

REQUEST FOR COUNCIL ACTION

SUBJECT: Class A Beer Single Event

SUMMARY: Approve a Class A Beer License Single Event

FISCAL

IMPACT: The City will receive a beer license fee in the amount of \$300.00 for a Class A Beer Single Event

STAFF RECOMMENDATION:

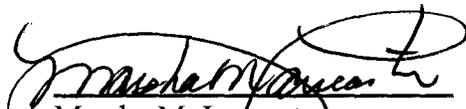
Staff recommends approval of a Class A Beer

MOTION RECOMMENDED:

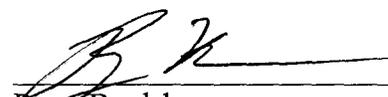
"I move to approve the Class B Beer for MH Pro Connections Mexican Rodeo Event

Roll Call vote required

Prepared by:


Marsha M. Lancaster
Business License Coordinator

Reviewed by:


Ryan Bradshaw
Finance Manager

Reviewed by:


Chief Doug Diamond
Police Chief

Recommended by:


Bryce Haderlie
Interim City Manager

BACKGROUND DISCUSSION:

MH Pro Connections is an event planner for a Mexican Rodeo the owner are Mitchel Garsz and Miguel Hernandez the dates that there would like to have their event is June 14,2015 and August 9, 2015 From 12:00 pm to 7:30 pm



West Jordan Police
8040 South Redwood Road
West Jordan, Utah 84088
(801) 256-2000
Fax (801) 562-2105

Douglas L. Diamond
Chief of Police

May 29, 2015

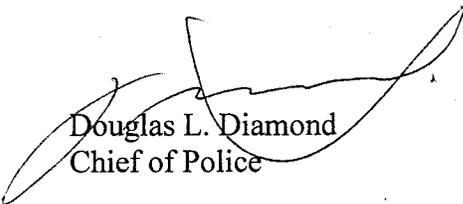
Attn: Marsha Lancaster
Finance Department

Dear Marsha,

I received the application for a Class A Beer and Single Event Permit License for MH Pro Connections, in which the event will be located at the West Jordan City Rodeo Grounds on June 14, 2015 and August 9, 2015. It has been reviewed and I can see no reason for one not to be issued to them for these events.

If you have any questions, please feel free to contact me at extension 2001.

Sincerely,


Douglas L. Diamond
Chief of Police

DLD/knj



#22944

CLASS A BEER AND SINGLE EVENT PERMIT LICENSE APPLICATION

NOTICE

ALCOHOLIC SALES LICENSING APPLICATIONS TO WEST JORDAN CITY REQUIRE APPROVAL BEFORE THE LICENSE CAN BE ISSUED. NO IMMEDIATE PRIVILEGE IS GRANTED WITH THE COMPLETION OF AN APPLICATION.

THIS APPLICATION DOES NOT AUTHORIZE THE SALE, OR DISPLAY FOR SALE, OF ALCOHOLIC BEVERAGES UNTIL THE LICENSE HAS BEEN ISSUED.

Registered Business Name (DBA): MH-Pro-Connections

Corporation Name:

Business Address: 4034 South Porter Phone: Av. 84403

Mailing Address: Ogden UT 84403

Name of Owner: Miguel Hernandez Mitchel

Phone (Home): 801-695-0801 Work: 801-695-0801

Owner Address: Same as above

Type of business or organization:

- Proprietorship, Partnership, Limited Liability Company, Corporation, Non-Profit Organization

A \$300.00 non-refundable application, investigation and processing fee is required at the time of application in addition to the annual licensing fee.

I/We hereby apply to the City of West Jordan for the following license:

- Class A Retail Beer - Original container sales for off-premises consumption. \$310.00 - Annual License Fee

I/We hereby apply to the City of West Jordan City Council for:

- Single Event Permit - Original container or on draft sales for on or off premises consumption for a period of time not to exceed 30 days. \$300.00 Permit Fee

Dates of event: From June 14th To June 14th

Hours of event: 12:00 PM to 7:30 PM

Has this event been licensed by the city previously? [] Yes [X] No

August 9, 2015 - August 9, 2015

City of West Jordan
8000 South Redwood Road
West Jordan, UT 84088
801-569-5010

Number of years this organization has been in business: In Utah 7 Elsewhere --

Utah State Sales Tax Number: 3891-15-0001

Does this organization possess any other municipal, county, and/or state licenses or permits allowing the sale of alcohol? Yes No

