## Meeting 3/9/15 217/15 #117304 **Special Event** Licensing Office 55 North Center Street PO Box 1466 **Liquor License** Mesa, Arizona 85211-1466 sava 480-644-2316 Telephone Application 480-644-3999 Fax www.mesaaz.gov Attachment B FEB 0 9 2015 CITY OF MESA LICENSIN'S OFFICE If you are having alcohol sales you will need to obtain a Special Event Liquor License or an Extension of

Premises from City of Mesa Licensing Office. This must be submitted at least 60 days prior to the event. A license is required with special provision outlined. Plan a minimum of 60 days to complete this process.

Check all that apply:

Free/Host Alcohol

Alcohol Sales

Host and Sale Alcohol

Beer

Beer and Wine

Beer, Wine and Distilled Spirits

Do you plan to secure a:

Special Event Liquor License - The Special Event Liquor License fee is \$25 and must be approved by the City Council. After city approval, your application must be submitted to and approved by the State of Arizona. There are fees involved at the State. A non-profit association must obtain this license. (Complete State of Arizona Special Event Liquor Application and site plan.)

OR

**Extension of Premises License** - There is no fee involved with the Extension of Premises. This is allowed when a liquor license is already in affect and you want to extend the area where liquor is sold. (Complete State of Arizona Extension of Premises Application and site plan.)

Please describe your security plan to ensure the safe sale or distribution of alcohol at your event

1D check point@ entrance. Security@ point of Sales
Coloned white the nds & stampson ALL 21 ovolder
If applying for a Special Event Liquor License the following must be provided: Sighage 21 or Older
LIVENTY WITHTE FOUNDATION 94-0138101
Charity's or Organization's Name Stevens UPISRATION DIRECTOR 501 (C)# 480.998.0230
Name of Contact at Charity/Organization Title with Organization Phone Number
On-Site Agent Responsible for Liquor
How will attendees over the age of 21 be identified?VIStbands - Colored
Stamp on Hand

What controls will be used to keep attendees under the age of 21 from obtaining alcohol at the event?				
Fencing, Police, Security, Unstands, Will food be served? X Yes No If yes, what type of food will be served FOOD THICKS				
Will food be served? Yes No If yes, what type of food will be served FOOD THICKS				

Seating capacity of designated area: # 3000.

Melting 3/9/15 Alerda 2/17/15		
DECEIVE Department of Liquor Licenses and Control	FOR DLLC US Event date(s):	EONLY
FEB 0 9 2015 Phoenix AZ 85007-2934 www.azliquor.gov 1602) 542-5147	Event time start/en	d:
CITY OF MESA LICENSING OFFICE APPLICATION FOR SPECIAL EVENT LICEN Fee= \$25.00 per day for 1-10 days (consecuti A service fee of \$25.00 will be charged for all dishonored checks (A.R	ve)	
IMPORTANT INFORMATION: This document must be fully completed or it The Department of Liquor Licenses and Control must receive this application ten ( event. If the special event will be held at a location without a permanent liquor license portion of a location that is not covered by the existing liquor license, this applicat local government before submission to the Department of Liquor Licenses and Control SECTION 1 Name of Organization:	(10) business days se or if the event wi ion must be approximately ap	ll be on any oved by the
SECTION 2 Non-Profit/IRS Tax Exempt Number: 94-27381	0	
SECTION 3 The organization is a: (check one box only) Charitable (501.C) Fraternal (must have regular membership and have been in Religious Civic (Rotary, College Scholarship) Political Party, Ballot Measure or SECTION 4 Will this event be held on a currently licensed premise and within the alread Yes No	r Campaign Comn	nittee
Name of BusinessLicense NumberSECTION 5How is this special event going to conduct all dispensing, serving, andPlease read R-19-318 for explanation (look in special event planning guide) and check		ous liquors?
Place license in non-use		
Dispense and serve all spirituous liquors under retailer's license		
Dispense and serve all spirituous liquors under special event		
Split premise between special event and retail location (If <u>not</u> using retail license, submit a letter of agreement from the agent/owner of the license during the event. If the special event is only using a portion of premise, agen portion of the premise.)		
SECTION 6 What is the purpose of this event? Son-site consumption	auction) 🛛 Both	
SECTION 7 Location of the Event: <u>Chester's Harley-Day</u> Address of Location: <u>922 S. Country Olu</u> Street city	County/State	A2 Zip
SECTION 8 Will this be stacked with a wine festival/craft distiller festival? Yes	No	
<b>SECTION 9</b> Applicant must be a member of the qualifying organization and authorize Chairperson of the Organization named in Section 1. (Authorizing signature is required		irector or
1. Applicant: STEVENS TERRY JOHN	REDACTED	
1. Applicant: JENEN TERNY JENN Last First Middle	Date of B	irth
2. Applicant's mailing address: P. U. BUX 14345 SCUTTORUE	AZ d	5267
2. Applicant's mailing address: <u>P, v, B v X 143 45</u> Street City 3. Applicant's home/cell phone: <u>REDACTED</u> Applicant's business p	state hone: 1480 1 998	- 0230
4. Applicant's email address: TERRY SELIBERTY WILDLIGE OR G	·····//	

