



# Pima County Clerk of the Board

Julie Castañeda

Melissa Manriquez  
Deputy Clerk

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

Management of Information & Records Division  
1640 East Benson Highway  
Tucson, Arizona 85714  
Phone: (520) 351-8454 • Fax: (520) 791-6666

June 7, 2019

Andrea Dahlman Lewkowitz  
Arizona Wine Collective  
2600 N. Central Avenue #1775  
Phoenix, AZ 85004

RE: Arizona Liquor License Job No.: 64540  
d.b.a. Arizona Wine Collective

Dear Ms. Lewkowitz:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 10, Beer and Wine Store, which was received in our office on May 13, 2019. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, July 2, 2019, 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".

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

**AFFIDAVIT OF POSTING**

Date of Posting: 05/14/19

Date of Posting Removal: 06/05/19

Applicant's Name: Arizona Wine Collective  
 Last: Lewkowitz First: Andrea Middle: Dahlman

Business Address: 4280 N. Campbell Avenue, Suite 155 Tucson 85718  
 Street City Zip

License #: 64540

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.

DR MCKillop Process Server 520-351-3919  
 Print Name of City/County Official Title Phone Number

DR mckillop 06/05/19  
 Signature Date Signed

JUN 07 19 AM 10:56 PC CLK OF RD

(14)

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: Melissa Whitney  
Administrative Support Specialist Senior  
DATE: 5/14/2019  
RE: Zoning Report - Application for Liquor License

Attached is the application of:

Andrea Dahlman Lewkowitz  
d.b.a. Arizona Wine Collective  
4280 N. Campbell Avenue, Suite 155  
Tucson, AZ 85718

Arizona Liquor License Job No. 64540  
Series 10, Beer and Wine Store  
New License   
Person Transfer  
Location Transfer

ZONING REPORT

DATE: 5/14/19

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](mailto:cob_mail@pima.gov)

MAY 14 19PM 01 25 PCLK OF PD

19-14-9361

State of Arizona  
Department of Liquor Licenses and Control

Created 05/10/2019 @ 10:41:46 AM

Local Governing Body Report

**LICENSE**

Number:	Type:	010 BEER AND WINE STORE
Name:	ARIZONA WINE COLLECTIVE	
State:	Pending	
Issue Date:	Expiration Date:	
Original Issue Date:		
Location:	4280 N CAMPBELL AVENUE STE 155 TUCSON, AZ 85718 USA	
Mailing Address:	2600 N CENTRAL AVENUE #1775 PHOENIX, AZ 85004 USA	
Phone:	(520)329-8595	
Alt. Phone:	(602)200-7222	
Email:	ANDREA@LEWKLAW.COM	

MY 1319PH0348 P0 CLK OF FD  
ellw

**AGENT**

Name:	ANDREA DAHLMAN LEWKOWITZ
Gender:	Female
Correspondence Address:	2600 N CENTRAL AVENUE #1775 PHOENIX, AZ 85004 USA
Phone:	(602)200-7222
Alt. Phone:	
Email:	ANDREA@LEWKLAW.COM

**OWNER**

Name: SNELL CREATIVE INC  
Contact Name: ANDREA LEWKOWITZ  
Type: CORPORATION  
AZ CC File Number: 09982504 State of Incorporation: AZ  
Incorporation Date: 08/06/2001  
Correspondence Address: 2600 N CENTRAL AVENUE  
#1775  
PHOENIX, AZ 85004  
USA  
Phone: (602)200-7222  
Alt. Phone:  
Email: ANDREA@LEWKLAW.COM

**Officers / Stockholders**

Name:	Title:	% Interest:
JEANNE MARIE SNELL	Director, Sec, Stockholder	50.00
PETER ALLEN SNELL	Director, Pres, Stockholder	50.00