If Yes, in which jurisdiction(s)? 06 Den City & DABC State
(with Abraham)

Has this business organization or any of its principals (officers, partners or managers) ever been convicted of or plead no contest to:

- 1) A felony under any federal or state law? Yes No
- 2) Any violation of any federal or state law or local ordinance concerning the sale, manufacture, distribution, warehousing, adulteration, or transportation or alcoholic beverages? Yes No
- 3) Has had any type of license, agency, or permit to sell liquor or beer revoked by any state, city or other state or local authority within the last five years? Yes No
- 4) Any crime involving moral turpitude? Yes No
- 5) Any misdemeanor conviction for crimes occurring within 5 years prior to the date of application. "Misdemeanor" shall not include minor traffic offenses (any traffic offense designated as a class "B" misdemeanor shall not be construed as a minor traffic offense). Yes No

If yes to any of the above, fully explain on a separate attached sheet. State the date and the jurisdiction in which the incident took place.

Number of employees who will dispense or sell alcoholic beverages: 6

Manager at this location: Mitchel Garsz Phone: 801-569-5010

Assistant Manager at this location: Security manager PAT Dean

(Personal information required on following pages.)

City of West Jordan
8000 South Redwood Road
West Jordan, UT 84088
801-569-5010

3. Identification by all corporations, partnerships or noncorporate entities included on the application of each individual authorized by the corporation, partnership or noncorporate entity to sign the checks for such corporation, partnership or noncorporate entity.
4. For all applicants, a statement of:
 - a. Any other names or aliases used the individual;
 - b. The age, date and place of birth;
 - c. Present business address and telephone number (if applicable);
 - d. Present residence and telephone number; and
 - e. Utah driver's license, social security or identification number.
5. Acceptable written proof that an individual is at least 21 years of age and a U.S. citizen.
6. A statement of the business, occupation and employment history of the applicant for 3 years immediately preceding the date of the filing of the application.
7. Copies of the written policies, procedures, training materials and other methods which the applicant will use to ensure compliance with the laws relating to the marketing and sale of alcoholic beverages. The applicant must also sign a statement certifying that all employees have been trained in these policies, procedures and laws.
8. If the application is for a single event permit, a statement by the applicant of the dates of the event and whether this event has been licensed by the city previously.
9. Any other information which the city may require to accurately evaluate the merits of the application.
10. A nonrefundable application fee in an amount adopted by the City Council in its uniform fee schedule.

COMPANY POLICIES

A copy of written company policies and procedures concerning the marketing and sales of alcoholic beverages are attached. Yes No

If such written company policies and procedures are not attached, fully explain why.

City of West Jordan
8000 South Redwood Road
West Jordan, UT 84088
801-569-5010

(If more space is needed, attach a separate page to the back of this application.)

I/We certify that we have read the foregoing application and that the statements made therein are true. I/We recognize that any license to be issued hereunder is a mere revocable privilege and shall not confer any vested rights of any kind or nature upon me/us or my/our successors. The license applied for, if granted, shall be deemed to be personal and NON-TRANSFERRABLE to any other person or organization, or to any other location.

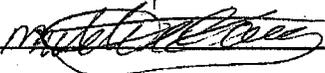
I/We have read the West Jordan City ordinances pertaining to the sale and use of alcoholic beverages and agree to abide by their terms. I/We recognize that any violation of said ordinances may jeopardize the license issued and that said violation will justify the City Manager's/City Council's revocation or suspension of the license to be issued. The said violations may further subject the offender to criminal prosecution. Any knowing misstatement, omission or misrepresentation of a material fact in this application will result in the revocation of the license issued.

SIGNATURE  DATE 5-5-2015
SIGNATURE _____ DATE _____
SIGNATURE _____ DATE _____
WITNESS _____ DATE _____

City of West Jordan
8000 South Redwood Road
West Jordan, UT 84088
801-569-5010

**CITY OF WEST JORDAN ORDINANCE
PERTAINING TO THE SALE OF ALCOHOLIC BEVERAGES**

I have read the West Jordan City ordinances pertaining to the sale and use of alcoholic beverages and agree to abide by their terms. I recognize that any violation of said ordinances may jeopardize the license issued and that said violation will justify the City Manager's/City Council's revocation or suspension of the license to be issued. The said violation may further subject the offender to criminal prosecution. Any knowing misstatement, omission or misrepresentation of a material fact in this application will result in the revocation of the license issued.

