



Pima County Clerk of the Board

Julie Castañeda

Melissa Manriquez
Deputy Clerk

Administration Division
130 W. Congress, 5th Floor
Tucson, AZ 85701
Phone: (520)724-8449 • Fax: (520)222-0448

Document and Micrographics Mgt. Division
1640 East Benson Highway
Tucson, Arizona 85714
Phone: (520) 351-8454 • Fax: (520) 791-6666

April 28, 2017

Joni Sue Condit
La Posada at Park Centre
350 E. Morningside Road
Green Valley, AZ 85614

RE: Arizona Liquor License No.: 06100138
d.b.a. La Posada at Park Centre

Dear Ms. Condit:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 6, Bar, which was received in our office on March 31, 2017. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, May 16, 2017, at 9:00 a.m. or thereafter, at the following location:

Pima County Administration Building
Board of Supervisors Hearing Room
130 W. Congress, 1st Floor
Tucson, AZ 85701

Should you have any questions pertaining to this matter, please contact this office at (520)724-8449.

Sincerely,

A handwritten signature in black ink, appearing to read "Julie Castañeda", is written over a horizontal line.

Julie Castañeda
Clerk of the Board

Enclosure



Arizona Department of Liquor Licenses and Control
 800 W Washington 5th Floor
 Phoenix, AZ 85007-2934
 www.azliquor.gov
 (602) 542-5141

APR 27 11 03 AM '17

AFFIDAVIT OF POSTING

Date of Posting: 4/5/17 Date of Posting Removal: 4/26/17

Applicant's Name: **La Posada at Park Centre**
Condit Joni Sue
Last First Middle

Business Address: 350 E. Morningside Road Green Valley 85614
Street City Zip

License #: 06100138

I hereby certify that pursuant to A.R.S. 4-201, I posted notice in a conspicuous place on the premises proposed to be licensed by the above applicant and said notice was posted for at least twenty (20) days.

Frank R. Hecht 1775 Rima Co. Sheriff 520 310 4034
Print Name of City/County Official Title Phone Number

[Signature] 1775 4/26/17
Signature Date Signed

Return this affidavit with your recommendations (i.e., Minutes of Meeting, Verbatim, etc.) or any other related documents. If you have any questions please call (602) 542-5141 and ask for the Licensing Division.



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TO: Development Services, Zoning Division
FROM: Ricci Romero *RR*
Administrative Support Specialist Senior
DATE: April 3, 2017
RE: Zoning Report - Application for Liquor License

Attached is the application of:

Joni Sue Condit
d.b.a. La Posada at Park Centre
350 E. Morningside Road
Green Valley, AZ 85614

Arizona Liquor License No. 06100138
Series 6, Bar
New License
Person Transfer X
Location Transfer X

ZONING REPORT

DATE: 4/17/17

Will current zoning regulations permit the issuance of the license at this location?

Yes No

If No, please explain:

Pima County Zoning Inspector

When complete, please return to cob_mail@pima.gov

APR 18 17:40:02 PC CLK/DJF BD *RR*

17-08-9284

17 MAR 30 11:47 AM '17



Arizona Department of Liquor Licenses and Control
800 W Washington 5th Floor
Phoenix, AZ 85007-2934
www.azliquor.gov
(602) 542-5141

DLLC USE ONLY

License # 06100138
Date Accepted: 3/30/17
CSR: SG

Application for Liquor License
Type or Print with Black Ink

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE
A service fee of \$25 will be charged for all dishonored checks (A.R.S. § 44-6852)

SECTION 1 Type of License

- Interim Permit
New License
Person Transfer
Location Transfer (series 6, 7 and 9)
Probate/ Will Assignment/ Divorce Decree (No Fees)
Seasonal

SECTION 2 Type of Ownership

- J.T.W.R.O.S.
Individual
Partnership
Corporation
Limited Liability Co
Club
Government
Trust
Tribe
Other (Explain)

SECTION 3 Type of license

- Add Sampling Privilege for Series 9 and 10 only (Complete Sampling Privilege application)
Add Growler privileges (restaurant, series 12, license only. 300-foot restriction applies)

