

The New HQ

19640 W John Wayne Parkway
Maricopa AZ 85139



October 11, 2023

To Nancy Smith, Mayor;

I have attached an APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT that the New HQ is applying for with the Arizona Department of Liquor Control Licenses and Control for a 70 Year Celebration of the Headquarters' being in business in Maricopa. We need for the City of Maricopa to also approve before we give to the Liquor Control. Please submit to the City Council for approval of this celebration for us at your next City Council Meeting. so we can submit this to the Liquor Control.

Thank you for your hard and unending work you have given all of us in Maricopa and please give my heartfelt thanks for this support and my prayer is to pay it forward.

Yours Truly,

A handwritten signature in cursive script that reads "Alma Farrell". The signature is written in dark ink and is positioned above the printed name.

Alma Farrell, Owner

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

FOR DLLC USE ONLY

Date payment received:

____/____/____

CSR initials: _____

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT

This application must be returned to the Department of Liquor
(Notice: Allow 30-45 days to process permanent change of premises)

☐ Permanent change of area of service. A NON-REFUNDABLE \$50 FEE WILL APPLY. Specific purpose for change:

☒ Temporary change for date(s) of: 11 / 18 / 23 through 11 / 19 / 23 List specific purpose for change:

Fence off parking area for 70th year celebration

1. Licensee's Name: Farrell Alma M
Last First Middle

2. Mailing Address: 43983 W Farrell Rd Maricopa AZ 85138
Street City State Zip

3. Business Name: The New HQ License # 06110024

4. Business Address: 19640 N John Wayne Pkwy Maricopa AZ 85139
Street City State Zip

5. Contact phone: (520) 518 1232 Business phone: (520) 568 2024

6. Email: amfarrell61@gmail.com

7. Is extension of premises/patio complete?

☐ N/A ☐ Yes ☐ No If no, what is your estimated completion date? ____/____/____

8. Do you understand Arizona Liquor Laws and Regulations?

☒ Yes ☐ No

9. Does this extension bring your premises within 300 feet of a church or school?

☐ Yes ☒ No

10. Have you received approved Liquor Law Training?

☒ Yes ☐ No If yes, when does your Certificate expire? Date: 10/10/26

11. What security precautions will be taken to prevent liquor violations in the extended area?

Hired Security Company

12. **IMPORTANT:** ATTACH THE REVISED FLOOR PLAN CLEARLY DEPICTING YOUR LICENSED PREMISES AND WHAT YOU PROPOSE TO ADD.

☐ Barrier Exemption: an exception to the requirement of barriers surrounding a patio/outdoor serving area may be requested. Barrier exemptions are granted based on public safety, pedestrian traffic, and other factors unique to a licensed premise. List specific reasons for exemption:

Investigation Recommendation: ☐ Approval ☐ Disapproval by: _____ Date: ____/____/____

➡ OBTAIN APPROVAL FROM LOCAL GOVERNING BODY BEFORE SUBMITTING TO THE DEPARTMENT ➡

➡ After completing the application, please take this application to your local Board of Supervisors, City Council or Designate for their recommendation. This recommendation is not binding on the Department of Liquor.

This change in premises is RECOMMENDED by the local Board of Supervisors, City Council or Designate:

(Authorized Signature)

(Title)

(Agency)

Date

I, Alma M. Farrell, declare that I am the APPLICANT and, under penalty of perjury, making the foregoing application. I have read this application and the contents and all statements are true, correct and complete.

x [Signature] 51% Owner 10/11/23 520 518 1232
(Signature) Title/Position Date Phone #

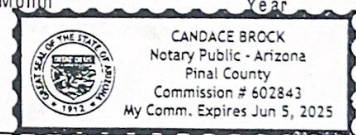
The foregoing instrument was acknowledged before me this 11th October 2023
Day Month Year

State Arizona County of Pinal

My Commission Expires on: 6-5-2025
Date

[Signature]

Signature of Notary Public



Investigation Recommendation: ☐ Approval ☐ Disapproval by: _____ Date: ____/____/____

Director Signature required for Disapprovals _____ Date: ____/____/____



Certificate # ON-LINE

Certificate of Completion
For
Title 4 **MANAGEMENT** Liquor Law Training

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

Basic Title 4 training is a prerequisite for MANAGEMENT Title 4 training. A valid Certificate of Completion for BASIC Title 4 training must be on file at the Department of Liquor and satisfactory completion of a State-approved BASIC Title 4 course must be verified by the training provider prior to issuing a Certificate of Completion for MANAGEMENT Title 4 training.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

Jocelyn Parks

Full Name (please print)

Signature

10/10/2023

Training Completion Date

10/10/2026

Certificate Expiration Date
(three years from completion date)

Training Provider Information

US Liquor Laws

Company Name

P.O. Box 6965 Chandler, Arizona 85246

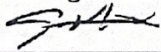
Mailing Address

(480) 709-8900

Daytime Contact Phone Number

I, Jared Repinski, certify that the above named individual did successfully complete
Instructor Name (please print)

Title 4 **MANAGEMENT** Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).



Instructor Signature

10 / 10 / 2023

Mo Date Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below
2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

In-state Microbrewery (series 3)
Conveyance (series 8)
Restaurant (series 12)

Government (series 5)
Liquor Store (series 9)
In-state Farm Winery (series 13)

Bar (series 6)
Private Club (series 14)

Beer & Wine Bar (series 7)
Hotel/Motel w/restaurant (series 11)
Beer & Wine Store (series 10)

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

July 11, 2013