10/17/14

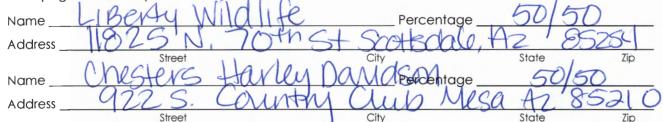
Page 1 of 4 Individuals requiring ADA accommodations call (602)542-9027.

## SECTION 10

1. Has the applicant been convicted of a felony, or had a liquor license revoked within the last five (5) years?

Yes No (If yes, attach explanation.)

- 3. Is the organization using the services of a promoter or other person to manage the event? (If yes, attach a copy of the agreement.)
- 4. List all people and organizations who will receive the proceeds. Account for 100% of the proceeds. The organization applying must receive 25% of the gross revenues of the special event liquor sales. Attach an additional page if necessary.



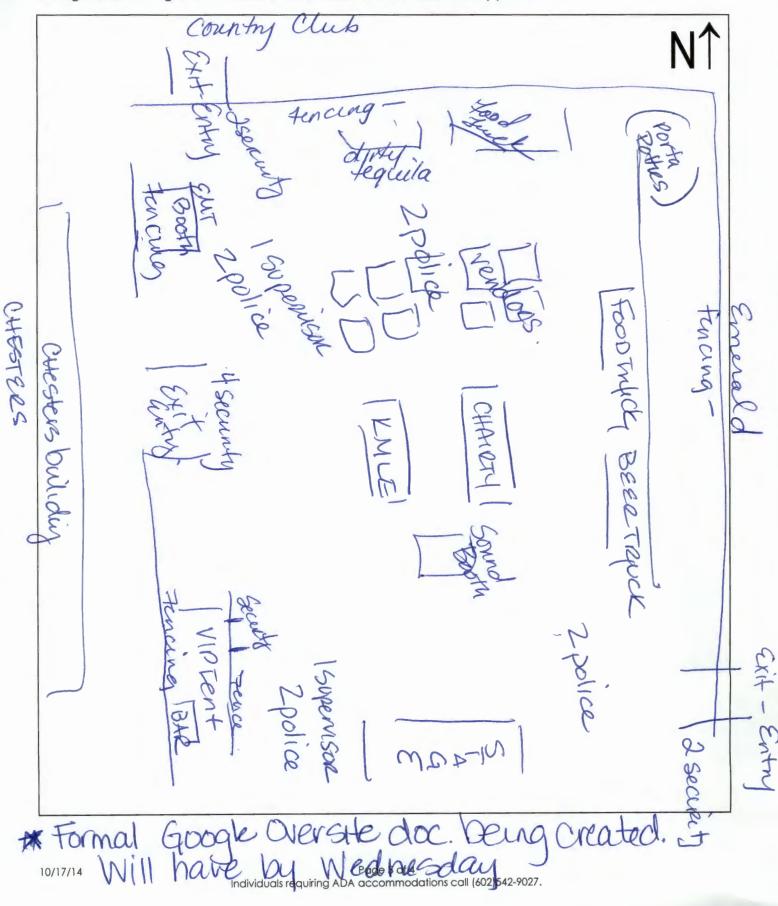
- 5. Please read A.R.S. §4-203.02 <u>Special event license; rules</u> and R19-1-205 <u>Requirements for a Special Event License</u>. Note: ALL ALCOHOLIC BEVERAGE SALES MUST BE FOR CONSUMPTION AT THE EVENT SITE ONLY. "NO ALCOHOLIC BEVERAGES SHALL LEAVE SPECIAL EVENT UNLESS THEY ARE IN AUCTION SEALED CONTAINERS OR THE SPECIAL EVENT LICENSE IS STACKED WITH WINE /CRAFT DISTILLERY FESTIVAL LICENSE"
- 6. What type of security and control measures will you take to prevent violations of liquor laws at this event? (List type and number of police/security personnel and type of fencing or control barriers, if applicable.)

