

Julie Castañeda Deputy Clerk

Pima County Clerk of the Board

Robin Brigode

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

Document and Micrographics Mgt. Division 1640 East Benson Highway Tucson, Arizona 85714 Phone: (520) 351-8454 • Fax: (520) 791-6666

June 21, 2016

Fadhl Nagi Obeid Aldhali Pima Liquors 2858 W. Drexel Road Tucson, AZ 85746

RE:

Arizona Liquor License No.: 09100101

d.b.a. Pima Liquors

Dear Mr. Aldhali:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 9, Liquor Store, which was received in our office on May 20, 2016. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, July 5, 2016, 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

For your information, enclosed is a copy of the Sheriff's Report. Any questions pertaining to the enclosed report should be directed to the Pima County Sheriff's Department at (520) 351-6999. If you have any questions pertaining to the above referenced hearing, please contact this office at (520) 724-8449.

Sincerely,

Robin Brigode

Clerk of the Board

Enclosure

c: Pima County Sheriff Investigative Support Unit





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: $\frac{5}{26}$	6/16	Date of Posting Removal:	6/	20/16
Pima Liquo Applicant's Name: Aldhali Last	ors	Fadhl First		Nagi Obeid Middle
Business Address: 2880 W. Dre	xel Road		Tucson	85706
License #: 09100101				
hereby certify that pursuant to A. licensed by the above applicant o				sed to be
EANK 12. Hecht 17. Print Name of City/C	75 - PCS ()	PROCESS SERVER	. <u> </u>	910 403 4
				6/20/16
Signature	/ M/ t	/ 1778		ate 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, Arizona 85714
Phone: (520) 351-8454 • Fax: (520) 791-6666

TO: 0	Development Services, Zoning Division						
FROM:	Alina Bárcenas ACS Administrative Support Specialist						
DATE:	May 23, 2016						
RE:	Zoning Report - Application for Liquor License						
Attached is	the application of:						
Fadhl Nagi (d.b.a. Pima 2880 W. Dre Tucson, AZ	exel Road						
Arizona Liqu Series <u>9, Lic</u> New Licenso Person Tran Location Tra	e nsfer						
ZONING RE	EPORT DATE: 5/31/65						
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



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

16-10-9253

Application for Liquor License

	Type or Print wi	th Black Ink		
<u>APPLICATION</u>	FEE AND INTERIM PERMIT FEES	(IF APPLICABLE) ARE NOT	<u>REFUNDABLE</u>	
A service fe	ee of \$25 will be charged for all	l dishonored checks (A.R.S.	§ 44-6852)	뇹
SECTION 1 This application is for a linterim Permit (Complete Section New License (Complete Section Person Transfer (Complete Section Location Transfer (Bars and Liqu (Complete Section 2, 3, 4, 11, 13, Probate/ Will Assignment/ Divor (Complete Sections 2, 3, 4, 9, 13, 1 (Fee not required) Government (Complete Section Seasonal	on 5) ns 2, 3, 4, 13, 14, 15, 16) ion 2, 3, 4, 12, 13, 14, 16) or Stores Only) 14, 16) ce Decree 4, 16)	SECTION 2 Type of Owr J.T.W.R.O.S. (Complete) Individual (Complete) Partnership (Complete) Corporation (Complete) Limited Liability Co (Complete) Club (Complete Secte) Government (Complete) Trust (Complete Secte) Tribe (Complete Secte) Other (Explain)	te Section 6) Section 6) e Section 6) ete Section 7) complete Section 7) ion 8) ete Section 10) on 6)	
SECTION 3 Type of license 1. Type of License:	-co.r 5702=	_LICENSE#_ 으역 \ o	0101	
SECTION 4 Applicants				P1.03917
1. Individual Owner/Agent's Nan	1e: ALDHALI	FADHL	NAGIO	BEID
2. Owner Name: (Ownership name for ty	Last しになったま (いく。 pe of ownership checked on section 2)	First		B10384
3. Business Name: Pima (Exactly as it appears	on the exterior of premises)		85-706	N 51000899
4. Business Location Address: 2 (Do not use PO Box)	Street	City Sta		County
5. Mailing Address: 2858 (All correspondence will be mailed to this a	ddress) Street	City Sta		
6. Business Phone: (522) 5	78-6418 Daytir	me Contact Phone: CS	20)406-077	[-[-
7. Email Address: ✓ ० ≤ A E	3 Cox. NET			
8. Is the Business located within t	he incorporated limits of the	above city or town? Ty	es XNo	
9. Does the Business location add				9
of another City, Town or Tribal F	_	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	any mino bootingano	•
If yes, what City, Town or Tribal		rated in:	Courty	
il yes, what chy, town or mod		.area iri		
10. Total Price paid for Series 6 Bar	, Series 7 Beer & Wine Bar or S	Series 9 Liquor Store (licens	se only) \$ ~ /A	
Fees: \$ 10090	Department	- 20 A) C	2 \$ 12	7.00
	m Permit Site Inspectio		<i>C</i> '	of All Fees
Is Arizona Statement of Citizenship	Allen Status for State Ben A	1 - 1	Yes □No	
Accepted by:	Date:	5 18 16 License #	<u> </u>	<u> </u>