1. Type of License (restaurant, bar etc.): Bar 2. LICENSE # (if issued): 06100138

SECTION 4 Applicants

1. Agent's Name: CONNOR JONI SUE P1067571
2. Applicant/Licensee Name: LA POSADA AT PARK CENTRE, INC. B1049548
3. Business Name (Doing Business As-DBA): LA POSADA AT PARK CENTRE B1058529
4. Business Location Address: 350 E. MORNINGSIDERD. GREEN VALLEY AZ 85614 Pima
5. Mailing Address: 350 E. MORNINGSIDERD. GREEN VALLEY AZ 85614
6. Business Phone: (520) 648-7912 Daytime Contact Phone: (520) 730-9169
7. Email Address: JONI@LAPOSADAGV.COM

8. Is the Business located within the incorporated limits of the above city or town? Yes No
If you checked no, in what City, Town, County or Tribal/Indian Community is this business located? Pima County

Fees: 200.00 Application 88.00 Finger Prints 288.00 Total of All Fees
Department Use Only
Is Arizona Statement of Citizenship & Alien Status for State Benefits complete? Yes No

SECTION 5 Background Check

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD ALONG WITH \$22. PROCESSING FEE PER CARD.

1. If the applicant is an entity, not an individual, answer questions 1a-b.

a) Date Incorporated/Organized: 06/07/1996 State where Incorporated/Organized: Arizona

b) AZ Corporation or AZ L.L.C. File No: 07792698 Date authorized to do business in AZ 06/10/1996

2. List any individual or entity that own a beneficial interest of 10% or more and/or controls the license. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure. Attach additional sheets as needed to disclose any controlling person, member, shareholder or general partner who owns a beneficial interest of 10% or more of the license.

Last	First	Middle	Title	%Owned	Mailing Address	City	State	Zip
CONDIT	JONI	SUE	VP/SEC.	0%	350 E. MORNINGSID E RD.	GREEN VALLEY	AZ	85614
ISRAEL	LISA	MIRSCH	PRES/CEO	0%	350 E. MORNINGSID E RD.	GREEN VALLEY	AZ	85614
IDE	PAUL	STEPHEN	V. PRES.	0%	350 E. MORNINGSID E RD.	GREEN VALLEY	AZ	85614
NON-PROFIT ORGANIZATION - NO ONE OWNS 10% OR MORE								

(Attach additional sheet if necessary)

SECTION 6 Interim Permit

If you intend to operate business while your application is pending you will need an interim permit pursuant to A.R.S. §4-203.01 for approval of an interim permit:

- There **must** be a valid license of the same series issued to the current location you are applying for OR
- A Hotel/Motel license is being replaced with a restaurant license pursuant to A.R.S. §4-203.01 (A)

1. Enter license number currently at the location: _____

2. Is the license currently in use? Yes No If no, how long has it been out of use? _____

I, (Signature) _____ declare that I am the CURRENT OWNER, AGENT, OR CONTROLLING PERSON on the stated license and location.

Attach a copy of the license currently issued at this location to this application.

NOTARY

State of Arizona }
 County of _____ }

On this _____ Day of _____, 20____ before me personally appeared _____
Day Month Year (Print Name of Document Signer)

Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.

Signature of NOTARY PUBLIC

(Affix Seal Above)

SECTION 7 Probate, Receiver, Bankruptcy Trustee, Assignment, or Divorce Decree of an existing liquor license ARS § 4-204

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD ALONG WITH \$22. PROCESSING FEE PER CARD.

1. Current Licensee's Name: _____
(Exactly as it appears on the license) Last First Middle

2. Assignee's Name: _____
Last First Middle

License Number: _____

ATTACH A COPY OF THE DOCUMENT THAT SPECIFICALLY ASSIGNS THE LIQUOR LICENSE TO THE ASSIGNEE.

