



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

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

July 17, 2018

Andrea Dahlman Lewkowitz
Coxco Fuel
2600 N. Central Avenue, Suite 1775
Phoenix, AZ 85004

RE: Arizona Liquor License No.: 23172
d.b.a. Coxco Fuel


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 June 12, 2018. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, August 7, 2018, 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,


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

JUL 16 10 05 AM '18
 RLB

AFFIDAVIT OF POSTING

Date of Posting: 6-13-2018

Date of Posting Removal: 7-16-2018

Applicant's Name: Coxco Fuel
Lewkowitz Andrea Dahlman
Last First Middle

Business Address: 5960 N. Oracle Road Tucson 85704
Street City Zip

License #: 23172

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.

*PIMA COUNTY
SHERIFF DEPT*

Deputy Bruce E. Haude #1299 deputy (520) 940-6270
Print Name of City/County Official Title Phone Number

[Signature] 7-16-2018
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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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) 791-6666

TO: Development Services, Zoning Division
FROM: Alina Bárcenas *ARB*
Administrative Support Specialist Senior
DATE: 6/13/2018
RE: Zoning Report - Application for Liquor License

Attached is the application of:

Andrea Dahlman Lewkowitz
d.b.a. Coxco Fuel
5960 N. Oracle Road
Tucson, AZ 85704

Arizona Liquor License No. 23172
Series 10, Beer and Wine
New License
Person Transfer
Location Transfer

ZONING REPORT

DATE: 6/13/18

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

Yes No

If No, please explain:

[Handwritten Signature]
Pima County Zoning Inspector

When complete, please return to cob_mail@pima.gov

JUN 13 10:03:47 POC KCF RD *bk*

18-10-9324
18 JUN 8 Lic. Lic. PM 2:07



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 #	23172
Date Accepted:	6-8-18
CSR:	SC

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 (series 6, 7 and 9)
- 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) _____

JUN 19 10 17 POC KCF PD MW

SECTION 3 Type of Privilege

- Add Sampling Privilege for Series 9 and 10 only (Complete Sampling Privilege application) A.R.S.§4-206.01(G), (H), (I) & (L)
- Add Growler privileges (restaurant, series 12, license only. 300-foot restriction applies) A.R.S.§4-207(A) & (B)

1. Type of License (Series of license): SERIES 10 2. LICENSE # 23172

SECTION 4 Applicants

1. Agent's Name: LEWKOWITZ ANDREA DAHLMAN
Last First Middle

2. Individual/Owner Name: SAL RESTAURANT I, LLC
(Ownership name for type of ownership checked in section 2)

3. Business Name (Doing Business As-DBA): COXCO FUEL

4. Business Location Address: 5960 N ORACLE RD TUCSON AZ 85704 PIMA
(Do not use PO Box) Street City State Zip Code County

5. Mailing Address: 2600 N CENTRAL AVE STE. 1775 PHOENIX AZ 85004
(All correspondence will be mailed to this address) Street City State Zip Code

6. Business Phone: 520.888.4213 Daytime Contact Phone: 602.200.7222

7. Email Address: ANDREA@LEWKLAW.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

9. Total Price paid for Series 6 Bar, Series 7 Beer & Wine Bar or Series 9 Liquor Store (license only) \$ _____

Department Use Only				Fees: <u>200.00</u> Total of All Fees
Fees: <u>100.00</u> Application	<u>100.00</u> Interim Permit	Site Inspection	Finger Prints	

SECTION 5 Interim Permit

If you intend to operate business while the 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: 10103196
2. Is the license currently in use? Yes No If no, how long has it been out of use? _____


NOTARY

I (Print Full Name) Cheryl Cox hereby declare that I am the Agent, Current Owner, or Controlling Person on the stated license and location.

Signature: Cheryl Cox State of AZ County of Pima

The foregoing instrument was acknowledged before me this 7 Day of June, 2018

My Commission Expires on: 8/10/19 Day Month Year



Jennifer Zeman
Signature of Notary

SECTION 6 Background Check

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

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

- a) Date Incorporated/Organized: 05/11/2018 State where Incorporated/Organized: Arizona
- b) AZ Corporation or AZ L.L.C. File No: 622470833 Date authorized to do business in AZ: Pending

2. List any individual or entity that owns a beneficial interest of 10% or more and/or controls the applicant or licensee. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure. Attach additional sheets as needed. Disclose all controlling persons and members, shareholders or general partners who own a beneficial interest of 10% or more of the applicant or licensee.

