

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
 Business and Professional Licensing Administration
 Business License Division
 1100 4th Street S.W., 4th Floor, Washington, DC 20024
 (202) 442-4311



DEFICIENCY NOTICE

Applicant Name: STARBUCKS CORPORATION T/A STARBUCKS COFFEE #11247

Date: TUESDAY NOVEMBER 16, 2010

Category/Customer Unique Identification #112-64002072

Your Basic Business License application/renewal has been found to have the following deficiencies:

- Please complete the highlighted portions of your basic business license application.
- Prior to submitting your application to Business and Professional Licensing Administration, please register with the following office/s:

<input type="checkbox"/> Corporations Division (202) 442-4432	<input type="checkbox"/> Department of the Environment (202) 673-6700	<input type="checkbox"/> Department of Health (202) 535-2180
<input type="checkbox"/> Dept. of Housing & Community Development (202) 442-7200	<input type="checkbox"/> Elevator & Safety Regulation (202) 442-4609	<input type="checkbox"/> Fire/Emergency Medical Services (202) 673-3331
<input type="checkbox"/> Home Occupancy Permits (202) 442-4576	<input type="checkbox"/> Inspections & Enforcement (202) 442-9557	<input type="checkbox"/> MPD (Arrest & Criminal History) (202) 727-4245
<input type="checkbox"/> MPD Pawn Unit (202) 727-4279 or (202) 727-6281	<input type="checkbox"/> Occupational & Professional Licensing (202) 442-4320	<input type="checkbox"/> Office of Tax and Revenue (202) 727-4829
<input type="checkbox"/> Permits Division (202) 442-4601	<input type="checkbox"/> Rental Accommodation Office (202) 442-4610	<input type="checkbox"/> Solid Waste Division (202) 727-5907
<input type="checkbox"/> Weights & Measures Office (202) 698-2130		

- You must submit the following form/s (Copies must be legible):

<input type="checkbox"/> Affidavit	<input type="checkbox"/> Approval Letter (i.e., Health Inspection Letter)	<input type="checkbox"/> Basic Business License Application/ Renewal Attachment (Completed)
<input type="checkbox"/> Bill of Sales	<input type="checkbox"/> Certificate of Occupancy (Copy)	<input type="checkbox"/> Certified Resolution (Notarized)
<input type="checkbox"/> Charter	<input type="checkbox"/> Clean Hands Self-Certification (Original)	<input type="checkbox"/> Contracts and Invoices
<input type="checkbox"/> Corporations By-Laws (Copy)	<input type="checkbox"/> District of Columbia Determination Letter or Certificate for Tax Exemption (Copy)	<input type="checkbox"/> Digital Passport Photographs
<input type="checkbox"/> Driver's License (Copy)	<input type="checkbox"/> Driving Record	<input type="checkbox"/> Good Character References (Employer)
<input type="checkbox"/> Good Character References (Personal)	<input type="checkbox"/> Home Occupation Permit Certificate	<input type="checkbox"/> Insurance Certificate (Original)
<input type="checkbox"/> Internal Revenue Service Determination Letter (under 501(c)3 tax exemption) (Copy)	<input type="checkbox"/> Lease	<input type="checkbox"/> Letter of Good Standing
<input type="checkbox"/> Medical Health Certification	<input type="checkbox"/> Notice of Business Tax Registration	<input type="checkbox"/> Notice of Individual Tax Registration
<input type="checkbox"/> Police Criminal History Report	<input type="checkbox"/> Registered/Resident Agent Appointment	<input type="checkbox"/> Rent Control Registration Form
<input type="checkbox"/> Salesperson Designation Letter	<input type="checkbox"/> Statement of Purpose	<input type="checkbox"/> Surety Bond Certificate (Original)
<input type="checkbox"/> Surveyor's Plat	<input type="checkbox"/> Sworn Statement/Letter of Authenticity	<input type="checkbox"/> Tax Form 990, Financial Report or Audited Financial Statement (Copy)
<input checked="" type="checkbox"/> Trade Name Certificate/APP. (Copy)	<input type="checkbox"/> Uniform Registration Statement (Notarized)	<input type="checkbox"/> Weights and Measures Application (Completed)

