CSR:	
Amount:	



SPECIAL EVENT LICENSE APPLICATION FEE \$25.00 PER DAY

Arizona Department of Liquor Licenses and Control 800 W. Washington St. 5th Floor Phoenix, AZ 85007

(602) 542-5141

Job #:	DLLC 0	SE ONLY
Date Ac	cepted:	
CSR:		
License	#:	

Application MUST be submitted to the Department of Liquor 10 days prior to the event.

<u>SECTION 1</u> Applicant must be a member of a qualifying nonprofit organization, political party, or Government entity and authorized by an Officer, Director, or Chairperson of the Organization.

1. Applicant: Webb, Wendy R.			
(Must be an Officer/Member of the Non Profit Entity) Last	First	Middle	
2. Applicant's mailing address: PO Box 82 Maricopa, AZ 851	139		
Street	City	State Zip	
3. Applicants home/cell phone: <u>623-764-0433</u>	Applicant's business phone:	520-251-0226	
4. Applicant's email address: formaricopa123@gmail.com	f -		
5. Special Event Name: Thirsty Thirdsday	4.50-50-00-00-00-00-00-00-00-00-00-00-00-0		99
6. Name of Non-Profit Organization, Candidate or Political Par	y/Gov.: F.O.R. Maricopa		
7. Non-Profit/IRS Tax Exempt Number: 26-0527262			
8. Arizona Corporation Commission File #: 14623034	If out of State please sp	Decify:(Attach letter of good s	tandina)
9. Event Location Name: Province			
10. Event Address: 20942 N. Province Parkway, Maricopa,	AZ 85138		

Dates and Hours of Event - Days must be consecutive and may not exceed 10 consecutive days.

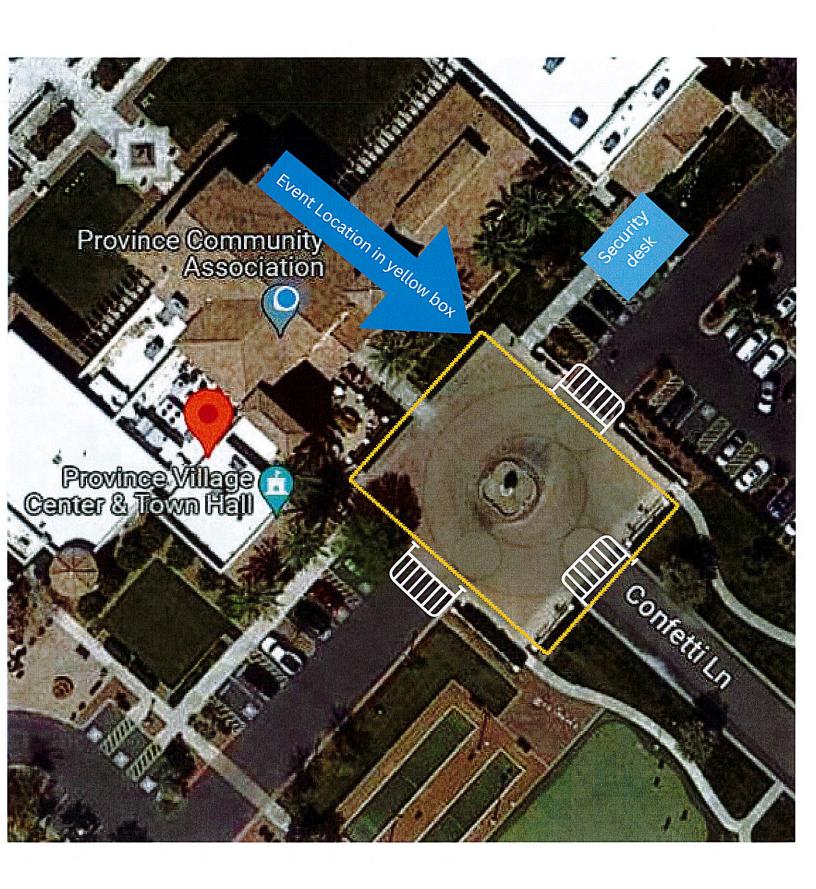
**SEPARATE APPLICATION FOR EACH "NON-CONSECUTIVE" DAY **

