

Melissa Manriquez Deputy Clerk

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

January 19, 2017

Samuel Joseph Kroack Harbottle Brewing Company 3820 S. Palo Verde Road, No. 102 Tucson, AZ 85714

RE: Arizona Liquor License No.: 03103032

d.b.a. Harbottle Brewing Company

Dear Mr. Kroack:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 3, In-State Microbrewery, which was received in our office on December 20, 2016. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, February 7, 2017, 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:	12/28/16	Date of Posting Removal:	1/17	117
Applicant's Name	Harbottle Brewing Company Exercises Last	Samuel First		Josej Middle
Business Address:	3820 S. Palo Verde Road, No. 10)2	Tucson	85714
License #: 0310	3032			
I hereby certify the licensed by the ab	at pursuant to A.R.S. 4-201, I posted notice i pove applicant and said notice was postec	n a conspicuous place on the for at least twenty (20) days.	e premises proposed	lo be
M. P	い乏化 nt Name of City/County Official	PROCESS SECURITION	2 351.611	DO
• • •	m Name of City/Coomy Official	Title	Phone N	umber
M.	Forme		1/13/	17
	Signature		Date Si	gned

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.



Pima County Clerk of the Board

Robin Brigode

Julie Castañeda Deputy Clerk 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

TO:	Development Services, Zoning Division
FROM:	Ricci Romero () Administrative Support Specialist
DATE:	December 22, 2016
RE:	Zoning Report - Application for Liquor License
Attached is	s the application of:
3820 S. Pa Tucson, Az Arizona Lic	guor License No. <u>03103032</u> n-State Microbrewery se <u>X</u> nsfer
ZONING R	
Will current	zoning regulations permit the issuance of the license at this location?
Yes	
If No, pleas	e explain:
•	
	Pima Courty Zoning Inspector

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



Pima County Clerk of the Board

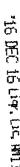
Robin Brigode

Julie Castañeda Deputy Clerk 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

TO:	Pima County Sheriff's Department Investigative Support Unit
FROM:	Ricci Romero
DATE:	December 22, 2016
RE:	Sheriff's Report - Application for Liquor License
Attached is	the application of:
	ottle Brewing Company o Verde Road, No. 102
	esfer
SHERIFF'S	REPORT DATE: 12/30/16
,	reason this application should not be recommended for approval?
	1
	Alleron Airce
	Investigative Support Unit Supervisor

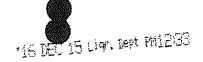
When complete, please return to cob mail@pima.gov

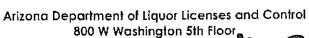
CONTENSION OF CO











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 a: Interim Permit (Complete Section 5) New License (Complete Sections 2, 3, 4, 13, 14, 15, 16) Person Transfer (Complete Section 2, 3, 4, 12, 13, 14, 16) Location Transfer (Bars and Liquor Stores Only) (Complete Section 2, 3, 4, 11, 13, 14, 16) Probate/ Will Assignment/ Divorce Decree (Complete Sections 2, 3, 4, 9, 13, 14, 16) (Fee not required) Government (Complete Sections 2, 3, 4, 10, 13, 16) Seasonal	SECTION 2 Type of Ownership: J.T.W.R.O.S. (Complete Section 6) Individual (Complete Section 6) Partnership (Complete Section 7) Corporation (Complete Section 7) Limited Liability Co (Complete Section 7) Club (Complete Section 8) Government (Complete Section 10) Trust (Complete Section 6) Tribe (Complete Section 6)
SECTION 3 Type of license 1. Type of License: Series 3	LICENSE # 03/03032
SECTION 4 Applicants 1. Individual Owner/Agent's Name: Kroack Lost 2. Owner Name: Hartbottle Brewing Company LLC (Ownership name for type of ownership checked on section)	Samuel Joseph <i>P10774</i> First Middle <i>B105</i> 791
3. Business Name: Harbottle Brewing Company (Exactly as It appears on the exterior of premises) 4. Business Location Address: 3820 S Palo Verde Rd. #102 (Do not use PO Box) 5. Mailing Address: 3820 S Palo Verde Rd. #102 (All correspondence will be mailed to this address) Street	Tucson Arizona 85714 Pima <u>B / 05 79 /</u> City State Zip Code County on Arizona 85714 Pima City State Zip Code
	ytime Contact Phone; 520-400-7358
8. Is the Business located within the incorporated limits of the Property of another City, Town or Tribal Reservation? Yes No. If yes, what City, Town or Tribal Reservation is this Business in the Property of the Property	for a City or Town but is actually in the boundaries ocated in: Pima County
Fees: \$\frac{100}{Application}\$ Interim Permit Site Inspects Arizona Statement of Citizenship & Alien Status for State B	nt Use Only 4400 Finger Prints Total 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.