*Sent to Home 11/30
 Sent overnight to Michael to obtain in person 12/14*

BASIC BUSINESS LICENSE - RENEWAL BILL

Billing Name and Address

STARBUCKS CORPORATION #7865
LICENSE SERVICES
P.O. BOX 34442- TAX2
SEATTLE, WA 98124

NOV 03 2010

Premise/Applicant's Name and Address

STARBUCKS CORPORATION
1250 U ST NW
WASHINGTON, DC 20009

Registered Agent's Name and Address

PRENTICE HALL CORPORATION SYSTEM
1090 VERMONT AVE NW
WASHINGTON, DC 20005

NOTICE: Pay online with PIN 979554 at <https://cpms.dcrd.dc.gov/osr/>

Applicant/Owner's Name: STARBUCKS CORPORATION
Corporation Name: STARBUCKS CORPORATION
Trade Name: STARBUCK COFFEE

CofO# / HOP#: CO72521	Units: 11	SQ FT.:	Perm#:
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RESTAURANT

Bill Only

Business ID# / BBL# : 91132XXXX-68007437
Category: 112

Fees Description

License Fee (Acc# 3235) :	\$432.00
RAO Fee (Acc# 3205) :	\$0.00
Renewal Fee (Acc# 3235) :	\$70.00
Endorsement Fee (Acc# 3235) :	\$25.00
Enhanced Services Fee (Acc# 3235) :	\$52.70

DCRA COPY

[Late Fee (Acc# 3235) : \$250.00]
[Late Fee (Acc# 3235) : \$500.00]

PAY THIS AMOUNT BY 10/31/2010 :	\$579.70
PAY THIS AMOUNT After 12/1/2010 :	\$829.70
PAY THIS AMOUNT After 12/31/2010 :	\$1,079.70

Make check payable to "DC TREASURER"
Write Business ID / BBL# on check.

Bill Only

Date Billed: 9/29/10 8:30 AM
For License Period: 11/1/2010 - 10/31/2012

Bill Only

Business ID# / BBL# : 91132XXXX-68007437
Category: 112

Fees Description

License Fee (Acc# 3235) :	\$432.00
RAO Fee (Acc# 3205) :	\$0.00
Renewal Fee (Acc# 3235) :	\$70.00
Endorsement Fee (Acc# 3235) :	\$25.00
Enhanced Services Fee (Acc# 3235) :	\$52.70

CUSTOMER COPY

[Late Fee (Acc# 3235) : \$250.00]
[Late Fee (Acc# 3235) : \$500.00]

PAY THIS AMOUNT BY 10/31/2010 :	\$579.70
PAY THIS AMOUNT After 12/1/2010 :	\$829.70
PAY THIS AMOUNT After 12/31/2010 :	\$1,079.70

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Write Business ID / BBL# on check.

Bill Only

Date Billed: 9/29/10 8:30 AM
For License Period: 11/1/2010 - 10/31/2012

Bill Only

Business ID# / BBL# : 91132XXXX-68007437
Category: 112

Fees Description

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Renewal Fee (Acc# 3235) :	\$70.00
Endorsement Fee (Acc# 3235) :	\$25.00
Enhanced Services Fee (Acc# 3235) :	\$52.70

CASHIER COPY

[Late Fee (Acc# 3235) : \$250.00]
[Late Fee (Acc# 3235) : \$500.00]

PAY THIS AMOUNT BY 10/31/2010 :	\$579.70
PAY THIS AMOUNT After 12/1/2010 :	\$829.70
PAY THIS AMOUNT After 12/31/2010 :	\$1,079.70

Make check payable to "DC TREASURER"
Write Business ID / BBL# on check.

Bill Only

Date Billed: 9/29/10 8:30 AM
For License Period: 11/1/2010 - 10/31/2012

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUSINESS AND PROFESSIONAL LICENSING ADMINISTRATION
BASIC BUSINESS LICENSE PROGRAM
P.O. BOX 91360
WASHINGTON, D.C. 20090

BASIC BUSINESS LICENSE RENEWAL BILL
PROFESSIONAL & HEALTH RENEWAL INSTRUCTION - ATTACHMENT

GENERAL INSTRUCTIONS FOR BUSINESS LICENSE RENEWAL

To ensure the timely issuance of your license, complete the following:

