

Pima County Clerk of the Board

Julie Castañeda

Administration Division 130 W. Congress, 1st 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 16, 2020

Jason Fred Kafcas Fat Willy's Family Sports Grill 650 N. Hawes Road Mesa, AZ 85207

RE:

Arizona Liquor License Job No.: 117561

d.b.a. Fat Willy's Family Sports Grill

Dear Mr. Kafcas:

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 August 20, 2020. The Hearing before the Pima County Board of Supervisors has been scheduled for Tuesday, October 6, 2020, 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: _	8/21/2020	Date of Posting Remov	val: 9/	10/2020	
Applicant's Name	Fat Willy's Family Sports Grill Kafcas Lost	Jason First	Professional Control of the Control	Fred	dle
Business Address:	8701 S. Kolb Road		Tucson	85756	mer.
	Street		City	Zip	H
License #: 11756	61				Z
	at pursuant to A.R.S. 4-201, I posted notice			osed to be	
	EVEN MONTANO	Process Server		51-4372	
	int Name of City/County Official	Title	Pf	none Number	
<u>(</u>	Sta Hanton Signature		г	<u>9/10/2020</u> 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.



Pima County Clerk of the Board

Julie Castañeda

Melissa Manriquez Deputy Clerk

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TO:	Development Services, Zoning Division
FROM:	Melissa Whitney Administrative Support Specialist Senior
DATE:	8/21/2020
RE:	Zoning Report - Application for Liquor License
Attached is t	the application of:
Jason Fred I d.b.a. Fat W 8701 S. Kolk Tucson, AZ	illy's Family Sports Grill Road
Series 12, R New License	$\frac{\overline{X}}{X}$
Person Tran Location Tra	
ZONING RE	PORT DATE: 7/1/2020
Will current z	zoning regulations permit the issuance of the license at this location?
Yes	No 🗆
If No, please	explain:
-	

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

HESTAMIOOTHCOKUFE

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

Created 08/21/2020 @ 08:46:51 AM

Local Governing Body Report

LICENSE

Number:

Type:

012 RESTAURANT

Name:

FAT WILLY'S FAMILY SPORTS GRILL

State:

Pending

Issue Date:

Expiration Date:

Original Issue Date:

Location:

8701 S KOLB ROAD

TUCSON, AZ 85756

USA

Mailing Address:

650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(520)574-5800 (480)309-0492

Alt. Phone: Email:

JASON@FATWILLYSGOLFAZ.COM

AGENT

Name:

JASON FRED KAFCAS

Gender:

Male

Correspondence Address: 650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(480)309-0492

Alt. Phone:

Email:

JASON@FATWILLYSGOLFAZ.COM

OWNER

Name:

FAT WILLY'S VOYAGER LLC

Contact Name:

JASON FRED KAFCAS

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number:

23096843 06/16/2020

Incorporation Date:

State of Incorporation: AZ

Correspondence Address: 650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(480)309-0492

JASON@FATWILLYSGOLFAZ.COM

Officers / Stockholders

Name:

Title:

Page 1 of 3

20-17-9402 State of Arizona **Department of Liquor Licenses and Control**

Created 08/20/2020 @ 09:24:55 AM

Local Governing Body Report

LICENSE

Number:

Type:

012 RESTAURANT

Name:

FAT WILLY'S FAMILY SPORTS GRILL

State:

Pending

Issue Date:

Expiration Date:

Original Issue Date:

Location:

8701 S KOLB ROAD TUCSON, AZ 85756

USA

Mailing Address:

650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(520)574-5800

Alt. Phone:

(480)309-0492

Email:

JASON@FATWILLYSGOLFAZ.COM

AGENT

Name:

JASON FRED KAFCAS

Gender:

Male

Correspondence Address: 29111 N 138TH PLACE

SCOTTSDALE, AZ 85262

USA

Phone:

(480)309-0492

Alt. Phone:

₹ Email:

JASON@FATWILLYSGOLFAZ.COM

OWNER

Name:

FAT WILLY'S VOYAGER LLC

Contact Name:

JASON FRED KAFCAS

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number:

23096843

State of Incorporation: AZ

Incorporation Date:

