

Meeting Date:
General Plan Element:
General Plan Goal:

September 23, 2014
Land Use
Support a diversity of businesses.

## ACTION

Bar Liquor License Request for Laugh Factory Comedy Club 82-LL-2014. To consider forwarding a recommendation of approval to the Arizona Department of Liquor Licenses and Control for a Person and Location Transfer of a Series 6 (bar) State liquor license for a new location and new owner.

OWNER
Laugh Factory Arizona LLC

## APPLICANT CONTACT

Paul Hopp

## LOCATION

7000 E Shea Blvd Suite 1990

## BACKGROUND

This request is for a Person and Location Transfer of a Series 6 (bar) liquor license. This has been a licensed location with a series 12 (restaurant) liquor license since 2005, most recently operating with liquor as Farenheit.

The distance to the nearest school, Sylvan Learning Center, is 1,011 feet.
The distance to the nearest religious facility, Bahai Faith Community, is 800 feet.
See Attachment \#3 for number and graphic representation of licenses within a one half-mile radius of this location.
$\qquad$

## APPLICANT'S PROPOSAL

The applicant is seeking a favorable recommendation on a Person and Location Transfer of a Series 6 (bar) liquor license. This allows a bar retailer to sell and serve spirituous liquors, primarily by individual portions, to be consumed on the premises and in the original container for consumption on or off the premises. The applicant has indicated that this establishment will serve liquor between the hours of 12:00 p.m. to 2:00 a.m.; however, due to State liquor license processing requirements, they are not required to notify the City or the State if they change their hours of operation.

## PETITIONS FROM PERSONS IN CLOSE PROXIMITY

The applicant has maintained the required posting notice for the State mandated 20-day period. No petitions or protests pursuant to A.R.S. 4-201.b. were received during the 20 (twenty) day posting period.

## OTHER LICENSES \& PERMITS

## Financial Management

Revenue Collection has reported that the applicant has met City licensing requirements and all fees have been paid.
Spirituous Liquor Tax Permit \# Pending.
Scottsdale Transaction Privilege Sales Tax License \# Pending.

## IMPACT ANALYSIS

## Current Planning Department

Development Information.
This establishment is $9,787 \mathrm{sq}$. ft . in size.

## Zoning.

This site is zoned Central Business District, Parking District (C-2/P-4). The C-2/P-4 district allows bars as a conditional use. Conditional Use Permits for a Bar and Live Entertainment were approved by City Council on August 18, 2014 under case 5-UP-2014 and 6-UP-2014.
Parking.
A total of 164 spaces are required for this use and 459 spaces are required for the shopping center. A total of 604 spaces are provided in the shopping center. The existing restaurant is not expanding and the sale of spirituous liquor itself does not increase parking demand. Parking is in compliance with the zoning ordinance.

## Public Safety Division <br> Police Department: Recommendation No Opposition <br> Major life safety issues: None noted.

Code Enforcement: There are no current cases of code violations at this time in relation to the liquor license.

## STATE GUIDELINES FOR CONSIDERING AN APPLICATION

A.R.S. Section 4.-203.A Granting a License for a New Owner for a Certain Location. A spirituous liquor license shall be issued only after satisfactory showing of the capability, qualifications and reliability of the applicant.
A.R.S. Section 4-112.B.1; R19-1-102 Criteria for Granting a License for a Certain Location The local governing authorities and the Department of Liquor Licenses \& Control may consider the following criteria in determining whether public convenience requires and that the best interest of the community will be substantially served by the issuance or transfer of a liquor license at a particular unlicensed location:

1. Petitions and testimony from persons who are in favor of or opposed to the issuance of a license, and who reside in, own or lease property in close proximity.
2. The number and series of licenses in close proximity.
3. Evidence that all necessary licenses and permits have been obtained from the state and all other governing bodies.
4. The residential and commercial population of the community and its likelihood of increasing, decreasing or remaining static.
5. Residential and commercial population density in close proximity.
6. Evidence concerning the nature of the proposed business, its potential market, and its likely customers.
7. Effect on vehicular traffic in close proximity.
8. The compatibility of the proposed business with other activity in close proximity.
9. The effect or impact of the proposed premises on business or the residential neighborhood whose activities might be affected by granting the license.
10. The history for the past five years of liquor violations and reported criminal activity at the proposed premises provided that the applicant has received a detailed report(s) of such activity at least 20 days before the hearing by the Board.
11. Comparison of the hours of operation of the proposed premises to the existing businesses in close proximity.
12. Proximity to licensed childcare facilities as defined by A.R.S. 36-881.