<u>\_</u>8\_Number of Police <u>\_</u>10\_Number of Security Personnel Tencing Tearriers Explanation: <u>10 Check point@ Entrance</u>·<u>Security@ point of Sales</u> <u>Colored Whist bands and stamp on all 21 or Older</u> <u>Signage-Must be 21</u>.

**SECTION 11** Date(s) and Hours of Event. May not exceed 10 consecutive days. See A.R.S. §4-244(15) and (17) for legal hours of service.

A	Date	Day of Week	Event Start Time AM/PM	License End Jime AM/PM
MARGAH -	20TH	Friday	Zpm-Ilpn	1 2pm-1039M
DAY 2:				
DAY 3:				
DAY 4:				
DAY 5:				
DAY 6: _		,		
DAY 7: _				
DAY 8: _				
DAY 9:				
DAY 10:				

**SECTION 12** 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. The following space is to be used to prepare a diagram of your special event licensed premises. Please show dimensions, serving areas, fencing, barricades, or other control measures and security position.





SECTION 13 This section is to be completed only by an Officer, Director or Chairperson of the organization				
named in Section 1.				
I, <u>TERRY JUHN VIEVENU</u> (Print full name) appointing the applicant listed in Section 9, to a	declare that I am an C	OFFICER, DIRECTOR, o	or CHAIRPERSON a Special Event	
		• •		
Liquor License.				
* jenny Turun (Signature)	OPERATIONS DIRECTOR	2-8-15	REDACTED	
(Signature)	Title/ Position	Date	Phone #	
The foregoing instrument was acknowledged be	efore me this	February Month	LC/5 Year	
State Argona County of Mar	1Copa_			
My Commission Expires on: My Commission Expires on: My Commission Expires Date September 03, 2016 My Commission Expires Date September 03, 2016				
			<u> </u>	
<b>SECTION 14</b> This section is to be completed only by the applicant named in Section 9.				
I, <u>IERRY</u> JOHN VIEVENY declare that I am the APPLICANT filing this application as (Print full name) listed in Section 9. I have read the application and the contents and all statements are true, correct and				
complete.				
1 the			REDACTED	

* un lum	OPERATIONS DINRITON	2-8-15	REDACTED	
(Signature)	Title/ Position	Date	Phone #	
The foregoing instrument was acknowledged before me this <u>B</u> <u>A</u> <u>Fibruary</u> <u>2015</u> Day Month Year				
state Anyone County of Mouropa				
My Commission Expires on:	ARY PUBLIC - ARIZONA ARY PUBLIC - ARIZONA MARICOPA COUNTY Commission Expires September 08, 2015	yin Burnan e of Notary Public	L	

The local governing body may require additional applications to be completed and submitted. Please check with local government as to how far in advance they require these applications to be submitted. Additional licensing fees may also be required before approval may be granted. For more information, please contact your local jurisdiction: <a href="http://www.azliquor.gov/assets/documents/homepage\_docs/spec\_event\_links.pdf">http://www.azliquor.gov/assets/documents/homepage\_docs/spec\_event\_links.pdf</a>.

SECTION 15 Local Governing Body Approval Section					
l,(government official)		(Title)			
on behalf of	(City, Town, County		Signature	,,,,,,,,,,	Phone
FOR DEPARTMENT OF LIQUOR LICENSES AND CONTROL USE ONLY					
		BY:		DATE:	

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Internal Revenue Service P.O. Box 2508 Cincinnati, OH 45201

Date: SEP 01 2006

Liberty Wildlife Rehabilitation Foundation, Inc 11825 North 70<sup>th</sup> Street Scottsdale, AZ 85254 Department of the Treasury

Person to Contact: Steven F. Bowling Toll Free Telephone Number: 877-829-5500 Employer Identification Number: 94-2738161

Dear Sir or Madam:

This is in response to your request of March 2, 2006, regarding your tax-exempt status.

Our records indicate that a determination letter was issued June 21, 1983, that recognized you as exempt from Federal income tax. Our records further indicate that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records also indicate you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section 509(a)(2).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,

indu Wert CAT Westcott

Manager, Exempt Organizations Determinations

TOTAL P.02