

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
www.azliquor.gov
(602) 542-5141

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT

THIS APPLICATION MUST BE RETURNED TO THE DEPARTMENT OF LIQUOR

☐ Permanent change of area of service – Give specific purpose of change: _____

☒ Temporary change for date(s) of: March 16 + 17, 2012

- Licensee's Name: Morse Theresa June
Last First Middle
- Mailing Address: 20800 N. John Wayne Hwy #101 Maricopa AZ 85139
City State Zip
- Business Name: O'Shays Pub + Grill LICENSE #: 12413207
- Business Address: 20800 W. John Wayne Hwy #101 Maricopa Pinel AZ 85139
City COUNTY State Zip
- Business Phone: (520) 568 - 5738 Residence Phone: (480) 238 - 6862
- Do you understand Arizona Liquor Laws and Regulations? ☒ YES ☐ NO FAX # () _____
- Have you received approved Liquor Law Training? ☐ NO ☒ YES When? September 2011
- What security precautions will be taken to prevent liquor violations in the extended area? checking I.D.s at door
and bar, issuing wrist bands and multiple security personnel on staff.
- Does this extension bring your premises within 300 feet of a church or school? ☐ YES ☒ NO
- IMPORTANT: ATTACH THE REVISED FLOOR PLAN CLEARLY DEPICTING YOUR LICENSED PREMISES AND WHAT YOU PROPOSE TO ADD.

****After completing sections 1-9, 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)

I, Gerald Shay DeVerse, being first duly sworn upon oath, hereby depose, swear and declare,
(Print full name)
under penalty of perjury, that I am the APPLICANT making the foregoing application. I have read this application and the contents and all statements are true, correct and complete.

X Shay DeVerse
(Signature of Owner or Agent)
State of Arizona County of Pinel
SUBSCRIBED IN MY PRESENCE AND SWORN TO before me this date
3 February 2012
Day Month Year
Leeanne Schirato
(Signature of NOTARY PUBLIC)
LEEANNE SCHIRATO
Notary Public - Arizona
PINAL COUNTY
My Comm. Exp. 7-13-14

My commission expires on: _____

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

Director Signature required for Disapprovals _____ Date: _____

STATE OF ARIZONA

DEPARTMENT OF LIQUOR LICENSES
AND CONTROL
ALCOHOLIC BEVERAGE LICENSE

License 12113207

Issue Date: 12/30/2011

Expiration Date: 8/31/2012

Issued To:

THERESA JUNE MORSE, Agent
CHIMI'S LLC, Owner

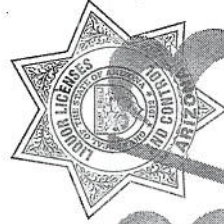
Location:

O'SHAYS PUB & GRILL
20800 N JOHN WAYNE PKWY #101
MARICOPA, AZ 85239

Restaurant

Mailing Address:

THERESA JUNE MORSE
CHIMI'S LLC
O'SHAYS PUB & GRILL
20800 N JOHN WAYNE PKWY #101
MARICOPA, AZ 85239



EXP 8/31/2012

POST THIS LICENSE IN A CONSPICUOUS PLACE

To see all the details that are visible on the screen, use the "Print" link next to the map.