06/16/2020

Correspondence Address: 650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(480)309-0492

Alt. Phone:

Email:

JASON@FATWILLYSGOLFAZ.COM

Officers / Stockholders

Name:

AMENDMENT

State of Arizona Department of Liquor Licenses and Control

Created 08/19/2020 @ 02:50:30 PM

Local Governing Body Report

LICENSE

Number:

Type:

012 RESTAURANT

Name:

FAT WILLY'S FAMILY SPORTS GRILL

State:

Pending

Issue Date:

Expiration Date:

Original Issue Date:

Location:

8701 S KOLB ROAD

TUCSON, AZ 85756

USA

Mailing Address:

650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(520)574-5800

Alt. Phone:

(480)309-0492

Email:

JASON@FATWILLYSAZ.COM

AGENT

Name:

JASON FRED KAFCAS

Gender:

Male

Correspondence Address: 29111 N 138TH PLACE

SCOTTSDALE, AZ 85262

USA

Phone:

(480)309-0492

Alt. Phone:

Email:

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OWNER

Name:

FAT WILLY'S VOYAGER LLC

Contact Name:

JASON FRED KAFCAS

Type:

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AZ CC File Number:

23096843

State of Incorporation: AZ

Incorporation Date:

06/16/2020

Correspondence Address: 650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(480)309-0492

Alt. Phone:

Email:

JASON@FATWILLYSAZ.COM

Officers / Stockholders

Name:

Title:

% Interest:

51.00 49.00

FAT WILLY'S VOYAGER LLC - MANGER

Name:

JAMES DION CONNOR

Gender:

Male

Correspondence Address: 650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(480)518-0976

Alt. Phone:

Email:

JIM@FATWILLYSAZ.COM

FAT WILLY'S VOYAGER LLC - MEMBER

Name:

JASON FRED KAFCAS

Gender:

Male

Correspondence Address: 650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(480)309-0492

Alt. Phone:

Email:

JASON@FATWILLYSGOLFAZ.COM

FAT WILLY'S VOYAGER LLC - MEMBER

Name:

GWEN A GELENITES

Gender:

Female

Correspondence Address: 650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(708)359-1705

Alt. Phone:

Email:

GGELENITES2002@GMAIL.COM

AMENDMENT

Sarata in as

JASON FRED KAFCAS **GWEN A GELENITES** JAMES DION CONNOR **MEMBER MEMBER MANGER**

51.00 49.00

FAT WILLY'S VOYAGER LLC - MANGER

Name:

JAMES DION CONNOR

Gender:

Male

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Name:

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Male

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SCOTTSDALE, AZ 85262

Phone:

(480)309-0492

Alt. Phone:

Email:

JASON@FATWILLYSAZ.COM

FAT WILLY'S VOYAGER LLC - MEMBER

Name:

GWEN A GELENITES

Gender:

Female

Correspondence Address: 10840 E STANTON AVENUE

MESA, AZ 85212

USA

Phone:

(708)359-1705

Alt. Phone:

Email:

GGELENITES2002@GMAIL.COM

APPLICATION INFORMATION

Application Number:

117561

Application Type:

New Application

Created Date:

08/19/2020

abagail Taracch

QUESTIONS & ANSWERS

012 Restaurant

1) Are you applying for an Interim Permit (INP)?

Yes

A Document of type INTERIM PERMIT (INP) NOTARY PAGE is required.

2) Are you one of the following? Please indicate below.

Property Tenant

Subtenant

Property Owner

Property Purchaser

Property Management Company

TENANT

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

Yes

What is the penalty?

\$4500.00 PER MONTH FOR 36 MONTHS

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

Yes

5) What is the total money borrowed for the business not including the lease?

Please list each amount owed to lenders/individuals.

