

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

August 25, 2017

Nicholas Carl Guttilla Safeway No. 2809 FC c/o Gutilla Murphy Anderson 5415 E. High St., No. 200 Phoenix, AZ 85054

RE:

Arizona Liquor License No.: 10103821

d.b.a. Safeway No. 2809 FC

Dear Mr. Guttilla:

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 July 28, 2017. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday. September 5, 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,

Clerk of the Board

Enclosure



# Arizona Department of Liquor Licenses and Control 800 W Washington 5th Floor Phoenix, AZ 85007-2934 www.azliquor.gov

# ALGESTAMILOTPCOLKUFED

# **AFFIDAVIT OF POSTING**

Date of Posting: $8/3/17$	Date of Posting Removal:		124/17
Safeway No. 2809			
Applicant's Name: <b>Guttilla</b>	Nicholas		Carl
Last	First		Middle
Business Address: 13360 E. Mary Ann	Cleveland Way	Vail	85641
Street		City	Zip
License #: <u>10103821</u>			
	, I posted notice in a conspicuous place on the otice was posted for at least twenty (20) days.	premises prop	osed to be
RANK R. HECHT 1775	PRICOS SERVER	E 820 9	104034
Print Name of City/County Office	cial Pina Co Title	P	hone Number

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:	Ricci Romero
DATE:	7/28/2017
RE:	Zoning Report - Application for Liquor License
Attached is t	the application of:
	yay No. 2809 FC ary Ann Cleveland Way
•	asfer
ZONING RE	EPORT DATE:
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, Hease return to cob mail@pima.gov

ALGO7:1784/08:51 PC CLK OF BD &C\_

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

**DILC USE ONLY** License # **Date Accepted:** CSR:

**∠**Yes

□No

17 JUL 27 Lig. Lic. PM 3:41

**Application for Liquor License** Type or Print with Black Ink

	• •	on for Liquor License Print with Black Ink		后 上,
		RMIT FEES (IF APPLICABLE) AR ed for all dishonored checks		목'
SECTION 1 Type of License  Interim Permit  New License  Person Transfer  Location Transfer (series 6,  Probate/ Will Assignment/ Seasonal	7 and 9)	sect □J.T □Ind □Pa ☑Cd □Lir ees) □Cl □Gd □Tru □Tru	ION 2 Type of Ownership  T.W.R.O.S. dividual artnership orporation mited Liability Co ub overnment ust	JUL 28*178MO9/25 PC CLK OF BI
	A.R.S.§4-206.01(G), (H), Add Growler privileges A.R.S.§4-207(A) & (B)	(I) & (L) (restaurant, series 12, licens	Complete Sampling Privilege e only. 300-foot restriction ap (if issued):	oplies)
mypo of Electric (restaurant, ou		Z. HOLIVOL //	(ii issued)	
SECTION 4 Applicants				
1. Agent's Name:				
5	GUTTILLA	NICHOLAS		RL p/04699
2. Applicant/Licensee Name: 5	Last	First		B10005
2. Applicant/Licensee Name: 5	Last Safeway, Inc. type of ownership checked on	First section 1)		RL <u>P/04</u> 699 <sup>Middle</sup> <u>B/00</u> 005 <u>B/05</u> 925
2. Applicant/Licensee Name:  (Ownership name for  3. Business Name (Doing Busine  4. Business Location Address:  (Do not use PO Box)	Last Safeway, Inc. type of ownership checked on SS AS-DBA): Safeway  3360 E Mary Ann Cleve	First section 1) #2809 FC eland Way Vail City	AZ 85641 Pima State Zip Code	B105925
2. Applicant/Licensee Name: Cownership name for 3. Business Name (Doing Busines 4. Business Location Address: Company States (Doing Busines)  4. Business Location Address: Company States (Doing Busines)	Last Safeway, Inc. type of ownership checked on ess As-DBA): Safeway: 13360 E Mary Ann Cleve Street Murphy Anderson 541	First section 1) #2809 FC eland Way Vail City 5 E High St #200 Pho	AZ 85641 Pima	<u>B105</u> 925
<ol> <li>Applicant/Licensee Name: (Ownership name for 3. Business Name (Doing Busines</li> <li>Business Location Address: (Do not use PO Box)</li> <li>Mailing Address: c/o Guttilla Name</li> </ol>	Last Safeway, Inc. type of ownership checked on ess As-DBA): Safeway: 13360 E Mary Ann Cleve Street Murphy Anderson 541	First section 1) #2809 FC eland Way Vail City 5 E High St #200 Pho	AZ 85641 Pima State Zip Code Denix, AZ 85054 State Zip Code	<u>B105</u> 925
<ol> <li>Applicant/Licensee Name: (Ownership name for Ownership name for Street Name)</li> <li>Business Name (Doing Busines)</li> <li>Business Location Address: (Do not use PO Box)</li> <li>Mailing Address: (All correspondence will be mailed to this</li> </ol>	Last Safeway, Inc. type of ownership checked on ess As-DBA): Safeway: 13360 E Mary Ann Cleve Street Murphy Anderson 541 address) Street	First section 1) #2809 FC eland Way Vail City 5 E High St #200 Pho	AZ 85641 Pima State Zip Code Denix, AZ 85054 State Zip Code	<u>B105</u> 925
<ol> <li>Applicant/Licensee Name: (Ownership name for Ownership name for Indiana)</li> <li>Business Name (Doing Busines</li> <li>Business Location Address: (Do not use PO Box)</li> <li>Mailing Address: (do Guttilla Mail correspondence will be mailed to this Dusiness Phone: pending</li> </ol>	Last Safeway, Inc. type of ownership checked on iss As-DBA): Safeway: 13360 E Mary Ann Cleve Street Murphy Anderson 541 address) Street  tw.com	section 1) #2809 FC eland Way Vail city 5 E High St #200 Pho city Daytime Contact Phosits of the above city or tox	AZ 85641 Pima State Zip Code Denix, AZ 85054 State Zip Code ne: (480) 304-8300	B 1059 25 a