## COUNCIL OPTIONS \& STAFF RECOMMENDATION

## Council Options

The City Council has the option of recommending approval, denial or no recommendation to the Arizona Department of Liquor Licenses and Control.

## Staff Recommendation

The City of Scottsdale staff has conducted a review and advises that the license request meets the criteria imposed for determining that the community's best interest is substantially served by the issuance of the liquor license and advises that the license request meets the criteria imposed for determining the capability, qualifications and reliability of the applicant.

## Next Steps

The City Council's recommendation of approval, denial or no recommendation will be forwarded to the Department of Liquor Licenses and Control for their consideration. If the application is approved by the Department of Liquor Licenses and Control, the applicant should receive their license from the State within 105 days of original application.

## RESPONSIBLE DEPARTMENTS)

Teri Gleason, Planning Assistant, tgleason@scottsdaleaz.gov
Planning and Development Services

James Wasson, Lieutenant, Special Assignment, jwasson@scottsdaleaz.gov
Public Safety Division

Raun Keagy, Neighborhood Planning Director, rkeagy@scottsdaleaz.gov
Planning and Development Services

## APPROVED BY

Tim Curtis, AICP, Current Planning Director
 8/26/2014 312-4210 tcurtis@scottsdaleaz.gov

Randy Grant, Director, Planning and Development Services
312-2664, rgrant@scottsdaleaz.gov

## ATTACHMENTS

## \#1: $\quad$ Aerial Map

\#2: Close-up Aerial Map
\#3: $\quad$ Graphic - Liquor License Locations Within Half-Mile
\#4: City of Scottsdale Applicant Questionnaire
\#5: State Application



ATTACHMENT \#2

## Liquor Licenses Withiln A Halltiville Radius of 7000 E SHEA BL



## LEGEND

Af Place of Worship

## Legend

## Licensed Locations, Count by Series Within a half-mile radius of site

1 - Microbrewery6 - Bar
(1) 3-Beer/Wine Bar

- 5-Liquor Store
(1) 7 - Beer/Wine Store
(11) 32 -Restaurant


## Date: 8/12/2014

Total Licenses in Half-Mile Buffer $=54$

Note: Liquor License location information is
from the Arizona Dept. of Liquor Licenses and
Control, and may not represent the exact location
of establishments. Data is updated regularily and this map is sometimes printed weeks prior to City Council meetings.


## Liquor License Questionnaire

Microbrewery, bar, hotel, restaurant, winery (Series 3, 6, 7, 11, 12, 13)

Please complete all questions and return within 3 business days.

## Will this business feature any of the following:

Patron Dancing?
Live Bands?
Amplified music?
Adult Entertainment?
After hours?


## *May require a Conditional Use Permit

## Applicant Narrative:

ARS 4-201-G: In all proceedings before the governing body of a city or town, the Board of Supervisors of a County or the Board, the applicant bears the burden of showing that the public convenience requires and that the best interest of the community will be substantially served by the issuance of this license.

