



**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: **GAME ARCADE**

ADDRESS OF BUSINESS: **1880 N HACIENDA BLVD, LA PUENTE, CA 91744**

TELEPHONE: **[REDACTED]**

OWNER OF BUSINESS: **N AND J FOOD INC.** **[REDACTED]**

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED: ~~N AND J FOOD INC.~~ **JAWAD AHMED
NISAR AHMED
AKHTAR AHMED**

FICTITIOUS NAME: **SHAKEYS PIZZA RESTAURANT**

MAILING ADDRESS: **1880 N HACIENDA BLVD., LA PUENTE, CA 91744**

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

BUSINESS LICENSE COMMISSION

UNINC. LA COUNTY

APPROVAL

DENIAL

RECOMMENDATION: _____

SIGNATURE: _____

DATE: _____



KEITH KNOX
TREASURER AND TAX COLLECTOR

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

Kenneth Hahn Hall of Administration
500 West Temple Street, Room 437, Los Angeles, California 90012
Telephone: (213) 974-2101 Fax: (213) 626-1812
ttc.lacounty.gov and propertytax.lacounty.gov

Board of Supervisors

HILDA L. SOLIS
First District

HOLLY J. MITCHELL
Second District

LINDSEY P. HORVATH
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

STATEMENT OF INFORMATION

APPLICATION FOR BUSINESS LICENSE FOR GAME ARCADE BL ID #147893

SUPERVISORIAL DISTRICT: FIRST
OWNER/DBA: N AND J FOOD, INC/
SHAKEY'S PIZZA RESTAURANT
ADDRESS: 1880 N. HACIENDA BLVD, LA PUENTE, CA 91744
DATE OF APPLICATION: SEPTEMBER 29, 2022
DATE OF HEARING: JULY 12, 2023

On September 29, 2022, Jawad Ahmed (Corporate Officer) of Shakey's Pizza Restaurant, applied for a Game Arcade Business License. The business license will be in the name of Shakey's Pizza Restaurant.

The Business License Referrals were received by the following departments:

- Regional Planning approved the referral on September 20, 2022
- Treasurer and Tax Collector (TTC) approved the referral on October 14, 2022
- Sheriff approved the referral on December 13, 2022
- Fire approved the referral on April 4, 2023
- Building and Safety approved the referral on January 19, 2023

The TTC reviewed the application and recommends approval of the Game Arcade Business License for Shakey's Pizza Restaurant.

There is a current Public Eating business license.

Photos and diagram are enclosed.

The TTC has no objections to the approval of this application.

COUNTY OF LOS ANGELES • TREASURER AND TAX COLLECTOR
Application for Business License



Business License fees are NOT refundable.
This application will expire in 60 calendar days. (Per 7.06.060*)

"I hereby promise the following information submitted in this application is true and correct. If I make any false statement in any application for a permit or license under Title 7, or in any report required by Title 7, I may be subject to penalties pursuant to section 7.04.300 of the County Code."

BUSINESS ACTIVITY: Public Eating / Game Arcade

BL ID #: 147093
(Complete if you are an existing Business License Holder)

What is the purpose of your application?

(Per 7.06.020 A) **New:** Business License Ownership
Change in: Corporate Office/Director Doing Business As Partnership

PART 1 - BUSINESS INFORMATION

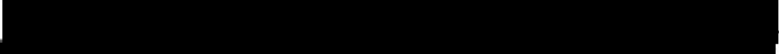
Projected Start Date: (Per 7.06.180 A-2) 09/27/2022 (MM/DD/YY)
Business Entity Name: (Per 7.04.020 A) N AND J FOOD, INC
Business Name (DBA): (Per 7.06.020 E) SHARKEY'S PIZZA RESTAURANT
Business Entity Type (check one): Corporation Limited Liability Corporation
(Per 7.06.020 A) Limited Partnership Partnership Sole Proprietorship
Business Entity Identification Number (California Secretary of State): 87-2772842
(Per 7.06.100)
Tax Identification Number: (26 U.S. Code § 6109) [REDACTED]
Business Phone Number: [REDACTED] **Email Address:** [REDACTED]
Business Location Address: (Per 7.06.020 D) 1880 N HACIENDA BLVD, LA PUENTE CA 91744
Mailing Address: (Per 7.06.020 D) 1880 N HACIENDA BLVD, LA PUENTE CA 91744
Hours of Operation: (Per 7.06.110) SUNDAY - THURSDAY 11am - 9pm FRI & SAT 11am - 10pm
Days of Operation: Mon Tues Wed Thurs Fri Sat Sun
Brief Description of Business Activity(ies) (If subsequent year application, please include new activities added since initial application): WE ARE A FAMILY RESTAURANT THAT SPECIALIZES IN PIZZA, CHICKEN AND MOXOS. WE HAVE AN AREA FOR THE KIDS, AND BEER AND SPORTS FOR THE ADULTS
Do you sell pre-packaged foods? Yes No
Do you own or rent the property where the business is located? Own Rent
Property Owner Name (If known): MUHAMMED SHARIF
Property Owner Phone Number: [REDACTED]
If you are leasing the property, please provide a copy of the lease agreement:

