



# NEVADA STATE LIQUOR LICENSE APPLICATION

The Board of County Commissioners or Incorporated Cities Governing Body Members must forward the approved and signed Form LTD 06 application to the Nevada Department of Taxation (NRS 369.200). Please note Per NRS 369.220 (3) the Nevada State Liquor License is nontransferable. The Department of Taxation's Nevada Business Registration form must be completed and attached to the application.

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APR 05 2024

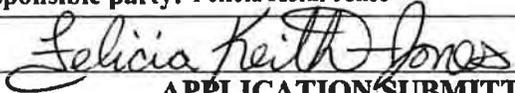
1	Application is being submitted for <input type="checkbox"/> New Business <input type="checkbox"/> Location Change <input checked="" type="checkbox"/> Additional Location	Taxpayer ID: 1041590482-001	STATE OF NEVADA DEPARTMENT OF TAXATION
2	Application is for: <input type="checkbox"/> Importer/Wholesaler Liquor License <input checked="" type="checkbox"/> Manufacturer Liquor License		
3	Importer/Wholesaler License Type (Check all that apply): <input type="checkbox"/> Importer and Wholesaler of Wine, Beer and Spirits <input type="checkbox"/> Importer and Wholesaler of Beer <input type="checkbox"/> Wholesaler of Wine, Beer and Spirits <input type="checkbox"/> Wholesaler of Beer		
4	Manufacturer License Type (Check all that apply): <input type="checkbox"/> Brew Pub <input type="checkbox"/> Brewer <input checked="" type="checkbox"/> Craft Distillery <input type="checkbox"/> Estate Distillery <input type="checkbox"/> Instructional Wine Facility <input type="checkbox"/> Winemaker <input type="checkbox"/> Rectifier		
5	Business Type: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Individual <input type="checkbox"/> Other:		
6	Date Incorporated/Organized: 12/12/2019	State where Incorporated/Organized: Nevada	
7	Anticipated Start Date of Location: 12/20/2019	Federal Tax ID: 27-4543222	
8	Name of Business: High Mark Barrel House, Inc.	Phone Number: (775) 622-9188	
9	DBA, if any: High Mark Distillery and Barrel House	Fax Number:	
10	Business Address: 4690 Longley Lane, Units 25, 26, 27, 28, 29, 56, 57, 58, 59, 60, 127		
11	Location of Operation: 4690 Longley Lane, Units 25, 26, 27, 28, 29, 56, 57, 58, 59, 60, 127		
12	Mailing Address: 4690 Longley Lane, Unit 28		
13	Email Address: highmarkdistillery@hotmail.com   Felicia@highmarkdistillery.com		
14	List All Owners, Officers, Members, Partners, etc. Attach Additional Sheets if Needed.		
	Name: Felicia Keith-Jones	Title: Owner, President	
	Residence Address: 11381 Messina Ct. Reno, NV 89521	% Owned: 100%	
	Name: Felicia Keith-Jones	Title: Secretary	
	Residence Address: 11381 Messina Ct. Reno, NV 89521	% Owned:	
	Name: Felicia Keith-Jones	Title: Treasurer	
	Residence Address: 11381 Messina Ct. Reno, NV 89521	% Owned:	
	Name: Felicia Keith-Jones	Title: Director	
	Residence Address: 11381 Messina Ct. Reno, NV 89521	% Owned:	

