



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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Tucson, Arizona 85714
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December 30, 2014

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

RE: Application for Extension of Premises/Patio Permit
License No.: 03103012
1055 Brew Works
Temporary Change for February 7, 2015

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, January 13, 2015, 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 cursive script that reads "Robin Brigode".

Robin Brigode
Clerk of the Board

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

FOR DLLC USE ONLY
 Date payment received: _____
 CSR initials: _____

DEC 29 14 14:04:43 PCLK/EP BD

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT
 This application must be returned to the Department of Liquor
 (Notice: Allow 30-45 days to process permanent change of premises)

Permanent change of area of service. **A NON-REFUNDABLE \$50 FEE WILL APPLY.** Specific purpose for change:

Temporary change for date(s) of: 02/07/15 through 02/07/15 List specific purpose for change:
Special event

1. Licensee's Name: Squires Myron Christopher
Last First Middle
2. Mailing Address: 3810 E 44th Street, #315 Tucson AZ 85713
Street City State Zip
3. Business Name: 1055 Brew Works License # 03103012
4. Business Address: 3810 E 44th Street, #315 Tucson AZ 85713
Street City State Zip
5. Contact phone: (520) 461-8073 Business phone: (520) 461-8073
6. Email: chris@1055brewing.com
7. Is extension of premises/patio complete?
 N/A Yes No If no, what is your estimated completion date? ___/___/___
8. Do you understand Arizona Liquor Laws and Regulations?
 Yes No
9. Does this extension bring your premises within 300 feet of a church or school?
 Yes No
10. Have you received approved Liquor Law Training?
 Yes No If yes, when does your Certificate expire? Date: 08/01/15
11. What security precautions will be taken to prevent liquor violations in the extended area?
100% ID check + hand stamp for service of beer
12. **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 premise. List specific reasons for exemption:

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

Ⓞ OBTAIN APPROVAL FROM LOCAL GOVERNING BODY BEFORE SUBMITTING TO THE DEPARTMENT Ⓞ

Ⓞ After completing the application, 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)

_____ Date

I, Myron Squires, declare that I am the APPLICANT and, under penalty of perjury, making the foregoing application. I have read this application and the contents and all statements are true, correct and complete.

(Print full name)

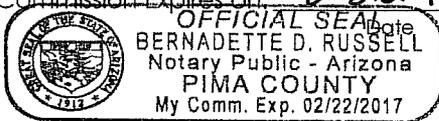
X [Signature] GM 12.29.14 520.461.8073
(Signature) Title/ Position Date Phone #

The foregoing instrument was acknowledged before me this 29th December 2014
Day Month Year

State Arizona County of Pima

My Commission Expires on: 2-22-17

[Signature]
Signature of Notary Public



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

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