Last	First	Middle	Title	%Owned	Mailing Address	City	State	Zip
RIZVI	JUAIB	AHMED	MEMBER	100%	1817 E GWEN ST, PHOENIX, AZ		85042	

(Attach additional sheet if necessary)

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

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$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
3. 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 #

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

1. License #: _____

2. Individual Owner/Agent Name: _____
Last First Middle

3. Ownership Name: _____
(Exactly as it appears on the license)

4. Current Business Name: _____
(Exactly as it appears on the license)

5. Business Location Address: _____
Street City State County Zip

6. Current Daytime Phone: _____ Primary Email Address: _____

7. Does current licensee intend to operate the business while this application is pending? Yes No

8. I, (Signature): _____ authorize the transfer of this license to the applicant.

NOTARY	
I (Print Full Name) _____ hereby declare that I am the Individual Agent, Owner, Or Controlling Person on the stated license and location.	
Signature: _____	State of _____ County of _____ The foregoing instrument was acknowledged before me this
My Commission Expires on: _____ Date	_____ Day of _____, _____ Day Month Year
_____ Signature of Notary	

**SECTION 10 Location Transfer– Current Licensee Information ARS§4-203(C), (D), (G)
(Bar and Liquor Stores only – Series 06, 07, and 09)**

1. Current Business: Name: _____

Address: _____
(exactly as it appears on license)

2. New Business: Name: _____

Address: _____

SECTION 11 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 03
- d) Craft Distillery (A.R.S. §4-205.10) Series 18
- e) Government license (A.R.S. §4-205.03) Series 05
- f) Playing area of a golf course (A.R.S. §4-207 (B)(5))
- g) Wholesaler/Distributor Series 04
- h) Farm Winery Series 13
- i) Producer Series 01

1. Distance to nearest School: 1.2 MILES
 (# less than one (1) mile, note footage)

Name of School: LA CIMA MIDDLE SCHOOL
 Address: 5600 N LA CANADA DR, TUCSON, AZ 85704

2. Distance to nearest Church: 1 MILE
 (# less than one (1) mile, note footage)

Name of Church: CASAS ADOBES CONGREG CHURCH
 Address: 6801 N ORACLE RD, TUCSON, AZ 85704

SECTION 12 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: SAL AZ PROPERTIES LLC

Address: 1817 E GWEN ST , PHOENIX, AZ 85042
Street City State Zip

3. What is the penalty if the lease is not fulfilled? \$ _____ or Other: DAMAGES + TERMINATION

4. Total money borrowed for the Business, not including lease? \$ 0.00

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

Last	First	Middle	Amount Owed	Mailing Address	City	State	Zip

(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 manufacturer, wholesaler, or employee have an interest in your business?

Yes No If yes, attach explanation.

SECTION 13 Diagram of Premises

Check ALL boxes that apply to your business:

Walk-up or drive-through windows

Patio: Contiguous

Patio: 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? ___/___/___

2. What type of business will this license be used for? (be Specific) CONVENIENCE STORE

3. Please attach a diagram of the premises which clearly shows only the areas where spirituous liquor will be sold, served, consumed, dispensed, possessed or stored. Include entrances, exits, interior walls, bar areas, dining areas, dance floor, stage, game room and kitchen.

DO NOT INCLUDE

Parking lots, living quarters or areas where business is not conducted under this liquor license. Please identify which orientation is North on the diagram.

4. 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.

ATTACH DIAGRAM

IMPORTANT NOTE: As stated in A.R.S. §4-207.01 (B), it is the licensee's 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.

