



# Pima County Clerk of the Board

Julie Castañeda

Melissa Manriquez  
Deputy Clerk

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

Management of Information & Records Division  
1640 East Benson Highway  
Tucson, Arizona 85714  
Phone: (520) 351-8454 • Fax: (520) 791-6666

September 19, 2018

Grey William Carpenter  
Mt. Lemmon General Store & Gift Shop  
12856 N. Sabino Canyon Parkway  
Box 790  
Mount Lemmon, AZ 85619

RE: Arizona Liquor License No.: Job No. 29409  
d.b.a. Mt. Lemmon General Store & Gift Shop

Dear Mr. Carpenter:

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 August 27, 2018. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, October 16, 2018, at 9:00 a.m. or thereafter, at the following location:

Pima County Administration Building  
Board of Supervisors Hearing Room  
130 W. Congress, 1st Floor  
Tucson, AZ 85701

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

Sincerely,

A handwritten signature in black ink, appearing to read "Julie Castañeda", is written over a horizontal line.

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:

08/28/18

Date of Posting Removal:

09/18/18

Applicant's Name:

Mt. Lemmon General Store & Gift Shop  
Carpenter Grey

William

Last

First

Middle

Business Address:

12856 N. Sabino Canyon

Mount Lemmon

85619

Street

City

Zip

License #: Job No. 29409

I hereby certify that pursuant to A.R.S. 4-201, I posted notice in a conspicuous place on the premises proposed to be licensed by the above applicant and said notice was posted for at least twenty (20) days.

DR McMillan

Print Name of City/County Official

PCSD Process Serv

Title

520  
351-3919

Phone Number

DR McMillan

Signature

09/18/18

Date Signed

Return this affidavit with your recommendations (i.e., Minutes of Meeting, Verbatim, etc.) or any other related documents.  
If you have any questions please call (602) 542-5141 and ask for the Licensing Division.

SEP 19 10 55 PM CACTUS RD  
AS



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TO: Development Services, Zoning Division

FROM: Alina Bárcenas *ARB*  
Administrative Support Specialist Senior

DATE: 8/27/2018

RE: Zoning Report - Application for Liquor License

Attached is the application of:

Grey William Carpenter  
d.b.a. Mt. Lemmon General Store & Gift Shop  
12856 N. Sabino Canyon  
Mount Lemmon, AZ 85619

Arizona Liquor License No. Job No. 29409  
Series 10, Beer and Wine Store  
New License ☒  
Person Transfer  
Location Transfer

ZONING REPORT

DATE: 9/14/18

Will current zoning regulations permit the issuance of the license at this location?

Yes ☒ No ☐

If No, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*[Signature]*  
Pima County Zoning Inspector

When complete, please return to cob\_mail@pima.gov

SEP 14 18 08 10 POC CLK OF RD

ARB

18-21-9335

18 AUG 24 Lic. Lic. PM1254



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

DLIC USE ONLY

License #	Job # 29409
Date Accepted:	8-24-18
CSR:	C.A.

Application for Liquor License  
Type or Print with Black Ink

IP Job # 29412

**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 Type of License**

- ☒ Interim Permit  
☒ New License  
☐ Person Transfer (series 6, 7 and 9)  
☐ Location Transfer (series 6, 7 and 9)  
☐ Probate/ Will Assignment/ Divorce Decree (No Fees)  
☐ Seasonal

**SECTION 2 Type of Ownership**

- ☐ J.T.W.R.O.S.  
☐ Individual  
☐ Partnership  
☐ Corporation  
☒ Limited Liability Co  
☐ Club  
☐ Government  
☐ Trust  
☐ Tribe  
☐ Other (Explain)

**SECTION 3 Type of Privilege**

- ☐ Add Sampling Privilege for Series 9 and 10 only (Complete Sampling Privilege application)  
A.R.S. § 4-206.01 (G), (H), (I) & (L)  
☐ Add Growler privileges (restaurant, series 12, license only. 300-foot restriction applies)  
A.R.S. § 4-207(A) & (B)

1. Type of License (Series of license): # 10 - BEER / WINE STORE 2. LICENSE # Job # 29409

**SECTION 4 Applicants**

1. Agent's Name: CARPENTER CREEY WILLIAM  
Last First Middle
2. Individual/Owner Name: ASPEN LEAF ENTERPRISES, LLC  
(Ownership name for type of ownership checked in section 2)
3. Business Name (Doing Business As-DBA): MT. LEMMON GENERAL STORE & GIFT SHOP
4. Business Location Address: 12856 N. SABINO CANYON MOUNT LEMMON AZ 85619 PIMA  
(Do not use PO Box) Street City State Zip Code County
5. Mailing Address: 12856 N. SABINO CANYON PKWY Box 790 MOUNT LEMMON AZ 85619  
(All correspondence will be mailed to this address) Street City State Zip Code County
6. Business Phone: (520) 576-1468 Daytime Contact Phone: (520) 631-6847 0790
7. Email Address: CREEY.CARPENTER@OUTLOOK.COM
8. Is the Business located within the incorporated limits of the above city or town? ☐ Yes ☒ No  
If you checked no, in what City, Town, County or Tribal/Indian Community is this business located? Pima Co.
9. Total Price paid for Series 6 Bar, Series 7 Beer & Wine Bar or Series 9 Liquor Store (license only) \$ N/A

