

NOTICE TO PRINTER
STATE LAW REQUIRES THAT THIS
LEGAL ADVERTISEMENT SHALL BE SET
IN TYPE NOT SMALLER THAN NONPAREIL (6 PT.)

CUSTOMER CODE : Z 91085

NEWSPAPER :..... PASADENA WEEKLY

PUBLISH 3 TIMES

1ST PUBLISHING DATE:..... 10/11/2018
2ND PUBLISHING DATE:..... 10/18/2018
3RD PUBLISHING DATE:..... 10/25/2018

REPRINTS ORDERED: NONE

NOTICE OF HEARING TO CONDUCT

ENTERTAINMENT -GENERAL

NOTICE IS HEREBY GIVEN THAT APPLICATION HAS BEEN
MADE TO THE LOS ANGELES COUNTY BUSINESS LICENSE
COMMISSION TO CONDUCT

ADVANCE PROOF REQUESTED

ADDRESS OF PREMISES:..... 3826 OCEAN VIEW BLVD.
MONTROSE, CA 91020
NAME OF APPLICANT:..... MAMA'S LEGACY
/ DBA OCEAN VIEW BAR & GRILL
/ ALISSA HWANG
DATE OF HEARING:..... 11/14/2018
TIME OF HEARING:..... 09:00 A.M.

**"ANY PERSON HAVING OBJECTIONS TO THE GRANTING OF
THE LICENSE MAY, AT ANY TIME PRIOR TO THE DATE ABOVE NAMED, FILE WITH THE BUSINESS
LICENSE COMMISSION HIS OBJECTIONS IN WRITING GIVING HIS REASONS THEREFOR, AND HE
MAY APPEAR AT THE TIME AND PLACE OF THE HEARING AND BE HEARD RELATIVE THERETO"**

OFFICE OF THE COMMISSION:

BUSINESS LICENSE COMMISSION
500 W. TEMPLE STREET, RM 374
LOS ANGELES, CA 90012

RETURN TO:

LOS ANGELES COUNTY TAX COLLECTOR
BUSINESS LICENSE SECTION
225 N. HILL STREET RM. 109
LOS ANGELES, CA 90012



Los Angeles County Treasurer and Tax Collector
Application for Business License



Please note: Business License fees are NOT refundable

Fee: \$ _____

ID # 144962

New Business

Change of Ownership

Change in Partnership

Change of Address/Site Transfer

Change of Business Name

Change in Corporate Officer/Director

BUSINESS INFORMATION

Type of Business Activity: <u>Public eating/entertainment</u>	Business Address: <u>3826 Ocean View Blvd., Manhattan, CA 91026</u>	
Start Date (Projected): <u>9/11/17</u>	Business Telephone: <u>818 421 5584</u>	
DBA (Business Name): <u>Ocean View Bar & Grill</u>	Mailing Address: <u>(same)</u>	
Sellers Permit # (State Board of Equalization):		
Business Ownership Structure: Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> LP <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input checked="" type="checkbox"/>		
If LLC, Partnership, LP, or Corporation, the information below is required:		
Date of Incorporation: <u>7/10/17</u>	Incorporated in the State of: <u>CA</u>	
Legal Entity Name: <u>Mama's Legacy</u>		
Name of Officer/Director/Partner	Address	Title
<u>President, Secretary, Treasurer</u>	[REDACTED]	<u>Alisa Hwang</u>
Name of Agent for Service of Process	Address	Title

APPLICANT INFORMATION

Applicant's Full Name: Alisa Hwang

Home Address: [REDACTED]

Home Telephone: _____ Cell Phone: [REDACTED] Email Address: [REDACTED]

Social Security #: [REDACTED] Date of Birth: [REDACTED] Place of Birth: [REDACTED]

Driver's License or State ID#: [REDACTED] Expiration Date: [REDACTED]

Male Female Height 55" Weight 240 lb Hair Color brn Eye Color hazel

The information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the license applied for, I agree to submit any additional information that may be required, to conduct all phases of this business license in accordance with regulations established for such business and to maintain all trucks and/or equipment that may be used in connection therewith in conformance with all applicable laws, ordinances, and regulations.

Date: 9/5/17 Applicant's Signature: Alisa Hwang

Application taken by: Tommy Date: 9/5/2017

CERTIFICATION OF LOBBYIST REQUIREMENTS

Each person or entity who applies for a County contract, permit, grant, license or franchise shall, as a part of the application for such contract, permit, grant, license or franchise, certify that the applicant is familiar with the requirements of this chapter, and that all persons acting on behalf of the applicant have complied therewith and will continue to comply therewith throughout the application process. A person or entity who seeks a contract, permit, grant, license or franchise from the County shall be disqualified therefrom, if any lobbyist, lobbying firm, lobbyist's employer or other person or entity acting on behalf of the person or entity seeking the contract, permit, grant, license or franchise fails to comply with the provisions of this chapter.