SECTION 5 Interim Permit

- If you intend to operate business when your application is pending you will need an interim permit pursuant to ARS § 4-203.01
- There MUST be a valid license of the same type you are applying for currently issued to the location or for the replacement of a Hotel/Motel license with a Restaurant license pursuant to A.R.S. § 4-203.01.

1. Enter li	cense number c	urrently at the loc	ation:			·		
2. Is the lie	cense currently i	n use? 🗌 Yes 🔲 N	No If no, ho	w long ha	s it been out of us	∋ș		
Attach a c	copy of the licer	nse currently issue	d at this locati	ion to this	application.			
I,	(Print Full	Name)			CURRENT OWNER, d location.	AGENT, OR CO	ONTROLLING	3 PERSON on
X	(Signature of CURREN	I Individual Owner/Agent	r)	State o	fThe foregoing in	County of	owledged befo	re me this
My commis	sion expires on: _	Date		Do	of	Month		Year
				4	Signal	ure of NOTARY PU	ВЦС	
					1,24,400			
	N LISTED MUST SUBN	ership, J.T.W.R.O.S, NT A COMPLETED QUES			TYPE FINGERPRINT CAR	D AND \$22 PRC	OCESSING FEI	FOR EACH
Last	First	Middle		Owned	Mailing Address	City	State	Zip Code
	name, current o	pove, going to sha address, and telepl Middle	hone number		s). Use additional		essary.	#
					,			
<u>Partnershi</u>	<u>p</u> artnership:							
General-Limit		First	Middle	%Owned	Mailing Address	City	. State	<i>I</i> ip Code
J.T.W.R.O.S	(Joint Tenant wi	th Rights of Survivo	rship)					
Last	First		Middle	Mc	niling Address	City	State	Zip Code

TRUST Name of Trust:			·		· · · · · · · · · · · · · · · · · · ·	
Last	First	Middle	Mailing Address	City	State	Zip Code
	· · · · · · · · · · · · · · · · · · ·			-		
				·		
TRIBE Name of Tribal Owner	ship:					
Last	First	Middle	Mailing Address	Сіту	State	Zip Code
	/_					
L.L.C. 1. Name of Corporation 2. Date Incorporated/ 3. AZ Corporation or A 4. Is Corp/L.L.C. Non Pi 5. List Directors, Officer Last First ALDMALI FADH	On/L.L.C: Pi ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	ons 1, 2, 3, 4, 5, 6, a	nd 7 へんと・ nere Incorporated/C	do Business in	AZ: <u> </u>	75 / 200 - C
	0	Attach additional sheet if n	ecessury		-	
6. List all Stockholders ,	-					
Last First	Middle	%0wned	Mailing Address	City	State	Zip Code
ALDHAL; FADH		(DO)	2858 w.))~=×=~Z	-) Tucs	on, Az 85 fg
Mari		Atlach additional sheet if n	acossan/)			

7. If the corporation/ L.L.C are owned by another entity, attach an Organizational **FLOWCHART** showing the structure of the ownership. Attach additional sheets as needed in order to disclose the Officers, Directors, Members, Managers, Partners, Stockholders and percentage owners of those entities.