1. I have the capability, qualifications and reliability to hold a liquor license because:

The Laugh Factory has owned and operated clubs since 1979, and has been nationally recognized for our business model and charitable contributions. The Laugh Factory is considered a leader and expert in the comedy and night club industry.
2. The public convenience requires and the best interest of the community will be substantially served by the issuance of the liquor license because:
The Laugh Factory is a comedy club that has been doing business since 1979. We have owned and operated clubs
throughout the U.S. We will serve food and drinks at customer's request during the shows.
3. Please describe your business:
comedy club featuring live comedy shows
The City's forwarding of a recommendation to the AZ Department of Liquor Licenses and Control does not waive and is not a substitute for the Licensee's obligation to comply with all state, local and federal laws, policies and regulations applicable to the license. The Recommendation is not a permit or regulatory approval to hold any events or construct or demolish any improvements. Zoning processes, building permit processes, and similar regulatory requirements may apply to Licensee's contemplated Improvements and are completely separate from the Recommendation. Licensee shall be responsible to, separate and apart from this Recommendation, directly obtain all necessary permits and approvals from any and all governmental or other entities including the City's having standing or jurisdiction over the subject areas. For more information regarding zoning processes, building permit processes, and similar regulatory requirements and approvals please call 480-312-2611.

Print Name: $\qquad$ Signature: Paul A Hopp

Date: 08-11-12014

## Planning and Development

7447 E. Indian School Road, Suite 105, Scottsdale, AZ 85251 * Phone: 480-312-7000 * Fax: 480-312-7088

# Arizona Department of Liquor Licenses and Control 800 West Washington, 5th Floor <br> Phoenix, Arizona 85007 <br> www.azliquor.gov 

602-542-5141
APPLICATION FOR LIQUOR LICENSE TYPE OR PRINT WITH BLACK INK
Notice: Effective Nov. 1, 1997, All Owners, Agents, Partners, Stockholders, Officers, or Managers actively involved in the day to day operations of the business must attend a Department approved liquor law training course or provide proof of attendance within the last five years. See page 5 of the Liquor Licensing requirements.
SECTION 1 This application is for a:
$\square$ MORE THAN ONE LICENSE
$\square$ INTERIM PERMIT Complete Section 5
$\square$ NEW LICENSE Complete Sections 2, 3, 4, 13, 14, 15, 16
SECTION 2 Type of ownership:
$\square$ PERSON TRANSFER (Bars \& Liquor Stores ONLY)
$\square$ J.T.W.R.O.S. Complete Section 6
$\square$ INDIVIDUAL Complete Section 6
Complete Sections 2, 3, 4, 11, 13, 15, 16
$\square$ PARTNERSHIP Complete Section 6
$\square$ CORPORATION Complete Section 7
$\square$ LOCATION TRANSFER (Bars and Liquor Stores ONLY)
$\square$ LIMITED LIABILITY CO. Complete Section 7
$\square$ CLUB Complete Section 8
Complete Sections 2, 3, 4, 12, 13, 15, 16
$\square$ PROBATE MILL ASSIGNMENT/DIVORCE DECREE $\square$ GOVERNMENT Complete Section 10
$\square$ TRUST Complete Section 6
Complete Sections 2, 3, 4, 9, 13, 16 (fee not required)
$\square$ OTHER (Explain)
$\square$ GOVERNMENT Complete Sections 2, 3, 4, 10, 13, 15, 16
SECTION 3 Type of license and fees LICENSE \#(s): $\qquad$

1. Type of License(s): $\qquad$
2. Total fees attached:

## APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE.

 The fees allowed under A.R.S. $44-6852$ will be charged for all dishonored checks.
2. Corp./Partnership/L.L.C.: $\qquad$
(Exactly as it appears on Articles of Inc. or Articles of Org.)
3. Business Name: $\qquad$
(Exactly as it appears on the exterior of premises)
4. Principal Street Location $\qquad$
5. Business Phone: Pending
(Do not use PO Box Number)
ne: 8 812484920 city Email:

County Zip
6. Is the business located within the incorporated limits of the above city or town? $\square$ YES $\square$ NO
7. Mailing Address: $\qquad$ City
wine, or liquor store: Type
$\$$
Type $\qquad$ \$

## DEPARTMENT USE ONLY


$\overline{\text { Interim Permit }}$
Site Inspection


Is Arizona Statement of Citizenship \& Alien Status For State Benefits complete? YES $\square$ NO

*Disabled individuals requiring special accommodation, please call (602) 542-9027.