**SNELL CREATIVE INC - Director, Pres, Stockholder**

Name: PETER ALLEN SNELL  
Gender: Male  
Correspondence Address: 2600 N CENTRAL AVENUE  
#1775  
PHOENIX, AZ 85004  
USA  
Phone: (520)404-0886  
Alt. Phone:  
Email: PETE@AZWINECOLLECTIVE.COM

**SNELL CREATIVE INC - Director, Sec, Stockholder**

Name: JEANNE MARIE SNELL  
Gender: Female  
Correspondence Address: 2600 N CENTRAL AVENUE  
#1775  
PHOENIX, AZ 85004  
USA  
Phone: (520)661-8815  
Alt. Phone:  
Email: JEANNE@AZWINECOLLECTIVE.COM

**APPLICATION INFORMATION**

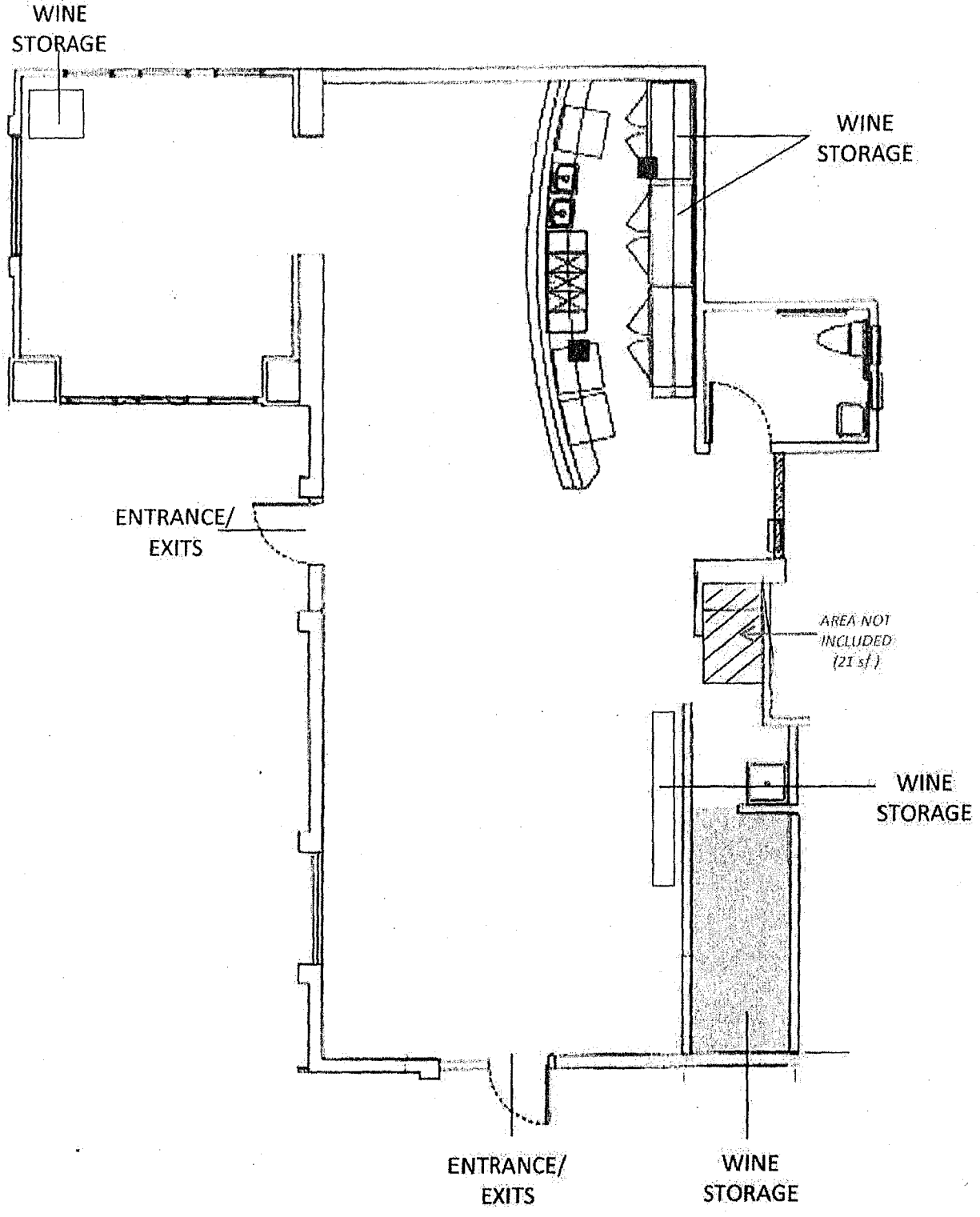
Application Number: 64540  
Application Type: New Application  
Created Date: 05/10/2019