SECTION 8 Club Applicants

EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNAIRE, AN "APPLICANT" TYPE FINGERPRINT CARD AND \$22 PROCESSING FEE FOR EACH CARD

1. Name of Club:_						<u>.</u>
	it?□Yes □No					
3. List all controlling	g members (minimun	n of four (4) request	ed)			
Last	First	Middle	Mailing Address	City	State	Zip Code
		(Affach additiona	I sheet if necessary)			
SECTION 9 Probate, W	ill Assignment or Div	orce Decree of an	existing Liquor Licen	nse		
No.			• .			
. Current Licensee's N (Exactly as it appear or		ast	First M	liddle		
•						
!. Assignee's Name: _		ast	First Mic	iddle		
			Itaaaa Maraa			
			License Number:			
3. License Type:						
ATTACH TO THIS APPLICA				STRUMENT, OR DIV	ORCE DECRE	ΞE
				STRUMENT, OR DIV	ORCE DECRE	ΕE
ATTACH TO THIS APPLICA				STRUMENT, OR DIV	ORCE DECRE	E
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ATTACHTO THIS APPLICATION THAT SPECIFICALLY DISTI	RIBUTES THE LIQUOR LI	cense to the Assigns, or counties only	NEE.	STRUMENT, OR DIV	ORCE DECRI	EE
ATTACH TO THIS APPLICATION OF THE PROPERTY OF	RIBUTES THE LIQUOR LI	cense to the Assigns, or counties only	NEE.	STRUMENT, OR DIV	ORCE DECRI	EE
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ATTACHTO THIS APPLICATION THAT SPECIFICALLY DISTI	ent (for cities, town	cense to the Assigns, or counties only	NEE.		ne Contact Pho	
ATTACHTO THIS APPLICATION TO THE SPECIFICALLY DISTINGUISTION TO GOVERNMENT ENTITY: 2. Person/Designee:	ent (for cities, town	as, or counties only	NEE.	Day fin	ne Contact Pho	ne #
ECTION 10 Government Entity: . Person/Designee:	ent (for cities, town	as, or counties only	Middle	Day fin	ne Contact Pho	ne #
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ATTACHTO THIS APPLICATION TO THE APPLICATION TO GOVERNMENT Entity: A SEPARATE ECTION 11 Location to Current Business:	tent (for cities, town First LICENSE MUST BE OB Name: Address: Name:	Last BTAINED FOR EACH T: Series 6 Bar, Series 2858	Middle PREMISE FROM WHICE es 7 Beer & Wine Ser	Day find the SPIRITUOUS LIQUIDES 9 Liquor Stores 9 Liquor Stores 9 Liquor Stores 9 Liquor Stores 10 Liquid	ne Contact Pho UOR IS SERV	ne# ED.
ECTION 10 Government Entity: A SEPARATE ECTION 11 Location of Courrent Business:	rent (for cities, town First LICENSE MUST BE OB Name: Address: Address:	Last BTAINED FOR EACH T: Series 6 Bar, Series 2880 W.	Middle PREMISE FROM WHICH es 7 Beer & Wine Ser Dray 27 75 (Exactly as it appear	Day tin TH SPIRITUOUS LIQ Ties 9 Liquor Store The spirituous Liquor Store The spirituo	ne Contact Pho UOR IS SERV	ne# ED.