1. Review all materials enclosed with this renewal bill for any special requirements for your particular business category, or for other important information regarding the Basic Business License.
2. On the bill, please review the current information for accuracy. This information is critical to the agency properly issuing your business license.
3. If the information on the bill is not correct, please correct the information in the spaces provided below. **PLEASE BE SURE THAT THERE IS A CURRENT CONTACT PHONE AND YOUR EMAIL ADDRESS BELOW.**
4. If your business is no longer operating, please check the appropriate box below, and provide the requested information and we will delete you from future mailings. **If your business ownership has been transferred or changed, a new license application is required.**

FEES

In accordance with the Enactment of DC Act 14-543, Fiscal Year 2003 Budget Support Amendment Act of 2002, DCRA shall collect a fee of \$70.00 on each BBL renewal license it issues, plus \$25.00 for each endorsement.

Billing / Address :

Trade Name : Starbucks Coffee # 7865
Street Address : P.O. Box 34442 - TAX2
City / State / Zip Code : Seattle WA 98124
Telephone No. (Area Code) : 206 318 8705
Information is correct : Yes No
Email address: _____

Registered Agent Address :

Registered Agent Name : no changes
Street Address : _____
City / State / Zip Code : _____
Telephone No. (Area Code) : _____
Information is correct : Yes No
Email address: _____

The information on the renewal bill is not correct for the following reasons:

- Business no longer operating
 I have a current license.
Expiration date : _____
Customer # : _____
 License transferred to new owner:
Name : _____
Address : _____
Phone : _____
 Other : (Please explain) _____

GENERAL INSTRUCTIONS TO RENEW OR GO TO THE ONLINE IF APPLICABLE

Please sign and date on the blank line below. Mail this attachment to the address above, or bring to DCRA, First Floor Business License Center, 1100 4th Street, SW, Suite E460, Washington, DC 20024. Make check or money order payable to DC Treasurer.

ONLINE SIMPLE RENEWAL INSTRUCTIONS (IF APPLICABLE)

Certain business licenses can be renewed online. Please review your renewal bill beneath the address in area designated as NOTICE to determine if you can renew online. The following items are required to renew your business license online:

- BBL Number – this number is printed on your renewal bill at the top right hand corner
- FEIN – the Federal Employer Identification Number of your business
- PIN – a Personal Identification Number that is sent to you with your renewal bill
- Credit Card – payment with Visa, MasterCard, or Discover is required for renewal

You can renew your business license application online 30 days prior to the expiration of your current license. DCRA must verify the information prior to the issuance of your FINAL renewal license.

PROFESSIONAL LICENSING APPLICANTS: (1) Licensee signature (2) Professional Title of applicant. (3) Professional license period.

(4) Licensee Professional license number (5) Signature Verification by Occupational & Professional Licensing Administration (OPLA) Contact Representative.

1. Licensee Signature _____
2. Licensee Professional Title _____
3. Professional License Period _____
4. Professional License No. _____
5. OPLA CR Verification Signature _____

HEALTH LICENSING APPLICANTS: Signature Verification by Health Professional Licensing Administration (HPLA)

HPLA Verification Signature _____ *See attached*

INSPECTION DATE _____

ADDITIONAL INFORMATION IS AVAILABLE ON OUR WEBSITE:
<http://dcra.dc.gov/dcra/site/default.asp>

Sign Here: _____

FEIN/SSN 911325671

Date: 10/20/10



DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS

Basic Business License Clean Hands Form

LICENSE DIVISION

CLEAN HANDS SELF CERTIFICATION

TO THE APPLICANT: Please read this form carefully and completely before signing. The District government shall not issue or reissue any license or permit if the applicant owes it more than \$100 in outstanding debt. You must complete and submit this certification form with any application for a license or permit or renewal by the Clean Hands Before Receiving a License or Permit Act of 1996, effective May 11, 1996 (DC Law 11-118, DC Code Sec. 47-2861 et seq.) as amended, effective October 21, 2000 (DC Law 13-183, sec. 2(b), DC Code sec. 47-2861 et. seq.).