PRINT NAME Mitchel Barsz
SIGNATURE  DATE _____
WITNESS _____ DATE _____

City of West Jordan
8000 South Redwood Road
West Jordan, UT 84088
801-569-5010

EMPLOYEE TRAINING

I hereby swear that all my current employees have received training on the written policies, procedures and laws relating to the marketing and sale of alcoholic beverages.

PRINT NAME Mitchel Gorse

SIGNATURE  DATE 5-5-2015

WITNESS _____ DATE _____

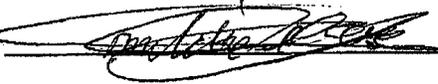
City of West Jordan
8000 South Redwood Road
West Jordan, UT 84088
801-569-5010

RIGHT TO ENTER PREMISES

CONSENT FORM

Having made application for an Alcohol Sales License with the City of West Jordan, I hereby authorize any representative of the City of West Jordan or any law enforcement officer unrestricted right to enter the licensed premises to verify compliance with the local ordinances and statutes regarding the marketing and sale of alcoholic beverages.

PRINT NAME Mitchel Garsz

SIGNATURE  DATE _____

WITNESS _____ DATE _____

West Jordan Police Department
8040 South Redwood Road
West Jordan, Utah 84088
801-256-2000

APPLICATION FOR CRIMINAL HISTORY RECORD REVIEW

Your application will not be processed unless all sections of this form are filled out completely

NAME: Hernandez Miguel Angel DATE OF BIRTH _____
Last Name First Name Middle Name

PREVIOUSLY USED NAME(S) (Maiden, etc.) _____

MAILING ADDRESS: _____
_____ Ogden UT 84403

HOME PHONE NUMBER: 801 _____

ALTERNATE PHONE NUMBER: _____

SOCIAL SECURITY NUMBER: _____

DRIVER LICENSE# AND STATE: _____ UTAH

PHYSICAL DESCRIPTION:
58 210 Black M Latino
HGT WGT EYE COLOR SEX RACE

I hereby make application to review and receive my Utah Computerized Criminal History:
Signature of applicant: _____ Date: 05-06-15

FOR OFFICE USE ONLY:
Confirm identify of applicant with identification that shows photo, signature and date of birth. Confirm ID with the information above, then list the type of ID used and the ID number in the space provided below.

APPLICANT IDENTIFICATION INFORMATION
Type of identification used: _____ Identification number: _____

Processed by: _____

Results: UCCH _____ None: _____

Miscellaneous info _____

***** WAIVER *****

INSTRUCTIONS FOR WAIVER: The waiver is required when application is made and you wish to have this information sent/given to someone other than yourself. This waiver must be signed and dated.

I request that the criminal history information requested be released to:

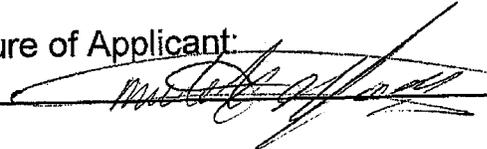
Attn: City Of West Jordan

Address: 8000 S. Redwood Rd

City/State/Zip: West Jordan, Utah 84088

I hereby release the City of West Jordan from any liability resulting from such request.

Signature of Applicant:



Date:

5-5-2015

City of West Jordan
8000 South Redwood Road
West Jordan, UT 84088
801-569-5010

PARTNER, PRINCIPAL, OFFICER, AND DIRECTOR

The following personal information must be furnished for each partner, principal, officer and director who own more than 20% of the stock. Any holding company or any entity holding more than 20% should also give the same information. This will expedite the background check.

owner, CEO

Name/Aliases: <u>Miguel Hernandez</u>	Name/Aliases: <u>Mitchel Garsz</u>
Business Address: <u>4034 South Porter Ave</u>	Business Address: _____
<u>So Ogden UT 84403</u>	_____
Business Telephone: <u>801-668-2594</u>	Business Telephone: <u>801-415-9857</u>
Residence Address: _____	Residence Address: _____
<u>So Ogden UT 84403</u>	<u>UT 84040</u> (407)
Residence Telephone: <u>801-...</u>	Residence Telephone: _____
Utah Driver's License #: _____	Utah Driver's License #: _____
Social Security #: _____	Social Security #: _____
Date of Birth: _____	Date of Birth: _____
Place of Birth: _____	Place of Birth: _____
Height: <u>5'8"</u> Weight: <u>210</u>	Height: <u>5'8"</u> Weight: <u>209</u>
Hair Color: <u>Black</u> Eye Color: <u>Brown</u>	Hair Color: <u>Brown</u> Eye Color: <u>Brown</u>