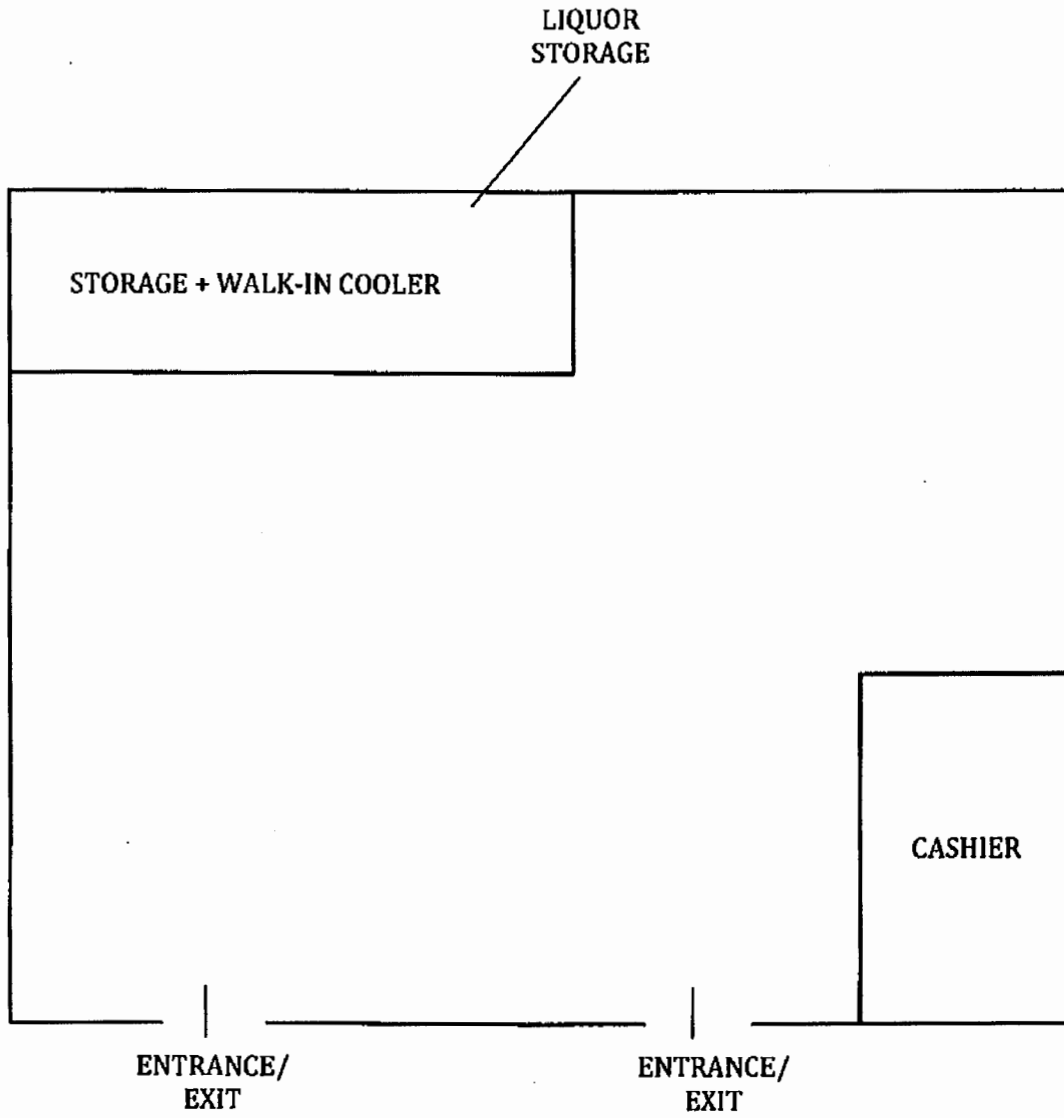
RESTAURANTS AND HOTELS/MOTELS ONLY

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

5a. 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)

5b. Provide a restaurant operation plan.

COXCO FUEL
5960 N ORACLE RD
TUCSON, AZ 85704
1200 SF



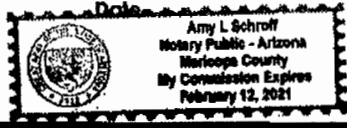
SECTION 14 SIGNATURE BLOCK

NOTARY

I (Print Full Name) ANDREA DAHLMAN LEWKOWITZ hereby declare that I am the Individual Agent, Owner, Or Controlling Person on the stated license and location.

Signature: [Handwritten Signature] State of ARIZONA County of MARICOPA
The foregoing instrument was acknowledged before me this

My Commission Expires on: 02-12-2021 Day of JUNE, 2018
Date Day Month Year



[Handwritten Signature]
Signature of Notary

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.