



IDAHO DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL BEVERAGE CONTROL

P O. Box 700, Meridian, ID 83680-0700
(208) 884-7060

FLOOR PLAN

2C-173

Applicant Name: KEBOR L.L.C.

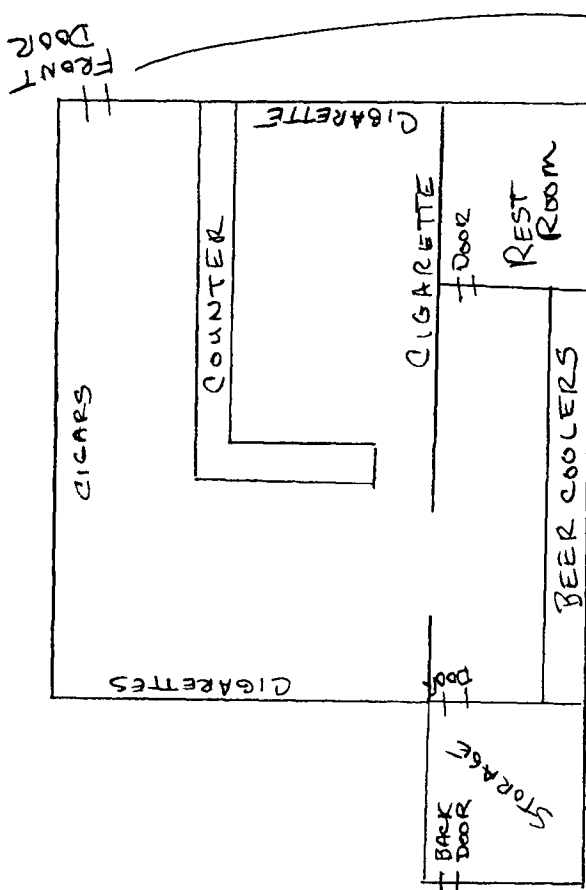
(Name of Individual(s) Registered Partnership, Corporation, Association or LLC)

Applicant Name: KEITH WEEKS

Business Name: TOBACCO CONNECTION

Business Location: 920 BLAINE ST. CALDWELL ID 83605

(Instructions: Sketch should show the entire area proposed to be licensed, all entrances and exits, location of bar, back bar, bar stools, booths, tables, coin operated amusement devices and the place where licenses are regularly displayed. There should also be indicated in the margin the direction and the distance to the nearest school, church, or other places of worship, measuring from the nearest entrance of the licensed premises to the nearest entrance of the school, church, or other place of worship, if within 300 feet.)



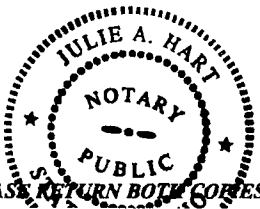
PLEASE NOTE
THERE IS NOT
A SCHOOL, CHURCH
OR PLACE OF
WORSHIP WITHIN
300 FEET

I HEREBY CERTIFY THAT THE BUILDING WHEREIN IT IS PROPOSED TO SELL BEER AT RETAIL CONFORMS TO ALL LAWS AND REGULATIONS OF THE STATE OF IDAHO AND TO THE ORDINANCES OF THE COUNTY AND CITY RELATING TO HEALTH, SAFETY AND ZONING. (Idaho Code section 23-1010(2)(b).) I FURTHER CERTIFY THAT I HAVE RECEIVED APPROVAL OF THE ABOVE PREMISE FROM THE GOVERNMENTAL AGENCY WITH ZONING JURISDICTION OVER THE FACILITY'S LOCATION. (PLEASE ATTACH APPROVAL NOTICE.) (Am. 2/90)

Keith Weeks

Applicant Signature

Subscribed and Sworn to before me this 3rd day February, 2000.



RECEIVED

FEB 4 2000

ALCOHOL BEVERAGE
CONTROL BUREAU

Notary Public

Residing at 7100 W. 1st

My Commission Expires 1-14-06