



Local Control Commission Meeting

Monday, November 18, 2024, 8:10 PM, Contois Auditorium, 149 Church Street, 2nd Floor

Please click the link below to join the webinar:

<https://zoom.us/j/95691577858>

Or Telephone: +1 309 205 3325 US

Webinar ID: 956 9157 7858

****CCTV link: https://www.youtube.com/playlist?list=PLIjLFn4BZd2PwCge7lNoKug676jIf_iUA ****

1. Agenda

Subject	1.1. Motion to adopt agenda
Meeting	November 18, 2024 - Local Control Commission Meeting - Monday, November 18, 2024, 8:10 PM, Contois Auditorium, 149 Church Street, 2nd Floor
Category	1. Agenda
Department	Council and Board
Type	Action Procedural
Recommended Action	Motion to adopt agenda

2. Consent Agenda

Subject	2.1. Motion to adopt the consent agenda and take the actions indicated
Meeting	November 18, 2024 - Local Control Commission Meeting - Monday, November 18, 2024, 8:10 PM, Contois Auditorium, 149 Church Street, 2nd Floor
Category	2. Consent Agenda

Department	Council and Board
Type	Action (Consent) Procedural
Recommended Action	Motion to adopt the consent agenda and take the actions indicated
Subject	2.2. 2024 - 2025 First Class Liquor License Renewal: Cafe Dim Sum, 95 St. Paul Street
Meeting	November 18, 2024 - Local Control Commission Meeting - Monday, November 18, 2024, 8:10 PM, Contois Auditorium, 149 Church Street, 2nd Floor
Category	2. Consent Agenda
Department	Clerk/Treasurer's Office
Type	Action (Consent)
Recommended Action	approve the 2024-2025 First Class Liquor License Renewal for Cafe Dim Sum, 95 St. Paul Street with all standard conditions

3. Deliberative Agenda

Subject	3.1. Second Class Liquor License Application (2024-2025): CSC Quick Stop, 1563 North Avenue
Meeting	November 18, 2024 - Local Control Commission Meeting - Monday, November 18, 2024, 8:10 PM, Contois Auditorium, 149 Church Street, 2nd Floor
Category	3. Deliberative Agenda
Department	Clerk/Treasurer's Office
Type	Action
Recommended Action	approve the 2024-2025 Second Class Liquor License Application for CSC Quick Stop, 1563 North Avenue with all standard conditions

4. Adjournment

Subject	4.1. Motion to adjourn
Meeting	November 18, 2024 - Local Control Commission Meeting - Monday, November 18, 2024, 8:10 PM, Contois Auditorium, 149 Church Street, 2nd Floor
Category	4. Adjournment
Department	Council and Board
Type	Action Procedural
Recommended Action	Motion to adjourn

Application

DLL - Application - 49619

Approve

Reject

Applicant Action Required

Town Payment Received

Download

APPLICATION DETAILS

RELATED INFORMATION

✓ Application Information

DLL - Application Id

DLL - Application - 49619

Business Entity Name

CCS ENTERPRISES

Phone number:

Applicant Email

chidadhimal28@gmail.com (mailto:chidadhimal28@gmail.com)

Renewal Application

Student Name

Applicant Action Comments

License/Permit Location Description

Town Fee

70

Business Entity Phone

5134859018

Training Completion Record

Designated Caterers Details

Days Since Last Modified

-1

Estimated time period for alcohol

Name and address from whom you purchase

Lease Expiration Date

12/31/2029

Liquor Liability Insurance Policy Number

Landlord Email

admin@myerstaxvt.com (mailto:admin@myerstaxvt.com)

Renewal Change Indicated

Renewal Change Description

URL for Policies & Procedures 1

URL for Duties 1

External Status

Application sent to municipality

Town Clerk/ Municipal Jurisdiction

Burlington

Historical Id

SECN

Application Type 1

License

Application For

Second Class License

Mode of Training

Town User Approval/Rejection Comments

Eligibility of Tobacco Fee waiver

Quantity of Alcohol required

what purpose this alcohol is used to be

Where is this alcohol to be used

polchick 24
to 11/12/27
\$70.00



CERTIFICATE OF ACHIEVEMENT

AWARDED TO

Chida Dhimal

"CORROBORATING"

2nd Class Seller Training Program 2024 (Final Exam)

COMPLETION DATE

March 7, 2024

SCORE

85%



Certificate ID# 00050497

TRAINING CERTIFICATE

Student Name: **Chida Dhimal**

Course Name: **Second Class (Off Premise)**

Date Completed: **February 7, 2022**

Expiration Date: **February 7, 2024**

Training Method: **DLC Online Training**

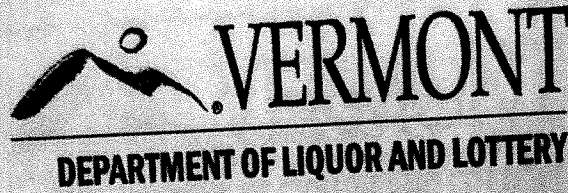
Transferable?: **YES**

By signing below, I am confirming the above training completion information is true and accurate.

