From: <u>Rrachelle Breckenridge</u>

To: Brenda Long

Subject: RE: DEL - Renew Whole Foods 3-12-19
Date: Wednesday, March 20, 2019 11:03:48 AM

Attachments: image001.png

image002.png image003.png

No voting tab.

Approved.

Thanks.

Rrachelle Breckenridge, Assistant City Attorney II

(913) 971-8727 | OlatheKS.org

Legal | City of Olathe, Kansas

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From: Brenda Long <BDLong@OLATHEKS.ORG> Sent: Wednesday, March 20, 2019 10:37 AM

To: Rrachelle Breckenridge < RRBreckenridge @OLATHEKS.ORG>

Subject: FW: DEL - Renew Whole Foods 3-12-19

We have all the approvals for Whole Foods application.

Brenda Long, Assistant City Clerk

(913) 971-8675 | OlatheKS.org

Resource Mgmt | City of Olathe, Kansas

Setting the Standard for Excellence in Public Service







From: Benjamin Laxton

**Sent:** Tuesday, March 19, 2019 5:57 PM **To:** Brenda Long < BDLong@OLATHEKS.ORG >

**Cc:** Marcia Cline < < MCline@OLATHEKS.ORG >; Timothy Linot < TALinot@OLATHEKS.ORG >

Subject: Approve: DEL - Renew Whole Foods 3-12-19

Brenda.

The most recent inspection is dated 06/26/2018 and is less than one (1) year from today's date. However, this business has not been inspected this year and will require a new inspection for this



To: Brenda Long, Assistant City Clerk

From Dianna Wright, Director of Resource Management

Subject: Liquor License Renewal

Date March 12, 2019

Resource Management is in receipt of WFM Kansas, LLC (dba Lone Elm Tap Room) liquor license renewal application.

In accordance with Title 7 section 7.06.020 and in reviewing the Statement of Gross Receipts for WFM Kansas, LLC (dba Lone Elm Tap Room), I hereby determine that the application meets the requirements as set forth by the above reference section.

Should you require any additional information please do not hesitate to let me know.

## **Brenda Long**

From: Brenda Long

**Sent:** Tuesday, March 12, 2019 1:39 PM

To: Benjamin Laxton; Curtis Bowman; David Bryant; Dianna Wright; GIS Shared; Jo Prochko; Rrachelle

Breckenridge

**Subject:** DEL - Renew Whole Foods 3-12-19

**Attachments:** DEL - Whole Foods.pdf

Tracking: Recipient Response

Benjamin Laxton Approve: 3/19/2019 5:57 PM
Curtis Bowman Approve: 3/18/2019 1:00 PM

Dianna Wright

GIS Shared Approve: 3/12/2019 1:52 PM
Rrachelle Breckenridge Approve: 3/13/2019 1:55 PM

Please use the voting tab to make comments and recommendations for the attached renewal drinking establishment license application by Tuesday, March 19.

Brenda Long, Assistant City Clerk

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Resource Mgmt | City of Olathe, Kansas

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year. Tim Linot or Marcia Cline (cc'd) will schedule a current inspection.

Benjamin Laxton, P.E., Fire Protection Engineer

(913) 971-9849 | OlatheKS.org

Fire | City of Olathe, Kansas

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## **RECEIVED**

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## OLATHE K A N S A S

528734/10538 OCA

## DRINKING TESTABOSAMENT LICENSE APPLICATION CITY CLERK OFFICE

Date: 2/20/2019 Business Phone:	913.764.5656		
Name of Applicant: WFM Kansas, LLC			<u> </u>
Business Address of Applicant: 14615 W. 119th St	eet, Olathe, KS 66062		
Mailing Address: PO Box 684786, Austin, TX 78768-4786	City	State	Zip
E-mail Address of Applicant (optional): catherine.s	shiffrin@wholefoods.com	)., ., <sub>., ., .</sub> , ., ., ., ., ., ., .	<u>. 1</u>
Legal description of premises: See attached			· · · · · · · · · · · · · · · · · · ·
Owner of premises (if different than applicant):	Maeburg, LLC		
Address of owner of premises: 280 E. 96th S	treet, Suite 210, Indiana	polis, IN 46240	
	City	State	Zip
Items required that must accompany this applic	cation:		
spaces, seating capacity and number B. Copy of Alcoholic Beverage Control L License Application) C. Copy of renewed State of Kansas drir submitted separately after issuance b D. License Fee (\$500.00 – 2 year licensing The biennial fee for Drinking Establishments author established and fixed at FIVE HUNDRED DOLLANGE renewal city licenses shall be submitted to the City Body. No license fee shall be refunded for any real	Division Form ABC oking establishment by the state) gg period) prized by K.S.A. Sup RS (\$500.00). All ap Clerk for consideral	-800 (Kansas t license (Ma p. 41-2622 is l	<b>Liquor</b> y be  hereby  new or
TO THE BEST OF MY KNOWLEDGE, THE ABOV TRUTHFUL.	E INFORMATION IS	S CORRECT A	AND
Albert Percival	State of Texas	<b>3</b>	
Name of Applicant (Print Please)			
	County ofTra	vis	
Signature	(h		
Secretary Title	Motary Notary	2 /	
SEAL	Sworn and subs		
CATHERINE T. SHIFFRIN Notary Public, State of Texas Comm. Expires 05-30-2021 Notary ID 129435146	This 5th da	ay of Manh	1,20 <u> </u> 9