Affach a c	opy of the licer	ise currently iss	ued at this	location to th	is application.				
l	(Print Full	Nome)		fore that I am I stated license		NER, AGENT, (or con'	trolling	S PERSON
X	(Signature of CURREN	T Individual Owner/Ag	geni)	State	⊇ OÍThe loreg	COU	niy ol	edged befor	e me Ihis
My commis	sion expires on:	Date			of	Month	1		Year
						Signature of NOT	ARY PIBLIC		A
									
ndividual	<u>I</u>								
ast	First	Midale		%Owced	Minilino Addres		City	State	7 in Code
.ast	First	Middle		%Owned	Mailing Addre	. S	City	State	Zip Code
s any pers	on other than at	oove, going to s	share in prot	fit/losses of th	e business? []Yes □N	lo		Zip Cods
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TRUST				/	KIOACF) Same
Name of Trust:						
iasi	First	Middle	Malling Address	City	State	Zip Code
					······································	. 13
TRIBE Name of Tribal Owners	nip:					
Lost	First	Middle	Mailing Address	City	State	Zip Code

	WARRESTON ALL CO.					
	Complete Que	State	, and 7 ny, LLC where Incorporated/C	~		
W-1998MANA			#	- And The Trans		· · · · · · · · · · · · · · · · · · ·
		(Affach additional sheet	if necessary)			
6. List all Stockholders /	-					
Tost First Kroack Samuel	Middle Joesph	%Owned 50%	Mailing Address 9024 E Calle Pa	c ly sto Tucsor	<u>state</u> 1 AZ 857	<i>1</i> 1p Code 115
Figueira Michael	Aaron	50%	448 W Corte Ca	·····	,	5629
Annual Control of the		(Attach additional sheet	if necessary)			

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 6 - continued

TRUST Name of T	rust:						
Last	······································	First	Middle	Moiling Address	City	State	Zip Code
IRIBE Name of Ti	ibal Owners	hip:	Middle		City	State	Zip Çode
1. Name of 2. Date Inc. 3. AZ Corp.	Corporation L.L.C. If Corporatio corporated/Geration or Al	Complete Questing Complete Questing L.L.C; Harbottle Borganized; 06/06/2016 Z.L.L.C File No: L2097	ons 1, 2, 3, 4, 5, 6, 6 ons 1, 2, 3, 4, 5, 6, 6 rewing CompanyState v	and 7 LLC vhere Incorporated/Orgo	inized: Ariz	ona	
·		ofit? Yes No s, Members in Corpor	ation/L.L.C;				
Kroack Figueira	Samuel Michael	Middle Joseph Aaron	Member Member	9024 E Calle Pasto 448 W Corte Calza	Tucson Tucson		Zip Code 85715 85629
		·	Attach additional sheet if				
6. List all St	ockholders /	percentage owners Middle	who own 10% or n	Mailing Address	City	51ale	ਹੋp Code
		(Allach addilional sheet i	(necessary)			

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

3. List all controlling m		o, 1001 [4] 16QL	,				
Last	First	Middle	Modilin	g Address	City	State	Zip Cod
		West Control of the C					***************************************
					···		
		(Altoch addi	ional sheet if necesso	n(A)	***************************************	***************************************	
SECTION 9 Probate, Will A	Assignment or	Divorce Decree of	an existing Liqu	or License			
Current Licensee's Nat (Exactly as it appear on the content of the content o	me:	Lost	m# L				
			First	Middle			
2 Assignee's Nome:			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Middle			
2. Assignee's Name:		Last	First				
3. License Type:	ON A CERTIFIED	COPY OF THE WILL,	License Nur				
3. License Type: ATTACHTO THIS APPLICATION THAT SPECIFICALLY DISTRIBUTE SECTION 10 Government	ON A CERTIFIED UTES THE LIQUOI	COPY OF THE WILL, I R LICENSE TO THE AS wns, or counties o	License Nur PROBATE DISTRIBU SIGNEE.	ITION INSTRUME	ENT, OR DIVOR	CE DECRI	
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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:	Last	First	Middle	_ Entity:(Indivi	dual, Agent, Elc.)
2. Ownership Name:	(Exactly as		e)		
3. Business Name;	(Exactly as	s It appears on license	e)		
4. Business Location Address:	Streel	City	State	e Zip	,
5. License Type:		License Num	ber:		
6. Current Mailing Address:	Street	City	State	e Zip	
7. Have all creditors, lien holders, intere	est holders, etc. b	een notified?]Yes □No		
8. Does the applicant intend to operat	te the business wh	ile this applicati	on is pending?]Yes □ No	
If yes, complete Section 5 (Interim Perr	mit) of this applica	ation; attach fee	e, and current lice	ense to this app	olication.
9. I. (Print Full Name)	the applicant pro	ovided that all t	erms and conditio	ons of sale are	met. Based on
l. (Print Full Name) STOCKHOLDER or LICENSEE of the state true, correct, and complete.					
	ř.	NOTARY			
X(Signature of CURRENT Individual Owner	ir/Agent)	State of	C The foregoing instrume	County of ent was acknowledged	d before me this
My commission expires on:	nte .	Day	of	Month	Year
			Signature of	F NOTARY 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:

a) Restaurant license (§ 4-205.02) Series 12

e) Government license (§ 4-205.03) Series 5

1. Distance to necrest School: 3 miles Name of School: Alta Vista High School (8 less than one (1) mile note foologe) 2. Distance to necrest Church: (1.5 miles) (1.5 miles) (1.6 mile note foologe) 2. Distance to necrest Church: (1.5 miles) (1.6 mile note foologe) 2. Distance to necrest Church: (1.5 miles) (1.6 mile note foologe) 2. Distance to necrest Church: (1.5 miles) (1.6 mile note foologe) 2. Distance to necrest Church: (1.5 miles) (2950 E Irvington Rd, Tucson, AZ 857014 (2.5 miles) (2950 E Irvington Rd, Tucson, AZ 857014 (2.5 miles) (2.6 miles) (2.6 miles) (2.6 miles) (2.7 mi	c)	Restaurant license (§ 4-) Hotel/motel license (§ 4-) Microbrewery Series 3) Craft Distillery Series 18	•		e) Government license f) Fenced playing area g) Wholesaler Series 4 h) Farm Winery Series 13	ofagolfcour		B)(5))
Address: 5040 S Campbell Ave, Tucson, AZ 85701 2. Distance to nearest Church: 1.5 miles Name of Church: The Door Church Address: 2950 E Irvington Rd, Tucson, AZ 85714 SECTION 14 Business Financials 1. I am the: Lessee Sub-lessee Owner Purchaser Management Compared Madress: 2410 W Ruthrauff Rd # 110 Tucson AZ 85705 3. Monthly Rent/ Lease Rate: \$ 2360.34 Size City State Zip Monthly Rent/ Lease Rate: \$ 2360.34 Order City State Zip Monthly Rend (I be as a size of the Business not including lease? \$ Order: Remainder of lease value (Give defails otherwise) Give defails otherwise additional sheet if necessary) 6. Total maney borrowed for the Business not including lease? \$ Order: Remainder of lease value Monthly Rend (I be as a size of the Business not including lease? \$ Order: Remainder of lease value Monthly Rend (I be as a size of the Business not including lease? \$ Order: Remainder of lease value Monthly Rend (I be as a size of the Business not including lease? \$ Order: Remainder of lease value Monthly Rend (I be as a size of the Business not including lease? \$ Order: Remainder of lease value Monthly Rend (I be as a size of the Business not including lease? \$ Order: Remainder of lease value Monthly Rend (I be as a size of the Business not including lease? \$ Order: Remainder of lease value Monthly Rend (I be as a size of the Business of the Rend (I be as a size of the Business of the Rend (I be as a size of th					Name of School: Alta	a Vista Hig	gh School	
2. Distance to nearest Church; 1.5 miles Name of Church: The Door Church Address: 2950 E Irvington Rd, Tucson, AZ 85714 SECTION 14 Business Financials 1. Lam the: Lessee	(if less	than one (1) mile note foo	tage)					
SECTION 14 Business Financials 1. I am the: Lessee Sub-lessee Owner Purchaser Management Comparing the premise is leased give lessors: Name: Palo Verde Trust Partners LLC Address: 2410 W Ruthrauff Rd # 110 Tucson AZ 85705 3. Monthly Rent/ Lease Rate: \$ 2360.34	2. Distor	nce to nearest Chui	rch: 1.5 miles					
2. If the premise is leased give lessors: Name: Palo Verde Trust Partners LLC	(II less	than one (1) mile note foo	tage)	-	Address: 2950 E Irvir	ngton Rd, 1	Fucson, A	Z 85714
2. If the premise is leased give lessors: Name: Palo Verde Trust Partners LLC	SECTION	N 14 Business Financ	cials					
Address: 2410 W Ruthrauff Rd # 110 Tucson AZ 85705 3. Monthly Rent/ Lease Rate: \$ 2360.34	1. Lam t	the: 🗷 Lessee	□Sub-lessee	Owner	Purchaser		Managem	ent Company
3. Monthly Rent/ Lease Rate: \$ 2500.34 4. What is the remaining length of the lease? Yrs. 5	2. If the	premise is leased gl	ive lessors:	Name: Palo V	erde Trust Partners I	LLC		
4. What is the remaining length of the lease? Yrs. 5 S. What is the penalty if the lease is not fulfilled? \$				Address: 2410	W Ruthrauff Rd # 11	0 Tucson	AZ 85705	5
4. What is the remaining length of the lease? Yrs. 5	3. Monti	hly Rent/ Lease Rate	_{9: \$} 2360.34		Street	City	State	Zip
6. Total money borrowed for the Business not including lease? \$ ^0 Please List Lenders/People you owe money to for business. Lost		•	,	Yrs. 5	Moi	nths 0		