STATE OF ARIZONA

DEPARTMENT OF LIQUOR LICENSES AND CONTROL ALCOHOLIC BEVERAGE LICENSE License 09100101

Issue Date: 7/11/2001

Issued To:

FADHL NAGI OBEID ALDHALI, Agent PIMA LIQUORS INC, Owner

Location:

PIMA LIQUORS 2858 W DREXEL RD TUCSON, AZ 85746 Expiration Date: 10/31/2016

Mailing Address:

FADHL NAGI OBEID ALDHALI PIMA LIQUORS INC PIMA LIQUORS 2858 W DREXAL RD TUCSON, AZ 85746



<u>SECTION 12</u> Person to Person Transfer

Questions to be completed by Current Licensee (Bar and Liquor Stores Only- Series, 06, 07, and 09)

1. Individual Owner / Agent Name:	Last First	Middle	Entity:	(Individual, Agent, Etc.)
2. Ownership Name:	(Exactly as it appears on t	icense)		
3. Business Name:	(Exactly as it appears on l	icense)		
4. Business Location Address:Street	City		State	Zip
5. License Type:	License t	Number:		
6. Current Mailing Address:	City	_/	State	Zip
7. Have all creditors, lien holders, interest ho	olders, etc. been notified	d? □Yes □No).	
8. Does the applicant intend to operate the	business while this appli	ication is pending?	? ∐Yes [] No
If yes, complete Section 5 (Interim Permit) o	f this application; attact	n fee, and current	license to this	s application.
9. I, (Print Full Name)	applicant provided that	all terms and con	ditions of sale	
I, (Print Full Name) STOCKHOLDER or LICENSEE of the stated lice true, correct, and complete.	•			, MEMBER, PARTNER at all statements are
	NOTARY			
X(Signature of CURRENT Individual Owner/Agent	State of	The foregoing insi	County of trument was acknow	vledged before me this
My commission expires on:	Do	of	Month	Year
		Signati	ure of NOTARY PUB	ис

<u>SECTION 13</u> Proximity to Church or School Questions to be completed by all in-state applicants.

R.S. § 4-207. (A) and (B) state that no retailed application is received by the director, (300) horizontal feet of a public or privation within three hundred (300) horizontal The above paragraph DOES NOT apply to	within three hundred te school building wit feet of a fenced recr	l (300) horizontal feet h kindergarten progr	of a church, v ams or grades	vithin three hundred one (1) through (12)
 a) Restaurant license (§ 4-205.02) Series 12 b) Hotel/motel license (§ 4-205.01) Series 11 c) Microbrewery Series 3 d) Craft Distillery Series 18 		e) Government license f) Fenced playing arec g) Wholesaler Series 4 h) Farm Winery Series 1	of a golf course (
1. Distance to nearest School: 2 (If less than one (1) mile note footage)	112 Feet	Name of School: P	30 6 A271 +	. AL A45.
2. Distance to nearest Church: 216 (If less than one (1) mile note footage)	40 Feet	Name of Church: Decrease: Address:	Dreyer fo w. mossh son, Az	120. 120. 185746
SECTION 14 Business Financials				
1. I am the: Lessee Sub-lesse	ee 🗌 Owner	Purchaser	□ Mar	nagement Company
2. If the premise is leased give lessors:	Name: Far	OHL NAGE OF	3=7) X.	-DHAL1
	Address:_288	30 w.) nexe	727.7	LSON , AZ 85.
3. Monthly Rent/Lease Rate: \$ 2,000 4. What is the remaining length of the lea	5	Street /	city onths	State Zip
5. What is the penalty if the lease is not ful	<i>~</i>		-	(DEPOSS 310:
6. Total money borrowed for the Business	,	(Give details-attach a	dditional sheet it nece	essary)
Please List Lenders/People you owe mone		7		
Last First Middle	Amount Owed	Mailing Address	City St	ate Zip
PIA	P/A	N/A		
7. What type of business will this license be	tach additional sheet it nece e used for (be specific			
C-5702				
8. Has a license or a transfer license for the		olication been denie	d by the state v	with in the past (1)
year? Yes No if yes, attach explanati			,г	
9. Does any spirituous liquor manufacture, v		_	your business?[Yes ı ≥INo
10. Is the premises currently license with a licens	quor iicense ? Yesj	⊼ INO		