Please submit the certification below with your application for a County of Los Angeles Business License.

The applicant certifies that:

1. I am familiar with the requirements of the County of Los Angeles Lobbyist Ordinance, Los Angeles County Code Chapter 2.160,
2. All persons acting on behalf of the applicant have complied and will comply with the Lobbyist Ordinance; and
3. The applicant is not on the County Executive Office's List of Terminated Registered Lobbyists.

Applicant's Signature

Alissa Hwang

Applicant's Name (Please Print)

Alissa Hwang

9/5/17

Date

Lobbyist Name

(Applies to lobbyist, lobbying firms, and lobbyist's employers)

Lobbyist Address

ATTENTION: READ BEFORE YOU SIGN

Dispensary operators, managers, and their employees may be subject to prosecution under federal law; and the County will not accept any legal responsibility or liability in connection with any approval of any license application and/or subsequent operation of any dispensary.



**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012



**BUSINESS LICENSE APPLICATION REFERRAL
SUMMARY SHEET**

KIND OF BUSINESS: ENTERTAINMENT-GENERAL

ADDRESS OF BUSINESS: 3826 OCEAN VIEW BL, MONTROSE, CA 91020

TELEPHONE: (818) 421-5584

OWNER OF BUSINESS: ALISSA HWANG

CAL. DR. LIC.# : [REDACTED]

NAME OF PERSON FINGERPRINTED: ~~MAMA'S LEGACY~~ ALISSA HWANG SR

FICTITIOUS NAME: OCEAN VIEW BAR & GRILL

MAILING ADDRESS: [REDACTED]

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

	<u>APPROVED</u>	<u>DATE</u>	<u>SIGNATURE</u>
<input type="checkbox"/> 1. Animal Care & Control			
<input type="checkbox"/> 2. Risk Management			
<input checked="" type="checkbox"/> 3. Building & Safety	YES	09/13/17	nlove
<input checked="" type="checkbox"/> 4. Fire Department	YES	09/20/18	nlove
<input type="checkbox"/> 5. Public Health			
<input checked="" type="checkbox"/> 6. Treasurer & Tax Collector	YES	02/26/18	ebarnes
<input checked="" type="checkbox"/> 7. Business License Commission			
<input type="checkbox"/> 8. Beaches & Harbors			
<input checked="" type="checkbox"/> 9. Regional Planning	YES	09/11/17	nlove
<input type="checkbox"/> 10. Weights and Measures			
<input checked="" type="checkbox"/> 11. Publishing	YES	10/11/18	tchen
<input type="checkbox"/> 12. Public Works - EPD			
<input checked="" type="checkbox"/> 13. Sheriff	YES	09/14/17	nlove
<input type="checkbox"/> 14. Emergency Medical Services			
<input type="checkbox"/> 15. Fire-CUPA			

Conditions:

COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR
225 N. Hill Street Room 109. P.O. Box 54970, Los Angeles, CA 90054-0970

BUSINESS LICENSE
APPLICATION REFERRAL

KIND OF BUSINESS: ENTERTAINMENT-GENERAL

ADDRESS OF BUSINESS: 3826 OCEAN VIEW BL, MONTROSE, CA 91020

TELEPHONE: (818) 421-5584

OWNER OF BUSINESS: ~~MAMA'S LEGACY~~ ^{MAMA'S LEGACY} ~~ALLISSA HUANG~~ ^{ALLISSA HUANG}

CAL. DR. LIC.# [REDACTED]

NAME OF PERSON FINGERPRINTED: ~~MAMA'S LEGACY~~ ^{MAMA'S LEGACY} ~~ALLISSA HUANG~~ ^{ALLISSA HUANG} (P)

FICTITIOUS NAME: OCEAN VIEW BAR & GRILL

MAILING ADDRESS: ~~3826 OCEAN VIEW BL, MONTROSE, CA 91020~~ [REDACTED]

DATE WHEN BUSINESS STARTED: [REDACTED]

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR NEW LICENSE

BUILDING & SAFETY
LA COUNTY

APPROVAL

DENIAL

RECOMMENDATION: No deficiencies noted.

SIGNATURE: [Signature]

DATE: 9/7/17

BASIC LICENSE NO. 2811

DATE 09/05/17

IDENTIFICATION NUMBER 144962



COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



BUSINESS LICENSE
APPLICATION REFERRAL

KIND OF BUSINESS: ENTERTAINMENT-GENERAL

ADDRESS OF BUSINESS: 3326 OCEAN VIEW BL, MONTROSE, CA 91020

TELEPHONE: (818) 421-5364

OWNER OF BUSINESS: MAMA'S LEGACY

CAL. DR. LIC.#: [REDACTED]

NAME OF PERSON FINGERPRINTED: MAMA'S LEGACY ALISSA HWANG (H)

FICTITIOUS NAME: OCEAN VIEW BAR & GRILL

MAILING ADDRESS: [REDACTED]

