

# **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

June 11, 2019

Ebony Evette Haywood Arivaca Soul P.O. Box 6399 Amado, AZ 85645

RE:

Arizona Liquor License Job No.: 57059

d.b.a. Arivaca Soul

Dear Ms. Haywood:

Enclosed is a copy of the Affidavit of Posting relative to your Liquor License Application for a Series 12, Restaurant, which was received in our office on May 16, 2019. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, July 2, 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: $0 > -20 - (1)$	Date of Posting Remov	al: <u>06~10</u>	~/)	
Arivaca Soul Applicant's Name: Haywood Last	Ebony First		Evette Midd	
Business Address: 15785 W. Universal Ranch Roa	ad	Arivaca	85601	
Street		City	Zip	屋(
License #: <b>57059</b>				1.19m1036FCQXGFB
I hereby certify that pursuant to A.R.S. 4-201, I posted notice licensed by the above applicant and said notice was poste			sed to be	OWELLAND
Greg Coun	Proposa Corve	r 5.20-20	13-6520	===
Print Name of City/County Official	Process Server	Ph	one Number	
Box		n	6-10-19	
Signature		D	ate 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.



#### Melissa Manriquez Deputy Clerk

# Pima County Clerk of the Board

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TO;	Development Services, Zoning Division
FROM:	Alina Bárcenas Administrative Support Specialist Senior
DATE:	5/17/2019
RE:	Zoning Report - Application for Liquor License
Attached is t	he application of:
Ebony Evett d.b.a. Arivad 15785 W. U Arivaca, AZ	a Soul niversal Ranch Road
Arizona Lique Series 12, R New License Person Tran Location Tra	sfer
ZONING RE	PORT DATE: 0 4 19
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

MOS-1940BORPECIAL FIELD (1/2)

## State of Arizona **Department of Liquor Licenses and Control**

Created 05/15/2019 @ 04:54:24 PM

Local Governing Body Report

#### **LICENSE**

Number:

Type:

012 RESTAURANT

Name:

ARIVACA SOUL

State:

Pending

Issue Date:

Expiration Date:

Original Issue Date:

Location:

15785 W UNIVERSAL RANCH ROAD

ARIVACA, AZ 85601

USA

Mailing Address:

PO BOX 6399

AMADO, AZ 85645

USA

Phone:

(520)284-7355

Alt. Phone:

Email:

ARIVACASOUL@GMAIL.COM

#### AGENT

Name:

EBONY EVETTE HAYWOOD

Gender:

Female

Correspondence Address: PO BOX 6399

AMADO, AZ 85645

USA

Phone:

(520)284-7355

Alt. Phone:

Email:

ARJVACASOUL@GMAIL.COM

#### **OWNER**

Name:

ARIVACA SOUL LLC

Contact Name:

EBONY EVETTE HAYWOOD

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number:

1882119

State of Incorporation: AZ

Incorporation Date:

08/15/2018

Correspondence Address: PO BOX 6399

AMADO, AZ 85645

USA

Phone:

(520)284-7355

Alt. Phone:

Email:

ARIVACASOUL@GMAIL.COM

Officers / Stockholders

Name:

Title:

% Interest:

Page 1 of 3

ETA SOUL TRUST

Managing Member

100.00

#### **ETA SOUL TRUST - Trustee**

Name:

EBONY EVETTE HAYWOOD

Gender:

Female

Correspondence Address: PO BOX 6399

AMADO, AZ 85645

USA

Phone:

(520)284-7355

Alt. Phone:

Email:

ARIVACASOUL@GMAIL.COM

#### ARIVACA SOUL LLC - Managing Member

Name:

**ETA SOUL TRUST** 

Contact Name:

EBONY EVETTE HAYWOOD

Type:

TRUST

AZ CC File Number:

State of Incorporation:

Incorporation Date:

Correspondence Address: PO BOX 6399

AMADO, AZ 85645

USA

Phone:

(520)284-7355

Alt. Phone:

Email:

ARIVACASOUL@GMAIL.COM

#### APPLICATION INFORMATION

Application Number:

57059

Application Type:

**New Application** 

Created Date:

03/21/2019

# **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.

Yes

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.

Ye:

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

Yes

A Document of type LEASE is required.

