

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

December 2, 2016

Kim Kenneth Kwiatkowski Circle K Store No. 3493 Licensing DC-36, P.O. Box 52085 Phoenix, AZ 85072

RE: Arizona Liquor License No.: 10103807

d.b.a. Circle K Store No. 3493

Dear Mr. Kwiatkowski:

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 November 3, 2016. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, December 13, 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

Should you have any questions pertaining to this matter, please contact this office at (520)724-8449.

Sincerely,

Robin Brigode 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

| ate of Posting: _ | 10 1400 2016 | | | |
|------------------------|--|-------|--------|-------------------|
| oplicant's Name | Circle K Store No. 3493 : Kwiatkowski | Kim | | Kenneth |
| | Last | First | | Middle |
| usiness Address: | 4600 W. Valencia Road | | Tucson | 85757 |
| | Street | | City | Zip |
| | | | | |
| ~~~~ #. 1 010 1 | 38 0 7 | | | |
| cense #: 10103 | | _ | | |
| nereby certify the ab | at pursuant to A.R.S. 4-201, I posted no pove applicant and said notice was put the said to the said notice was put the said notice was put to the said noti | | ıys. | (조) (조) (조) |

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: | Ricci Romero A. Administrative Support Specialist |
| DATE: | November 3, 2016 |
| RE: | Zoning Report - Application for Liquor License |
| Attached is t | he application of: |
| | |
| | sfer |
| ZONING RE | PORT DATE: 11/10/16 |
| 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

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| TO: | Pima County Sheriff's Department Investigative Support Unit |
|---------------|---|
| FROM: | Ricci Romero R |
| DATE: | November 3, 2016 |
| RE: | Sheriff's Report - Application for Liquor License |
| Attached is | the application of: |
| d.b.a. Circle | h Kwiatkowski e K Store No. 3493 Ilencia Road 85757 |
| | nsfer |
| SHERIFF'S | REPORT DATE: 11/07/16 |
| is there any | reason this application should not be recommended for approval? |
| - NOTH | ING NOTED to REPORT |
| £ | |
| | |
| | Investigative Support Unit Supervisor |

When complete, please return to cob mail@pima.gov



716 OCT 28 Ligr. Lic. PM 3 09 1.6-24-9267 Arizona Department of Liquor Licenses and Cont 800 W Washington 5th Floor

Phoenix, AZ 85007-2934 www.azliquor.gov (602) 542-5141

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 This application is for Interim Permit (Complete Section New License (Complete Section Person Transfer (Complete Section Location Transfer (Bars and Liq (Complete Section 2, 3, 4, 11, 13, Interior (Complete Section 2, 3, 4, 9, 13, (Fee not required) Independent Complete Section Seasonal | ion 5) ons 2, 3, 4, 13, 14, 15, 16) otion 2, 3, 4, 12, 13, 14, 16) puor Stores Only) , 14, 16) orce Decree 14, 16) | □J.T.W.R.O. □Individual □Partnershi □Corporati □Limited Lide □Club (Coll □Governme □Trust (Cor | ype of Ownersh S. (Complete Section (Complete Section (Complete Section 8) The plate Section 8 The plate Section 6) The plate Section 6 The plate Section 6 The plate Section 6 | ction 6) ion 6) ction 6) ection 7) elete Section 7) ction 10) | WY CS. TEM |
|---|--|--|---|---|---------------------------------------|
| SECTION 3 Type of license 1. Type of License: Beer/Wine #1 | 10 | LICENSE #_ | 1010380 | 7 | · · · · · · · · · · · · · · · · · · · |
| SECTION 4 Applicants 1. Individual Owner/Agent's Na | Last | KIN Fir | | | NETH PIOOT(605 |
| 3. Business Name: CIRCLE K | type of ownership checked on section STORE #3493 | 12) | | | B10051e75 B1057le24 |
| (Exactly as it appears) 4. Business Location Address: 46 (Do not use PO Box) | ors on the exterior of premises) 600 W Valencia Rd Street | Tucson | AZ State | 85757 Zip Code | Pima |
| 5. Mailing Address: <u>LICENSING</u> (All correspondence will be mailed to this 6. Business Phone: <u>Pending</u> | address) Street | PHOENIX, AZ 850 city sytime Contact P | State | Zlp Code -4783 | |
| 7. Email Address: azlicense@circ | | | | | |
| Is the Business located within Does the Business location ad of another City, Town or Tribal If yes, what City, Town or Tribal | ldress have a street address I Reservation? □Yes√No | s for a City or Tow | | | 9 \$ |
| 10. Total Price paid for Series 6 Bo | or, Series 7 Beer & Wine Bar | or Series 9 Liquor : | Store (license on | ily) \$ | |
| Fees: 100.00 Application Intelled Is Arizona Statement of Citizensh Accepted by: 56 | erim Permit Site Inspe | | Finger Prints te? ZIYes License # | \$ <u>10</u> Total DNO 1010380 | O·OO of All Fees |

