

APPEAL APPLICATION FORM

Updated: October, 2019

Associated Case # _____



CONTACT INFORMATION

Appellate Name	Andrea Villescaz	Appellate Mailing Address	1525 Amberwood Loop
Company	Longhorn Daiquiris	Company	
Appellate Phone #	512 905 1442	Appellate Email	longhornpartiestogo@gmail.com

ORIGINAL APPLICATION INFORMATION

Subject Property Address: 1617 Aguarone Springs

Original Application Type: _____

REASON FOR APPEAL

I am: ☒ The applicant ☐ Influenced by the proposed change

Briefly describe the reason for appeal (attach additional pages if needed):

Longhorn Daiquiris is a family friendly restaurant that's been in business for 5 years. We are not a bar or a club. We are asking for a BG Beer and wine licensed for on and off premise. We had 3 minutes on a zoom call with zoning/planning and are asking to be heard by city council. We opened in May 2020 with a food truck while we remodeled the kitchen which is 80% complete now, we have hired a manager and a lot of improvements have been made these last 5 months. We have documentation showing no concerns from fire department and no violations with TABC. We are in compliance with environmental health and would like to get our TABC application turned in to serve beer/wine. Not liquor or mixed beverages. We had 2 noise complaints in June/July but since then have not, and learned the city ordinances to be in compliance. We are asking to fully open our restaurant to serve families in San Marcos.

I certify that the information on this application is complete and accurate. I understand the fees and the process for this application. I understand my responsibility, as the applicant, to be present at meetings regarding this request.

Appeal, if residence is located within 400ft of the subject property:

Filing Fee \$106

Technology Fee \$13

TOTAL COST \$119

All other appeals:

Filing Fee \$634

Technology Fee \$13

TOTAL COST \$647

Submission of this digital Application shall constitute as acknowledgement and authorization to process this request.

Submit Appeal Application to: planninginfo@sanmarcostx.gov

Planning & Development Services • 630 East Hopkins • San Marcos, Texas 78666 • 512-393-8230

Print

Export To PDF



San Marcos Fire Department

630 E. HOPKINS
San Marcos, TX 78666
512-805-2600

**Occupant Name:**

Longhorn Daiquiris
1617 Aquarena Springs Drive
San Marcos

Address:**City:****Occupancy Class:**

A-2

Local File ID:**Inspection Date:**

9/23/2020

Inspected By:

Chris Mulvaney

InspectionType:

Plan Review-CUP

Property Owner:

-None-

Contacts:

-None-

No violations noted at this time. If you have any questions, please contact our office.

Ref: 5906

CONDITIONAL USE PERMIT APPLICATION (ALCOHOL OUTSIDE CBA)



Updated: October, 2019

CONTACT INFORMATION

Applicant's Name	Andrea Villacaz Hernandez ^{Martinez}	Property Owner	Dale Grayson
Company	Longhorn Daiquiris LLC	Company	GIS Development
Applicant's Mailing Address	1525 Amberwood Loop Key TX	Owner's Mailing Address	6621 Olympia Dr Pasadena TX 77505
Applicant's Phone #	512 905 1442	Owner's Phone #	(713) 305-0550
Applicant's Email	longhornpartiestogo@gmail.com	Owner's Email	dgraysonjr@comcast.net

PROPERTY INFORMATION

Subject Property Address: 11617 Aquarena Springs Dr San Marcos TX 78666

Zoning District: _____ Tax ID #: R _____

Legal Description: Lot _____ Block _____ Subdivision _____

Number of Parking Spaces: _____

Is property more than 300' from church, school, hospital, or residential district? ☒ YES ☐ NO

DESCRIPTION OF REQUEST

Business Name: Longhorn Daiquiris LLC ☒ Restaurant ☐ Bar ☐ Other: _____

☒ NEW ☐ RENEWAL/AMENDMENT ☐ Mixed Beverage ☐ Beer & Wine ☐ Late Hours

Hours of Operation(ex. Mon 12pm-1am): Mon 12pm-10pm Tue 12pm-10pm Wed 12pm-10pm
Thurs 12pm-10pm Fri 12pm-1am Sat 12pm-1am Sun 12pm-10pm

Indoor Seating Capacity: 150 Outdoor Seating Capacity: 60 Gross Floor Area: _____

AUTHORIZATION

I certify that the information on this application is complete and accurate. I understand the fees and the process for this application. I understand my responsibility, as the applicant, to be present at meetings regarding this request.

Initial Filing Fee 793*

Technology Fee \$13

TOTAL COST \$806

Renewal/Amendment Filing Fee \$423*

Technology Fee \$13

TOTAL COST \$436

*Nonprofit Organization fees are 50% of the adopted fee listed for Conditional Use Permits

Submittal of this digital Application shall constitute as acknowledgement and authorization to process this request.

PROPERTY OWNER AUTHORIZATION

I, Dale Grayson (owner name) on behalf of
ADS Development LLC (company, if applicable) acknowledge that I/we
am/are the rightful owner of the property located at
1617 Aguarana Springs San Marcos Tx 78666 (address).

