

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

May 2, 2019

Gregory Lee Wexler Whiskey Roads 6088 W. Pavillions Drive, Ste No. 2 Tucson, AZ 85743

RE:

Arizona Liquor License Job No.: 59990

d.b.a. Whiskey Roads

Dear Mr. Wexler:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 7, Beer and Wine Bar, which was received in our office on April 5, 2019. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, May 21, 2019, 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: 4-10-2019	Date of Posting Removal:	-30-19
Whiskey Roads Applicant's Name: Wexler	Gregory	Lee
Last	First	Middle
Business Address: 2265 W. Ina Road	Tucson	85741
Street License #: 59990	City	proposed to be proposed to be
I hereby certify that pursuant to A.R.S. 4-201, I posted relicensed by the above applicant and said notice was Brian J. Rutlepge	posted for at least twenty (20) days.	proposed to be
Print Name of City/County Official	Title	Phone Number
B Signature		5-1-2019 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.





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Melissa Manriquez Deputy Clerk Administration Division 130 W. Congress, 5th 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

TO:	Development Services, Zoning Division		
FROM:	Alina Bárcenas Administrative Support Specialist Senior		
DATE:	4/5/2019		
RE:	Zoning Report - Application for Liquor License		
Attached is	the application of:		
Gregory Lee d.b.a. Whisk 2265 W. Ina Tucson, AZ	key Roads a Road		
Arizona Liqu Series <u>12, F</u> New Licens Person Tran Location Tra	e <u>X</u> nsfer		
ZONING RE	EPORT DATE: 4/8/19		
Will current	zoning regulations permit the issuance of the license at this location?		
Yes 🗖	No □		
If No, pleas	e explain:		
	Pima County Zopting Inspector		

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

19-09-9356

State of Arizona Department of Liquor Licenses and Control

Created 04/04/2019 @ 04:45:18 PM

Local Governing Body Report

LICENSE

Number:

Type:

Expiration Date:

012 RESTAURANT

Name:

WHISKEY ROADS

State:

Pending

Issue Date:

Original Issue Date: Location:

2265 W INA ROAD

TUCSON, AZ 85741

USA

Mailing Address:

6088 W PAVILLIONS DRIVE

STE 2

TUCSON, AZ 85743

USA.

Phone:

(520)333-8522

Alt. Phone:

Email:

JOSHUA.ARVIZO@ICLOUD.COM

AGENT

Name:

GREGORY LEE WEXLER

Gender:

Male

Correspondence Address: 6088 W PAVILLIONS DRIVE

STE 2

TUCSON, AZ 85743

USA

Phone:

(520)333-8522

Alt, Phone:

Email:

JOSHUA.ARVIZO@ICLOUD.COM

OWNER

HROSTINATORICANOFIN

Name:

WHISKEY ROAD LLC

Contact Name:

GREGORY LEE WEXLER

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number: Incorporation Date:

1947924

06/06/2019

Correspondence Address: 6088 W PAVILLIONS DRIVE

STE 2

TUCSON, AZ 85743

USA

Phone:

(520)333-8522

Alt. Phone:

Email:

JOSHUA.ARVIZO@ICLOUD.COM

Officers / Stockholders

Name:

Title:

% Interest:

GREGORY LEE WEXLER

ManagingMember

State of Incorporation: AZ

100.00

WHISKEY ROAD LLC - ManagingMember

Name:

GREGORY LEE WEXLER

Gender:

Male

Correspondence Address: 6088 W PAVILLIONS DRIVE

STE 2

TUCSON, AZ 85743

USA

Phone:

(520)333-8522

Alt. Phone:

Email:

JOSHUA.ARVIZU@ICLOUD.COM

APPLICATION INFORMATION

Application Number:

59991

Application Type:

New Application

Created Date:

04/04/2019

QUESTIONS & ANSWERS

012 Restaurant

If you intend to operate the business while your application is pending you will need an interim permit pursuant to A.R.S.§4-203.01. Would you like to apply for an Interim Permit? If yes, after completing this application, please go back to your Licensing screen, under New License Application choose "Interim Permit" from the drop-down window.