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.

| | (Print Full | Name) | | that I am the ed license ar | e CURRENT OWNER, A and location. | GENT, OR CONT | FROLLING | PERSON |
|---|--|---|---|--|---|---------------------------------|-------------|----------|
| . | (Signature of CURRE) | IT Individual Owner/Aç | nent) | _ State o | ofThe foregoing instr | County of | rdged belon | ne this |
| My commi | ssion expires on: | | yo, | | of | | | Year |
| | | Date | | | | | | Tear |
| | | | | | Signotur | e of NOTARY PUBLIC | | |
| ndividuc | ii First | Mardala | | | Mantha - A dalan | | Shorts | Zip Code |
| | LM21 | WIDGIS | | 76OWRED | MQIIING Address | Çity | 31446 | |
| | | | | | Mailing Address | | зіме | |
| any per | son other than a | bove, going to s address, and tel | hare in profit/lephone numb | osses of the er of person | business? Yes (s). Use additional st | □No neets if necess | ary. | |
| any per Yes, give | son other than a | bove, going to s address, and tel | hare in profit/lephone numb | osses of the er of person | business? | □No neets if necess | ary. | |
| any per Yes, give | son other than a e name, current | bove, going to s address, and tel | hare in profit/lephone numb | osses of the er of person | business? Yes (s). Use additional st | □No neets if necess | ary. | |
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| e any per f Yes, give ust | son other than a e name, current First lip Partnership: lied Last | bove, going to s address, and tel- Middle | hare in profit/lephone numb | osses of the per of person g Address | business? Yes (s). Use additional sh City State Zla | No neets if necess o Code | CITY. Phone | # |
| s any per f Yes, give ast Partnersh Name of General-Lim | son other than a e name, current First Lip Partnership: Last S (Joint Tenant w | bove, going to s address, and tel- Middle | hare in profit/lephone numb | osses of the per of person g Address | business? Yes (s). Use additional sh City State Zla | No neets if necess o Code | CITY. Phone | # |
| e any per yes, give out | son other than a e name, current First lip Partnership: lied Last | bove, going to s address, and tel- Middle | hare in profit/lephone numb | osses of the per of person g Address | business? Yes (s). Use additional sh City State Zla | No neets if necess o Code | CITY. Phone | # |