ZERO

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

No

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

CONTIGUOUS

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

No

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

Created 08/20/2020 @ 09:16:03 AM

Local Governing Body Report

LICENSE

Number:

INP070012016

Type:

INP INTERIM PERMIT

Name:

FAT WILLY'S FAMILY SPORTS GRILL

State:

Active

Issue Date:

08/19/2020

Expiration Date:

12/02/2020

Original Issue Date:

08/19/2020

Location:

8701 S KOLB ROAD

TUCSON, AZ 85756

Mailing Address:

650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(520)574-5800

Alt. Phone:

(480)309-0492

🔏 Email:

JASON@FATWILLYSGOLFAZ.COM

AGENT

Name:

JASON FRED KAFCAS

Gender:

Male

Correspondence Address: 29111 N 138TH PLACE

SCOTTSDALE, AZ 85262

USA

Phone:

Alt. Phone:

(480)309-0492

Email:

JASON@FATWILLYSGOLFAZ.COM

OWNER

Name:

FAT WILLY'S VOYAGER LLC

Contact Name:

JASON FRED KAFCAS

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number:

23096843

State of Incorporation: AZ

Incorporation Date:

06/16/2020

Correspondence Address: 650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(480)309-0492

AMENDMENT

Alt. Phone:

Email:

JASON@FATWILLYSGOLFAZ,COM

Officers / Stockholders

Name:

Title:

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

Created 08/19/2020 @ 02:51:46 PM

Local Governing Body Report

LICENSE

Number:

Type:

INP INTERIM PERMIT

Name:

FAT WILLY'S FAMILY SPORTS GRILL

State:

Pending

Issue Date:

Expiration Date:

Original Issue Date:

Location:

8701 S KOLB ROAD TUCSON, AZ 85756

USA

Mailing Address:

650 N HAWES ROAD

MESA, AZ 85207

USA

Phone:

(520)574-5800

Alt. Phone:

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Email:

JASON@FATWILLYSAZ.COM

AGENT

Name:

JASON FRED KAFCAS

Gender:

Male

Correspondence Address: 29111 N 138TH PLACE

SCOTTSDALE, AZ 85262

USA

Phone:

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JASON@FATWILLYSAZ.COM

OWNER

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JASON FRED KAFCAS

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number:

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State of Incorporation: AZ

Incorporation Date:

06/16/2020

Correspondence Address: 650 N HAWES ROAD

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Officers / Stockholders

Name:

Title:

% Interest:

51.00

49.00

FAT WILLY'S VOYAGER LLC - MANGER

Name:

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Gender:

Male

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Name:

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Gender:

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Page 2 of 3 Fat willy's Family Sports Circle
Vallage Sports Circle

BRSSLY.II, Mg

JASON FRED KAFCAS **GWEN A GELENITES** JAMES DION CONNOR MEMBER **MEMBER MANGER**

51.00 49.00

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Name:

GWEN A GELENITES

Gender:

Female

Correspondence Address: 10840 E STANTON AVENUE

MESA, AZ 85212

USA

Phone:

(708)359-1705

Alt. Phone:

Email:

GGELENITES2002@GMAIL.COM

APPLICATION INFORMATION

Application Number:

117562

Application Type:

New Application

Created Date:

08/19/2020

QUESTIONS & ANSWERS

INP Interim Permit

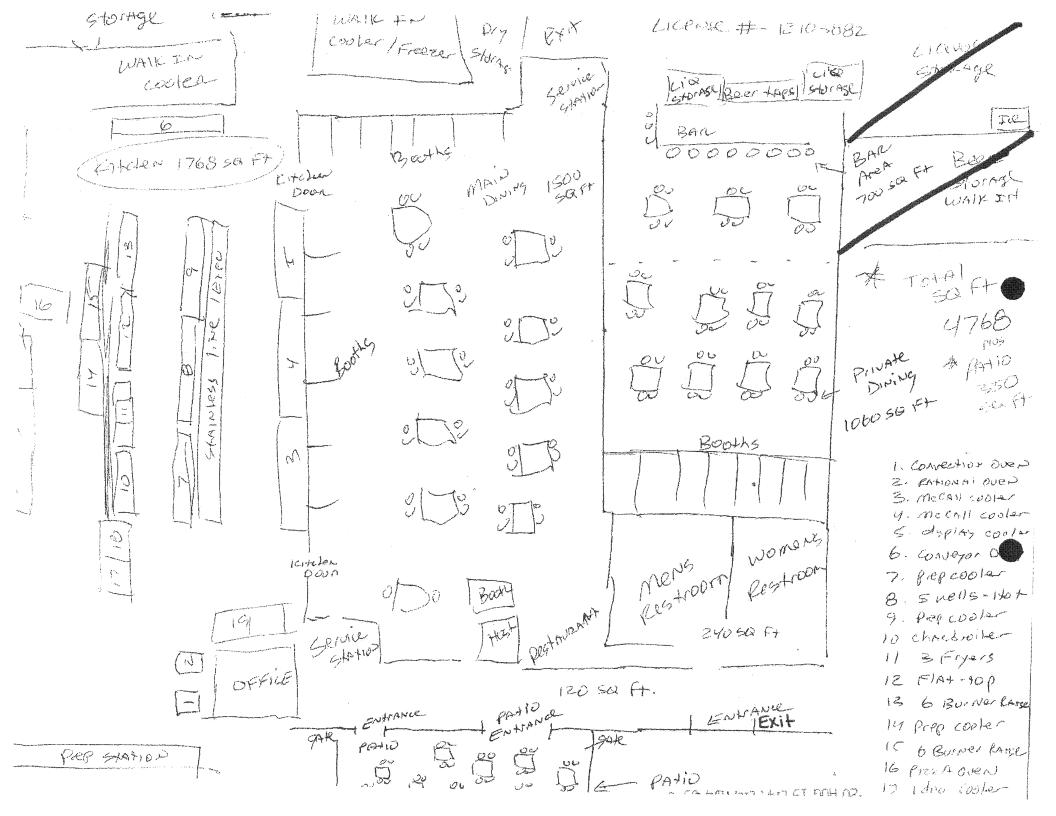
1) Enter License Number currently at location

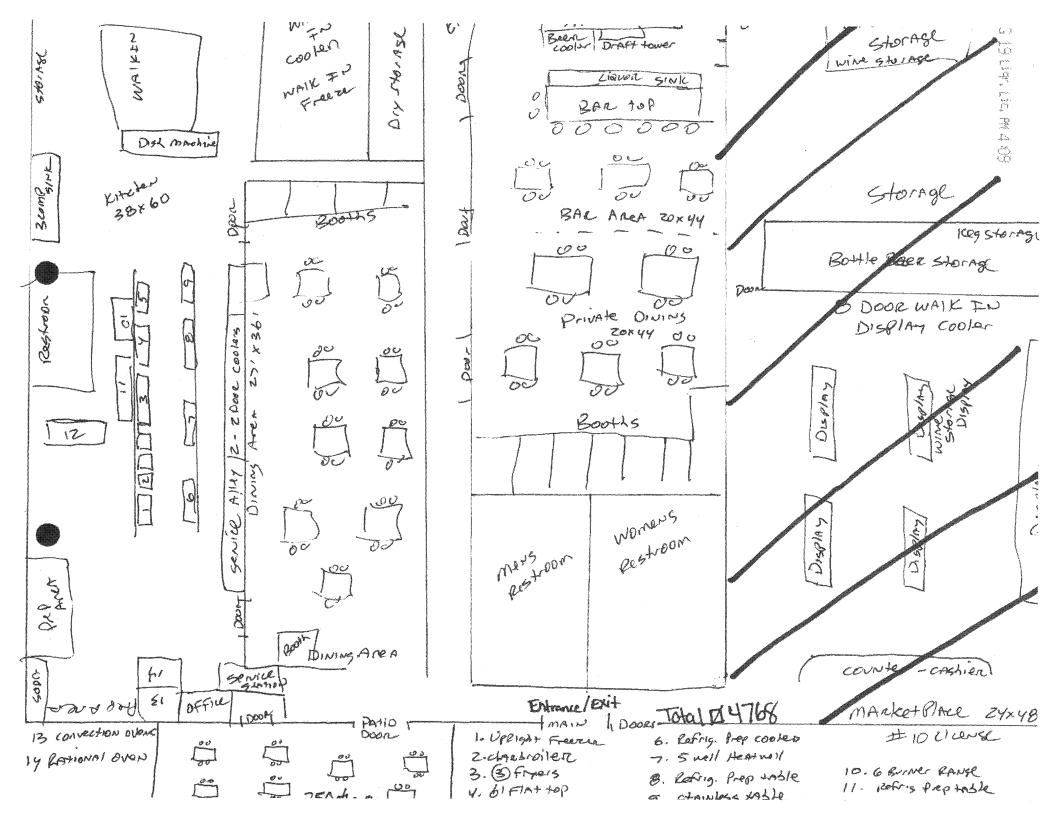
12103882

2) Is the license currently in use?