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DEPARTMENT OF TAXATION

R1102704Q-APP-2024

15	<b>If Partnership, is the agreement recorded?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>In what county and city is it recorded in?</b>
16	<b>Operating under a Fictitious Firm Name?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Supply a certified copy of the certificate to the Department)	<b>In what county and city is it recorded in?</b> Washoe, Reno
17	<b>Has applicant applied for a local County or City license?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>If so, where?</b> Reno, NV
18	<b>Has applicant secured all necessary Federal permits?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>TTB Permit Number (Supply a copy of permit):</b> NV-S-20025
19	<b>Is the location of operations shared with any other business?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please provide the following:	
	<b>Business Name:</b>	<b>Type of Operations:</b>
	<b>Business Name:</b>	<b>Type of Operations:</b>
	<b>Business Name:</b>	<b>Type of Operations:</b>
20	<b>Does any person listed on this application engage in manufacturing, importing, wholesaling or retailing alcoholic beverages through another company?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please provide the following:	
	<b>Person's Name:</b>	<b>% Owned:</b>
	<b>Business Name:</b>	<b>Type of Operations:</b>
	<b>Person's Name:</b>	<b>% Owned:</b>
	<b>Business Name:</b>	<b>Type of Operations:</b>
21	<b>Have any individuals with interest, financial or otherwise, in the applicant's business, ever been convicted of a violation of Federal or any state liquor laws?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If so, provide the following:	
	<b>Name:</b>	<b>When:</b>
	<b>Explain:</b>	
22	<b>APPLICANT'S AFFIRMATION:</b> By signing I certify that, to the best of my knowledge under penalty of perjury, the information contained herein is correct and acknowledge that pursuant to Nevada Revised Statutes (NRS) 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing to the Nevada Department of Taxation. In addition, if I am granted a liquor license, I understand that I am expected to comply with all liquor laws, including, but not limited to NRS 369 and 597, Nevada Administration Code, and all Federal laws. Noncompliance can result in fines, suspension or revocation of my license, and criminal prosecution.	
	<b>Name of responsible party:</b> Felicia Keith-Jones	<b>Title:</b> President, Owner
	<b>Signature:</b> 	<b>Date:</b> 04/04/2024
<b>APPLICATION SUBMITTAL LOCATIONS</b>		
<p><b>If the location of business operations is in one of the following cities:</b>  Boulder City, Caliente, Carlin, Carson City, Elko, Ely, Fallon, Fernley, Henderson, Las Vegas, Lovelock, Mesquite, North Las Vegas, Reno, Sparks, Wells, West Wendover, Winnemucca or Yerington.  <b>Submit page 1, 2 and 3 to that Incorporated City's Governing Board for review and a completed Department of Taxation's Nevada Business Registration Form.</b></p>		

**DESCRIPTION OF NEVADA BUSINESS OPERATIONS**

**Business Name:**

**Importer/Wholesaler of Liquor**

Provide a detailed description of your business practice in Nevada

- NA -

**Manufacturer (Brew Pub, Brewer, Craft Distillery, Estate Distillery,  
Instructional Wine Facility, Winemaker, Rectifier)**

Describe, step by step, the nature of your business and procedure to produce liquor in Nevada

AS A CRAFT DISTILLERY IN NEVADA, HIGH MARK DISTILLERY AND Barrel House CONDUCTS ALL DUTIES AND PROCEDURES TO PROPERLY DISTILL AND SELL SPIRITS TO INCLUDE, BUT NOT LIMITED TO THE FOLLOWING:

- |   |  |
|---|--|
| 1. PURCHASE RAW GRAINS AND INGREDIENTS FROM FARMERS AND CO-OPS. | 8. BOTTLE/CORK/SEAL/LABEL/SPIRITS  |
| 2. MILL GRAINS  | 9. SELL RETAIL AND WHOLESALE TO DISTRIBUTION COMPANIES.                                      |
| 3. MASH IN GRAINS   | 10. SELL SAMPLES OF OUR SPIRITS, MIX, BLEND, AND AGE SPIRITS AND COCKTAILS FROM OUR SPIRITS. |
| 4. INFUSE INGREDIENTS   | 11. SELL MERCHANDISE   |
| 5. FERMENTATION   | 12. EDUCATIONAL CLASSES TAUGHT.  |
| 6. DISTILL THROUGH STILLS                                       |  |
| 7. BARREL AGE ALL BOURBON/WHISKEY/<br>GOLDEN RUM                |  |

Provide additional attachments if needed.

**APPLICANT'S AFFIRMATION:** By signing I certify that, to the best of my knowledge under penalty of perjury, the information contained here is correct and acknowledge that pursuant to Nevada Revised Statutes (NRS) 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing to the Nevada Department of Taxation. In addition, if I am granted a liquor license, I understand that I am expected to comply with all liquor laws, including, but not limited to NRS 369 and 597, Nevada Administration Code, and all Federal laws. Noncompliance can result in fines, suspension or revocation of my license, and criminal prosecution. **By signing this document, it is acknowledged you are not permitted to conduct business until you have obtained a State of Nevada Department of Taxation liquor license.**

Title: <b>PRESIDENT</b>	Date: <b>5/21/24</b>
Name of responsible party: <b>FELICIA KEITH-JONES</b>	Signature: <i>Felicia Keith Jones</i>