SECTION 6 - continued

| RUST | | | | | | | |
|---|---|---|--|---|---|---|-------------------------------|
| Name of Tru | st: | | | | | | |
| Last | | First | Middle | Mailing Address | City | State | Zip Code |
| | | | | | | | |
| <u>TRIBE</u> Name of Tril | oal Ownership: | | | | | | |
| Last | | First | Middle | Malling Address | City | State | Tip Code |
| | ******* | | | | | · · · · · · · · · · · · · · · · · · · | |
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| ACH PERSON CARD. I Name of Date Inco A Is Corpo L Is Corp/L List Direct | Corporation L.C. Corporation/L. orporated/Orgoration or AZ L.L. L.C. Non Profit? ors, Officers, Me | Complete Question Complete Question L.C: CIRCLE I Inized: 06/08/19 C File No: F-0006 M Yes No Embers in Corpora | ons 1, 2, 3, 4, 5, 6, and ons 1, 2, 3, 4, 5, 5, 6, and ons 1, 2, 3, 4, 5, 5, 6, and ons 1, 2, 3, 4, 5, 5, 6, and ons 1, 2, 3, 4, 5, 5, 6, and ons 1, 2, 3, 4, 5, 5, 6, and ons 1, 2, 3, 4, 5, 5, 6, and ons 1, 2, 3, 4, 5, 5, 6, and ons 1, 2, 3, 4, 5, 5, 6 | nd 7 nd 7 nere Incorporated/C Date authorized to c | Organized: do Business in . city | EXAS AZ: 04/08 | 3/1957 |
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| ACH PERSON CARD. | Corporation L.C. Corporation/L. corporated/Orgoration or AZ L.L. L.C. Non Profit? ors, Officers, Me First Geoffrey Kathleen Paul | Complete Question Complete Question L.C: CIRCLE I Inized: 06/08/19 C File No: F-0006 Yes 7 No embers in Corpora Middle Charles K | ons 1, 2, 3, 4, 5, 6, and the state what is state when it is state what is state when it is state what is state when it is state what is state when it is | nd 7 nere Incorporated/Coate authorized to co Mailing Address 1130 W Warner F | Organized:T do Business in A Rd, Tempe Rd, Tempe, A Rd, Tempe | State , AZ 8528 , AZ 8528 | 3/1957 Tip Code 34 |
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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.

(Attach additional sheet If necessary)

OFFICERS.XLS

Circle K Stores Inc. Texas 6/8/51 Charter No. 0010697700 FIN# 74-1149540

| OFFICE | Name | BUSINESS ADDRESS | PHONE |
|-------------------------------------|----------------------------|--|----------------|
| * President and Secretary | Geoffrey C. Haxel | 1130 W Wamer Rd, Tempe, AZ 85284 | (602) 728-8000 |
| * Treasurer and Assistant Secretary | Kathleen K Cunnington | 1130 W Wamer Rd, Temps, AZ 85284 | (602) 728-8000 |
| * Sr Vice President | Dameil Davis | 12911 Telecom Parkway, Tampa, FL 33637 | (813) 910-6882 |
| Sr Vice President | Dennis Tewell | 1130 W Wamer Rd, Tempe, AZ 85284 | (602) 728-8000 |
| Vice President | Pla Bach Henriksen | 495 E Rincon, Suite 150, Corona, CA 92879 | (951) 270-5129 |
| Vice President | Paul Rodriquez | 1130 W Wamer Rd, Tempe, AZ 85284 | (602) 728-8000 |
| Vice President | David Morgan | 12911 Telecom Perkway, Tampa, FL 33637 | (951) 270-5136 |
| Vice President | Brian Bednarz | 25 W Cedar St, Suite 100, Pensacole, FL 35202 | (951) 270-5138 |
| Vice President | Timothy Alexander Miller | 1130 W Wamer Rd, Tempe, AZ 85284 | (602) 728-8000 |
| Vice President | Dag Roger Rinde | 2440 Whitehall Park Dr., #800, Charlotte, NC 28273 | (704) 583-5718 |
| Vice President | Matt McCure | 2440 Whitshall Park Dr., #800, Charlotte, NC 28273 | (704) 583-5715 |
| Vice President | Waymon (Butch) Seber | 12911 Telecom Parkway, Tampa, FL 33637 | (951) 270-5138 |
| Vice President | Meredith Willard Rica, Jr. | 305 Gregson Dr., Cary, NC 28273 | (704) 683-6712 |
| Vice President | Rodney Blanton | 2440 Whitehall Park Dr., #800, Charlotte, NC 26273 | (704) 583-5716 |
| Assistant Secretary | Scott J. Stevenson | 1130 W Warner Rd, Tempe, AZ 85284 | (602) 728-8000 |
| Assistant Secretary | Kim Kwiatkowski | 1130 W Wamer Rd, Tempe, AZ 85284 | (802) 728-8000 |
| Assistant Secretary | Sylvain Aubry | 4204 Boul, Industriel, Laval (Quebec) Canada H7L 0E3 | (450) 662-6632 |
| Assistant Secretary | Marc Lee Flanary | 255 E Rincon, Suite 100, Corona, CA 92879 | (951) 270-5136 |
| Assistant Secretary | Sarah Lynn Longwell | 255 E Rincon, Sulle 100, Corona, CA 92879 | (851) 270-5136 |
| Assistant Secretary | Michael L Foster | 2440 Whitehall Park Dr., #800, Charlotte, NC 28273 | (704) 583-5716 |
| Assistant Secretary | Kyle Poyer | 2440 Whitehall Park Dr., #800, Charlotte, NC 28273 | (704) 583-5716 |
| Assistant Secretary | Randy Home | 12911 Telecom Parkway, Tampa, FL 33637 | (813) 910-6882 |
| Assistant Secretary | Tim Peters | 1199 S Bellline Rd, #180, Coppell, TX 75019 | (602) 728-8000 |
| Assistant Secretary | Peter Uhlich | 12911 Telecom Parkway, Tampa, FL 33637 | (613) 910-6878 |
| Assistant Secretary | Edward Giunta | 12911 Telecom Parkway, Tampa, FL 33637 | (813) 910-8878 |
| Assistant Secretary | John Little | 305 Gregson Dr., Cary, NC 28273 | (704) 683-5712 |