**QUESTIONS & ANSWERS**

- 1) If you intend to operate the business while your application is pending you will need an interim permit pursuant to A.R.S. §4-203.01. Would you like to apply for an Interim Permit?  
If yes, after completing this application, please go back to your Licensing screen, under New License Application choose "Interim Permit" from the drop-down window.  
No
- 2) Have you submitted a questionnaire? Each person listed must submit a questionnaire and mail in a fingerprint card along with a \$22. processing fee per card.  
Yes
- 3) Please provide name, address, and Distance of nearest school.  
SATORI CHARTER SCHOOL- 1.2 MILES  
3727 N 1ST AVE TUCSON AZ 85719
- 4) Please provide name, address, and distance of nearest church.  
ST PHILIPS IN THE HILLS EPISCOPAL CHURCH- 700 FT  
4440 N CAMPBELL AVE TUCSON AZ 85718
- 5) Are you a tenant? (A person who holds the lease of a property; a lessee)  
Yes  
A Document of type LEASE is required.
- 6) Is there a penalty if lease is not fulfilled?  
Yes  
What is the penalty?  
MONETARY DAMAGES + TERMINATION
- 7) Are you a sub-tenant? (A person who holds a lease which was given to another person (tenant) for all or part of a property)  
No
- 8) Are you the owner?  
No
- 9) Are you a purchaser?  
No
- 10) Are you a management company?  
No
- 11) Is the Business located within the incorporated limits of the city or town of which it is located?  
No  
If no, in what City, Town, County or Tribal/Indian Community is this business located?  
PIMA COUNTY
- 12) What is the total money borrowed for the business not including the lease?  
Please list lenders/people owed money for the business.  
0
- 13) Have you provided a diagram of your premises?  
Yes
- 14) Is there a drive through window on the premises?  
No
- 15) If there is a patio please indicate contiguous or non-contiguous within 30 feet.  
NONE
- 16) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?  
No

19 MAY 10 11:41 AM

**ARIZONA WINE COLLECTIVE**  
4280 N. Campbell Ave. #155  
Tucson, AZ 85718  
1,100 SF



#07100130

Certificate # AZB-06160

19 MAR 10 10:41 AM AZB-06160

Certificate of Completion  
For  
Title 4 **BASIC** Liquor Law Training

<input checked="" type="checkbox"/>	On-sale
<input type="checkbox"/>	Off-sale
<input type="checkbox"/>	On- and off-sale

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

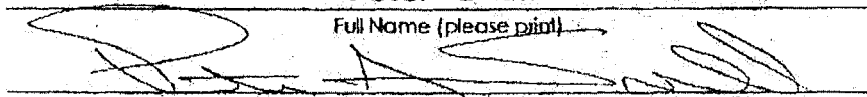
The State requires BASIC Title 4 training only as a prerequisite for MANAGEMENT Title 4 training or as a result of a liquor law violation. Persons required to have BASIC Title 4 training are listed at the base of this Certificate. Licensees sometimes require BASIC Title 4 Training a condition of employment.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

Peter Snell

Full Name (please print)



Signature

07/21/2016

Training Completion Date

07/21/2019

Certificate Expiration Date  
(three years from completion date)

17 SEP 15 09:14 AM 06160

Training Provider Information

360training.com Inc.