Name/Aliases: _____
Business Address: _____

Business Telephone: _____
Residence Address: _____

Residence Telephone: _____
Utah Driver's License #: _____
Social Security #: _____
Date of Birth: _____
Place of Birth: _____
Height: _____ Weight: _____
Hair Color: _____ Eye Color: _____

Name/Aliases: _____
Business Address: _____

Business Telephone: _____
Residence Address: _____

Residence Telephone: _____
Utah Driver's License #: _____
Social Security #: _____
Date of Birth: _____
Place of Birth: _____
Height: _____ Weight: _____
Hair Color: _____ Eye Color: _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/24/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Mountain Star Insurance 300 E 2650 N Ogden, Utah 84414 (801) 528-6557	CONTACT NAME: Parker Reed	FAX (A/C, No): 801-528-6563	
	PHONE (A/C, No, Ext): 801-528-6557	E-MAIL ADDRESS: Parker@MountainStarIns.com	
INSURED MH Pro Connections 4034 South Porter Ave South Ogden, Utah 84403	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A: Burns and Wilcox (Western Heritage)		
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDRESOR INSR	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
a	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR	Y	Y	680-001F629393	03/11/2015	03/11/2016	EACH OCCURRENCE \$ 1000000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100000
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS HIRED AUTOS						MED EXP (Any one person) \$ 5000
	UMBRELLA LIAB EXCESS LIAB						PERSONAL & ADV INJURY \$ 1000000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				GENERAL AGGREGATE \$ 3000000
							PRODUCTS - COMP/OP AGG \$ 3000000
							COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							EACH OCCURRENCE \$
							AGGREGATE \$
							WC STATUTORY LIMITS \$
							OTHER \$
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

CANCELLATION

Attn: Julie Brown West Jordan City 8040 South Redwood Road West Jordan, Utah	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE Parker Reed

ACORD 25 (2010/05)

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Utah Department of Commerce
Division of Corporations & Commercial Code

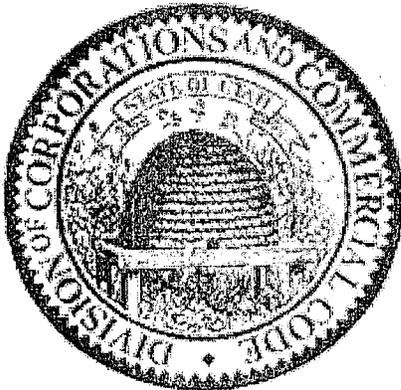
160 East 300 South, 2nd Floor, PO Box 146705
Salt Lake City, UT 84114-6705
Service Center: (801) 530-4849
Toll Free: (877) 526-3994 Utah Residents
Fax: (801) 530-6438
Web Site: <http://www.commerce.utah.gov>

03/21/2014
7371051-016003212014-12035

CERTIFICATE OF EXISTENCE

Registration Number:	7371051-0160
Business Name:	MH PRO CONNECTIONS LLC
Registered Date:	June 03, 2009
Entity Type:	LLC - Domestic
Current Status:	Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Kathy Berg
Director
Division of Corporations and Commercial Code

Mh-Pro-Connections has been in business since 2006 and have been involved in dozens of medium to large events over the years. The events range anywhere from 100 to 2,600 people in attendance. My security personnel and event staff ranges from 20 to 35 personnel. We currently run the Ogden liga premier a well established soccer league that plays every weekend from May through October.

I've personally have ran alcohol selling events since 1994. I am also a supervisor for CSC one of the biggest security companies in the nation that control anything from Professional sporting events to concerts to our very own Utahs, Sundance festival up in Park city. They hired me because of my military background in ops and security details. As a supervisor I am very aware of the effects of alcohol on and individual a group and even a crowd, possibly changing the crowd Phycology / demeanor to something less than desirable and downright deadly.