Fees:

Application

Interim Permit

Department Use Only

Site Inspection

Finger Prints

Total of All Fees

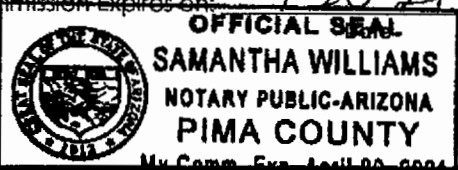
**SECTION 5 Interim Permit**

If you intend to operate business while the application is pending, you will need an interim permit pursuant to A.R.S. §4-203.01. For approval of an interim permit:

- There **must** be a valid license of the same series issued to the current location you are applying for, **OR**
- A Hotel/Motel license is being replaced with a restaurant license pursuant to A.R.S. §4-203.01(A)

1. Enter license number currently at the location: 10103379

2. Is the license currently in use? ☒ Yes ☐ No If no, how long has it been out of use? n/a

<b>NOTARY</b>	
<p>I (Print Full Name) <u>PHILIP JOHN WACK</u> hereby declare that I am the Agent, Current Owner, or Controlling Person on the stated license and location.</p> <p>Signature: <u>[Signature]</u></p> <p>My Commission Expires on: <u>4-20-21</u></p>	<p>State of <u>Arizona</u> County of <u>Pima</u></p> <p>The foregoing instrument was acknowledged before me this <u>24<sup>th</sup></u> Day of <u>August</u>, <u>2018</u></p> <p style="text-align: center;">    <u>[Signature]</u>            Signature of Notary         </p>

**SECTION 6 Background Check**

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$22 PROCESSING FEE PER CARD.

1. If the applicant is an entity, and not an individual, answer questions 1a-b.

a) Date Incorporated/Organized: 07/16/18 State where Incorporated/Organized: Arizona

b) AZ Corporation or AZ LLC. File No: 1878955 Date authorized to do business in AZ: 08/06/18

2. List any individual or entity that owns a beneficial interest of 10% or more and/or controls the applicant or licensee. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure. Attach additional sheets as needed. Disclose all controlling persons and members, shareholders or general partners who own a beneficial interest of 10% or more of the applicant or licensee.

Last	First	Middle	Title	%Owned	Mailing Address	City	State	Zip
CARPENTER	CRY	WILLIAM	man/own.	50%	12856 W. SABINO CANYON PARKWAY	Box 790	MT. LEMMON, AZ	85619
CARPENTER	TERRI	SUE	man/own.	50%	12856 W. SABINO CANYON PARKWAY	Box 790	MT. LEMMON, AZ	85619
CARPENTER	CRY	WILLIAM	man.	0	12856 W. SABINO CANYON PARKWAY	Box 790	MT. LEMMON, AZ	85619
Carpenter, H&W, Comm. Prop. w/205 (Carpenter & Terris Carpenters - Trustees)								

(Attach additional sheet if necessary)

**SECTION 7 Probate, Receiver, Bankruptcy Trustee, Assignment, or Divorce Decree of an existing liquor license A.R.S. §4-204**

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD, AND \$22 PROCESSING FEE PER CARD.

1. Current Licensee's Name: \_\_\_\_\_

(Exactly as it appears on the license) Last First Middle

2. Assignee's Name: \_\_\_\_\_

Last First Middle

3. License Number: \_\_\_\_\_

**ATTACH A COPY OF THE DOCUMENT THAT SPECIFICALLY ASSIGNS THE LIQUOR LICENSE TO THE ASSIGNEE.**

**SECTION 8 Government (for Cities, Towns or Counties only)**

1. Government Entity: \_\_\_\_\_

2. Person/Designee: \_\_\_\_\_  
Last First Middle Daytime Contact Phone #

**SECTION 9 Person to Person Transfer ARS§4-203(C), (D), (G)  
(Bar and Liquor Stores only – Series 06, 07, and 09)**

1. License #: \_\_\_\_\_

2. Individual Owner/Agent Name: \_\_\_\_\_  
Last First Middle

3. Ownership Name: \_\_\_\_\_  
(Exactly as it appears on the license)

4. Current Business Name: \_\_\_\_\_  
(Exactly as it appears on the license)

5. Business Location Address: \_\_\_\_\_  
Street City State County Zip

6. Current Daytime Phone: \_\_\_\_\_ Primary Email Address: \_\_\_\_\_

7. Does current licensee intend to operate the business while this application is pending? ☐ Yes ☐ No

8. I, (Signature): \_\_\_\_\_ authorize the transfer of this license to the applicant.

**NOTARY**

I (Print Full Name) \_\_\_\_\_ hereby declare that I am the Individual Agent, Owner,  
Or Controlling Person on the stated license and location.