*Per the Los Angeles County Code

PART 2 - APPLICANT INFORMATION

Title: (Per 7.06.020 A) Business Representative/Agent for Service Corporate Officer
 General Partner Managing Member
 Owner


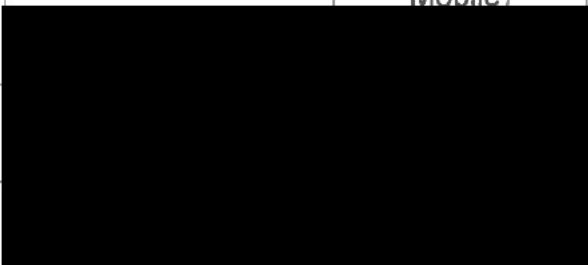
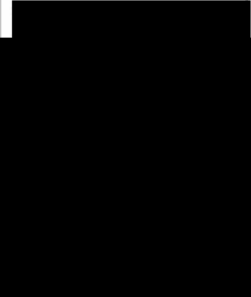
Full Name: JAWAD AHMED
 (If corporate officer, name shall be exactly as set forth in its articles of incorporation).

Applicant Address: (Per 7.06.020 A) 

Phone Number: 

PART 3A - ENTITY INFORMATION (If Applicable) (Per 7.06.020 A & B)

If the applicant is a Partnership, Limited Partnership, Limited Liability Corporation, or a Corporation, please list the names and addresses of all directors and the name and address of an officer who is duly authorized to accept the service of legal process.

Title	Full Name (First Name, Last Name)	Address (Number, Street, City, Zip)	Phone Number(s) (Office and Mobile)	Email
PRESIDENT	NSAQ AHMED			
VICE PRESIDENT	AKHTAR AHMED			
TREASURER	JAWAD AHMED			

(If there are additional individuals, please include the information on a separate attachment)

Do you hold or have you held business licenses in another city, county, or state?

No Yes (if yes, provide details)

Have you ever had a business permit or license denied, suspended, restricted, or revoked by any city or county? (Per 7.08.080 E) No Yes (if yes, provide details)

PART 3B – Business Personal Property (Required)

Is the total cost of your business personal property \$100,000 or more? Yes No

- Each year the Los Angeles County Assessor (Assessor) is responsible for the assessment of business personal property for property tax purposes. Examples of business personal property are machinery, equipment, furniture, computers, tools, and supplies, etc. Business inventory is exempt and not subject to property tax. A business property statement, form 571-L, is required to be filed if the aggregate cost of your taxable personal property is \$100,000 or more on January 1 of each year, or if the Assessor requests to file a statement. To learn more about Los Angeles County business personal property tax, visit the Assessor's website at <https://assessor.lacounty.gov/>

PART 4 - ACKNOWLEDGEMENT

As a condition of the issuance of the license applied for, I agree to submit any additional information that may be required, to comply with Title 7 of the County Code and any other applicable regulations, and I understand that any facts and documentation I give, will be matched with local, state and federal records for authenticity.

****You must submit a completed application, comply with the appropriate County departments, and submit all required documents within 60 calendar days from the date we receive your payment. Failure to comply with this requirement will result in the denial of your application and you will have to re-apply and repay the initial application fee.**

Place your initials next to each statement below to indicate acceptance.

	I acknowledge that my Application for Business License will expire in 60 calendar days without a refund.**
	I acknowledge and accept that some of the information reported in the above application may be used by the County Assessor for tax purposes or other County departments.
	I affirm that, to the best of my knowledge and belief, all information in the above referenced application is accurate and complete.

By signing below, I agree to comply with all of the requirements of the Los Angeles County Code and above referenced rules and regulations.

Business Representative:

Print Full Name: JAWAD AHMED Title: TREASURER

Signature: [Redacted] Date: 09/27/2022

Please email the completed application to businesslicense@ttc.lacounty.gov.

If you suspect fraud or wrong doing by a County of Los Angeles employee, report the incident to the Los Angeles County Fraud Hotline at 1(800) 544-6861.