Director

Business Address: 1130 W. Wenner Road, Bldg B. Tempe, AZ 85284 (602) 728-8000 Domicle Address: % CSC-Lawyers incorporating Service Company, 701 Brazos Street, Suite 1050, Austin, TX 78701 12,000,000 Shares Authorized, 1,000 issued at \$1,00 Par. 100% owned by Circle K Delaware Inc. (FIN: 48-0520872)

Circle K Stores Inc. is qualified in:
AL, AZ, AR, CA, CO, FL, GA, , ID, KS, LA, MS,
MO, NV, NM, NC, DK, OR, SC, TN, TX, UT, WA

MU, NV, NM, NC, UN, UN, UN, 1N, 1A,

Corporate Structure:

Circle K Delaware Inc. is 100% owned by The Circle K Corporation (Geoffrey Haxel - President/Director)

The Circle K Corporation is 100% owned by Couche-Tard US Inc. (Geoffrey Haxel - President/Director)

Couche-Tard US Inc. is 100% owned by Mac's Convenience Stores Inc. (Geoffrey Haxel - President/Director)

Mac's Convenience Stores Inc. is 100% owned by Couche-Tard Inc. (Geoffrey Haxel - Str. Vice President)

Couche-Tard Inc. is 100% owned by Depan-Escompte Couche-Tard Inc. (Geoffrey Haxel - Str. Vice President)

Depan-Escompte Couche-Tard Inc. is 100% owned by Altmentation Couche-Tard Inc. (Geoffrey Haxel - Str. Vice President)

Allmentation Couche-Tard Inc. is a publicly tradad company (Geoffrey Haxel - Str. Vice President)