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

No

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?

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

Arivaca AZ PIMA COUNTY

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

1200.00 Square Inc

13) Have you provided a diagram of your premises?

Yes

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

No

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? No

17) Have you provided a Restaurant Operation Plan form?

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

Yes

#### **DOCUMENTS**

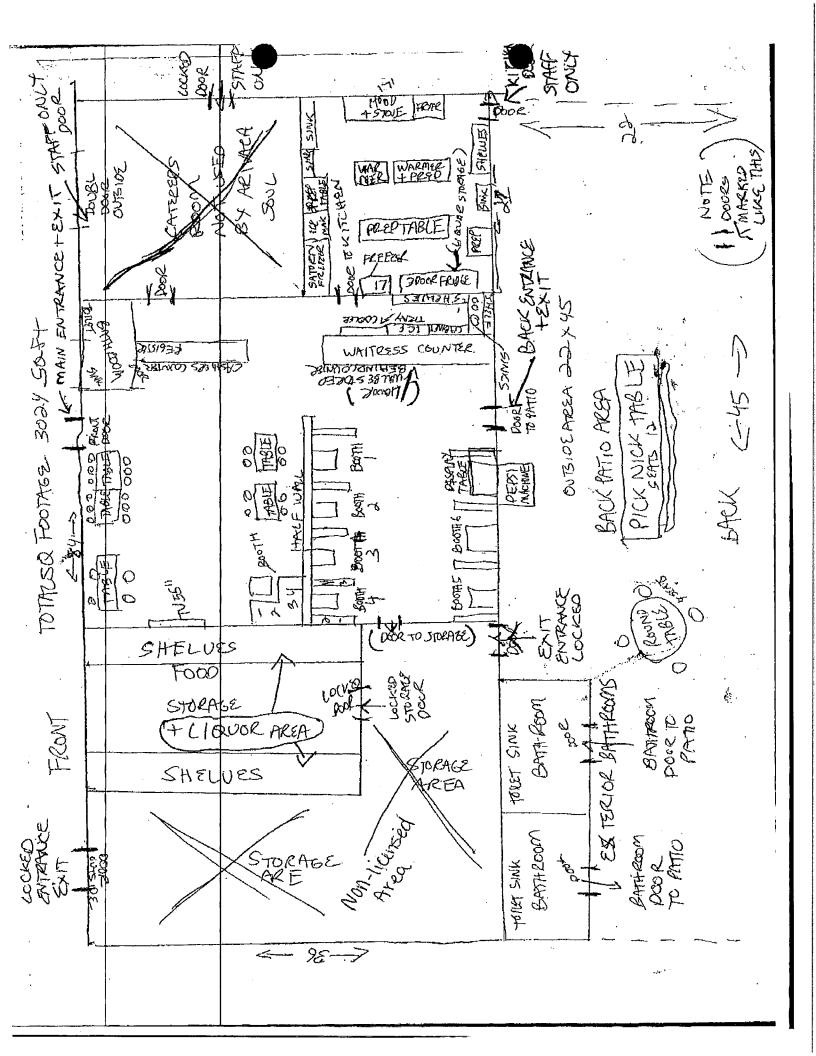
DOCUMENT TYPE	FILE NAME	UPLOADED DATE
MENU	Arivaca Soul Menu Jan 2019.pdf	03/21/2019
LEASE	lease to arivaca soul.pdf	03/27/2019
QUESTIONNAIRE	Questionaire for Bere and Wine Permit.pdf	03/27/2019
RECORDS REQUIRED FOR AUDIT	records required sign.pdf	03/27/2019
DIAGRAM/FLOOR PLAN	Building drawingpdf	04/01/2019
RESTAURANT OPERATION PLAN	Operation Plan.pdf	04/01/2019
	updated questionnaire form with licencee info etc.pdf	04/12/2019
	building diagram and total sq footage.pdf	04/12/2019
	Drivers Liesence Ebony.jpg	04/12/2019
	Alien Status signed.pdf	04/12/2019
	Restauraunt Operations Plan 4 25 19 reupload.pdf	04/25/2019
	Alien Status all pages signed 4 25 19 rc upload.pdf	04/25/2019

