| HIMM Special Event Liquor License Application Attachment B | fice. This must be submitted | at least 60 days prior to the event. A |
|---|--|--|
| Check all that apply: | | |
| Free/Host Alcohol Alcohol Sales Host and Sale Alcohol | Beer and Beer W | d Wine ine and Distilled Spirits |
| Do you plan to secure a: | | |
| Special Event Liquor License - The Sp Council. After city approval, your application fees involved at the State. A non-profit asso Liquor Application and site plan.) OR | must be submitted to and appr | oved by the State of Arizona. There are |
| liquor license is already in affect and you war Extension of Premises Application and site pla | at to extend the area where lique | |
| | | cohol at your event Alcohol will |
| | | er ballroom during the |
| event. Only residents who | have purchased tic | Kets to the event will be served provided: Community Security will be on si |
| | | |
| Fountain of the Sun Commu Charity's or Organization's Name <u>Heather Roberts</u> Name of Contact at Charity/Organization <u>Heather Roberts</u> Activities On-Site Agent Responsible for Liquor | Activities Di Title with Organizat | |
| How will attendees over the age of 21 be iden | ntified? ID will be ch | ecked at the door when |
| tickets are collected and member or volunteer will | | |
| What controls will be used to keep attendees | under the age of 21 from obtair | ning alcohol at the event? No one |
| Will food be served? XYes \ No If yes, | | |
| Seating capacity of designated area: # 30 | | |



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

| FOR DLLC USE ONLY |
|-------------------|
|-------------------|

2.5

Event Date(s):

Event time start/end:

CSR:

License:

Fee= \$25.00 per day for 1-10 days (consecutive) 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 15).

APPLICATION FOR SPECIAL EVENT LICENSE

| SECTION 1 Name of Organization: FOU | ntain of the | Sun Comm | unity Ass | ociation |
|---|--|---------------------|-------------------|------------------------|
| SECTION 2 Non-Profit/IRS Tax Exempt Number | er: 94292377 | 4 | | |
| SECTION 3 The organization is a: (check one Charitable Fraternal (must have regular Religious Civic (Rotary, College Scholars | membership and have b | | | - |
| <u>SECTION 4</u> Will this event be held on a curre | ntly licensed premise an | d within the alread | dy approved premi | ses?□Yes XNO |
| Nome of Business | License | Number | Phone (include A | vreo Code) |
| SECTION 5 How is this special event going to 318 for explanation (look in special event pla Place license in non-use Dispense and serve all spirituous lique Split premise between special event | nning guide) and check ors under retailer's licens ors under special event | one of the followi | • | xrs? Please read R-19- |
| (If <u>not</u> using retail license, submit a letter of event. If the special event is only using a | of agreement from the age | | | |
| SECTION 6 What is the purpose of this event | ? 💢 On-site consumptio | on 🛛 🗖 Off-site (au | ction) 🛛 Both | |
| SECTION 7 Location of the Event: Foun | tain of the Su | n Activity | Center | |
| Address of Location: 560 | S 80th St 1 Street | Uesa K | COUNTY | AZ 85208 State Zip |
| SECTION 8 Will this be stacked with a wine fe | estival/craft distiller festive | al? 🛛 Yes 🕅 No |) | |
| SECTION 9 Applicant must be a member of of the Organization named in Section 1. (Aut | | | | ctor or Chairperson |
| 1. Applicant: <u>Roberts</u> | Heather | Middle | REDACT | |
| 2. Applicant's mailing address: 540 | S SOth St Street | Mesa | AZ State | <u>85208</u> Zip |

| 3. A | pplicar | nt's hon | ne/cel | phone: | (| _) | | | Applicant's business p | hone: (<u>480</u>) | 380. | 4000 |
|------|---------|----------|--------|--------|---|----|----|-----|----------------------------|----------------------|------|------|
| | | | | | 1 | 1 | 00 | 1 - | | | | |