____ Individual Owner /Agent Name: _

SECTION 15 Restaurant or hotel/motel license applicants

	e answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application is ag; consult A.R.S. § 4-203.01; and complete SECTION 5 of this application.
	Restaurant and Hotel/Motel applicants must complete a Restaurant Operation Plan form provided by the ment of Liquor Licenses and Control.
gross re the lice mainto	ated in A.R.S. § 4-205.02. (H)(2), a Restaurant is an establishment which derives at least forty (40) percent of its evenue from the sale of food. Gross revenue is the revenue derived from sales of food and spirituous liquor on ensed premises. By applying for this Restaurant Hotel/Motel, I certify that I understand that I must a minimum of forty (40) percent food sales based on these definitions and have included the Restaurant Motel Records Required for Audit form with this application.
	(Applicant's Signature)
inspecting the lice for this inspecting insp	derstand it is my responsibility to contact the Department of Liquor Licenses and Control to schedule an tion when all tables and chairs are on site, kitchen equipment, and, if applicable, patio barriers are in place on ensed premises. With the exception of the patio barriers, these items are not required to be properly installed inspection. Failure to schedule an inspection will delay issuance of the license. If you are not ready for your tion 90 days after filing your application, please request an extension in writing; specify why the extension is any; and the new inspection date you are requesting.
	(Applicant's Initials)

	N 16 Diagram of Premises ALL boxes that apply to your business:
Check	
Check	ALL boxes that apply to your business:
Check	ALL boxes that apply to your business: Entrances/Exits Liquor storage areas Patio: Contiguous Walk-up windows Drive-through windows Non Contiguous Is your licensed premises currently closed due to construction, renovation or redesign? Yes No
Check	ALL boxes that apply to your business: Entrances/Exits
Check	ALL boxes that apply to your business: Entrances/Exits
Check	ALL boxes that apply to your business: Entrances/Exits
Check	ALL boxes that apply to your business: Entrances/Exits Liquor storage areas Patio: Contiguous Walk-up windows Drive-through windows Non Contiguous Is your licensed premises currently closed due to construction, renovation or redesign? Yes No If yes, what is your estimated completion date? Month/Day/Year Restaurants and Hotel/Motel applicants are required to draw a detailed floor plan of the kitchen and dining areas including the locations of all kitchen equipment and dining furniture. Place for diagram is on section 16
Check 1.	ALL boxes that apply to your business: Entrances/Exits Liquor storage areas Patio: Contiguous Walk-up windows Drive-through windows Non Contiguous Is your licensed premises currently closed due to construction, renovation or redesign? Yes No If yes, what is your estimated completion date? Month/Day/Year Restaurants and Hotel/Motel applicants are required to draw a detailed floor plan of the kitchen and dining areas including the locations of all kitchen equipment and dining furniture. Place for diagram is on section 16 number 6. The diagram (a detailed floor plan) you provide is required to disclose only the area(s) where spirituous liquor is to be sold, served, consumed, dispensed, possessed or stored on the premises unless it is a restaurant (see # 3)

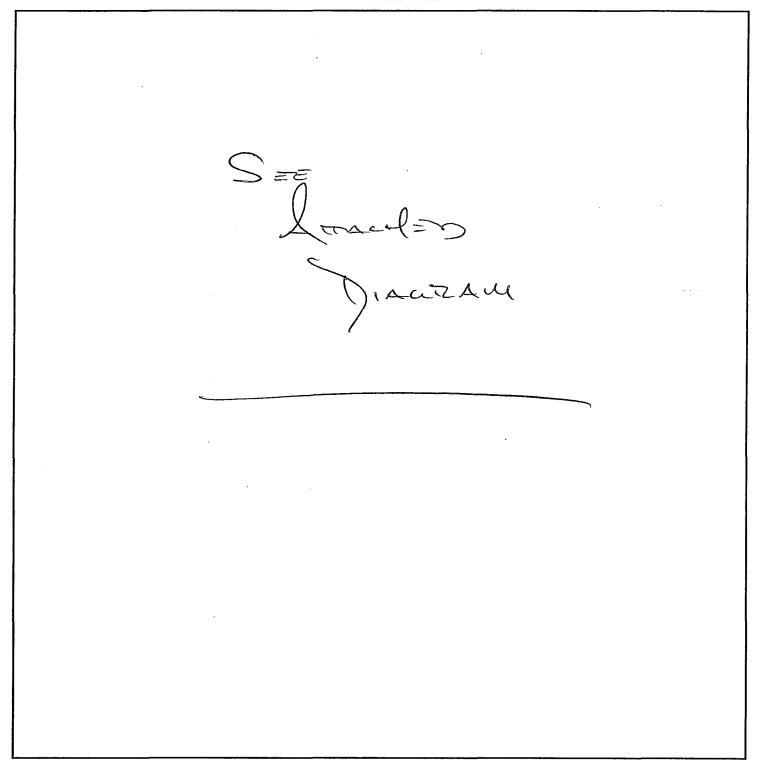
1. Is there an existing Restaurant or Hotel/Motel Liquor License at the proposed location? Yes No