PART 5 - INTERNAL USE ONLY



Date: 9/28/2022

Application received by: _____
(Please Print Name)

Place a check in the check box or N/A if not applicable:

Lease Agreement (if applicable)	<input type="checkbox"/>
Entity Document(s)	<input type="checkbox"/>
DRP Referral	<input type="checkbox"/>
Zoning Approved	<input type="checkbox"/>
Referral Checklist Provided	<input type="checkbox"/>

**APPLICATION
EXPIRATION DATE**
/ /
(Payment Received Date + 60 days)

Conditional Use Permit	Number:
Conditions Listed:	Expiration Date:

Additional Staff Comments: _____

Supervisor Reviewed:  Date: 04/04/2023 BL ID#: 147893

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 :**CLAREMONT COURIER**

PUBLISH 3 TIMES

1ST PUBLISHING DATE:.....**06/23/2023**

2ND PUBLISHING DATE:.....**06/30/2023**

3RD PUBLISHING DATE:.....**07/07/2023**

REPRINTS ORDERED: NONE

NOTICE OF HEARING TO CONDUCT

GAME ARCADE

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:..... **1880 N. HACIENDA BL.
LA PUENTE, CA 91744**
NAME OF APPLICANT:..... **N AND J FOOD INC.
/ DBA SHAKEYS PIZZA RESTAURANT
/ JAWAD AHMED, NISAR AHMED AND
AKHTAR AHMED**
DATE OF HEARING:..... **07/12/2023**
TIME OF HEARING:..... **09:15 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



**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: **GAME ARCADE**

ADDRESS OF BUSINESS: **1880 N HACIENDA BLVD, LA PUENTE, CA 91744**

TELEPHONE: [REDACTED]

OWNER OF BUSINESS: **N AND J FOOD INC.** [REDACTED]

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED: ~~**N AND J FOOD INC.**~~

**JAWAD AHMED
NISAR AHMED
AKHTAR AHMED**

FICTITIOUS NAME: **SHAKEYS PIZZA RESTAURANT**

MAILING ADDRESS: **1880 N HACIENDA BLVD., LA PUENTE, CA 91744**

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	01/19/23	ehernand
<input checked="" type="checkbox"/> 4. Fire Department	YES	04/04/23	ehernand
<input type="checkbox"/> 5. Public Health	_____	_____	_____
<input checked="" type="checkbox"/> 6. Treasurer & Tax Collector	YES	10/14/22	ehernand
<input checked="" type="checkbox"/> 7. Business License Commission	_____	_____	_____
<input type="checkbox"/> 8. Beaches & Harbors	_____	_____	_____
<input checked="" type="checkbox"/> 9. Regional Planning	YES	09/20/22	ehernand
<input type="checkbox"/> 10. Weights and Measures	_____	_____	_____
<input checked="" type="checkbox"/> 11. Publishing	YES	06/23/23	tchen
<input type="checkbox"/> 12. Public Works - EPD	_____	_____	_____
<input checked="" type="checkbox"/> 13. Sheriff	YES	12/13/22	ehernand
<input type="checkbox"/> 14. Emergency Medical Services	_____	_____	_____
<input type="checkbox"/> 15. Fire-CUPA	_____	_____	_____
<input type="checkbox"/> 16. Tobacco	_____	_____	_____
<input type="checkbox"/> 17. Public Works - SB 205	_____	_____	_____
<input type="checkbox"/> 18. Public Health ME	_____	_____	_____

Conditions:

BASIC LICENSE NO. **3281**

DATE **04/05/23**

IDENTIFICATION NUMBER **147893**

**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: GAME ARCADE

ADDRESS OF BUSINESS: 1880 N HACIENDA BLVD, LA PUENTE, CA 91744

TELEPHONE: [REDACTED]

OWNER OF BUSINESS: N AND J FOOD INC. [REDACTED]

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED: ~~N AND J FOOD INC.~~

JAWAD AHMED
NISAR AHMED
AKHTAR AHMED

FICTITIOUS NAME: SHAKEYS PIZZA RESTAURANT

MAILING ADDRESS: 1880 N HACIENDA BLVD., LA PUENTE, CA 91744

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

BUILDING & SAFETY

UNINC. LA COUNTY

APPROVAL

DENIAL

RECOMMENDATION: _____

SIGNATURE [REDACTED]

DATE: 01/19/23

BASIC LICENSE NO. 3281

DATE 10/11/22

IDENTIFICATION NUMBER 147893



COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970
businesslicense@ttc.lacounty.gov