SECTION 8 Government (for Cities, Towns or Counties only)

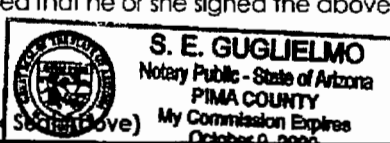
1. Government Entity: _____
2. Person/Designee: _____
Last First Middle Daytime Contact Phone #

A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED.

**SECTION 9 Person to Person - Current Licensee Information ARS§4-203(C), (D), (G)
(Bar and Liquor Stores only - Series 06, 07 and 09)**

1. License #: 06100138
2. Current Agent Name: KRAMBER Kevin
Last First Middle
3. Current Licensee Name: HSL EL CONQUISTADOR, LLC
(Exactly as it appears on the license)
4. Current Business Name: 020 VALLEY COMMUNITY & RECREATION CENTER
(Exactly as it appears on the license)
5. Current Daytime Phone: (520) 235-5684 Primary Email Address: KKRAMBER@520GMAIL.COM
6. Does current licensee intend to operate the business while this application is pending? Yes No
7. I authorize the transfer of this license to the applicant: [Signature]
Signature of Agent or Individual controlling person

NOTARY

State of Arizona }
County of PIMA }
On this 23 Day of MARCH, 2017 before me personally appeared KEVIN A. KRAMBER
Day Month Year (Print Name of Document Signer)
Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document:
[Signature]
Signature of NOTARY PUBLIC


SECTION 10 Proximity to Church or School - Questions to be completed by 6, 7, 9, 10 and 12G applicants.

A.R.S. §4-207. (A) and (B) state that no retailer's license shall be issued for any premises which are at the time the license application is received by the director, within three hundred (300) horizontal feet of a church, within three hundred (300) horizontal feet of a public or private school building with kindergarten programs or grades one (1) through (12) or within three hundred (300) horizontal feet of a fenced recreational area adjacent to such school building.

The above paragraph DOES NOT apply to:

- a) Restaurants that do not sell growlers (A.R.S. §4-205.02) Series 12
- b) Hotel/motel license (A.R.S. §4-205.01) Series 11
- c) Microbrewery (A.R.S. §4-205.08) Series 3
- d) Craft Distillery (A.R.S. §4-205.10) Series 18
- e) Government license (A.R.S. §4-205.03) Series 5
- f) Playing area of a golf course (A.R.S. §4-207 (B)(5))
- g) Wholesaler/Distributor Series 4
- h) Farm Winery Series 13
- i) Producer Series 1

1. Distance to nearest School: 1.8 MILES
 (If less than one (1) mile note footage)

Name of School: CONTINENTAL ELEMENTARY
1991 WHITE HOUSE CANYON RD.
 Address: GREEN VALLEY, AZ 85614

2. Distance to nearest Church: 2.2 MILES
 (If less than one (1) mile note footage)

Name of Church: RISEN SAVIOR LUTHERAN
555 S. LA CANADA DR.
 Address: GREEN VALLEY, AZ 85614

SECTION 11 Business Financials A.R.S.§4-202(F)

1. I am the:

- Tenant: a person who holds the lease of a property; a lessee.
- Sub-tenant: a person who holds a lease which was given to another person (tenant) for all or part of a property.
- Owner
- Purchaser
- Management Company

2. If the premises is leased give lessors:

Name: N/A
 Address: N/A
Street City State Zip

3. What is the penalty if the lease is not fulfilled? \$ N/A or Other: N/A

4. Total money borrowed for the Business not including lease? \$ 8,188,138.00

Please List Lenders/People you owe money to for business.

Last	First	Middle	Amount Owed	Mailing Address	City	State	Zip
NORTHERN TRUST	BANK		7,366,638.00	3450 E. SUNRISE DR. #100	TULSA	AZ	74116
NAKOMA SKY	LLC		8,215,500.00	350 E. MORNINGSIDES	GREEN VALLEY	AZ	85614

(Attach additional sheet if necessary)

5. Has a license or a transfer license for the premises on this application been denied by the state within the past year?

Yes No If yes, attach explanation.

6. Does any spirituous liquor manufacture, wholesaler, or employee have an interest in your business?

Yes No If yes, attach explanation.