# ARIVACA SOUL LLC OWNERSHIP FLOW CHART

ARIVACA SOUL LLC WEMBER MANAGER IS ETA SOULTRUST 100%

ONLY TRUSTEE OF ETA SOUL TRUST IS

EBONY E HAYWOOD





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

HIN II IN III E

	RESTAURANT OPERATION PLAN	
DITC ARE ONTA TIC	ENSE # 57059	
Name of restaurant (Please prices of the following items:)	ocity of your: (If you attached a legible	le copy of your equipment list, only
Grill	none	
Oven	0 10	ENTR 2 OVEN
Freezer	SATIRAL 274	31'× 56"
Refrigerator (2)	TROUGSON 75	×31"×56"
Sink	TROVL 75"	31" x 60"
Dish Washing Facilities	STANLESS YSINK	11FtxJFT
Food Preparation Counter (Dimensions)	1070'x 36" (2) 30.	" x 60"
Other HENNY PENN	WARMER 29x3	<b>5</b> ))
List the <u>seating capacity</u> for:  a. Restaurant dining area of ( <u>Do not include patio se</u> b. Bar area of your premise	nner, and Nonalcoholic beverages). of your premises: aling)	[ 60 ] [+ 0 ]
Reusable	tensils are utilized within your restaurd Disposable [7] Bot	th 
	or area that is distinct and separate from public floor space does this area con	
	c premises is used primarily for restau top tables, or game area.) <sup>80</sup>	rant dining? %
15	Page 1 of 2	

8.	Does your resto	aurant contain ar	ny <u>games, televisions, or c</u> now many (examples: 4-1	any other entertainme V's, 2-Pool Tables, 1-Vi	nt? TYES ENO
	1 Fi A-	SCREEN			•
		Success			
	Do you have li	ive entertainmen	it or dancing? 🔲 YES	✓ No	
•	(If yes, what ty				h, Live Band-1 x a month,
	etc.)				,
0.	Use space bek	ow to list how mo	ny employees for each p	position to fully staff yo	ur business.
			Position	How many	
		Cooks		2	
		Bartenders		0	
		Hostesses	•	1	
	•	Managers		0	
		Servers		2	
		Other (	)		
		Other (	)		
		Other (	)		
		\ <u></u>			······································
E	bony E Haywo	od for Arivaca	Soul LLC_, hereby d	eclare that I am the /	APPLICANT filing this application
ha			contents and all statem	ents true, correct and	l complete.
<u></u>	2 5	. N.	***		
*□	(Signature of	APPLICANT)		KIN Notary	MBERLY A DUNSON Public State of Arizona
			NOTARY	Му	Pima County Commission Expires May 23, 2020
Sta	ite of <u>Ariza</u>	10 County of	Pina	· ald a real first free entrance	
The	e foregoing instru	ement was ackro	owledged before me thi	s 3 day of 10	Muary 2019 Manth X Year
Му	Commission Exp	mes Orr	VWZOZO	Signature	distançante
				<del>- / / -</del>	:
11/	2015		Page 2 of 2		•
		Individu	als requiring ADA accommodal	ons call (602) 542-9027.	



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

RECORDS REQUIRED FOR AUDIT
Applies to Series 11 (Hotel/Motel W/Restaurant) & Series 12 (Restaurant) Only

#### MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DILC 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) Daliy 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.R.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.

N	OTARY
1, (Print Full Name) Ebony E. Hay wood	, have read and understand all aspects of this statement
X (Signature) Z :   (L	State of AHZONA County of Pinac the foregoing instrument was acknowledged before me this
My commission expires on: 23 Way 2020	3 of January 2019 Month Year
KIMBERLY A DUNSON Notary Public, State of Arizona Pima County My Continues for Expires	Agriculture of NOTARY PUBLIC
May 23, 2020	