I have ran 3 "Jaripeo" style Rodeos alone in 2014 where I personally got certified along with a few of my staff and we still presently have alcohol permits from Ogden. Most of my alcohol serving staff has already worked in the restaurant business and are also well aware of the tale tale signs of recognizing people status before event during event and before they leave the event. They are held to a little stricter standard by our group and by myself as we have by rule decided not to take any chances. When in doubt take no chances get them a cab or someone to take them home with the car keys so they wont be tempted to drive. My staff will be briefed 1 month prior to event on our re-coring education if their still not in the business, policy. Plus, like before every event we will brief before and after event to ensure we learned about the particular sight, stadium.

As operations manager along with my 2 assistants and the company owner will ensure constant monitoring of the staff ensuring responsible serving at all times.

Feel free to call me or email me direct at

Mitchelg1@gmail.com



Sincerely Mitchel Garsz

Marsha Lancaster

From: Marsha Lancaster
Sent: Monday, May 04, 2015 3:16 PM
To: 'mailto:mitchelg1@gmail.com'
Subject: RE: FW: State ABC requirements
Attachments: BackgroundForm_Waiver Police.pdf; CLASS A BEER AND SINGLE EVENT PERMIT APPLICATION.doc

I have attached the temporary beer application and background waivers. In order to make your dead line I must have the application completely filled out with all of the background checks, police waivers and bond information no later than Wednesday May 6, 2015. You will miss the first council meeting on the 6th however. If there is any problems when the police review your application there will be no extra time to get your application to the DABC buy their meeting on the 27th. So please be prompt it getting the application in for your inspections.

Marsha Lancaster
City of West Jordan
Business License Coordinator
801-569-5005

From: Julie Brown
Sent: Monday, May 04, 2015 12:56 PM
To: 'Mitchel Garsz'
Cc: Marsha Lancaster
Subject: RE: FW: State ABC requirements

Great. I'm forwarding this to Marsha Lancaster. She handles the beer permits.

From: Mitchel Garsz [<mailto:mitchelg1@gmail.com>]
Sent: Monday, May 04, 2015 12:53 PM
To: Julie Brown
Subject: Re: FW: State ABC requirements

Sunday June 14th , 2015

On Mon, May 4, 2015 at 12:16 PM, Julie Brown <julieb@wjordan.com> wrote:

What is the date of your event again?

From: Mitchel Garsz [<mailto:mitchelg1@gmail.com>]
Sent: Monday, May 04, 2015 12:15 PM
To: Julie Brown
Subject: Re: FW: State ABC requirements

Hi Julie,

, This is Mitchel G With the Mexican Rodeo, and MH-Pro- Connections. Just wanted to touch bases with you and ask what is the next step to make sure we have the Temp beer permit, as the State ABC will be ready to go as soon as we get a fax copy of being okay with the City, West Jordan. If it's quicker to call me please fell free to do so, 801-695-0801

Thanks, Mitchel Garsz

Operations Manager

MH- Pro-Connections

On Mon, Apr 6, 2015 at 3:41 PM, Miguel Hernandez <mhernandezlobo@gmail.com> wrote:

We still need minimum 2 police officers on uniform to make people aware of law

On Mon, Apr 6, 2015 at 3:33 PM, Mitchel Garsz <mitchelg1@gmail.com> wrote:

----- Forwarded message -----

From: Julie Brown <julieb@wjordan.com>

Date: Mon, Apr 6, 2015 at 3:20 PM

Subject: FW: State ABC requirements

To: "mitchelg1@gmail.com" <mitchelg1@gmail.com>

We only have one concession stand (see attached). For the Western Stampede we put food booth on the opposite end of the arena from the concession stand. There were plans years ago for a second concession stand but it's never been funded.

Also, Police said that if you submitted a proposal for security using a bonded security company they would review it for approval. This would save you substantially since our officers are \$50 per hour with a minimum of 3 hours.

From: Julie Brown

Sent: Monday, April 06, 2015 1:37 PM

To: 'Mitchel Garsz'
Subject: RE: State ABC requirements

See attached layout.

From: Mitchel Garsz [<mailto:mitchelg1@gmail.com>]
Sent: Monday, April 06, 2015 12:14 PM
To: Julie Brown
Subject: State ABC requirements

Good Morning Julie, Trust you had a great weekend.

This Is Mitchel Garsz with MH-Pro-Connections- and The Mexican Rodeo, June 14th.