Company Name

13801 Burnet Road, Ste 100 Austin, TX 78727


Mailing Address

(877) 881-2235

Daytime Contact Phone Number

I, Craig Douglas, certify that the above named individual did successfully complete  
Instructor Name (please print)

Title 4 BASIC Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).



Instructor Signature

07/21/2016

Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below  
2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

In-state Microbrewery (series 3)  
Conveyance (series 8)  
Restaurant (series 12)

Government (series 5)  
Liquor Store (series 9)  
In-state Farm Winery (series 13)

Bar (series 6)  
Private Club (series 14)

Beer & Wine Bar (series 7)  
Hotel/Motel w/restaurant (series 11)  
Beer & Wine Store (series 10)

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.



#07100130

COPY

Certificate # AZM-01555

Certificate of Completion  
For  
Title 4 **MANAGEMENT** Liquor Law Training

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

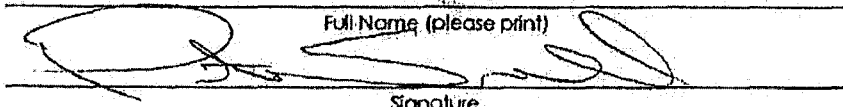
Basic Title 4 training is a prerequisite for MANAGEMENT Title 4 training. A valid Certificate of Completion for BASIC Title 4 training must be on file at the Department of Liquor and satisfactory completion of a State-approved BASIC Title 4 course must be verified by the training provider prior to issuing a Certificate of Completion for MANAGEMENT Title 4 training.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

**Pete Snell**

Full Name (please print)



Signature

09/05/2017

Training Completion Date

09/05/2020

Certificate Expiration Date  
(three years from completion date)

17 SEP 15 11:41 AM '13

Training Provider Information

**360training.com Inc.**

Company Name

13801 Burnet Road, Ste 100 Austin, TX 78727

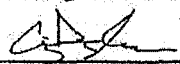
Mailing Address

(877) 881-2235

Daytime Contact Phone Number

I, Craig Douglas, certify that the above named individual did successfully complete  
Instructor Name (please print)

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Instructor Signature

09/05/2017

Day Mo Year

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July 11, 2013

#07100130

US MPT 10 L... #1054

Certificate # AZB-ON-09745

Certificate of Completion  
For  
Title 4 **BASIC** Liquor Law Training

<input checked="" type="checkbox"/>	On-sale
<input type="checkbox"/>	Off-sale
<input type="checkbox"/>	On- and off-sale

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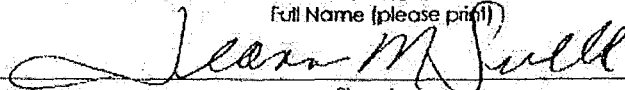
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A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

Jeanne Snell

Full Name (please print)



Signature

05/01/2017

Training Completion Date

04/30/2020

Certificate Expiration Date  
(three years from completion date)

Training Provider Information

360training.com Inc.

Company Name

13801 Burnet Road, Ste 100 Austin, TX 78727

Mailing Address

(877) 881-2235

Daytime Contact Phone Number

SEP 7 09 16 AM '05

I, Craig Douglas, certify that the above named individual did successfully complete  
Instructor Name (please print)

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Instructor Signature

05/01/2017  
Day Mo Year

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Certificate # AZM-01553

Certificate of Completion  
For  
Title 4 **MANAGEMENT** Liquor Law Training

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A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

**Jeanne Snell**

Full Name (please print)

*Jeanne M Snell*  
Signature

09/04/2017

Training Completion Date

\* 1912 \*

09/04/2020

Certificate Expiration Date  
(three years from completion date)

Training Provider Information

**360training.com Inc.**

Company Name

13801 Burnet Road, Ste 100 Austin, TX 78727

Mailing Address

(877) 881-2235

Daytime Contact Phone Number

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Instructor Name (please print)

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*Craig Douglas*  
Instructor Signature

09/04/2017

Day Mo Year

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