FIRE DEPARTMENT REFERRAL

BUSINESS ACTIVITY: PUBLIC EATING & GAME ARCADE

ADDRESS OF BUSINESS: 1880 N. HACIENDA BLVD., LA PUENTE, CA 91744

TELEPHONE: [REDACTED]

EMAIL ADDRESS: [REDACTED]

OWNER OF BUSINESS: N AND J FOOD INC

AGENT FOR SERVICE:

FICTITIOUS NAME: SHAKEY'S PIZZA PARLOR

MAILING ADDRESS: 1880 N. HACIENDA BLVD. LA PUENTE CA 91744

PROJECTED OPENING DATE: 09/27/2022

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW BUSINESS LICENSE YES

COUNTY OF LOS ANGELES
FIRE DEPARTMENT
FIRE PREVENTION DIVISION

APPROVED

DOKE

Subject to
Subject to
Subject to

The stamping of this application SHALL NOT be an approval of the application or any County/City Law.

Fire Department Use Only

FIRE DEPARTMENT REFERRAL

APPROVAL

DENIAL

RECOMMENDATION:

PUBLIC EATING WAS ALREADY APPROVED. THIS IS ONLY FOR THE "GAME ARCADE"

SIGNATURE: [REDACTED] DATE: 4/4/2023

Business License ID#: 147893

TTC Staff Initials: PH

**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: GAME ARCADE

ADDRESS OF BUSINESS: 1880 N HACIENDA BLVD, LA PUENTE, CA 91744

TELEPHONE: [REDACTED]

OWNER OF BUSINESS: N AND J FOOD INC. [REDACTED]

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED: ~~N AND J FOOD INC.~~ JAWAD AHMED
NISAR AHMED
AKHTAR AHMED

FICTITIOUS NAME: SHAKEYS PIZZA RESTAURANT

MAILING ADDRESS: 1880 N HACIENDA BLVD., LA PUENTE, CA 91744

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**TREASURER & TAX COLLECTOR
UNINC. LA COUNTY**

APPROVAL

DENIAL

RECOMMENDATION: _____

SIGNATURE: [REDACTED] _____

DATE: 10/14/2022



COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR



DEPARTMENT OF REGIONAL PLANNING REFERRAL

To: Department of Regional Planning
320 W. Temple Street, 13th Floor, Room 1360
Los Angeles, California 90012
(213) 974-6411
zoningldcc@planning.lacounty.gov

From: Business License Section
225 North Hill Street, Room 109
Los Angeles, California 90012
Telephone: (213) 974-2011
Fax: (213) 633-5427
Businesslicense@ttc.lacounty.gov

Department of Regional Planning Fee: \$427.00

Date: 09-15-22

ID#: 147893
Regional Planning ID#: BLR RPPL2022010417

Type of Business and Code: Arcade License

Business Address: 1880 N Hacienda Blvd

City: La Puente, CA 91744 APN#: 8489-012-074

Name of owner: N and J Food Inc Phone #: [REDACTED]

D.B.A. /Name of Business: Shakey's Pizza Parlor Cell Phone#: [REDACTED]

Mailing Address: 1880 N. Hacienda Blvd, La Puente CA 91744

Email Address: [REDACTED]

To be completed by Regional Planning

RBUS: RPPL2022010417

Existing Use: New Renewal

Project#: _____

Cell Phone #: _____

Use Permitted in Zone: C-2 Use Not Permitted in Zone: _____

Approved: Yes Denied: _____

Remarks: Up to 25 games of skill allowed in conjunction with the restaurant pursuant to CUP 201500073.

Signature: [REDACTED] Date: 9/20/2022

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 process. If you have any questions, please call (213) 974-2011 or email at businesslicense@ttc.lacounty.gov.

COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR

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

✓
22
601

BUSINESS LICENSE
APPLICATION REFERRAL

KIND OF BUSINESS: GAME ARCADE

ADDRESS OF BUSINESS: 1880 N HACIENDA BLVD, LA PUENTE, CA 91744

TELEPHONE: [REDACTED]

OWNER OF BUSINESS: N AND J FOOD INC.