SECTION 4 Applicant

3. Business Name. (Exaclly as it appears on the exterior of premises)

5. Business Phone: $\because 10-226-742$ gaytime Phone:
6. Is the business located within the incorporated limits of the above city or town? XYES ロNO
7. Mailing Address: 7000 E. Shea Blvd., Ste. H-1990, Scottsdale, AZ 85254
8. Price paid for license only bar, beer and wine, or liquor store: Type Serles 6 Sale $\$ 66,00 \mathrm{Z}$. 00


## SECTION 5 Interim Permit:

1. If yuy intend to operate business when your application is pending you will need an Interim Permit pursuant to A.R.S. 4-201 01.
2. There MU\{T be a valid license of the same type you are applying for currently issued to the location.
3. Enter the license number currently at the location. $\qquad$ —
4. Is the license cukently in use? $\square$ YES $\square$ NO If no, how long has it been out of use? $\qquad$

## ATTACH THE LICENSE CURRENTLYISSUED AT THE LOCATION TO THIS APPLICATION.

1. $\qquad$ , declare that I am the CURRENT OWNER, AGENT, CLUB MEMBER, PARTNER, (Print full name) MEMBER, STOCKHOLDER, UR LICENSEE (circle the title which applies) of the stated license and location.


SECTION 6 Individual or Partnership Owners:
EACH PERSON USTED MUST SUBMT A COMPLETED QUESTIONNAIRE (FORM MC0101), AN "APPUCANT" TYPE FINGERPRINT CARD, AND \$22 PROCESSING FEE FOR EACH CARD.

1. Individual:


Partnership Name: (Only the first partner listed will appear on license) $\qquad$

| General | Last | Firsi | Middle | \% Onmed | Mailing Addrass | City State Zip |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\square \square$ |  |  |  |  |  |  |
| $\square \square$ |  |  |  |  |  |  |
| $\square \square$ |  |  |  |  |  |  |
| $\square \square$ |  |  |  |  |  |  |

2. Is any person, other than the above, going to share in the profitsfosses of the business? $\square$ YES $\square$ NO If Yes, glve name, current address and telephone number of the person(s). Use addilional sheets if necescary.


SECTION 7 Corporation/Limited Llability Co.:
EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNARE (FORMLCO101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND S22 PROCESSING FEE FOR EACH CARD.
$\square$ CORPORATION Complete questlons 1, 2, 3, 5, 6, 7, and 8.
L.L.C. Complete 1, 2, 4, 5, 6, 7, and 8.

1. Name of Corporation/L.L.C.: Laugh Factory-Arizona, LLC
(Exactly as it appears on Artides of Incorporation or Articles of Organizalion)
2. Date Incorporated/Organized: December 26,2013 State where Incorporated/Organized: Arizona
3. AZ Corporation Commission Flle No.: $\qquad$ Date authorized to do business in AZ:
4. AZ L.L.C. File No: L-1894458-3_ Date authorized to do business in AZ: .. $12-30-13$
5. Is Corp./L.L.C. Non-profit? $\square$ YES : NO
6. List all directors, officers and members in Corporation/L.L.C.:

(ATTACH ADDITIONAL SHEET IF NECESSARY)
7. List stockholders who are controlling persons or who own $10 \%$ or more:

(ATTACHADDITIONAL SHEETIF NECESSARY)
8. If the corporation/L.L.C. is owned by another entity, attach a percentage of ownership chart, and a director/officer/member dilsclosure for the parent entity. Attach addilional sheets as needed in order to disciose personal identitles of all owners. SECTION 8 Club Applicants:
EACH PERSONLISTED MUSTEUBMT A CONPLEIED QUESTIONNAIRE (FORMUCO101), AN "APPLCANT" TYPE FINGERPRINT CARD, AND \$22 PROCESSING FEE FOR EACH CARD.