Is Arizona Statement of Citizenship & Alien Status for State Benefits complete?

SECTION 5 Background Check	N CANADE ENG	: :	DD ALONIO MARTILA	22 00000000	IC FEE DED CADD
EACH PERSON LISTED MUST SUBMIT A QUES 1. If the applicant is an entity, not an indivi				22. PROCESSIN	IG FEE PER CARD.
a) Date Incorporated/Organized: 7	7/23/86	State w	here Incorporated	/Organized: _	Delaware
b) AZ Corporation or AZ L.L.C. File No			authorized to do bu		
2. List any individual or entity that own a bouned by another entity, attach an organeeded to disclose any controlling person % or more of the license.	anizational chart	showing th	ne ownership struct	ture. Attach a	additional sheets as
Last First Middle	Title	%Owned	Mailing Address	City	State Zip
See attached flow chart					
	(Attach addition	al sheet if ne	CACCADY)		
SECTION 6 Interim Permit	Auaciraduluoi	iai sileet ii ile	Cessary)	N-Ber and the second second	or and design of the first state of the stat
If you intend to operate business while you For approval of an interim permit:  • There must be a valid license of the • A Hotel/Motel license is being repla	same series issue	ed to the cu	rrent location you	are applying f	for <b>OR</b>
1. Enter license number currently at the l	ocation:			_/_	
2. Is the license currently in use? Tyes [	☐No If no, h	ow long ha	s it been out of use	<u>{</u>	
I, (Signature)  CONTROLLING PERSON on the stated lice	ense and location		declare that I am	the CURRENT	OWNER, AGENT, OR
Attach a copy of the	license currently	y issued at	this location to this	application.	
		OTARY			
State of Arizona )		<del></del>			
) County of)					
On this Day of	before me	e personally	appeared		
Day Month	Year			(Print Name of Doo	·
Whose identity was proven to me on the lacknowledged that he or she signed the	above/attached	d documer	e to be the person t.	wno ne or sne	e claims to be and
			Signature	of NOTARY PUBLIC	
(Affix Seal Above)					
SECTION 7 Probate, Receiver, Bankruptcy EACH PERSON LISTED MUST SUBMIT A QUES				• •	
1.Current Licensee's Name:					Middle
(Exactly as it appears on the license)  2. Assignee's Name:			First		Middle
License Number:			First		Middle
ATTACH A COPY OF THE DOCU	MENT THAT SPECIF	ICALLY ASSI	GNS THE LIQUOR LIC	ENSE TO THE AS	SSIGNEE.

2/24/2017

## Safeway Inc.

### AB Acquisition LLC (B) (12/6/05 DE)

OFFICERS:
Robert Miller: Exec. Chairman
Robert Dimond: CFO Robert Gordon: EVP/GC/Sec

### "CLASS B MEMBERS" (Safeway ONLY)

Safeway Group Holdings Inc. (94.29% parent entity for AB Acquisition LLC "Class B" members only)

Robert Miller: Executive Chairman Robert Gordon: EVP/Sec/GC Robert Dimond: EVP/CFO

Cerberus Iceberg, LLC (39.22%) (Stephen Feinberg, Director reported on CP Affidavit)

Cerberus Partners, LP (52.46%)

GP: Cerberus Associates, L.L.C.

