

Pima County Clerk of the Board

Julie Castañeda

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

October 5, 2018

Jeffrey Craig Miller Arroyo Gardens Independent & Assisted Living PO Box 2502 Chandler, AZ 85244

RE: Arizona Liquor License No.: Job No. 30352

d.b.a. Arroyo Gardens Independent & Assisted Living

Dear Mr. Miller:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 12, Restaurant, which was received in our office on September 7, 2018. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, October 16, 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



AFFIDAVIT OF POSTING

Date of Posting: _	9/12/18	Date of Posting Remo	val:)/3/18	
Applicant's Name	Arroyo Gardens Independe E: Miller	ent & Assisted Living Jeffrey First	<i>:</i>	Craig _{Middle}	
Business Address:	160 N. La Canada Drive	G	ireen Valley ^{City}	85244 Zip	
License #: Job N	No. 30352				
	at pursuant to A.R.S. 4-201, I posted no bove applicant and said notice was p			posed to be	
57 Pr	CVGN MONTAND rint Name of City/County Official	PAOCESS SERVER Title	<u> 820 - 38</u> 1	820 - 35/ - 4372 Phone Number	
	to 1. Makes			/ 8 / 6/3 //8 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.





Melissa Manriquez Deputy Clerk

Pima County Clerk of the Board

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TO:	Development Services, Zoning Division		
FROM:	Bernadette Russell & Administrative Support Specialist Senior		
DATE:	9/11/18		
RE:	Zoning Report - Application for Liquor License		
Attached is t	he application of:		
160 N. La Co Green Valley	o Gardens Independent & Assisted Living anada Drive y, AZ 85244		
Arizona Lique Series 12, Rev License Person Tran Location Tra	e <u>X</u> esfer		
ZONING RE	PORT DATE: 4/1/8		
Will current	zoning regulations permit the issuance of the license at this location?		
Yesc	No 🗆 ·		
If No, please	e explain:		
+	Pima County Zoning Inspector		

When complete, please return to cob_mail@pima.gov

18-23-9337

State of Arizona **Department of Liquor Licenses and Control**

Created 09/07/2018 @ 08:23:13 AM

Local Governing Body Report

LICENSE

Number:

Type:

012 RESTAURANT

Name:

ARROYO GARDENS INDEPENDENT & ASSISTED LIVING

State:

Pending

Issue Date:

Expiration Date:

Original Issue Date:

Location:

160 N LA CANADA DRIVE GREEN VALLEY, AZ 85614

USA

Mailing Address:

PO BOX 2502

CHANDLER, AZ 85244

USA

Phone:

(520)625-7737 (480)730-2675

Alt. Phone: Email:

RHONDA@AZLIC.COM

AGENT

Name:

JEFFREY CRAIG MILLER

Gender:

Male

Correspondence Address: PO BOX 2502

CHANDLER, AZ 85244

USA

Phone: Alt. Phone: (928)200-0702 (480)730-2675

Email:

CRAIG@AZLIC.COM

OWNER

Name:

ARROYO GARDENS LLP

Contact Name:

JEFFREY CRAIG MILLER

Type:

PARTNERSHIP

AZ CC File Number:

Incorporation Date:

Correspondence Address: PO BOX 2502

CHANDLER, AZ 85244

USA

Phone:

(480)730-2675

Alt. Phone:

(520)625-7737

Email:

RHONDA@AZLJC.COM

Officers / Stockholders

Name:

Title:

State of Incorporation:

% Interest:

Page 1 of 4

1995 PATTERSON REVOCABLE FAMILY TRUST CARL KENNETH ZIMMERMAN

Limited Partner 89.90 GENERAL/LIMITED 10.00

PARTNER

MPF-GP 2 LLC General Partner 0.10

ARROYO GARDENS LLP - GENERAL/LIMITED PARTNER

Name:

CARL KENNETH ZIMMERMAN

Gender:

Male

Correspondence Address: PO BOX 2502

CHANDLER, AZ 85244

USA.

Phone:

(602)618-9813

Alt. Phone:

(520)625-7737

Email:

CARL@CARL-CO.COM

1995 PATTERSON REVOCABLE FAMILY TRUST -TRUSTEE 1995 PATTERSON REVOCABLE FAMILY TRUST -TRUSTEE

Name:

BERNIECE ANNE PATTERSON

Gender:

Female

Correspondence Address: PO BOX 2502

CHANDLER, AZ 85244

USA

Phone:

(925)989-7856

Alt. Phone:

(520)625-7737

Email:

BERNIECE@MPFLCOM

1995 PATTERSON REVOCABLE FAMILY TRUST -TRUSTEE 1995 PATTERSON REVOCABLE FAMILY TRUST -TRUSTEE

Name:

CHARLES EVANS PATTERSON

Gender:

Malc

Correspondence Address: PO BOX 2502

CHANDLER, AZ: 85244

USA

Phone:

(925)788-2808 (520)625-7737

Alt. Phone: Email:

PAT@MPFLCOM

ARROYO GARDENS LLP - Limited Partner LCA-GP 2 LLC - MEMBER/MANAGER

Name:

1995 PATTERSON REVOCABLE FAMILY TRUST

Contact Name:

JEFFREY CRAIG MILLER

Type:

TRUST

AZ CC File Number:

State of Incorporation:

Incorporation Date:

Correspondence Address: PO BOX 2502

CHANDLER, AZ 85244 USA

Phone:

(480)730-2675

Alt. Phone:

Email:

RHONDA@AZLIC.COM

ARROYO GARDENS LLP - General Partner

Name:

MPF-GP 2 LLC

Contact Name:

JEFFREY CRAIG MILLER

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number:

State of Incorporation:

Incorporation Date:

Correspondence Address: PO BOX 2502

CHANDLER, AZ 85244

USA

Phone:

(480)730-2675

Alt. Phone:

Email:

RHONDA@AZLIC.COM

MPF-GP 2 LLC - MEMBER/MANAGER

Name:

LCA-GP 2 LLC

Contact Name:

JEFFREY CRAIG MILLER

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number:

State of Incorporation:

Incorporation Date:

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Correspondence Address: PO BOX 2502

CHANDLER, AZ 85244

USA

Phone:

(480)730-2675

Alt. Phone:

Email:

RHONDA@AZLIC.COM

APPLICATION INFORMATION

Application Number:

30352

Application Type:

New Application

Created Date:

09/05/2018

QUESTIONS & ANSWERS

012 Restaurant

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

5) Are you a tenant? (A person who holds the lease of a property; a lessee)

No

6) Is there a penalty if lease is not fulfilled?

No

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?

Yes

A Document of type BILL OF SALE is required.

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?

12) What is the total money borrowed for the business not including the lease? Please list lenders/people owed money for the business.

18 MILLION BANK OF TUCSON 440 E BROADWAY RD TUCSON AZ 85711

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.

CONTIGUOUS

16) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?

Have you provided a Restaurant Operation Plan form?

V_Pc

18) Have you provided a Records Required for Audit form?

Yes