Student Signature

Date Signed

Vermont Department of Liquor and Lottery 1311 US Route 302, Suite 100, Barre, VT 05641 liquorcontrol.vermont.gov
(802) 828-2339 (p) (802) 828-1031 (f) DLL.DLCEduTeam@vermont.gov



TRAINING CERTIFICATE

Student Name: **Chitrakhar Poudel**

Business Name: **Chida Enterprises, LLC**

Course Name: **Second Class (Off Premise)**

Date Completed: **March 30, 2024**

Expiration Date: **March 30, 2026**

Training Method: **In-House Training by a Certified Trainer**

Trainer Name: **Chida Dhimal**

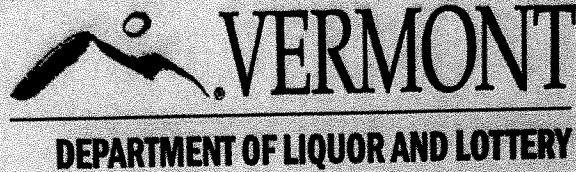
Score: **100** Transferable?: **NO**

By signing below, I am confirming the above training completion information is true and accurate.

Student Signature

Date Signed

Vermont Department of Liquor and Lottery 1311 US Route 302, Suite 100, Barre, VT 05641 liquorcontrol.vermont.gov
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TRAINING CERTIFICATE

Student Name: **Sabitra Poudel**

Business Name: **Chida Enterprises, LLC**

Course Name: **Second Class (Off Premise)**

Date Completed: **March 29, 2024**

Expiration Date: **March 29, 2026**

Training Method: **In-House Training by a Certified Trainer**

Trainer Name: **Chida Dhimal**

Score: **100** Transferable?: **NO**

By signing below, I am confirming the above training completion information is true and accurate.

Student Signature

Date Signed

Vermont Department of Liquor and Lottery 1311 US Route 302, Suite 100, Barre, VT 05641 liquorcontrol.vermont.gov
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LIQUOR LICENSE

NEW APPLICANT QUESTIONNAIRE

D/B/A (Business Name) CSC Quick stop

Contact person CHIDA DHIMAL Contact Phone 513-485-9018

1. Have you ever had a liquor license before? If yes, please explain.

Yes, liquor license for Sammy's Quick stop and
Currently active

2. Please describe your experience serving or selling alcohol?

Selling or serving alcohol after 6am and
until midnight. Check customer ID to make sure
they allow to purchase alcohol.

3. Are you familiar with the laws relating to the sale of alcohol in Vermont? Have you completed the training required by DLC? Have your employees? If not, what is your plan for training?

Yes, I completed the training required by DLC
for Sammy's Quick Stop and trained employees
Employees are reading DLC Manual, watch Training
for 2nd class license and take a test to pass
than allow to sell.

4. Have you had an opportunity to meet with an inspector from the Department of Liquor Control?

yes, when we start Sammy's Quick stop.
I did not had an opportunity to meet with an inspector
for CSC Quick stop yet.

5. How many employees will you have?

Currently we all are business partners, we donot
have employees. when we have employee we will train before working.

6. What is/will the square footage of the public space and what is/will be your occupancy load??

2700 Sq feet Retail Space

Deli 120 Sq feet

7. What kind of precautions will you take to prevent underage sales?

Check Id, Ask Date of birth

Zip code / address and if that was correct
but look like underage refuse.

Please note that your application will not go before the License Subcommittee until this application has been satisfactorily completed and returned to the Clerk's Office



May 1, 2024 ---- April 30, 2025

CITY OF BURLINGTON
Liquor License Supplemental Questionnaire

☒ New ☐ Renewal

PART I--ORGANIZATION

1. Corporation/Sole Proprietor name CCS Enterprises LLC
2. D/B/A (Business Name) CSC Quick Stop 3. Bus. Phone _____
4. Business Address 1563 North Ave, Burlington, VT 05408
5. Contact person Chitrakhar Poudel 6. Contact Phone 802-343-9347
7. Email Address: Sharmakumari 43@gmail.com

PART II--OPERATION

1. Regular Hours of Operation:

Sunday 7am - 8pm Wednesday 6am - 9pm Saturday 6am - 9pm
Monday 6am - 9pm Thursday 6am - 9pm
Tuesday 6am - 9pm Friday 6am - 9pm

2. Occupancy Load _____ 3. # of Restrooms _____ 4. # of Egresses _____

5. Date of last Fire/Safety Check Dec 2024

PART III--MANAGER OF RECORD

Please provide the following information on the manager of record.

Manager of Record _____

Home Address _____

Phone Number _____ Social Security Number _____

Driver's License _____ State _____ Date of Birth _____

WITHIN THE PAST SEVEN YEARS HAS THE MANAGER BEEN CONVICTED OF A FELONY OR A VIOLATION OF STATE OR FEDERAL NARCOTICS LAW? _____

ANY PENDING CHARGE? _____