DATE THAT YOU STARTED BUSINESS: Sept. 2017

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

FIRE DEPARTMENT
LA COUNTY

APPROVAL

DENIAL

RECOMMENDATION: _____

SIGNATURE: *[Handwritten Signature]*

DATE: 9/18/18

BASIC LICENSE NO. 2811

DATE 08/30/18

IDENTIFICATION NUMBER 144962



COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109. P.O. Box 54970. Los Angeles, CA 90054-0970



BUSINESS LICENSE
APPLICATION REFERRAL

KIND OF BUSINESS: ENTERTAINMENT-GENERAL

ADDRESS OF BUSINESS: 3826 OCEAN VIEW BL, MONTROSE, CA 91020

TELEPHONE: (818) 421-5584

OWNER OF BUSINESS: MAMA'S LEGACY

CAL. DR. LIC.# : [REDACTED]

NAME OF PERSON FINGERPRINTED: ~~MAMA'S LEGACY~~ ALISSA HWANG ^(AC)

FICTITIOUS NAME: OCEAN VIEW BAR & GRILL

MAILING ADDRESS: ~~3826 OCEAN VIEW BL, MONTROSE, CA 91020~~ [REDACTED] ^(R)

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

ALISSA HWANG 818-421-5584

TREASURER & TAX COLLECTOR
LA COUNTY

APPROVAL

DENIAL

RECOMMENDATION: _____

SIGNATURE:

DATE: 2-26-2018

COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR
BUSINESS LICENSE SECTION
REVENUE & ENFORCEMENT DIVISION

TO: DEPARTMENT OF REGIONAL PLANNING
320 W. TEMPLE STREET, 13TH FLOOR, ROOM 1360
LOS ANGELES, CALIFORNIA 90012

FROM: BUSINESS LICENSE SECTION
225 NORTH HILL STREET ROOM 109
LOS ANGELES, CALIFORNIA, 90012

DEPARTMENT OF REGIONAL PLANNING FEE: \$382.00

TELEPHONE: (213) 974-2011
FAX: (213) 633-5427

DATE: 9/5/17

ID#:

TYPE OF BUSINESS AND CODE:

Public Eating
Entertainment General

BUSINESS ADDRESS:

3826 Ocean view blva.

CITY:

Montrose 91020

APNS:

NAME OF OWNER:

Mama's Legacy.

PHONE#:

D.B.A./NAME OF BUSINESS:

Ocean View Bar & Grill

CELL PHONE#:

MAILING ADDRESS:

SAME

E-mail ADDRESS:

To be completed by Regional Planning

RBUS 2017 009192

EXISTING USE: New () Renewal

DEPARTMENT OF REGIONAL PLANNING
320 W. TEMPLE STREET, ROOM 1360
HALL OF RECORDS
LOS ANGELES, CALIFORNIA, 90012

PROJECT# 2017-006056

CELL PHONE #:

USE PERMITTED IN ZONE

(C-2)

USE NOT PERMITTED IN ZONE:

APPROVED

DENIED:

REMARKS:

Approved for public eating and entertainment per
previous approval dated 5/18/2016. Also, approved
per RCUP 2008001198 which expires on 1/6/2020.

SIGNATURE: [Signature]

DATE: 9/5/2017

THIS IS ONLY A BUSINESS LICENSE REFERRAL AND AN APPROVAL DOES NOT CONSTITUTE A BUSINESS LICENSE. YOU MUST RETURN REFERRAL TO THE TREASURER AND TAX COLLECTOR TO CONTINUE THE BUSINESS LICENSE APPLICATION PROCESS. (IF ANY QUESTIONS, PLEASE CALL 213/974-2011)

OWNER OF BUSINESS: ~~MAMA'S LEGACY~~
COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR
225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

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BUSINESS LICENSE
APPLICATION REFERRAL

KIND OF BUSINESS: ENTERTAINMENT-GENERAL

ADDRESS OF BUSINESS: 3826 OCEAN VIEW BL., MONTROSE, CA 91020

TELEPHONE: (818) 421-5584

OWNER OF BUSINESS: ~~MAMA'S LEGACY~~

MAMA'S LEGACY
Hwang, Alissa

CAL. DR. LIC.#



NAME OF PERSON FINGERPRINTED: ~~MAMA'S LEGACY~~

ALISSA HUANG (i.p.)

FICTITIOUS NAME: OCEAN VIEW BAR & GRILL

MAILING ADDRESS: ~~3826 OCEAN VIEW BL., MONTROSE, CA 91020~~



DATE WHEN BUSINESS STARTED:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR NEW LICENSE

SHERIFF
LA COUNTY

APPROVAL

DENIAL

RECOMMENDATION:

APPROVED

SIGNATURE:

WLP 5300170

DATE:

9/14/17

BASIC LICENSE NO. 2811

DATE 09/05/17

IDENTIFICATION NUMBER 144962

SATTC 9/14