Cerberus Institutional Partners V, LP (31.73%)
GP: Cerberus Institutional Associates II L.L.C.

(No other member owns 10% or greater of licensee Safeway Inc.)

Jubilee ABS Holding, LLC (15.11%) (Jay Schottenstein, Director reported on CP Affidavit) (No member owns 10% or greater of licensee Safeway Inc.)

Klaff Markets Holdings, LLC (15.11%) (Hersch Klaff, Director reported on CP Affidavit) (No member owns 10% or greater of licensee Safeway Inc.)

<u>Lubert-Adler SAN Aggregator, L.P.</u> (15.11%) (Dean Adler, Director reported on CP Affidavit)

General Partner(s): Lubert-Adler Group SAN LLC

(No limited partner owns 10% or greater of licensee Safeway Inc.)

KRS AB Acquisition, LLC - 15.11% (David Henry, Director reported on CP Affidavit) (No member owns 10% or greater of licensee Safeway Inc.)

(No other member owns 10% or greater of CLASS B interest in AB Acquisition LLC)

### Albertsons Companies LLC (B) (Delaware LLC)

(100% Member: AB Acquisition LLC (B) )

Robert Miller - Chairman Robert Gordon - EVP/Sec/GC Robert Dimond: CFO/EVP Robert Larson – SVP/CAO Bradley Fox – VP/Treas/Asst Sec

### Safeway Inc (LICENSEE)

Acc #f-0037205-0 (Delaware Corp)
(100% Shareholder: Albertsons Companies LLC (B) )

OFFICERS: Robert Miller - Chariman/CEO Robert Gordon - EVP/SEC/GC Bradley Fox - VP/Treas Robert Dimond - EVP/CFO

SECTION 8 Government (for Cities, Towns or Counties	only)		
1. Government Entity:			
2. Person/Designee:			
Last	First		aytime Contact Phone #
A SEPARATE LICENSE MUST BE OBTAINED FOR	EACH PREMISES FROM WHI	CH SPIRITUOUS LIQU	OR IS SERVED.
SECTION 9 Person to Person – Current Licensee I (Bar and Liquor Stores only – Series 06)		D), (G)	
1. License #:			
2. Current Agent Name:			
Last	First	M	iddle
3. Current Licensee Name:(Exactly a	as it appears on the license)		
4. Current Business Name:(Exactly a	as it appears on the license)	/	
5. Current Daytime Phone:			
6. Does current licensee intend to operate the busine	ess while this application is p	ending? Yes [	□No
7. I authorize the transfer of this license to the applica	int		
/		Agent or Individual cont	rolling person
	NOTARY		
			,
State of Arizona			
County of			
On thisDay of, 20befo	ore me personally appeared	(Print Name of	Document Signer)
Whose identity was proven to me on the basis of satis acknowledged that he or she signed the above/atta	sfactory evidence to be the ached document.	e person who he or s	she claims to be and
(Affix Seal Above)		Signature of NOTARY PU	BLIC
/ (Allix Jedi Above)		<u> </u>	

### SECTION 10 Proximity to Church or School - Questions to be completed by 6, 7, 9, 10 and 12G applicants.

A.R.S.§4-207. (A) and (B) state that no <u>retailer's license</u> 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) Restaurants that do not sell growlers (A.R.S.§4-205.02) Series 12
- b) Hotel/motel license (A.R.S.§4-205.01) Series 11
- c) Microbrewery (A.R.S.§4-205.08) Series 3
- d) Craft Distillery (A.R.S.§4-205.10) Series 18

- e) Government license (A.R.S.§4-205.03) Series 5
- f) Playing area of a golf course (A.R.S.§4-207 (B)(5))
- g) Wholesaler/Distributor Series 4
- h) Farm Winery Series 13
- I) Producer Series 1