## 

1. Current Licensee's Name: (Exactly as it appears on license)
L_ Last First Middle
2. Assignee's Name: $\qquad$ First Middle
3. License Type: $\qquad$ last Firs
4. ATTACH TO THIS APPLICATION A CERTIFIED COPY OF THE WILL, PROBATE DISTRIBUTION INSTRUMENT, OR DIVORCE DECREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THIS APPLICATION.

SECTION 10 Government: (for cities, towns, or counties only)

1. Governmental Entity:
2. Person/designee: $\qquad$ Contact Phone Number

## A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED.

## SECTION 11 Person to Person Transfer: <br> 

1. Current Licensee's Name: $\qquad$ Entity: $\qquad$
2. Corporation/L.L.C. Name:
(Exactly as it appears on license)
3. Current Business Name: $\qquad$
4. Physical Street Location of Business: Street $\underset{t}{T}$

City, State, Zip
5. License Type: $\qquad$ License Number: $\qquad$
6. If more than one license to be transfered: License Type: $\qquad$ License Number: $\qquad$
7. Current Mailing Address: street _10111 N. E/ Mirage, Ste. 5 Mirage, $A=85335$
City, State, Zip $\qquad$
8. Have all creditors, lien holders, interest holders, etc. been notified of this transfer? $\square$ YES $\square$ NO
9. Does the applicant intend to operate the business while this application is pending? $\square$ YES $\square$ NO If yes, complete Section 5 of this application, attach fee, and current license to this application.
10. I, $\qquad$ hereby authorize the department to process this application to transfer the (print full name)
privilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of these conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue.

I, $\qquad$ declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNER

STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are true, correct, and complete.
(Signature of CURRENT LICENSEE)
State of $\qquad$ County of $\qquad$ The foregoing instrument was acknowledged before me this

My commission expires on: $\qquad$

## - SECTION 9 Probate, Will Assignment or Divorce Decree g an existing Bar or Liquor Store License:

1. Current Licensee's Name: $\qquad$ (Exactly as it appears on license)

Last First
Middle
2. Assignee's Name: $\qquad$
st Middle
3. License Type: Last First Middle
3. License Type: $\qquad$ License Number: Date of Last Renewal: $\qquad$
4. ATTACH TO THIS APPLICATION A CERTIFIED COPY OF THE WILL, PROBATE DISTRIBUTION INSTRUMENT, OR DIVORCE DECREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THIS APPLICATION

SECTION 10 Government: (for cities, towns, or counties only)

1. Governmental Entity:
2. Person/designee: $\qquad$ Contact Phone Number

## A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED.

## SECTION 11 Person to Person Transfer:

Questions to be completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY-Series 06,07, and 09).

1. Current Licensee's Name: $\underset{\text { (Exactly as it appears on license) }}{\text { Buttrum }}$ Last Donald $\quad$ First $\quad$ Paul $\quad$ Middle $\quad$ Entity: $\frac{\text { Agent }}{\text { (Indiv., Agent, etc.) }}$
2. Corporation/L.L.C. Name: $\frac{\text { Desert Wind Investment, Inc. }}{\text { (Exactly as it appears on license) }}$
(Exactly as it appears on license)
3. Current Business Name: $\frac{\text { Creekside Event Center }}{\text { (Exactly as it appears on license) }}$
4. Physical Street Location of Business: Street 22640 N. 21st Avenue

$$
\text { City, State, Zip Phoenix, AZ } 85027
$$

5. License Type: 06

License Number: 06070711
6. If more than one license to be transfered: License Type: $\qquad$ License Number: $\qquad$
7. Current Mailing Address: (Other than business)

$$
\text { City, State, Zip for } A x
$$


8. Have all creditors, lien holders, interest holders, etc. been notified of this transfer? XX YES $\square$ NO
9. Does the applicant intend to operate the business while this application is pending? $\square$ YES $\mathbb{X N O}$ If yes, complete Section 5 of this application, attach fee, and current license to this application.
10. I, Donald Paul Buttrum ,___ hereby authorize the department to process this application to transfer the (print full name)
privilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of these conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue.
I. $\frac{\text { Donald Paul Buttrum }}{\text { (print full name) }}$
, declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNER

STOCKHQLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are true, correct, and complete.
(Signature of CURRENT LICENSEE)

State of Arizona County of Maricopa The foregoing instrument was acknowledged before me this


## License 06070711

Issue Date: 10/22/2010
Issued To:
DONALD PAUL BUTTRUM, Agent
DESERT WIND INVESTMENT INC, Owner

## Location:

CREEKSIDE EVENT CENTER
22640 N 21 ST AVE
PHOENIX, AZ 85027

Expiration Date: 1/31/2015
Bar

## Mailing Address:

DONALD PAUL BUTTRUM
DESERT WIND INVESTMENT INC
CREEKSIDE EVENT CENTER
22640 N 21ST AVE
PHOENIX, AZ 85027


# SECTION 12 Location to Location Transfer: (Bars and Liquor Stores ONLY) APPLICANTS CANNOT OPERATE UNDER A LOCATION TRANSFER UNTIL IT IS APPROVED BY THE STATE 

1. Current Business:
(Exactly as it appears on license)

Name Creekside Event Center
Address 22640 N. 21st Avenue, Phoenix, AZ 85027
Name Laugh Factory-Arizona
Address 7000 E. Shea Blvd., Ste. H-1990, Scottsdale, AZ 85254
3. License Type: Series 6 Bar License Number: 06070711
4. If more than one license to be transferred: License Type:N/A License Number: N/A
5. What date do you plan to move? September 1, 2014 What date do you plan to open? October 1, 2014

SECTION 13 Questions for all instate applicants excluding those applying for government, hotel/motel, and restaurant licenses (series 5, 11, and 12):
A.R.S. § 4-207 (A) and $(B\rangle$ state that no retailer's license shall be issued for any premises which are at the time the license application is received by the director, within three hundred ( 300 ) horizontal feet of a church, within three hundred ( 300 ) horizontal feet of a public or private school building with kindergarten programs or grades one (1) through (12) or within three hundred (300) horizonal feet of a fenced recreational area adjacent to such school building. The above paragraph. DOES NOT apply to:
a) Restaurant license ( $\S 4-205.02$ )
c) Government license (§ 4-205.03)
b) Hotelmotel license (§ 4-205.01)
d) Fenced playing area of a golf course (§ 4-207 (B)(5))

1. Distance to nearest school:

ft. Name of school Cluaparvil High Sch col Address

2. Distance to nearest church: $\qquad$ ft. Name of church Fiahail Faith Coinmuinify Address $\frac{12910 \text { E. Shea Bud Scottsdale, } 42 \quad 85254}{\text { City, State, Zip }}$
$\square$ Owner $\square$ Purchaser (of premises)
3. 1 am the: Lessee
$\square$ Sublessee
4. If the premises is leased give lessors: Name 7000 Shea Boulevard, LLC, a Delaware corporation

Address $\frac{\text { c/o Younan Properties, Inc., } 5959 \text { Topanga Canyon Blvd., Ste. 200, Woodland } 4 \text { It }}{\text { City, State, Zip }}$
Aa. Monthly rentallease rate $\$ 7,750.00$
What is the remaining length of the lease 5 yrs. 6 $\qquad$ mos.
tb. What is the penalty if the lease is not fulfilled? $\$$ $\qquad$ or other Standard Commercial Lease Default Te\# (give details - attach additional sheet if necessary)
5. What is the total business indebtedness for this licenseflocation excluding the lease? $\$$ $\qquad$ Zero (00.00) Please list lenders you owe money to.

