

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

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APPLICATION FOR SPECIAL EVENT LICENSE Fee= \$25.00 per day for 1-10 days (consecutive) Cash Checks or Money Orders Only

A service fee of \$25.00 will be charged for all dishonored checks (A.R.S § 44-6852)

IMPORTANT INFORMATION: This document must be fully completed or it will be returned. The Department of Liquor Licenses and Control must receive this application ten (10) business days prior to the event. If the special event will be held at a location without a permanent liquor license or if the event will be on any portion of a location that is not covered by the existing liquor license, this application must be approved by the local government before submission to the Department of Liquor Licenses and Control (see Section 12).
SECTION 1 Name of Organization: VFW POST 12043 C/O RELIEF FUND
Name of Licensed Contractor only (if any):
SECTION 2 Non-Profit/IRS Tax Exempt Number:
SECTION 3 Event Location: COPPER SKY RECREATIONAL CENTER
Event Address: 44345 M.L.K. Jr. Blvd, Maricopa, AZ 85138
SECTION 4 Applicant must be a member of the qualifying organization and authorized by an Officer, Director, or Chairperson of the Organization.
1. Applicant: KEMERY MICHAEL J. 04/09/1950
1. Applicant: Lemery Michael J. O4/09/1950 Last First Middle Date of Birth 2. Applicant's mailing address: 53308 W. HA Thaway Aye, Maricoff, Az 85/39 Street City State Zip 3. Applicant's home cell phone: 602 3394423 Applicant's business phone:
3. Applicant's home cell phone: (607 3394423 Applicant's business phone:
4. Applicant's email address: MIKEKS 004@ YAhro. Com
I, (Print Full Name)



SECTIO	certifies that the Organization meets the oboxes below.	event permit: the Officer, Directo riteria in A.R.S. § 4-203.02(E) as	or, or Chairperson of the organization indicated by checking one of the
(1)	The Organization is a political party or a call indicate the name of the candidate that the month and year that the candidate would	he Organization supports, the o	a candidate for public office. Please flice that the candidate seeks, and the
	Candidate:		
	Name	Office	Month/Year
(2) 🔽	The Organization is a non-profit entity orga for designation under Section 501(C) of the applying under option (2) as a nonprofit er statements to indicate that, to the best of the statements to indicate that it is to the statements to indicate that it is the statement in the statement is the statement in the statement in the statement is the statement in the statem	e internal revenue code of the Unitity, please also INITIAL in the	nited States. If the Organization is a spaces provided next to all following
	To be initialed only by an Office	er, Director, or Chairperson	of the organization.
×iy ×iy	The Organization has received a determination is eligible for designation as a nonprofit entiple special event will occur, or has a pending but that will retroactively cover all days that determination letter or the application [with	ation letter from the Internal Revity under Section 501(C), eligibili application with the IRS for such at the special event will occur. (hout attachments] with this application.	enue Service ("IRS") indicating that it ty or will be eligible on all days that the treatment that has not been resolved Please provide a copy of either the IRS lication).
- 10	The Organization is not aware of any action Eligibility under 501(C), or if there is a pend the IRS will deny its application and has a guidelines and forms that are eligible under	ding application, the eligibility ha good faith basis formed upon a re	s not received any indication that
XIV	The Organization understands that if there cause or has caused it to lose its eligibility uletter, that it has an affirmative duty to notifice regarding the loss of eligibility.	under 501(C), whether before or	after receiving an IRS determination
To be co	mpleted only by an Officer, Director, or Chairper	son of the organization.	
the contrue, X	oregoing instrument was acknowledged before me this application instrument was acknowledged before me this application as listed above correct and complete. The had plemeny are corrected in the country of the light and the country of the light and the commission Expires on: 11-12-2021	Austromate 2-	n Officer, Director, or Chairperson of the contents and all statements are 23-18 02-339-4475 Date Phone Number 20 18 Month Year K SEYFFERT Notary Public - Artzon Pinal County
,	Date	Signatu	re of Notary Public My Comm. Expires Nov 1. 2021
Will this event be held on a currently licensed premise and within the already approved premises? Yes No (If yes, Local Governing Body Signature not required)			
	() so, 2000 Coliming Dody Olyriature	not required)	
	Name of Business	License Number	Phone (Include Area Code)