### -Section 10 continued -

1. Distance to nearest School; 470 feet		Name of School: OI	d Vail Midd	le School	
(If less than one (1) mile note footage)		Address: 13299 E C	olossal Cav	e Rd - Vai	I, AZ 85641
2. Distance to nearest Church: 1,753 feet		Name of Church: S	aint Rita In t	he Desert	Church
(If less than one (1) mile note footage)		Address: 13260 E C	olossal Cav	e Rd - Vai	l, AZ 85641
SECTION 11 Business Financials A.R.S.§4-202(I	=)				
☐ Tenant: a person who holds the lease of a pr☐ Sub-tenant: a person who holds a lease whi☐ Owner☐ Purchaser☐ Management Company		other person (tenant)	for all or part	t of a prope	erty.
2. If the premises is leased give lessors:	Name: n/a				
	Address:				
		Street	City	State	Zip
3. What is the penalty if the lease is not fulfille	:d? \$ <u>m/a</u>	or Othe	er:		
4. Total money borrowed for the Business not	including lease?	3 0			
Please List Lenders/People you owe money t	o for business.				
Last First Middle	Amount Owed	Mailing Address	City	State	Zip
n/a			4		
	(Attach additional shee	t if necessary)			
5. Has a license or a transfer license for the p		•	ed by the sta	ate within t	he past year?
☐ Yes ☑ No If yes,	, attach explanatio	n.			
6. Does any spirituous liquor manufacture, who	olesaler, or employ	ee have an interest i	n your busine	ess?	
☐ Yes 🗹 No If yes	s, attach explanatio	on.			
SECTION 12 Diagram of Premises  Check ALL boxes that apply to your business  Walk-up or drive-through windows					
Patio: Contiguous		Non-Contiguous w	ithin 30 feet		
1. Is your licensed premises now closed due	to construction, re	novation or redesig	n or rebuild?		
✓ Yes   ☐ No If yes, what is your estimated			2018		
Please attach a diagram of the premises wh consumed, dispensed, possessed or stored. floor, stage, game room and the kitchen. <b>D</b> o	Include all entrand	es, exits, interior wa	ills, bar areas	s, dining ar	eas, dance

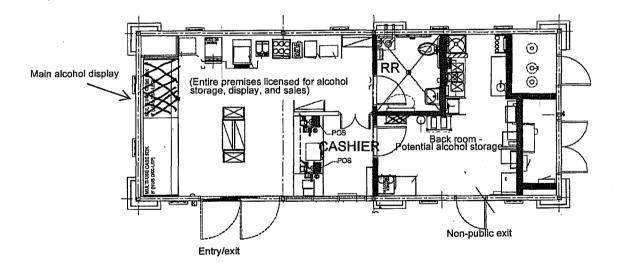
North. 2/24/2017

conducted under this liquor license. When completing your premises diagram, please identify which orientation is

	COMPARATI			-	******
-	WWW.HOOFCOM	1 44	-		-
NAM.	MATERIAL STATES	10	-		
_	MARKET CO. P. CO. PE	DI			
-	MATERIA WINNEY	v			ľ
	KD1 623 8-7500	5	_		
400	MALTICORDE PROCESIFICOR				<u> </u>
تجيك	ON SEVICE	10	_		- •

# Safeway #2809 FC Approx 5,100 s.f.

(Entire premises licensed for alcohol storage, display, and sales)



HELEGARIA MUNICORE TEZ SF

FEWAY
CADO DELIAGO # 8809
BE MARY ANN CEUESAL ON

02809

FINAL FIXTURE PLAN

F1.1

27 Liv. Lic. PH 3 41

### -Section 12 continued on next page-

2. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed areas such as parking lots, living quarters, etc.

3. 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 service areas or the square footage of the licensed premises, either by increase or decrease.

### **RESTAURANTS AND HOTELS/MOTELS ONLY**

(IMPORTANT NOTE: A site inspection must be conducted prior to activation of the license. The fee of \$50.00 will be due and payable upon submitting this application.)

- 4a. Provide a detailed drawing of the kitchen and dining areas, including the locations of all kitchen equipment and dining furniture, these are required as part of the diagram. A.R.S.§4-205.02(C)
- 4b. Provide a restaurant operation plan.

	SECTION	ON 13	SIGN	ature	BLO	CI
--	---------	-------	------	-------	-----	----

I, (Signature) Nicholas Carl Guttilla dereby declare that I am the Owner/Agent filing this application, I have read this document and verify the content and all statements are true, correct and complete, to the best of my knowledge.

N	<b>^</b>	T	Δ	D	v
14	v	١.	m	л	T

State of Arizona

County of \_ Maricopa

On this 26 Day of Out

20\_\_\_\_\_\_ before me personally appeared Nicholas Carl Guttilla

(Print Name of Document Signer)

Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.

OFFICIAL SEAL KAREN PLUM Notary Public State of Arizona Tix Seal Above

MARICOPA COUNTY

Signature of NOTARY PUBLIC

### 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.