2) Have you submitted a questionnaire? Each person listed must submit a questionnaire and mail in a fingerprint card along with a \$22, processing fee per card.

Are you a tenant? (A person who holds the lease of a property; a lessee) 5)

A Document of type LEASE is required.

6) Is there a penalty if lease is not fulfilled?

Yes

What is the penalty?

\$15,000.00

7) Are you a sub-tenant? (A person who holds a lease which was given to another person (tenant) for all or part of a property)

No

8) Are you the owner?

No

9) Are you a purchaser?

No

10) Are you a management company?

No

11) Is the Business located within the incorporated limits of the city or town of which it is located?

No

12)

If no, in what City, Town, County or Tribal/Indian Community is this business located? PIMA COUNTY

What is the total money borrowed for the business not including the lease? Please list lenders/people owed money for the business.

ZERO

13) Have you provided a diagram of your premises?

Yes

14) Is there a drive through window on the premises?

Nο

15) If there is a patio please indicate contiguous or non-contiguous within 30 feet.

CONTIGUOUS

16) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?

Yes

If yes, what is your estimated completion date?

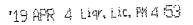
07/01/2019

17) Have you provided a Restaurant Operation Plan form?

Yes

18) Have you provided a Records Required for Audit form?

Yes





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

DLLC USE ONLY	
Job #: 000 1	
7.11	

RESTAURANT OPERATION PLAN

Grill	American Ronge 36 Chorbrother	
Oven	American Range 6 Burner Steve B Oven	
Freezer	Occast 66 Dolable poor Precises	
Refrigerator	Eucrest wall in Fridge	
Sink	senerce Hord wash Sink	
Dish Washing Facilities	Eco Lab Double Rock Dishwasher	
Food Preparation Counter (Dimensions)	everest 72' Rean in with preplable	
Other		
List the <u>seating capacity</u> for: a. Restaurant dining area o (Do not include patio sec		
b. Bar area of your premise	[+ 267035 74] 60 8	
c. Total dining and bar sea	fing capacity of your premises: [= 5670 3674] 216	
What Type of dinnerware and utensils are utilized within your restaurant?		
Reusable	Disposable 🔲 Both	
F Wooden	Does your restaurant have a bar area that is distinct and separate from the dining area?	
	ar area that is distinct and separate from the dining area?	
Does your restaurant have a ba	public floor space does this area cover?) _20 _%	
Does your restaurant have a ba		
Does your restaurant have a ba	public floor space does this area cover?) _20 _ %	

Individuals requiring ADA accommodations call (602) 542-9027.

8.		ant contain any games, televisi		
	14 TV'S	at types and how many (exam	pies: 4-17 s, 2-root tables, 1-7	٦.
	.	LAL P	Z 0224 WIW	Citive
	2 corn x			
	Z Corn v	iore osera)		
9.		entertainment or dancing? and how often 8.5	YES No	
		eek, Karaoke-2 x a month, Live Ba	nd-1 x a month, etc.)	
	D) 2x	a wiere		
	Meraone	zy awek		
	<u> </u>	and 14 a week		
10.	Use space below	to list how many employees fo	r each position to fully staff yo	our business.
		Position	How many	
		Cooks	14	
		Bartenders	16	
		Hostesses	ધ	
		Managers	2-	
		Servers	16	
		Other (
		Other (
		Other (
I,I have	Gregory e read this applied	ticster h		APPLICANT filing this application d complete.
		<u>NC</u>	OTARY OTARY	OFFICIAL SEAL
Stat	e of Wretor	County of Mari	COOC WIN	ELENA MARIE GONZALES OTARY PUBLIC - State of Arizoria MARICOPA COUNTY
		ent was acknowledged before	10	My Comm Existes February, 12, 2020 2019
ì	Commission Expire		(Xelenally	Month Year Wals Natary Public Park