I, Cindy Sliva, as licensee, certify that Starbucks Coffee #7865
(name) (owner/partner/corporate officer) (business name)
trading as Starbucks Coffee #7865 at 1048 Maple Ave, using business tax number 911325671
(trade name) (business address) (FEIN/SSN)

as of this date, does not owe more than one hundred dollars (\$100) in outstanding debt to the District of Columbia government as a result of:

- (1) Fines, penalties or interest assessed pursuant to the Litter Control Administration Act of 1985, effective March 25, 1986 (DC Law 6-100; DC Code Sec. 8-801 (et. seq.) (2001 ed.); or
- (2) Fines, penalties or interest assessed pursuant to the Illegal Dumping Enforcement Act of 1994, effective May 20, 1994 (DC Law 10-117; DC Code Sec. 8-901 (et. seq.) (2001 ed.); or
- (3) Fines, penalties or interest assessed pursuant to the Department of Consumer and Regulatory Affairs (DCRA) Civil Infraction Act of 1985, effective October 5, 1985 (DC Law 6-42; DC Code Sec. 2-1801.01 (et. seq.) (2001 ed.); or
- (4) Past Due Taxes owed to the Office of Tax and Revenue pursuant to Title 47 of the DC Code; or
- (5) Past due District of Columbia Water and Sewer Authority service fees pursuant to Title 34 Chapter 22 and 24 of the DC Code (2001 ed.); or
- (6) Fines, penalties or interest assessed pursuant to Traffic Adjudication Act, Title 50 Chapter 23 of the DC Code (2001 ed.)

I understand that a signed and dated Clean Hands Self Certification Form is required as documentation to accompany my application for a business license, license endorsements, and permits. I understand completing and submitting this form does not guarantee that my license or permit will be approved.

I understand that DCRA may conduct an investigation to ascertain the veracity of the information contained in this *Clean Hands Self Certification Form*.

I understand that if I knowingly provide false information on this Clean Hands Self Certification Form, DCRA will proceed immediately to revoke each license or permit for which I am applying and fine me one thousand dollars (\$1,000).

Cindy Sliva license
Signature and Title

911325671
FEIN/SSN

10/20/10
Date

For help with this form, please call (202) 442-4400.

Starbucks 1250 U Street, NW

NONCRITICAL ITEMS

	COS	R		COS	R		COS	R
<input type="checkbox"/> Food and non-food contact surfaces — Constructed, cleanable, usage	Yes	<input type="checkbox"/>	<input type="checkbox"/>	Plant food cooking	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Liquid waste disposal	N/A	<input type="checkbox"/>	<input type="checkbox"/>	Toilet facilities	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Storage of equipment, utensil, linens, & single-service / single-use articles	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Physical facilities	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Summary Suspension Issued

Government of the District of Columbia
Adrian M. Fenty, Mayor

Food Establishment Inspection Report

Pursuant to Title 25 of the District of Columbia Municipal Regulations

Health Regulations & Licensing Administration
Bureau of Community Hygiene
Food Safety & Hygiene Inspection Services Division
825 North Capitol St. NE, 8th floor
Washington, DC 20002
(202) 535-2180

	CRIT. AL.	NC N CRIT. CAL.
No. of Violations	2	C
No. of Repeat Violations		
COS Score (optional)	C	C

Page 1 of 2
Date September 3, 2010
In 3:56 PM
Time Out 4:44 PM

Establishment Name: Starbucks
Address: 1250 U Street, NW Washington, DC 20009
Telephone: 202-232-7271

License Holder: Not Available
License/Consumer No.:
Certified Food Manager: Courtney D. Lackey
Certified Food Manager Identification Card No. 4343 Exp. Date 5/28/2011
ID Card Available: Yes No

Type of Inspection:
 Pre-Operational
 Follow-up
 Complaint generated
 Routine
 HACCP
 Other

Establishment Type:
 Food Service
 Food Market
 Wholesaler/Food Processor

Risk Category:
 High
 Medium
 Low

CRITICAL ITEMS *

The letter to the left of each item indicates that item's status at the inspection.