JAWAD ANMED

CAL. DR. LIC.#: [REDACTED]

NAME OF PERSON FINGERPRINTED: ~~N AND J FOOD INC.~~

NISAR ANMED

FICTITIOUS NAME: SHAKEYS PIZZA RESTAURANT

MAILING ADDRESS: 1880 N HACIENDA BLVD., LA PUENTE, CA 91744

DATE THAT YOU STARTED BUSINESS:

AKHTAR ANMED

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

SHERIFF
UNINC. LA COUNTY

APPROVAL

DENIAL

RECOMMENDATION:

Approved

SIGNATURE: [REDACTED]

DATE: 12/13/22

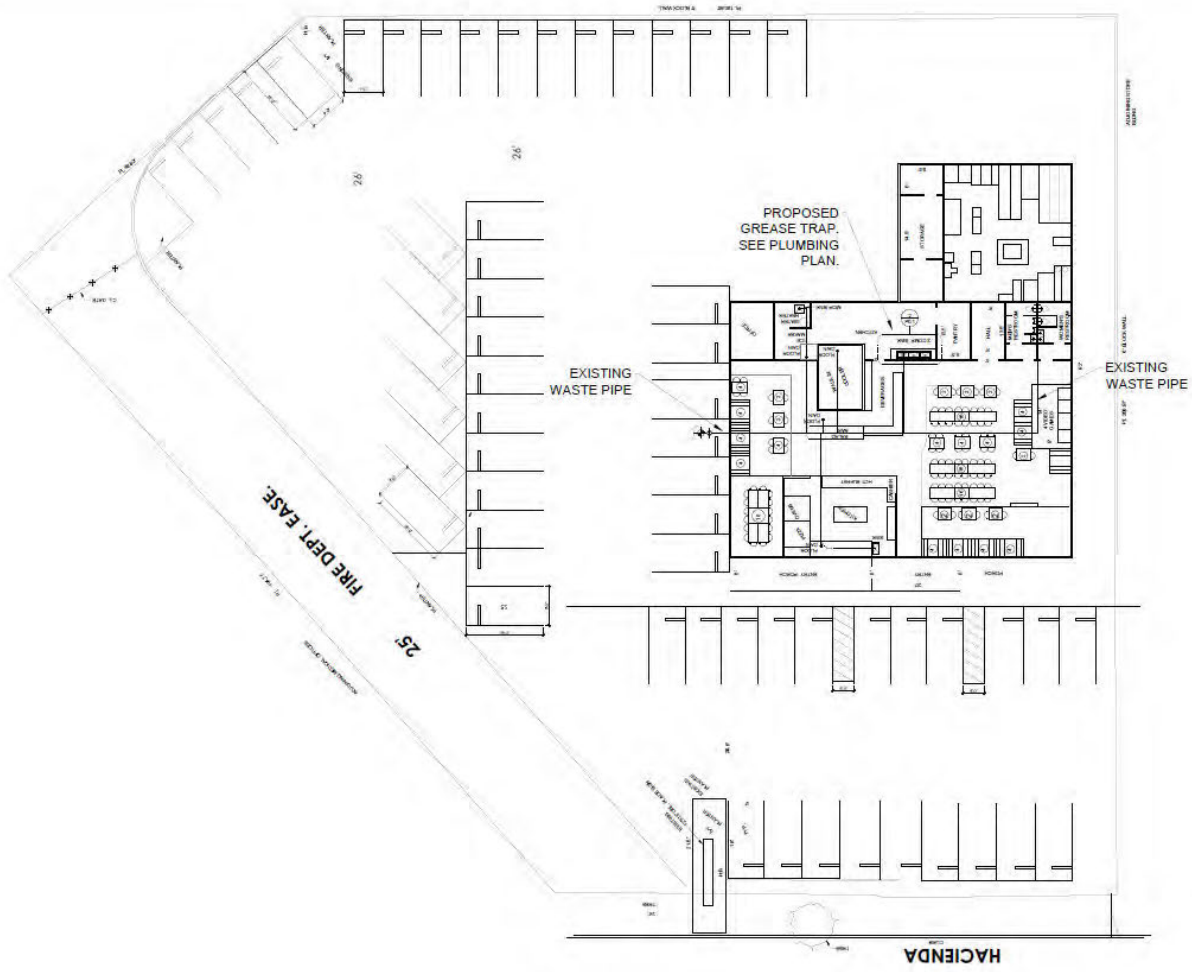
BASIC LICENSE NO. 3281

DATE 10/11/22

IDENTIFICATION NUMBER 147893

Email LiveScan 11/22

SITC 12/13



No.	Description	Date

Projec Information
 SHAKEY'S PIZZA
 1830 N HACIENDA BLVD
 LA PUENTE, CA 91744

Client
 NISAR AHMED

Sheet Title
 FLOOR PLAN
 (FOR REFERENCE ONLY)

Date: _____

Job No: _____

Scale: _____

08-04-2021

P0.2