1. COMPLETE THE FORM BELOW
- 2. ATTACH THE FOLLOWING:
 - A. COPY OF THE CUB APPLICATION PACKAGE SUBMITTED TO THE DEPARTMENT OF CITY PLANNING
 - B. LETTER OF DETERMINATION APPROVING A CONDITIONAL USE PERMIT FOR ALCOHOL SALES
 - C. MAILING LIST OF ABUTTING PROPERTY OWNERS
 - MUST INCLUDE IN LIST APPLICANT, REPRESENTATIVE, AND PROPERTY OWNER, IF APPLICABLE
 - MUST USE EXCEL TEMPLATE PROVIDED

Click here to download the Excel Template

SUBMIT THE COMPLETED PCN APPLICATION VIE EMAIL TO:
OFFICE OF THE CITY CLERK, CITY OF LOS ANGELES
CLERK.PCN@LACITY.ORG

ALL FIELDS ARE REQUIRED - COMPLETE ALL ITEMS BELOW OR USE "N/A"

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|--|--|
| PROJECT NAME | ENCANTO MESTIZO |
| PROJECT ADDRESS | 13766 FOOTHILL BLVD STE A,B,C |
| COUNCIL DISTRICT | 7 |
| | |
| APPLICANT | Check if the Property Owner is the same as the Applicant |
| NAMI | ROJAS AND ROJAS FOOD ENTERPRISE INC |
| ADDF | RESS 13766 FOOTHILL BLVD |
| PHO | ¹ 310-387-4320 |
| EMAI | yessi2rojas@gmail.com |
| | |
| PROPERTY OWNER | |
| NAME | |
| ADDF | RESS 201 WILSHIRE BLVD SUITE A28 SANTAMONICA CA 90401 |
| PHON | SE 310-367-4320 |
| | |
| REPRESENTATIVE Check if the Representative is the same as the Applicant | |
| NAME | ALICIA MENDOZA |
| ADDF | RESS 14435 SHERMAN WAY STE 204 |
| PHON | E 213-278-8373 |
| EMAI | AVANTYSERVICES1@GMAIL.COM |
| TYPE OF BUSINESS | FAMILY RESTAURANT |
| CITY PLANNING CASE N | o. ZA-2020-0276-CUB |
| TYPE OF ALCOHOL SAL | Es On-Site |
| (Select one option) | |
| AGENT. CA DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL | |

AGENT, CA DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL

CONTACT INFORMATION REQUIRED. APPLICATION MAY BE REJECTED IF CONTACT INFORMATION IS NOT PROVIDED.

Marlene Carmona

EMAIL

Marlene.Carmona@abc.ca.gov