6. Total money borrowed for the Business not including lease? \$ ^0 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) 7. What type of business will this license be used for (be specific)? Craft beer microbrewery and tasting room 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, wholesoler, or employee have an interest in your business? Yes No 10. Is the premises currently license with a liquor license? Yes No 11. No 11. Is the premises currently license with a liquor license? Yes No 15. No 16. Is the premises number and licensee's name:	5. What	is the penalty if the	lease is not fulfille	.d2 \$	or Other: Re	emainder d	of lease v	alue
7. What type of business will this license be used for (be specific)? Craft beer microbrewery and tasting room 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:					Give delais-allacti an	Ciniolici suesi n	• •	
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7. What type of business will this license be used for (be specific)? Craft beer microbrewery and tasting room 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:	6. Total i Please L	money borrowed fo List Lenders/People	or the Business not you owe money to	including lease? o for business,	\$ a	The contract of the contract o		
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:	6. Total i Please L	money borrowed fo List Lenders/People	or the Business not you owe money to	including lease? o for business,	\$ a	The contract of the contract o		
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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 is pending; consult A.R.S. \S 4-203.01; and complete SECTION 5 of this application.				
 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 (orty (40) percent of its gross revenue from the sale of food. Gross revenue is the revenue derived from sales of food and spirituous liquor on the licensed premises. By applying for this Restaurant Hotel/Motel. I certify that I understand that I must 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.				
(Applicant's Signature)				
5. I understand it is my responsibility to contact the Department of Liquor Licenses and Control to schedule an inspection when all tables and chairs are on site, kitchen equipment, and, if applicable, patio barriers are in place on 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 your inspection 90 days after filling your application, please request an extension in writing; specify why the extension is necessary; and the new inspection date you are requesting.				
(Applicant's Initials)				
SECTION 16 Diagram of Premises Check ALL boxes that apply to your business:				
☑ Entrances/Exits ☑ Liquor storage areas				
☐ 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 dafe?				
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.
- 3. 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 above).
- 4. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed premises such as parking lots, living quarters, etc.
- 5. As stated in A.R.S. § 4-207.01 (B), I understand it is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to the boundaries, entrances, exits, added or deleted doors, windows, service windows or increase or decrease to the square footage after submitting this initial diagram.

(Applicant's initials)

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 †.

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

DIAGRAM ATTACHED

"16 DEC 16 Lig. Lic. #11109

I. (Print Full Name) Samuel Joseph Kroack stated in Section 4 # 1. I have read this application and verify all statements to be true, correct and complete X. (Signatore of CURRENT Individual Owner/Agent) State of AUDUAL County of IMA The foregoing instrument was acknowledged before me this My commission expires an: June 28 1 2018 Jay of Aucunty TATIANA SHOPTAUGH NOTARY PUBLIC - ARIZONA Pirma County My Commission Expires		NOTARY
	stated in Section 4 # 1 I have read this application and X (Signature of CURRENT Individual Owner/Agent) My commission expires on: TATIANA SHOPTAUGH NOTARY PUBLIC - ARIZONA Pirna County	State of AUDOU County of I M Q The foregoing instrument was acknowledged before me this Only Only

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.