SECTION 8 Club Applicants

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

| | | | | cit. | £1—1— | Tim Carl |
|--|---|---|--|--|---------------------------|---------------|
| Last | First | Middle | Mailing Address | City | State | Tip Code |
| | | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | | | |
| | | (Allegh addilloge | sheet ii necessary) | | | |
| | | (Anden adolional | sieci ii riecessary) | | | |
| | | | | | | |
| <u>:CTION 9</u> Probate, Will Ass | signment or Divorce | e Decree of an (| existing Liquor License | | | |
| Current Licensee's Name (Exactly as it appear on the I | | - | First Middl | e | | - 11, Store - |
| . , | - | | | | | |
| Assignee's Name: | Last | - | First Middle | | | |
| | • | | | | | |
| License Type: | | | license Number: | | | |
| | | | | | | - |
| TACH TO THIS APPLICATION | N A CERTIFIED COPY | OF THE WILL, PROI | BATE DISTRIBUTION INSTRI | | | - |
| TACH TO THIS APPLICATION | N A CERTIFIED COPY | OF THE WILL, PROI | BATE DISTRIBUTION INSTRI | | | - |
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| TTACH TO THIS APPLICATION IAT SPECIFICALLY DISTRIBUT ECTION 10 Government (Government Entity: | N A CERTIFIED COPY (TES THE LIQUOR LICEN (for cities, towns, o | OF THE WILL, PROI | BATE DISTRIBUTION INSTRI IEE. | UMENT, OR DIVOI | | - |
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| TTACH TO THIS APPLICATION HAT SPECIFICALLY DISTRIBUT ECTION 10 Government (Government Entity: Person/Designee: | NA CERTIFIED COPY (ES THE LIQUOR LICEN (for cities, towns, o | OF THE WILL, PROP ISE TO THE ASSIGN or counties only Last | BATE DISTRIBUTION INSTRI IEE. | UMENT, OR DIVOI | Conlact Pho | ne # |
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| TACH TO THIS APPLICATION IAT SPECIFICALLY DISTRIBUT ECTION 10 Government (Government Entity: Person/Designee: A SEPARATE LICE ECTION 11 Location to Loc. Current Business: | First NA CERTIFIED COPY (TES THE LIQUOR LICEN (for cities, towns, of the cities of | OF THE WILL, PROI | Middle PREMISE FROM WHICH Series (Exactly as it appears | Day time SPIRITUOUS LIQU s 9 Liquor Stores on license) | Contact Pho OR IS SERV | ne # |
| License Type: | First NA CERTIFIED COPY (ES THE LIQUOR LICEN (for cities, towns, o First NSE MUST BE OBTAI Docation Transfer: Se Name: Address: Name: | OF THE WILL, PROI | Middle PREMISE FROM WHICH Series 7 Beer & Wine Serie | Day time SPIRITUOUS LIQU s 9 Liquor Stores on license) | CONICCI Pho OR IS SERV | ne# |

SECTION 12 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: | | | E | ntity: |
|--|---------------------|------------------------|----------------------------|--|
| , ilditidadi Offici , Agoir Hollic. | last | First | Middle | (individual, Agent, Etc.) |
| 2. Ownership Name: | /Eventhere | it appears on license | | |
| | (Exactly as | in appears on license, | , | |
| 3. Business Name: | (Exactly as | It appears on license |) | |
| 4. Business Location Address: | | | | |
| Sh | reel | City | State | Zip |
| 5. License Type: | | License Numb | oer: | |
| 6. Current Mailing Address: | | | | |
| Str | reet | Clty | State | Zip |
| 7. Have all creditors, lien holders, interes | t holders, etc. b | een notified? | Yes No | |
| | | | | |
| 8. Does the applicant intend to operate | the business wh | ile this application | on is pending? 🔲 \ | ∕es ∐ No |
| If yes, complete Section 5 (Interim Perm | It) of this applica | ation: attach fee | . and current license | e to this application. |
| | | anon, andon to | , 4., 4. | • |
| 0.1 | | (1 | . He a alamandura and ta | proper this Application to |
| 9. l, (Print Full Name) | | | | |
| transfer the privilege of the license to the | | | | |
| the fulfillment of these conditions, I certi | ify that the appl | icant_now owns | or will own the prop | erty rights of the license by |
| the date of issue. | | | | |
| | | | | |
| L | | | Al CURRENT A | CHAIRIED RACKADED DADTRIED |
| | | | | OWNER, MEMBER, PARTNER |
| STOCKHOLDER or LICENSEE of the stated | Hicense. Have | read the above | Section 12 and cor | ntirm that all statements are |
| true, correct, and complete. | | | | |
| | | | | |
| | | | | |
| | | <u>NOTARY</u> | | |
| | • | NOIARI | | |
| | | | | |
| X | | State of | Cou | inty of |
| X(Signature of CURRENT Individual Owner/ | 'Agent) | | The foregoing instrument v | inty of was acknowledged before me this |
| | | | | |
| My commission expires on: | | | of | |
| Dat | e | Day | Mon | tih Year |
| | | | | |
| | | | Signature of NO | OTARY PUBLIC |
| | | | | |