'19 APR 4 LIG. M 4 53



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RECORDS REQUIRED FOR AUDIT

Applies to Series 11 (Hotel/Mole! W/Restaurant) & Series 12 (Restaurant) Only

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DLLC RECORDS

In the event of an audit, you will be asked to provide to the Department any documents necessary to determine compliance with A.R.S. §4-205.02(G). Such documents requested may include however, are not limited to:

- 1. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises.
- 2. A list of all food and liquor vendors
- 3. The restaurant menu used during the audit period
- 4. A price list for alcoholic beverages during the audit period
- 5. Mark-up figures on food and alcoholic products during the audit period
- 6. A recent, accurate inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
- 7. Monthly Inventory Figures beginning and ending figures for food and liquor
- 8. Chart of accounts (copy)
- 9. Financial Statements-Income Statements-Balance Sheets
- 10. General Ledger
 - A. Sales Journals/Monthly Sales Schedules
 - 1) Daily sales Reports (to include the name of each waitress/waiter, bartender, etc. with sales for that day)
 - 2) Daily Cash Register Tapes Journal Tapes and Z-tapes
 - 3) Dated Guest Checks
 - 4) Coupons/Specials/Discounts
 - 5) Any other evidence to support income from food and liquor sales
 - B. Cash Receipts/Disbursement Journals
 - 1) Daily Bank Deposit Slips
 - 2) Bank Statements and canceled checks
- 11. Tax Records
 - A. Transaction Privilege Sales, Use and Severance Tax Return (copies)
 - B. Income Tax Return city, state and federal (copies)
 - C. Any supporting books, records, schedules or documents used in preparation of tax returns
- 12. Payroll Records
 - A. Copies of all reports required by the State and Federal Government
 - B. Employee Log (A.R.S. §4-119)
 - C. Employee time cards (actual document used to sign in and out each work day)
 - D. Payroll records for all employees showing hours worked each week and hourly wages

- 13. Off-site Catering Records (must be complete and separate from restaurant records)
 - A. All documents which support the income derived from the sale of food off the license premises.
 - B. All documents which support purchases made for food to be sold off the licensed premises.
 - C. All coupons/specials/discounts

The sophistication of record keeping varies from establishment to establishment. Regardless of each licensee's accounting methods, the amount of gross revenue derived from the sale of food and liquor must be substantially documented.

REVOCATION OF YOUR LIQUOR LICENSE MAY OCCUR IF YOU FAIL TO COMPLY WITH A.P. S. \$4-210(A)7 AND A.R. S. \$4-205.02(G).

A.R.S. §4-210(A)7

The licensee fails to keep for two years and make available to the department upon reasonable request all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of spirituous liquors and, in the case of a restaurant or hotel-motel licensee, all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of food.

A.R.S. §4-205.02(G)

For the purpose of this section:

1."Restaurant" means an establishment which derives at least forty percent (40%) of its gross revenue from the sale of food 2. "Gross revenue" means the revenue derived from all sales of food and spirituous liquor on the licensed premises, regardless of whether the sales of spirituous liquor are made under a restaurant license issued pursuant to this section or under any other license that has been issued for the premises pursuant to this article.



NOTARY		
X (Signature) Controlling Person / Age to My commission expires on: 2-12-2020	State of Out County of Maritime and Signature of NOTAKY PUBLIC COUNTY OF The Indiana Signature of NOTAKY PUBLIC COUNTY OF THE STATE OF THE SIGNATURE OF NOTAKY PUBLIC COUNTY OF THE STATE OF THE SIGNATURE OF NOTAKY PUBLIC COUNTY OF THE STATE OF THE SIGNATURE OF NOTAKY PUBLIC COUNTY OF THE STATE OF THE SIGNATURE OF NOTAKY PUBLIC COUNTY OF THE SIGNATURE OF THE	

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH RECORDS REQUIRED BY THE STATE