I hereby authorize _____ (agent name) on behalf of
_____ (agent company) to file this application for
_____ (application type), and, if necessary, to work with
the Responsible Official / Department on my behalf throughout the process.

Signature of Owner: [Signature] Date: 4/21/20
Printed Name, Title: Dale R. Grayson Jr. V.P.

Signature of Agent: _____ Date: _____
Printed Name, Title: _____

Form Updated October, 2019

AGREEMENT TO THE PLACEMENT OF NOTIFICATION SIGNS AND ACKNOWLEDGEMENT OF NOTIFICATION REQUIREMENTS

The City of San Marcos Development Code requires public notification in the form of notification signs on the subject property, published notice, and / or personal notice based on the type of application presented to the Planning Commission and / or City Council.

- Notification Signs: if required by code, staff shall place notification signs on each street adjacent to the subject property and must be placed in a visible, unobstructed location near the property line. It is unlawful for a person to alter any notification sign, or to remove it while the request is pending. However, any removal or alteration that is beyond the control of the applicant shall not constitute a failure to meet notification requirements. ***It shall be the responsibility of the applicant to periodically check sign locations to verify that the signs remain in place had have not been vandalized or removed. The applicant shall immediately notify the responsible official of any missing or defective signs. It is unlawful for a person to alter any notification sign, or to remove it while the case is pending; however, any removal or alteration that is beyond the control of the applicant shall not constitute a failure to meet notification requirements.***
- Published Notice: if required by code, staff shall publish a notice in a newspaper of general circulation in accordance with City Codes and the Texas Local Government Code. ***If, for any reason, more than one notice is required to be published it may be at the expense of the applicant. The renotification fee shall be \$91 plus a \$13 technology fee.***
- Personal Notice: if required by code, staff shall mail personal notice in accordance with City Codes and the Texas Local Government Code. ***If, for any reason, more than one notice is required to be mailed it may be at the expense of the applicant. The renotification fee shall be \$91 plus a \$13 technology fee.***

I have read the above statements and agree to the required public notification, as required, based on the attached application. The City's Planning and Development Services Department staff has my permission to place signs, as required, on the property and I will notify City staff if the sign(s) is/are damaged, moved or removed. I understand the process of notification and public hearing and hereby submit the attached application for review by the City.

Signature: Andrea Villacaz
Print Name: Andrea Villacaz

Date: 10-8-20

Form Updated October, 2019

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TEXAS ALCOHOLIC BEVERAGE COMMISSION

Texans Helping Businesses & Protecting Communities

LOCATION PACKET FOR RETAILERS

L-L
(12/2019)

This Location packet (L-L) should be completed by all retailers submitting an original, reinstatement, and/or change of location application. This packet (L-L) along with the Prequalification Packet (L-ON) or (L-OFF) must be submitted to your local TABC office.

All statutory and rule references mentioned in this application refer to and can be found in the Texas Alcoholic Beverage Code or Rules located on our website. www.tabc.texas.gov/laws/code_and_rules.asp

1. Application for: ☒ Original

☐ Reinstatement

☐ Reinstatement and Change of Trade Name License/Permit Number

☐ Change of Location

☐ Change of Location and Trade Name License/Permit Number

2. Trade Name of Location (Name of restaurant, bar, store, etc.)

Longhorn Daiquiris LLC

3. Location Address

1617 Aquamarina Springs Dr. San Marcos TX 78666

4. Owner of Business/Applicant (Name of Corporation, LLC, etc.)

Andrea Villescaz

5. Federal Employer Identification Number (FEIN)

84-3375857

INITIAL INFORMATION

6. Do you currently hold an active license/permit issued by the TABC under the above FEIN? ☒ Yes ☐ No
If "YES," provide your most recently issued license/permit number. **861029353**
If "NO," you must complete the Business Packet (L-B).

7. If you hold a current and active license/permit under the above FEIN has there been a change in the ownership or business structure since the submission of your last application? ☐ Yes ☒ No
If "YES," you must complete the Business Packet for Reporting Changes (L-BRC) in its entirety.

OWNERSHIP/LEASE/SUBLEASE/MANAGEMENT INFORMATION

8. Does the applicant own the land and building at this proposed licensed location? ☐ Yes ☒ No
If "NO," please complete Owner of Property (L-OP).

NOTE: Be prepared to provide additional information (such as a copy of your lease) if requested.

9. If operating under a lease at this location, complete the following:

Expiration date(s)/Options

Monthly rental amount

\$ 8,500.00

Other fees and payments to landlord

10. Are you operating under any concession, service or management agreement(s) that contain terms for services or management beyond property rental? ☐ Yes ☒ No
If "YES," complete Sublessor (L-SL), indicate the following, and attach copy of agreement(s):

Expiration date(s)/Options

Monthly fee \$

If you have a sublessor that differs from the management company enter sublessor name below and complete Form L-SL.

Sublessor Name

11. Do you or anyone else at the location operate under a franchise agreement? ☐ Yes ☒ No
If "YES," as required under Section 109.53 do you maintain exclusive control of ALL phases of the purchase, sale, service and brands of alcoholic beverages? ☐ Yes ☐ No