SECTION 13 Proximity to Church or School

Questions to be completed by all in-state 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: e) Government license (§ 4-205.03) Series 5 a) Restaurant license (§ 4-205.02) Series 12 b) Hotel/motel license (§ 4-205.01)Series 11 f) Fenced playing area of a golf course (§ 4-207 (B)(5)) g) Wholesaler Series 4 c) Microbrewery Series 3 d) Craft Distillery Series 18 h) Farm Winery Series 13 Name of School: Lawrence 3-8 School 1. Distance to nearest School: 3,081' (If less than one (1) mile note footage) Address: 4850 W Jeffrey Rd, Tucson, AZ 85757 Name of Church: Mission Valley Church of Christ 2. Distance to nearest Church: _10,256' Address: 3022 W Bilby Rd, Tucson, AZ 85746 (If less than one (1) mile note footage) **SECTION 14 Business Financials** Purchaser Management Company 1. I am the: Lessee Owner ☐ Sub-lessee Name:_NA 2. If the premise is leased give lessors: Address: State 3. Monthly Rent/Lease Rate: \$ NA 4. What is the remaining length of the lease? Yrs. NA 5. What is the penalty if the lease is not fulfilled? \$ NA or Other: (Give details-attach additional sheet if necessary) 6. Total money borrowed for the Business not including lease? \$3,500,000 Please List Lenders/People you owe money to for business. Mailing Address **Amount Owed** 333 S Grand Ave., 12th Floor, Los Angeles, CA 90071 Wells Fargo Bank Acct-4123020786 3,500,000 (Attach additional sheet if necessary) 7. What type of business will this license be used for (be specific)? Retail Convenience Store 8. Has a license or a transfer license for the premises on this application been denied by the state with in the past (1) year?
☐ Yes No If yes, attach explanation. 9. Does any spirituous liquor manufacture, wholesaler, or employee have an interest in your business? ☐ Yes ✔ No 10. Is the premises currently license with a liquor license? ☐ Yes ✓ No If yes, give license number and licensee's name: License #: Individual Owner /Agent Name: (Exactly as it appears on license)

