



Pima County Clerk of the Board

Robin Brigode

Mary Jo Furphy
Deputy Clerk

Administration Division
130 W. Congress, 5th Floor
Tucson, AZ 85701
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Document and Micrographics Mgt. Division
1640 East Benson Highway
Tucson, Arizona 85714
Phone: (520) 351-8454 • Fax: (520) 351-8456

May 20, 2014

Mr. Myron Christopher Squires
1055 Brew Works, L.L.C.
3810 E. 44th Street, No. 315
Tucson, AZ 85713

RE: Application for Extension of Premises/Patio Permit
License No.: 03103012
1055 Brew Works, L.L.C.
Temporary Change for June 28, 2014

Dear Mr. Squires:

Notice is hereby given that the Pima County Board of Supervisors will hold a hearing in reference to the above Extension of Premises/Patio Permit application. Please be advised that the hearing has been scheduled for Tuesday, June 3, 2014, at 9:00 a.m. or thereafter, to be held at the following location:

Pima County Administration Building
Board of Supervisors Hearing Room
130 West Congress, 1st Floor
Tucson, Arizona 85701

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

Sincerely,

A handwritten signature in black ink that reads "Robin Brigode".

Robin Brigode
Clerk of the Board

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
www.azliquor.gov
(602) 542-5141

Date payment received _____

CSR Initials _____

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT

THIS APPLICATION MUST BE RETURNED TO THE DEPARTMENT OF LIQUOR

Permanent change of area of service. A non-refundable \$50 fee will apply. Specific purpose for change: _____

Temporary change for date(s) of: 06 /28 /2014 through: 06 /28 /2014 List specific purpose for change: special event

requires more room for seating

1. Licensee's Name: Squires Myron Christopher
Last First Middle
2. Mailing Address: 3810 E 44th Street, #315 Tucson AZ 85713
City State Zip
3. Business Name: 1055 Brew Works LLC LICENSE #: 03103012
4. Business Address: 3810 E 44th Street, #315 Tucson PIMA AZ 85713
City COUNTY State Zip
5. Business Phone: (520) 461-8073 Residence Phone: () _____
6. Do you understand Arizona Liquor Laws and Regulations? YES NO Email: _____
7. Have you received approved Liquor Law Training? NO YES If so, when does your Certificate expire? 8/10/2014
8. What security precautions will be taken to prevent liquor violations in the extended area? barricades, one point of entry with id checkers
9. Does this extension bring your premises within 300 feet of a church or school? YES NO
10. **IMPORTANT: ATTACH THE REVISED FLOOR PLAN CLEARLY DEPICTING YOUR LICENSED PREMISES AND WHAT YOU PROPOSE TO ADD.**

Barrier Exemption: an exception to the requirement of barriers surrounding a patio/outdoor serving area may be requested. Barrier exemptions are granted based on public safety, pedestrian traffic, and other factors unique to a licensed premises. List specific reasons for exemption: _____

Investigation Recommendation Approval Disapproval by: _____ Date: ___ / ___ / ___

****After completing sections 1-10, please take this application to your local Board of Supervisors, City Council or Designate for their recommendation. This recommendation is not binding on the Department of Liquor.

This change in premises is RECOMMENDED by the local Board of Supervisors, City Council or Designate:

(Authorized Signature)

(Title)

(Agency)

I, MYRON CHRISTOPHER SQUIRES, being first duly sworn upon oath, hereby depose, swear and declare, (Print full name)
under penalty of perjury, that I am the APPLICANT making the foregoing application. I have read this application and the contents and all statements are true, correct and complete.

State of Arizona County of Pima
SUBSCRIBED IN MY PRESENCE AND SWORN TO before me this date

X _____

State of Arizona County of Pima
SUBSCRIBED IN MY PRESENCE AND SWORN TO before me this date

(Signature of Owner or Agent)

OFFICIAL SEAL

MELISSA MANRIQUEZ

Notary Public - Arizona

PIMA COUNTY

My Comm. Exp. 01/16/2016

My commission expires on 01/16/2016

2016

My Comm. Exp. 01/16/2016

20th May 2014

Day Month Year

(Signature of NOTARY PUBLIC)

Investigation Recommendation Approval Disapproval by: _____ Date: ___ / ___ / ___

Director Signature required for Disapprovals _____ Date: ___ / ___ / ___

- Proposed extension would give us some room in parking lot, would provide tables and chairs, etc
- Will provide designated ID checkers at gate, using hand stamp system for service
- Owners will be on-site to enforce