SECTION 12 Diagram of Premises

Check ALL boxes that apply to your business:

Walk-up or drive-through windows

Patio: Contiguous Non-Contiguous within 30 feet

1. Is your licensed premises now closed due to construction, renovation or redesign or rebuild?

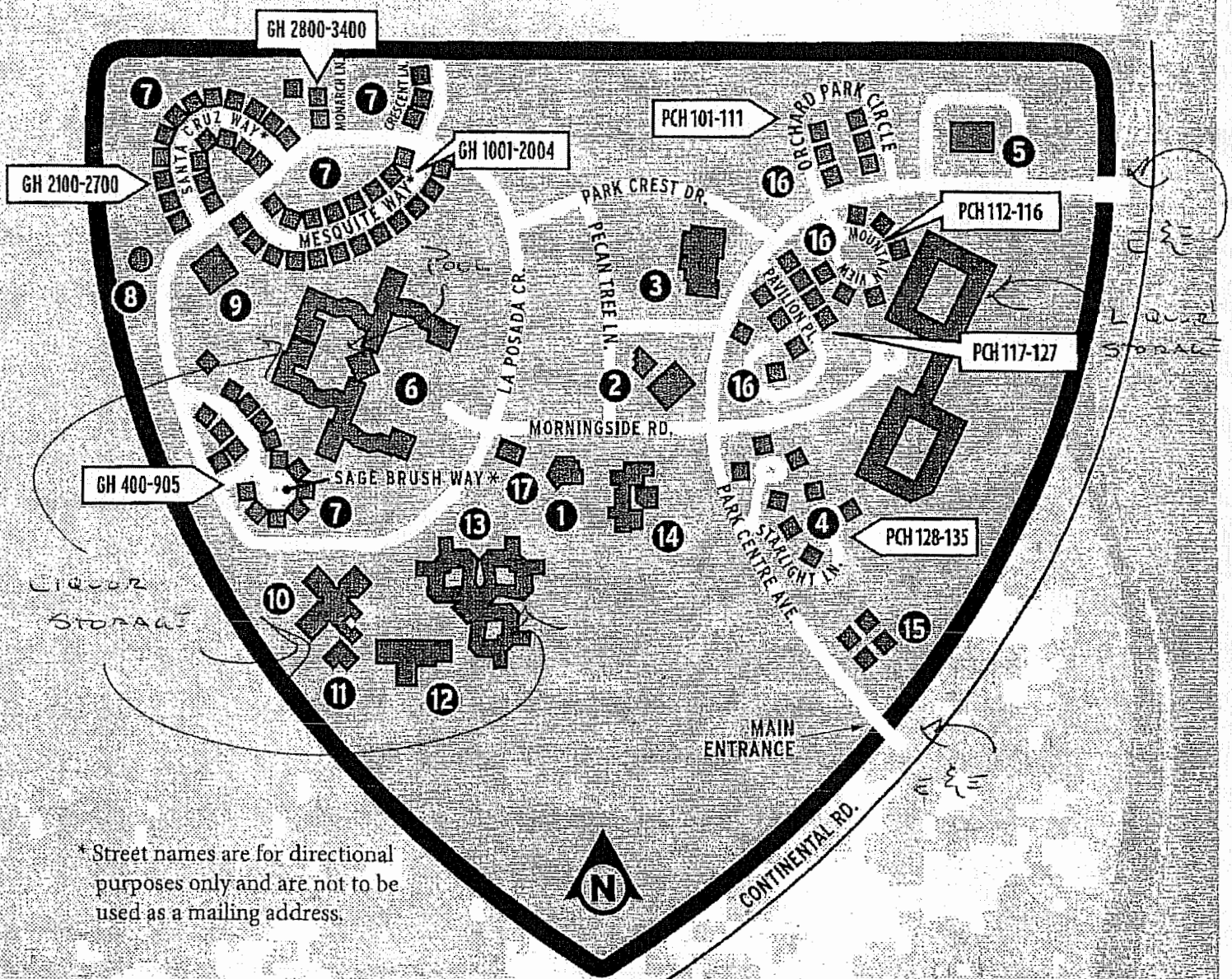
Yes No If yes, what is your estimated completion date? N/A

Please attach a diagram of the premises which clearly show only the areas where spirituous liquor will be sold, served, consumed, dispensed, possessed or stored. Include all entrances, exits, interior walls, bar areas, dining areas, dance floor, stage, game room and the kitchen. **DO NOT INCLUDE** parking lots, living quarters or areas where business is not conducted under this liquor license. When completing your premises diagram, please identify which orientation is North.