SECTION 15 Restaurant or hotel/motel license applicants

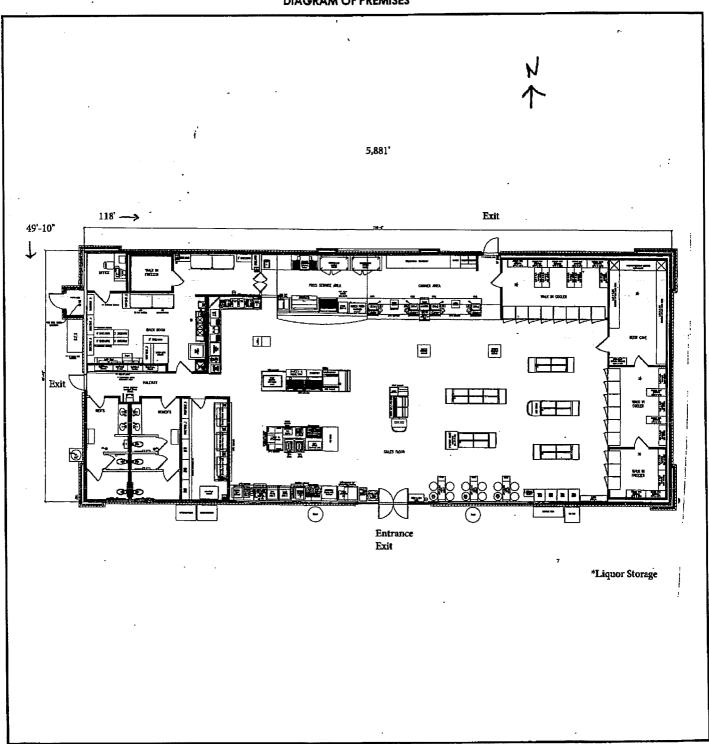
| 1. Is there an existing Restaurant or Hotel/Motel Liquor License at the proposed location? ☐Yes☐No | | | | |
|--|-----------------|--|--|--|
| 2. If the answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application pending; consult A.R.S. § 4-203.01; and complete SECTION 5 of this application. | is | | | |
| . All Restaurant and Hotel/Motel applicants must complete a Restaurant Operation Plan form provided by the Department of Liquor Licenses and Control, | | | | |
| 4. As stated in A.R.S. § 4-205.02. (H)(2), a Restaurant is an establishment which derives at least forty (40) percent of gross revenue from the sale of food. Gross revenue is the revenue derived from sales of food and spirituous liquor of the licensed premises. By applying for this Restaurant Hotel/Motel, I certify that I understand that I multiply maintain a minimum of forty (40) percent food sales based on these definitions and have included the Restaurant Hotel/Motel Records Required for Audit form with this application. | on Ist | | | |
| (Applicant's Signature) | | | | |
| 5. I understand it is my responsibility to contact the Department of Liquor Licenses and Control to schedule of inspection when all tables and chairs are on site, kitchen equipment, and, if applicable, patio barriers are in place of the licensed premises. With the exception of the patio barriers, these items are not required to be properly installed for this inspection. Failure to schedule an inspection will delay issuance of the license. If you are not ready for you inspection 90 days after filing your application, please request an extension in writing; specify why the extension necessary; and the new inspection date you are requesting. | on ed our | | | |
| (Applicant's Initials) | | | | |
| | | | | |
| SECTION 16 Diagram of Premises | | | | |
| Check ALL boxes that apply to your business: | | | | |
| ✓ Entrances/Exits ✓ Liquor storage areas Patlo: Contiguous | | | | |
| ☐ Walk-up windows ☐ Drive-through windows ☐ Non Contiguous | | | | |
| 1. Is your licensed premises currently closed due to construction, renovation or redesign? Yes No | | | | |
| If yes, what is your estimated completion date? January 1, 2018 Month/Pay/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 1 number 6. | 9 6 | | | |
| 3. The diagram (a detailed floor plan) you provide is required to disclose only the area(s) where spirituous liquor to be sold, served, consumed, dispensed, possessed or stored on the premises unless it is a restaurant (see # above). | is 3 | | | |
| Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licenses premises such as parking lots, living quarters, etc. | d | | | |
| 5. As stated in A.R.S. § 4-207.01 (B), I understand it is my responsibility to notify the Department of Liquor License and Control when there are changes to the boundaries, entrances, exits, added or detected doors, windows service windows or increase or decrease to the square footage after submitting this initial diagram. | :S S, | | | |

SECTION 16 Diagram of Premises - continued

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 \u2203.

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



| | NOTARY |
|---|--|
| | |
| I, (Print Full Name) Kim Kenneth Kwiatkowski | _, hereby declare that I am the Owner/Agent filing this application as |
| stated in Section 4, # 1. (have read this application and | <i>,</i> |
| X (Signature of CURRENT individual Owner/Agent) | State of Arizona County of Maricopa The foregoing instrument was acknowledged before me this |
| My commission expires on: 6/24//9 | 26th of October 2016 |
| ERIKA BEARDSLEE Notery Public - State of Arizona | Month Year |
| MARICOPA COUNTY My Commission Expires June 24, 2019 | Signature of NOTARY PUBLIC |

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.