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

# **ARIVACA SOUL**

15785 W Universal Ranch Rd ,Arivaca ,AZ ,85601 Thursday - Saturday 3 Pm to 9 Pm Sunday 12 PM to 7 PM 520-284-7355

Chilli Cheese Fries
Fried Chicken Wings Flavors BBQ, Buffalo, Sweet Chili 6 Chicken Wing served \$8.00 with Carrots and Celery your Choice in Flavor
Mozerella Sticks 6 Mozzarella Sticks with Ranch or Marinara
<u>Fried Zucchini</u>
Bacon Ranch Fries French Fries topped with Creamy Ranch Bacon Bit Sauce \$6.00 topped with Cheese
Chicken Strip Basket 4 Chicken Strips with French Fries & Slaw
2 Piece Meat Plates Served with two pieces 1 Type of your choice of meat from the A la Carte Menu and Your Choice of Two Sides Add \$1.00 for Fried Green Tomatoes when available
3 Piece Meat Plate Your Choice Choice of 2 Types of Meat From The A La Carte \$14.00 Menu , Choose any 3 Sides, Sweet Corn Bread * 3 Pieces of Meat Total , Choice of Two Types Add \$1.00 for Fried Green Tomatoes when available
4 Pieces Meat Plate Your Choice of 4 Pieces of Meat from The A la Carte Menu , \$25.00 any 3 Sides, Corn Bread, Drink & Desert  * 4 Pieces of Meat Total You can choose up to 3 Types of Meat Add \$1.00 for Fried Green Tomatoes when available

1 Piece Meat 1 Piece of Fish or Chicken with 1 Side
Choice of 4 Standard Sides Choice of 4 Sides served with Combread & Drink \$12.00
· · · · · · · · · · · · · · · · · · ·
Pulled Pork Served with French Fries & Cole Slaw
Hot Links Served with French Fries & Cole Slaw
Barbecue Shredded Chicken Served with French Fries & Cole Slaw\$8.00
<u>Dirty Pork Sandwich</u> Pulled Pork topped with Cole Slaw & Side of French Fries \$8.00
<u>Cod Filets</u>
Cat Fish Fillets or Nuggets (Full Nugget Serving)
Pork Chops
Smothered Pork Chops
Hot Links
Fried Chicken
Fried Chicken All White Meat
Smothered Chicken Chicken Smothered in Gravy

Cat Fish Nuggets Served with Fries, Drink & Fruit Snack
Grilled Cheese Sandwich Served with Fries , Drink & Fruit Snack
2 Chicken Strips Served with Fries, Drink & Fruit Snack
Hot Dog Served with Fries , Drink & Fruit Snack
<u>Mac N Cheese</u>
<u>Collard Greens</u>
<u>Eried Okra</u>
<u>Cole Slaw</u>
<u>Home Fries</u>
Mashed Potatoes & Gravy\$3.00
<u>Cabbage</u>
<u>Green Beans</u> \$3.00
<u>Sweet Yams</u> \$3.00
<u>Corn</u> \$3.00
Red Beans & Rice
<u>Chilli Beans</u>
Fried Green Tomatoes

A S BY	
Home Made Kool Aid (Various Flavors) 1 Refill	\$2.00
Soda Coke, Sprite. Dr. Pepper, Diet Coke, 1 Refill	\$2.00
<u>Pretty Pink Punch</u> Tropical Punch Kool Aid , Slices of Lemon & Strawberries, Sprite, Pink Lemonade all mixed up!	\$2.50
Muddy Waters aka Arnold Palmer 1/2 Iced Tea 1/2 Lemonade	\$2.50
Banana Pudding Banana Pudding with layers of Custard, Cookies and Fresh Banana Slices topped with whipped cream	\$4.00
<u>Cheese Cake Slice</u> Sweet and Creamy with a Graham Cracker Crust topped with Whipped Cream or Strawberries	\$4.00
<u>Chocolate Kisses</u> Hershey's Cake With Vanilla Ice Cream, Whipped Cream, Chocolate Syrup, Chopped Nuts.	\$5.00
Blonde Bliss Vanilla Cake with Vanilla Ice Cream , Whipped Cream, Caramel Syrup, Chopped Nuts	\$5.00
Sweet Potato Pie	\$3.00

<sup>&</sup>quot;Allergy statement: Menu items may contain or come into contact with WHEAT, EGGS, PEANUTS, TREE NUTS, and MILK. For more information, please speak with a manager."

# THANK YOU FOR VISITING ARIVACA SOUL FOOD!

<sup>• &</sup>quot;Consuming raw or undercooked meats, poultry, seafood, shellfish or eggs may increase your risk of foodborne illness."