

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

Created 11/02/2024 @ 08:21:48 AM

**Local Governing Body Report**

**LICENSE**

Number:		Type:	006 BAR
Name:	DUKE'S ROADHOUSE		
State:	Pending		
Issue Date:		Expiration Date:	
Original Issue Date:			
Location:	19395 N MARICOPA ROAD MARICOPA, AZ 85139 USA		
Mailing Address:	12539 N SIERRA DEL SOL FOUNTAIN HILLS, AZ 85268 USA		
Phone:	(305)965-7037		
Alt. Phone:	(602)432-4008		
Email:	KOVACHAK@GMAIL.COM		

**AGENT**

Name:	JEFFREY CRAIG MILLER
Gender:	Male
Correspondence Address:	PO BOX 2502 CHANDLER, AZ 85244 USA
Phone:	(480)730-2675
Alt. Phone:	
Email:	LIQUORLICENSE@AZLIC.COM

**OWNER**

Name:	DUKE'S ROADHOUSE LLC		
Contact Name:	ALANE JANET KOVACH		
Type:	LIMITED LIABILITY COMPANY		
AZ CC File Number:	23442270	State of Incorporation:	AZ
Incorporation Date:	10/31/2022		
Correspondence Address:	12539 N SIERRA DEL SOL FOUNTAIN HILLS, AZ 85268 USA		
Phone:	(602)432-4008		
Alt. Phone:			
Email:	KOVACHAK@GMAIL.COM		

**Officers / Stockholders**

600- 11/1/25  
105- 2/15/25

Name:  
STEPHEN EMERY KOVACH IV  
ALANE JENET KOVACH

Title:  
Member  
Member

% Interest:  
27.00  
27.00

**DUKE'S ROADHOUSE LLC - Member**

Name: STEPHEN EMERY KOVACH IV  
Gender: Male  
Correspondence Address: 12539 N SIERRA DEL SOL  
FOUNTAIN HILLS, AZ 85268  
USA  
Phone: (602)432-4007  
Alt. Phone:  
Email: STEVE@STEVEKOVACH.NET

**DUKE'S ROADHOUSE LLC - Member**

Name: ALANE JENET KOVACH  
Gender: Female  
Correspondence Address: 12539 N SIERRA DEL SOL  
FOUNTAIN HILLS, AZ 85268  
USA  
Phone: (602)432-4008  
Alt. Phone:  
Email: KOVACHAK@GMAIL.COM

## APPLICATION INFORMATION

Application Number: 312148  
Application Type: New Application  
Created Date: 10/02/2024

## QUESTIONS & ANSWERS

### 006 Bar

- 1) Are you applying for an Interim Permit (INP)?  
No
- 2) Provide name, address, and distance of nearest school.  
(If less than one (1) mile note footage)  
MARICOPA HIGH SCHOOL  
45012 W HONEYCUTT AVE MARICOPA AZ 85139 - 1502 FEET
- 3) Are you one of the following? Please indicate below.  
Property Tenant  
Sub-tenant  
Property Owner  
Property Purchaser  
Property Management Company  
PROPERTY OWNER
- 4) Is there a penalty if lease is not fulfilled?  
No
- 5) Is the Business located within the incorporated limits of the city or town of which it is located?  
Yes
- 6) What is the total money borrowed for the business not including the lease?  
Please list each amount owed to lenders/individuals.  
NONE
- 7) Are there walk-up or drive-through windows on the premises?  
No
- 8) Does the establishment have a patio?  
Yes  
Is the patio contiguous or non-contiguous (within 30 feet)?  
CONTIGUOUS
- 9) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?  
Yes  
If yes, what is your estimated completion date?  
12/01/2024

9,000 s.



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**WALL TYPE**

**WALL TYPE C**