Approx. 75 Acres

ENTIRE PROPERTY ENCLOSED BY
NATURAL BARRIERS & WASH

Campus Map



* Street names are for directional purposes only and are not to be used as a mailing address.

- | | |
|---|---|
| ① Campus Administration | ⑩ La Hacienda |
| ② Community Doctor & Dentist Offices | ⑪ La Posada Outpatient Therapies and Therapy Pool |
| ③ Fitness Pavilion | ⑫ La Via Memory Care |
| ④ La Perla Apartments | ⑬ La Joya Assisted Living Suites |
| ⑤ La Posada Maintenance Building | ⑭ Casa Community Services |
| ⑥ La Vista Apartments | ⑮ La Posada Shoppes |
| ⑦ Garden Homes | ⑯ Park Centre Homes (PCH) |
| ⑧ Astronomy Observatory | ⑰ The Learning Center |
| ⑨ Recreation Center and Resident Workshop | |

2. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed areas such as parking lots, living quarters, etc.

3. As stated in A.R.S. §4-207.01 (B), I understand it is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to the service areas or the square footage of the licensed premises, either by increase or decrease.

JKC
Applicants Initials

RESTAURANTS AND HOTELS/MOTELS ONLY

(IMPORTANT NOTE: A site inspection must be conducted prior to activation of the license. The fee of \$50.00 will be due and payable upon submitting this application.)

4a. Provide a detailed drawing of the kitchen and dining areas, including the locations of all kitchen equipment and dining furniture, these are required as part of the diagram. A.R.S. §4-205.02(C)

4b. Provide a restaurant operation plan.

SECTION 13 SIGNATURE BLOCK

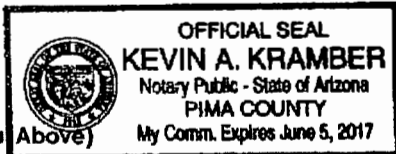
I, (Signature) Joan Sue Condit, hereby declare that I am the Owner/Agent filing this application, I have read this document and verify the content and all statements are true, correct and complete, to the best of my knowledge.

NOTARY

State of Arizona Pima }
County of Arizona }

On this 14 Day of March, 2017 before me personally appeared Joan Sue Condit
Day Month Year (Print Name of Document Signer)

Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.



(Affix Seal Above)

[Signature]
Signature of NOTARY PUBLIC

A.R.S. §41-1030. Invalidity of rules not made according to this chapter; prohibited agency action; prohibited acts by state employees; enforcement; notice

B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.

D. THIS SECTION MAY BE ENFORCED IN A PRIVATE CIVIL ACTION AND RELIEF MAY BE AWARDED AGAINST THE STATE. THE COURT MAY AWARD REASONABLE ATTORNEY FEES, DAMAGES AND ALL FEES ASSOCIATED WITH THE LICENSE APPLICATION TO A PARTY THAT PREVAILS IN AN ACTION AGAINST THE STATE FOR A VIOLATION OF THIS SECTION.

E. A STATE EMPLOYEE MAY NOT INTENTIONALLY OR KNOWINGLY VIOLATE THIS SECTION. A VIOLATION OF THIS SECTION IS CAUSE FOR DISCIPLINARY ACTION OR DISMISSAL PURSUANT TO THE AGENCY'S ADOPTED PERSONNEL POLICY.

F. THIS SECTION DOES NOT ABROGATE THE IMMUNITY PROVIDED BY SECTION 12-820.01 OR 12-820.02.