318 for explanation a	and check one of the follow	ing boxes	spirituous liquors? Pie	ease read R-19-
Place license in non-use	and check one of the follow	ing boxes.		
Dispense and serve all spir	rituous liquors under retaile	r's license		
☑Dispense and serve all spi				
Split premise between sp	ecial event and retail local	ion		
(IF USING RETAIL LICENSE, PLEASE SU RUN CONCURRENT WITH THE PERMAN AGENT/OWNER WILL NEED TO SUSPEN	IENT LICENSE DURING THE E\	ENT. IF THE SPECIAL EVENT IS ON	HE LICENSED PREMISES ILY USING A PORTION O	S TO SUSPEND OR OF THE PREMISES,
SECTION 8				
What is the purpose of this event?	✓On-site consumption	Off-site (auction/wine/distil	lled spirits pull)	oth
SECTION 9				
Has the applicant been convice Yes ✓No (If yes, attach explana		liquor license revoked within th	ne last five (5) years?	
How many special event days (The number cannot exceed 10 days)	have been issued to this oper year.)	organization during the calendar	year? 0	
3. Is the organization using the ser	vices of a licensed contra	ctor or other person to manag	ge the sale or service	e of alcohol?
Yes ✓No (If yes, must be a licen				
4. List all people and organizatio applying must receive 25% of the Name VFW POST 12043	e gross revenues of the s	pecial event liquor sales. Attac	ch an additional page	e organization e if necessary.
Address				
Name		Percentage:		
				· · · · · · · · · · · · · · · · · · ·
Address	Street	City	State	Zip
		les and R19-1-205 <u>Requiremen</u>	*	
Note: ALL ALCOHOLI	C BEVERAGE SALES MUS	T BE FOR CONSUMPTION AT T	HE EVENT SITE ONLY	′ .
NO ALCOHOLIC BEVERAGES SHA SEALED CONTAINERS OR THE	LL LEAVE A SPECIAL EVEN SPECIAL EVENT LICENSE I	T UNLESS THEY ARE IN AUCTION S STACKED WITH WINE /CRAFT D	I WINE OR DISTILLED S DISTILLERY FESTIVAL L	PIRITS PULL ICENSE.
 What type of security and contro (List type and number of police/secur 	ol measures will you take ity personnel and type of fenc	to prevent violations of liquor ing or control barriers, if applicable.	laws at this event?	
4 Number of Po	lice 4	umber of Security Personnel	Fencing	Barriers
Explanation: We expect no		(A.E.)	2000 100 100 100 100 100 100 100 100 100	
have staff monitoring ID.			~	
beer garden area, which	will be fenced with s	security and guards in p	lace.	

PLEASE FILL OUT A SEPARATE APPLICATION FOR EACH "NON-CONSECUTIVE" DAY

	Date	Day of Week	Event Start Time AM/PM	License End Time AM/PM
DAY 1:	April 7, 2018	Saturday	1pm	10pm
DAY 2:	-			
DAY 3:				
DAY 4:		-		
DAY 5:		-		
DAY 6:				
DAY 7:				
DAY 8:				
DAY 9:				
DAY10:				

<u>SECTION 11</u> License premises diagram. The licensed premises for your special event is the area in which you are authorized to sell, dispense or serve alcoholic beverages under the provisions of your license. Please attach a diagram of your special event licensed premises. Please show dimensions, serving areas, fencing, barricades, or other control measures and security position.

ATTACH DIAGRAM

Please contact the local governing board for additional application requirements and submission deadlines. Additional licensing fees may also be required before approval may be granted. For more information, please contact your local jurisdiction.

SECTION 12 Local Coverning Body Approval Continu

SECTION 12 Local Governing Body Approval				
Date Received:	(Title)	_recommend □APPROVAI	_ □ DISAPPROVAL	
On behalf of(City, Town, County)	,Signature	,,,	Phone	
(Oity, 10Wii, County)	Signature	Date	Phone	
SECTION 13 For Department of Liquor Licenses and Control use only.				
□APPROVAL □DISAPPROVAL BY:		DATE:		

A.R.S. § 41-1030. <u>Invalidity of rules not made according to this chapter; prohibited agency action; prohibited acts by state employees; enforcement; notice</u>

- B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.
- D. THIS SECTION MAY BE ENFORCED IN A PRIVATE CIVIL ACTION AND RELIEF MAY BE AWARDED AGAINST THE STATE. THE COURT MAY AWARD REASONABLE ATTORNEY FEES, DAMAGES AND ALL FEES ASSOCIATED WITH THE LICENSE APPLICATION TO A PARTY THAT PREVAILS IN AN ACTION AGAINST THE STATE FOR A VIOLATION OF THIS SECTION.
- E. A STATE EMPLOYEE MAY NOT INTENTIONALLY OR KNOWINGLY VIOLATE THIS SECTION. A VIOLATION OF THIS SECTION IS CAUSE FOR DISCIPLINARY ACTION OR DISMISSAL PURSUANT TO THE AGENCY'S ADOPTED PERSONNEL POLICY.
 - F. THIS SECTION DOES NOT ABROGATE THE IMMUNITY PROVIDED BY SECTION 12-820.01 OR 12-820.02.