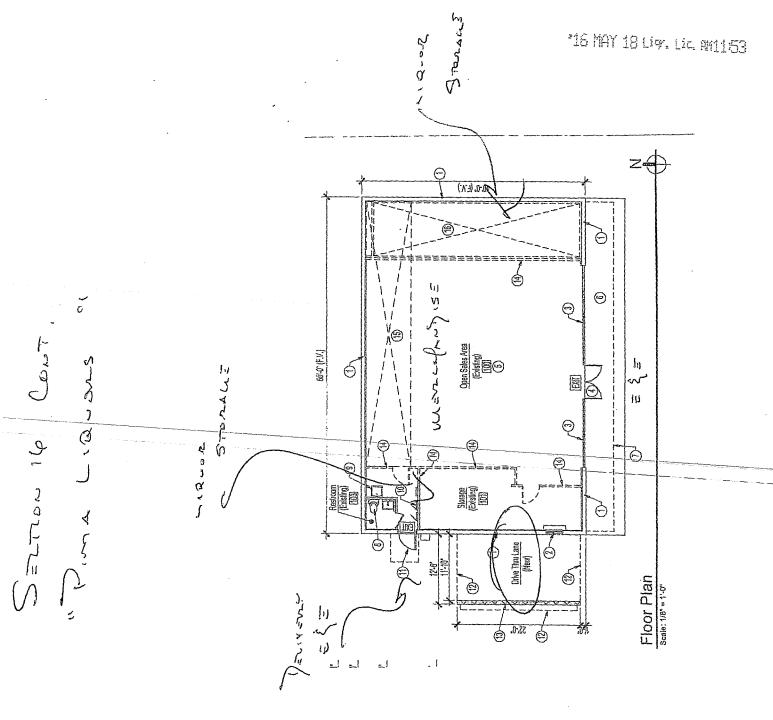
service windows or increase or decrease to the square footage after submitting this initial diagram.

6. On the diagram please show only the areas where spirituous liquor is to be sold, served, consumed, dispensed, possessed or stored. It must show all entrances, exits, interior walls, bars, hi-top tables, dining tables, dining chairs, dance floor, stage, game room, and the kitchen. DO NOT include parking lots, living quarters, etc. When completing diagram, North is up ↑.

If a legible copy of a rendering or drawing of your diagram of the premises is attached to this application, please write the words "DIAGRAM ATTACHED" in the box provided for the diagram on the application.

DIAGRAM OF PREMISES





.

<u>NOTARY</u>				
1 -				
1, (Print Full Name) FADHL NACH OBED ALDYALI, he	ereby declare that I am the Owner/Agent filing this application as			
stated in Section 4 # 1. I have read this application and verify	all statements to be true, correct and complete.			
X (Signature of CURRENT Individual Owner/Agent)	State of Aur Zona County of Your a The foregoing instrument was acknowledged before me this			
My commission expires on: Date	Day Month Year			
OFFICIAL SEAL KEVIN A. KRAMBER Notary Public - State of Arizona PIMA COUNTY	Signature of NOTARY PUBLIC			
Nity Comm. Expires June 5, 2017				

A.R.S. § 41-1030. <u>Invalidity of rules not made according to this chapter; prohibited agency action; prohibited acts by state employees; enforcement; notice</u>

- 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.