Yes

3) Will you please submit section 5, page 6, of the license application when you reach the upload page?







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	#:	17	5002	<i></i>

RESTAURANT OPERATION PLAN

Grill	WICAN 6' FlAT-top 6 Burner Rouxe	_ 3'0ha
Oven	RATIONAL Self cooking over 2) Duke	
Freezer	Kolpax WAIXIN - The I door upaigh	
Refrigerator	Friederch WALK IN - True & DOOR uperan	
Sink	3 comp. sink - 1 5/N prep sink	
Dish Washing Facilities	Proclean conveyor	
······································	*	
Food Preparation Counte (Dimensions)	30'x 10'stainless Rep 5' stainless	8/5-600
(Dimensions) Other Attach a copy of your full	30'x 10'stainless fep 5'stainless 3 deep Fryers Lincoln conveyor	
(Dimensions) Other Attach a copy of your full	30'x 10'stannless fep 5'stainless 3 deep Fryers Lincoln Conveyor menu including prices n, Dinner, and Nonalcoholic beverages). rea of your premises:	
(Dimensions) Other Attach a copy of your full examples: Breakfast, Luncist the seating capacity for a. Restaurant dining of	30'x 10'stanules, sep 5'stanules, 3 deep Fryers Lincoln Conveyor menu including prices n, Dinner, and Nonalcoholic beverages). r: rea of your premises: o seating)	
(Dimensions) Other Attach a copy of your full examples: Breakfast, Luncist the seating capacity for a. Restaurant dining of (Do not include path) b. Bar area of your present the present the path of	30'x 10'stanules, sep 5'stanules, 3 deep Fryers Lincoln Conveyor menu including prices n, Dinner, and Nonalcoholic beverages). r: rea of your premises: o seating)	
(Dimensions) Other Attach a copy of your full examples: Breakfast, Luncist the seating capacity for a. Restaurant dining of (Do not include path) b. Bar area of your process. Total dining and both	30'x 10'stanules, sep 5'stanules, 3 deep Fryers Lincoln Conveyor menu including prices n, Dinner, and Nonalcoholic beverages). r: rea of your premises: o seating) mises: [120	
(Dimensions) Other Attach a copy of your full examples: Breakfast, Luncist the seating capacity for a. Restaurant dining of (Do not include path) b. Bar area of your process. Total dining and both	30'x 10'stanules, Rep 5'stanules, 3 deep Fryers Lincoln conveyor menu including prices n, Dinner, and Nonalcoholic beverages). r: rea of your premises: o seating mises: [120	

	4 - TU'S		
(If yes, w) example: (ave live entertainment or dancing? Stat type and how often 8.5 DJ-2 x a week, Karaoke-2 x a month, Live Ban Aoke Jx per week		
. Use space	e below to list how many employees for	each position to fully staff your	husinges
. Use space	Position	How many	
	Cooks		
	Bartenders	4	
	Hostesses	. 2	
	Managers	3	
	Servers	17-	
	Other (
	Other (
	Other ()		
ave read this	application and the contents and all s	reby declare that I am the AP tatements true, correct and c	PLICANT filing this applicat omplete.
	NOT		
tate of <u>Av</u>	Zona County of Marica	pa	
ne foregoing	instrument was acknowledged before	me this 5 ⁴⁴ day of 4c	egas 7 2020

8/22/2018

Page 2 of 2



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 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.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.

	NOTARY
1, (Print Full Name) SASON FRO KR	have read and understand all aspects of this statement
X (Signature) Controlling Person / Agent	State of Arizona County of Maricaga the foregoing instrument was acknowledged before the this
My commission expires on: 4-25-2022	Day of August 2020 Month Year
	Signature of NOTARY PUBLIC

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