(ATTACH ADDITIONAL SHEET IF NECESSARY)
6. What type of business will this license be used for (be specific)? Improvisational Comedy Club
7. Has a license or a transfer license for the premises on this application been denied by the state within the past one (1) year? $\square$ YES $\boxtimes$ NO if yes, attach explanation.
8. Does any spirituous liquor manufacturer, wholesaler, or employee have any interest in your business? $\square$ YES $\mathbb{X}$ NO
9. Is the premises currently licensed with a liquor license? $\square$ YES $\otimes$ NO if yes, give license number and licensee's name:

License \#N/A (exactly as it appears on license) Name

SECTION 14 Restaurant or hotel/motel license applicants:

1. Is therban existing restaurant or hotel/motel liquor license at the proposed location? $\square$ YES $\square$ NO If yes, give name of licensee, Agent or a company name:

and license \#:
2. If the answer to Question 1 ISYES, you may qualify for an Interim Permit to operate whlle your application is pending; consult A.R.S. § 4-203.01; and complete SECTION 5 of this application.
3. All restaurant and hotel/motel applicants tupst complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor Licenses and Control.
4. As stated in A.R.S. § 4-205.02.G.2, a restaurant is anestablishment which derives at least 40 percent of its gross revenue from the sale of food. Gross revenue is the revenue dethed from all sales of food and spirituous liquor on the licensed premises. By applying for this $\square$ hotel/motel $\square$ restaurant lioense, I certify that I understand that I must maintain a minimum of 40 percent food sales based on these definitions and neye included the Restaurant Hotel/Motel Records Required for Audit (form LIC 1013) with this application.


As stated in A.R.S § 4-205.02 (B), I understand it is my responsibility to contact the Department of Liquor Licenses and Control to schedule an inspection when all tables and chairs are on site, kitchen equipment, and, if applicable, patio barriers are in place on the licensed premises. With the exception of the patio barriers, these items are notrequired to be properly installed for this inspection. Failure to schedule an inspection will delay issuance of the license. If you ace not ready for your inspection 90 days after filing your application, please request an extension in writing, specify why the extention is necessary, and the new inspection date you are requesting. To schedule your site inspection visit www.azliquor.gov and clicion the "Information" tab.

## applicants initials

SECTION 15 Dlagram of Premises: (Blueprints not accepted, dlagram must be on this form)

1. Check ALL boxes that apply to your business:
区 Entrances/Exits
Llquor slorage areas
Patio: $\square$ Contiguous
$\square$ Service windows
$\square$ Drive-in windows
[ Non Contiguous
2. Is your licensed premises currently closed due to construction, renovation, or redesign? $\boxtimes$ YES $\square$ NO If yes, what is your estimated opening date? October 1, 2014 month/day/year
3. Restaurants and hotel/motel applicants are required to draw a detailed floor plan of the kitchen and dining areas including the locations of all kitchen equipment and dining furniture. Diagram paper is provided on page 7.
4. The diagram (a detailed floor plan) you provide is required to disclose only the area(s) where spiritous liquor is to be sold, served, consumed, dispensed, possessed, or stored on the premises unless it is a restaurant (see \#3 above).
5. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed premises, such as parking lots, llving quarters, etc.
As stated In A.R.S. § 4-207.01 (B), I understand It Is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to boundaries, entrances, exits, added or deleted doors, ythdaws or service windows, or Increase or decrease to the square footage after submitting this initial drawing.

## SECTION 15 Diagram of Premises

4. In this diagram please show only the area where spirituous liquor is to be sold, served, consumed, dispensed, possessed or stored. It must show all entrances, exits, interior walls, bars, bar stools, hi-top tables, dining tables, dining chairs, the kitchen, dance floor, stage, and game room. Do not Include parking lots, living quarters, etc. When completing diagram, North is up $\uparrow$.

If a legible copy of a rendering or drawing of your diagram of premises is attached to this application, please write the words "diagram attached" in box provided below.
See Attached

## SECTION 16 Signature Block

Paul C. Rodriguez
(print full name of applicant)
application as stated ins Section 4, Question 1. I have read this application and verify all statements to be true, connect and complete
(signature of applicant lIsted in Section 4, question 1)

My commission expires on :
 County of


The foregoing instrument was acknowledged before me this



Total Square Footage of Premises HLOORPLANOM， 9,78759 ．Tf
\＃06070711 Hopp，Paul Laugh Factory－Afizon


Total Square Footage of Premises FLOORPLAND $\quad$,787 sq. AT