Signature: \_\_\_\_\_ State of \_\_\_\_\_ County of \_\_\_\_\_  
The foregoing instrument was acknowledged before me this

My Commission Expires on: \_\_\_\_\_ Date \_\_\_\_\_ Day of \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary

**SECTION 10 Location Transfer– Current Licensee Information ARS§4-203(C), (D), (G)  
(Bar and Liquor Stores only – Series 06, 07, and 09)**

1. Current Business: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
(exactly as it appears on license)

2. New Business: Name: \_\_\_\_\_  
Address: \_\_\_\_\_

**SECTION 11 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 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) 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 03
- d) Craft Distillery (A.R.S. §4-205.10) Series 18

- e) Government license (A.R.S. §4-205.03) Series 05
- f) Playing area of a golf course (A.R.S. §4-207 (B)(5))
- g) Wholesaler/Distributor Series 04
- h) Farm Winery Series 13
- i) Producer Series 01

1. Distance to nearest School: 9.31 miles  
(If less than one (1) mile, note footage)

Name of School: CONRAD K-8 School  
Address: 340 E. WILDS RD.  
TULSON, AZ 85739

2. Distance to nearest Church: 9.39 miles  
(If less than one (1) mile, note footage)

Name of Church: SANTA CATALINA CATHOLIC  
Address: 1480 N. ORACLE RD.  
TULSON, AZ 85739

**SECTION 12 Business Financials A.R.S. §4-202(F)**

1. I am the:

- ☒ Tenant: a person who holds the lease of a property; a lessee.
- ☐ Sub-tenant: a person who holds a lease which was given to another person (tenant) for all or part of a property.
- ☐ Owner
- ☐ Purchaser
- ☐ Management Company

2. If the premises is leased give lessors:

Name: LEMMON MOUNTAIN HOLDINGS  
Address: 12856 N. SABINO CANYON PARKWAY Box 404  
MT. LEMMON, AZ 85619  
Street City State Zip

3. What is the penalty if the lease is not fulfilled? \$ 0 or Other: CASH ON HAND COLLECT

4. Total money borrowed for the Business, not including lease? \$ 0 (CASH ON HAND CONTRIBUTION)

Please List Lenders/People you owe money to for business.

Last	First	Middle	Amount Owed	Mailing Address	City	State	Zip
N/A			N/A	N/A			

(Attach additional sheet if necessary)

5. Has a license or a transfer license for the premises on this application been denied by the state within the past year?

☐ Yes ☒ No

If yes, attach explanation.

6. Does any spirituous liquor manufacturer, wholesaler, or employee have an interest in your business?

☐ Yes ☒ No

If yes, attach explanation.

### SECTION 13 Diagram of Premises

Check ALL boxes that apply to your business:

☐ Walk-up or drive-through windows

☐ Patio: Contiguous

☐ Patio: Non-Contiguous within 30 feet

1. Is your licensed premises now closed due to construction, renovation or redesign or rebuild?

☐ Yes ☒ No If yes, what is your estimated completion date? N/A

2. What type of business will this license be used for? (be Specific) General Store / Gift Shop

3. Please attach a diagram of the premises which clearly shows only the areas where spirituous liquor will be sold, served, consumed, dispensed, possessed or stored. Include entrances, exits, interior walls, bar areas, dining areas, dance floor, stage, game room and kitchen.

## DO NOT INCLUDE

Parking lots, living quarters or areas where business is not conducted under this liquor license. Please identify which orientation is North on the diagram.

4. 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.

# ATTACH DIAGRAM

**IMPORTANT NOTE:** As stated in A.R.S. §4-207.01 (B), it is the licensee's 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. A \$50.00 fee for the inspection will be due and payable upon submitting this application.)

5a. 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)

5b. Provide a restaurant operation plan.



SECTION 14 SIGNATURE BLOCK

NOTARY	
I (Print Full Name) <u>Cristy William Carpenter</u>	hereby declare that I am the Individual Agent, Owner, Or Controlling Person on the stated license and location.
Signature: <u>[Signature]</u>	State of <u>Arizona</u> County of <u>Pima</u>
My Commission Expires on: <u>06/05/2021</u>	The foregoing instrument was acknowledged before me this
Date	<u>20<sup>th</sup></u> Day of <u>August</u> , <u>2018</u>
	Day Month Year
	<u>[Signature]</u> Signature of Notary

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.

18 AUG 24 Ltr. Lic. PM1254