In Compliance	COS	R
Y (N) N/O N/A	1	<input type="checkbox"/>
Y (N) N/O N/A	2	<input type="checkbox"/>
Y (N) N/O N/A	3	<input type="checkbox"/>
Y (N) N/O N/A	4	<input type="checkbox"/>
Y (N) N/O N/A	5	<input type="checkbox"/>
Y (N) N/O N/A	6	<input type="checkbox"/>
Y (N) N/O N/A	7	<input type="checkbox"/>
Y (N) N/O N/A	8	<input type="checkbox"/>
Y (N) N/O N/A	9	<input type="checkbox"/>
Y (N) N/O N/A	10	<input type="checkbox"/>
Y (N) N/O N/A	11	<input type="checkbox"/>
Y (N) N/O N/A	12	<input type="checkbox"/>
Y (N) N/O N/A	13	<input type="checkbox"/>
Y (N) N/O N/A	14	<input type="checkbox"/>
Y (N) N/O N/A	15	<input type="checkbox"/>
Y (N) N/O N/A	16	<input type="checkbox"/>

In Compliance	COS	R
Y (N) N/O N/A	17	<input type="checkbox"/>
Y (N) N/O N/A	18	<input type="checkbox"/>
Y (N) N/O N/A	19	<input type="checkbox"/>
Y (N) N/O N/A	20	<input type="checkbox"/>
Y (N) N/O N/A	21	<input type="checkbox"/>
Y (N) N/O N/A	22	<input type="checkbox"/>
Y (N) N/O N/A	23	<input type="checkbox"/>
Y (N) N/O N/A	24	<input type="checkbox"/>
Y (N) N/O N/A	25	<input type="checkbox"/>
Y (N) N/O N/A	26	<input type="checkbox"/>
Y (N) N/O N/A	27	<input type="checkbox"/>
Y (N) N/O N/A	28	<input type="checkbox"/>

R = repeat violation Y = yes, in compliance N = no, not in compliance
COS = corrected on-site N/O = not observed N/A = not applicable

* VIOLATION OF SIX (6) OR MORE CRITICAL ITEMS THAT CANNOT BE CORRECTED ON SITE DURING THE COURSE OF THE INSPECTION RESULTS IN AUTOMATIC SUSPENSION & CLOSURE OF FOOD ESTABLISHMENT

Additional Comments

Hot Water (Sink)	114°F	Hot Water (3-comp)	113.8°F	Hot Water (Toilet)	15.4°F
Refrigerator	38°F	Hot Water (Handsink)	116°F	Hot Water (Toilet)	11°F
Refrigerator	36°F	Reach-in Refrigerator	36°F	Open Display Refrigerator	31°F

BY THE AUTHENTICITY OF THIS MULTI-TONE SECURITY DOCUMENT. CHECK BACKGROUND AREA CHANGES COLOR ERIDUALLY FROM TOP TO BOTTOM.



STARBUCKS COFFEE COMPANY
2401 UTAH AVE SOUTH
PO BOX 34067, Mail Stop S-AC3
SEATTLE, WA 98124-1067
UNITED STATES

Wells Fargo Bank, N.A.
115 Hospital Drive
Van Wert, OH 45891

56-382
412

Date: Oct 18, 2010
Check #: 1001074025

Amount

\$*****579.70

VOID AFTER 180 DAYS

PAY **Five Hundred Seventy Nine and 70/100-US Dollars**

PAY
TO
THE
ORDER
OF

DISTRICT OF COLUMBIA
DC TREASURER
PO BOX 96019
WASHINGTON, DC 20090-6019

91360 pr

Authorized Signer

⑆1001074025⑆ ⑆041203824⑆ 9600047461⑆

THE ORIGINAL DOCUMENT HAS A REFLECTIVE WATERMARK ON THE BACK. HOLD AT AN ANGLE TO VIEW WHEN CHECKING THE ENDORSEMENT.

KEYED/PAYMENTS

Amt: \$579.70
Date: 11-03-2010
Box: 91360
Batch: 352
Item: 14
Name: D C GOVT.,

★ ★ ★
GOVERNMENT OF THE DISTRICT OF COLUMBIA
Department of Consumer and Regulatory Affairs

Business License Center - 2nd Floor
1100 4th Street, S.W.
Washington D.C. 20024

Unique Business ID# 91132XXXX-128031

Adrian Fenty, Mayor

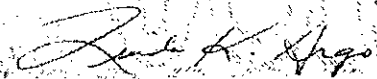
CERTIFICATE of REGISTRATION

THIS IS TO CERTIFY that all applicable Trade Name requirements of the Omnibus Regulatory Reform Act of 1998 have been complied with and accordingly, this **CERTIFICATE OF REGISTRATION** is hereby issued to:

STARBUCKS CORPORATION

Trade Name: **STARBUCK COFFEE #11247**

As of: **December 10, 2010**



Linda Argo
Director