I was talking to Abraham from the State ABC office. Apparently they now want us to provide them with our detailed security lay out for the stadium event (s) . In order to do that I have to get a lay out of the stadium print it out mark where security will be going and then provide him with a copy.

My question is in order to do this where or how can I get a lay out of the West Jordan Arena. Do you have one by any chance? Doesn't have to be to scale can simply be an artists hand drawn version. hope you can t point me in the right direction.

Thanks

Mitchel Garsz

801-695-0801

Operations Manager

MH-Pro-Connections

Mexican Rodeo(s) (Jaripeos)

City of West Jordan
8000 South Redwood Road
West Jordan, UT 84088
801-569-5010

NOTICE: PAGES 7-10 WILL NEED TO BE FILLED OUT BY EACH PARTNER, PRINCIPAL, OFFICER, DIRECTOR WITH 20% STOCK OWNERSHIP AND MANAGERS AND ASSISTANT MANAGERS.

MANAGER/ASSISTANT MANAGER

PERSONAL INFORMATION

Name/Title: Mitchel Garsz Operations Manager
Business Name: MH-pro connections
Business Address: 1333 N 1000 East
Business Phone: 801 784-0823 Home Phone: 801- - - - -
Residence Address: same as above
Age: 46 Date of Birth: - - - - - place of Birth: - - - - -
Height: 5' 8" Weight: 208 Hair Color: Brown Eye Color: Brown
Utah Driver's License #: - - - - - Expiration Date: 08/23/2019
SSN #: - - - - -
Number of years employed by company: As Manager: 9 Total: 10

EMPLOYMENT HISTORY

Employment history for the last 3 years (Class A/Single Event):

- 1) JEF Blue 5+ years
- 2) CSC Security Officer 9+ years
Sundance, The Depot, The Complex, Usana, Rio Tinto EX
- 3) DMU translations
ER Interpretations

West Jordan Police Department
8040 South Redwood Road
West Jordan, Utah 84088
801-256-2000

APPLICATION FOR CRIMINAL HISTORY RECORD REVIEW

Your application will not be processed unless all sections of this form are filled out completely

NAME: Barsz Mitchel A DATE OF BIRTH 08/23/1968
Last Name First Name Middle Name

PREVIOUSLY USED NAME(S) (Maiden, etc.) _____

MAILING ADDRESS: _____ Dayton, UT 84040

HOME PHONE NUMBER: 801-

ALTERNATE PHONE NUMBER: 801-4784-0823

SOCIAL SECURITY NUMBER: _____

DRIVER LICENSE# AND STATE: _____

PHYSICAL DESCRIPTION:
HGT 5'8" WGT 208 EYE COLOR Brown SEX Male RACE White/Hispanic

I hereby make application to review and receive my Utah Computerized Criminal History:

Signature of applicant: [Signature] Date: 5/6/2015

FOR OFFICE USE ONLY:

Confirm identify of applicant with identification that shows photo, signature and date of birth. Confirm ID with the information above, then list the type of ID used and the ID number in the space provided below.

APPLICANT IDENTIFICATION INFORMATION

Type of identification used: _____ Identification number: _____

Processed by: _____

Results: UCCH _____ None: _____

Miscellaneous info _____

***** WAIVER *****

INSTRUCTIONS FOR WAIVER: The waiver is required when application is made and you wish to have this information sent/given to someone other than yourself. This waiver must be signed and dated.

I request that the criminal history information requested be released to:

Attn: City Of West Jordan

Address: 8000 S. Redwood Rd

City/State/Zip: West Jordan, Utah 84088

I hereby release the City of West Jordan from any liability resulting from such request.

Signature of Applicant:



Date:

5/6/15

INTEROFFICE MEMORANDUM

Rec'd 5/21/15 @ 1:30 PM
Kelly Durb



TO: Chief Doug Diamond
CC: Larry C Montgomery, Ryan Bradshaw
FROM: Marsha Lancaster
SUBJECT: Class A Beer Single Event
DATE: March 16, 2015

Attached is an application for the MH Pro Connections located at West Jordan City Rodeo Grounds. Miguel Hernandez is the owner and will be overseeing and managing all of the operations for this event on all beer sales. Beer will be sold in original container, Dates are June 14, 2015 and August 9, 2015 there will be a City Council Agenda Action that will be needed. I have the information included in this packet for our police department to run back ground checks that are needed.

Sincerely,

Marsha M. Lancaster
Business License Coordinator