Days	Date	Day of Week	Event Start Time AM/PM	License End Time AM/PM
DAY 1:	Jan. 15, 2026	Thursday	3:30 PM	6:30 PM
DAY 2:				
DAY 3:				
DAY 4:			-	
DAY 5:		 ,		
DAY 6:				
DAY 7:		-	1	
DAY 8:		<u> </u>		
DAY 9:		<u>-</u>		
DAY10:				

		l measures will you take to prevent v y personnel and type of fencing or control t		vs at this event?
Number of Police	ce <u>2</u>	Number of Security Personne	el L Fencing	✓ Barriers
Must explain security measures: T	he event take	es place at the clubhouse of the priv	ate, gated communit	y of Province.
Management and security will	be on-site.	The gatehouse team provides 24-	hour security	
SECTION 3 What is the purpose o	of this event?			
☑On-site consumption	☐Off-site	e (auction/wine/distilled spirits pull)	⊟Во	th
How is this special event going to a Check one of the following boxes.		ispensing, serving, and selling of spiritu	ous liquors?	
A) 🗹 Special Event being held on Body on page 3. (If checked		ed premises will require approval and : ction 4)	signature by the Locc	al Governing
		sed premises and within the already or semises with an explanation of the opti		ed area?
Name of Bus	siness	License Number	Phone (Incl	ude Area Code)
		ee selling all alcohol without retailer inva ng license for duration of special even		
Dispense and serve all spirituous revenue from alcohol sales is done		retailer's license – Business operates no ee	ormally, minimum of 25	% of gross
purchased or donated by the spe	cial event lice	special event - The special event licens nsee. The retailers existing alcohol inven er from the location suspending licens	tory must be separate	d from any alcoho
sales of alcohol. (These sales will be	e done in sepa	ill location - Both the special event licer arate areas. If alcohol is donated or pur not is dispensed by the licensed retailer.)	chased by the special	
		r Silent Auctions – Retailer will still be pe		normal sale and
SECTION 4				
1. Has the applicant been convic	ted of a felo	ny, or had a liquor license revoked w	vithin the last five (5)	years?
☐ Yes ✓ No If yes, attach letter	of explanatio	n.		
2. How many special event days t	have been is:	sued to this organization during the o	calendar year? 8 în 20	025. Same in 2026
 Is the Organization using the se contractor who may purchase an responsible for the sales and service 	nd sell alcohol	pecial Event Contractor? (A licensee on behalf of the licensee. If no special	can utilize the services event contractor is list	s of a special even ted, the licensee i
✓ Yes ☐ No If yes, please provious	de the Name	of the Special Event Contractor: C	ouple of Bartenders, I	Iquid Caterers
		ies 6, 7, 11, or 12 licensee to manage ense are automatically qualified to		
☐ Yes ☑ No if yes, please provide	de the Name	of Licensee:	License #:	
5. List the name of the Individual o	or Oraanizatio	on that will receive revenues, MUST E	QUAL 100 PERCENT	

Attach additional sheet if necessary.

Name: F.O.R. Maricopa		Percentage: <u>25%</u>	
		Perceniage:	
Address: PO Box 82 Maricopa, AZ 85139	City	State	
Name: Liquid Caterers		Percentage: 75%	
Address: 3145 E. Chandler Blvd. Chandler, A	AZ 85048		
Street	City	State	Zip
Please read A.R.S. § 4-203.02 Special event I	icense; rules and R19-	1-205 <u>Requirements for a</u>	Special Event License.
ALL ALCOHOLIC BEVERAGE SAL	ES MUST BE FOR CON	SUMPTION AT THE EVENT	SITE ONLY.
NO ALCOHOLIC BEVERAGES SHALL LEAVE A SPE SEALED CONTAINERS OR THE SPECIAL EVENT			
SECTION 5 License premises diagram. The license authorized to sell, dispense or serve alcoholic be of your special event licensed premises. Please measures and security position.	everages under the pi	rovisions of your license. F	Please attach a diagram
ATTAC	CH DIA	GRAM	
If the special event will be held at a location withou that is not covered by the existing liquor license, this to the Department of Liquor Licenses and Control. I APPLICANT SIGNATURE	s application must be ap	proved by the local gover	ning body before submitting
Declaration: I, (Print Name) Wendy R. Webb authorized to submit this application. I have rebelieve all statements made on this application.	ead the contents of th tion to be true, correct		
		Signatur	e
LOCAL GOVERNING BODY			
Date Received:			
,(Government Official)	(Title)	recommend LAPPRO	OVAL 🗖 DISAPPROVAL
■ 0.0 Mail - 10.0 PROVIDENCE IN LAW SECURITY - 4 MIN (1991 - 4 MIN (199	• ********		
On behalf of, (City, Town, County)	Signature	Date ,	Phone
The local governing body (city, town or municapplications to be completed and submitted. Plethese applications to be submitted. Additional licazonal USE ONLY	ease check with local g	government as to how far	in advance they require
□approval □ disapproval by:		DATE:	



January 2026 Liquor License Application

Final Audit Report 2025-09-24

Created: 2025-09-22

By: Roxanne Cooke (rcooke@ccmcnet.com)

Status: Signed

Transaction ID: CBJCHBCAABAA52W8MaogAeWJhmkwL9ftaJ-6bccGSd-E

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