4. Applicant's email address: heather @ tos - az. com

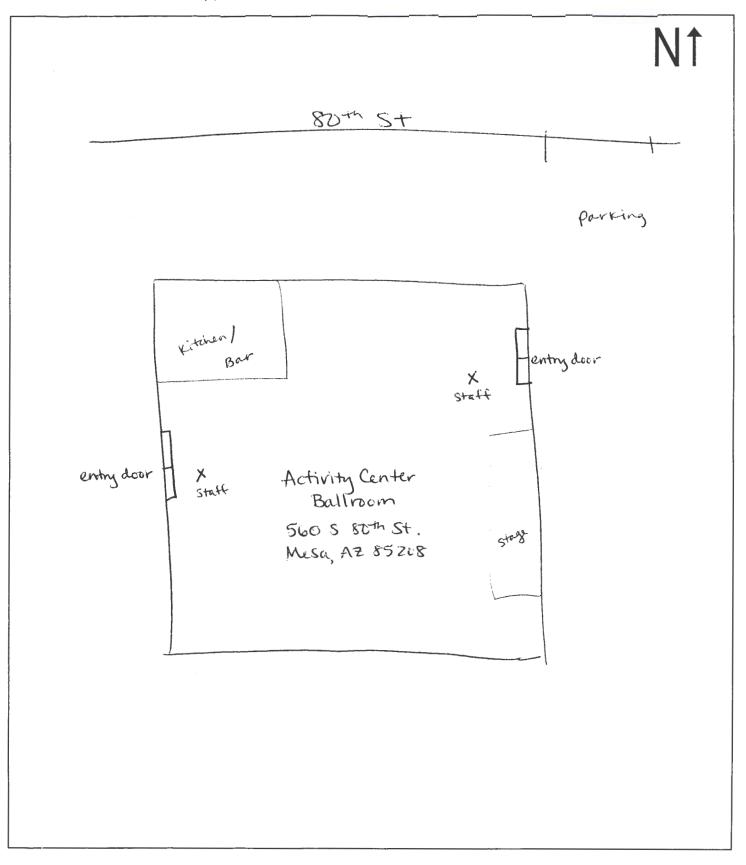
SECTION 10

| Has the applicant been convicted of a felony, or had a liquor lic Yes XNO (if yes, attach explanation.) | cense revoked within the | last five (5) ye | ears? |
|--|---|----------------------------|----------------------------------|
| 2. How many special event licenses have been issued to this locati (The number cannot exceed 12 events per year; e | exceptions under A.R.S. §4-20 | | |
| 3. Is the organization using the services of a promoter or other personal | on to manage the event (If yes, attach a copy of t | ? Yes An he agreement.) | 40 |
| 4. List all people and organizations who will receive the proceeds. applying must receive 25% of the gross revenues of the special e | event liquor sales. Attach | an additiond | Il page if necessary. |
| Name Fountain of the Sun Community Address 540 S 80th St Assoc | Percentage: 10C | > | |
| Address 540 S 80th St Assoc | city Mesa | A Z State | 85208 |
| Street | City | Juic | |
| | | | |
| AddressStreet | City | State | Zip |
| 5. Please read A.R.S. § 4-203.02 <u>Special event license; rules</u> and R15 Note: ALL ALCOHOLIC BEVERAGE SALES MUST BE FC <u>"NO ALCOHOLIC BEVERAGES SHALL LEAVE SPECIAL EVENT UNLE</u> <u>SPECIAL EVENT LICENSE IS STACKED WITH WINE</u> | DR CONSUMPTION AT THE ESS THEY ARE IN AUCTIC | N SEALED CO | ONLY. ONTAINERS OR THE |
| 6. What type of security and control measures will you take to prev (List type and number of police/security personnel and type of fencing or co | | ws at this eve | nt? |
| Number of PoliceNumber of Sec. | ecurity Personnel | Fencing | Barriers |
| Explanation: Event will be held within cw | r ballroom an | & IDSI | will be |
| checked int the door by Staff or Volu | nteer. Securi | ty is ci | n-site |
| within the community and periodica | Illy chocks the | prent | hallmom |

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.

| | Date | Day of Week | Event Start Time AM/PM | License End Time AM/PM |
|---------|---------|-------------|---------------------------|---------------------------|
| DAY 1: | 3/12/10 | Saturday | 4:00 pm | 9:00 pm |
| DAY 2: | | | | |
| DAY 3: | ··· | | | |
| DAY 4: | ····· | | | |
| DAY 5: | | | | |
| DAY 6: | | | | |
| DAY 7: | · | ······ | | |
| DAY 8: | | | | |
| DAY 9: | | | <u> </u> | <u> </u> |
| 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 To be completed only by an Officer, Di | irector or Chairperson of the | e organization nan | ned in Section 1. |
|--|-------------------------------|--------------------------|---|
| 1. Larry J. Shima, fres. (Print Full Name) | declare that I am an C | OFFICER, DIRECTO | R, or CHAIRPERSON |
| appointing the applicant listed in Section 9, to ap Liquor License. | oply on behalf of the foreg | going organization | for a Special Event |
| | FOSCA President | 10 · 6 · 15 Date | 480-380-4000 Phone # |
| The foregoing instrument was acknowledged before | e me this | Octob | er 2015 |
| State Anzona County of Mancopa | Day | Month | Notary Public, State of Arizona Maricopa County |
| My Commission Expires on: May 24, 24 p | Reven m Jost | gnature of Notary Public | My Commission Expires May 29, 2016 |
| · · · · · · · · · · · · · · · · · · · | | | |
| SECTION 14 This section is to be completed only by | the applicant named in Se | ection 9. | |
| 1. Heather Roberts | declare that I am the | APPLICANT filing | this application as |
| (Print Full Name) listed in Section 9. I have read the application | | | |
| complete. | | 10.115 | 110 250 (1000) |
| x hathertobab | Activities Director | | 480.330.400 |
| (Signature) | Title/ Position | Date | Phone # |
| The foregoing instrument was acknowledged before | a mathic (a | October | 2015 |
| | | in the second second | Constitution of the second discount of the second discount of the second discount of the second discount of the |
| state Añ 200a County of Mancopa | Day | Month | TERESA M. JUDD |

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: <u>http://www.azliquor.gov/assets/documents/homepage_docs/spec_event_links.pdf</u>.

| SECTION 15 Local Governing Body | Approval Section | n | | |
|----------------------------------|------------------|------------------|---|--------|
| ,(Government Official) | (Title) | recommend | | PROVAL |
| on behalf of(City, Town, County) | / | Signature | ,,, | Phone |
| FOR DEPA | RTMENT OF LIQ | UOR LICENSES AND | CONTROL USE ONLY | |
| | Y: | | _ DATE: | |

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

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.

Search Date and Time: 10/21/2015 2:10:29 PM

File Number: 01605630

Corporation Name: FOUNTAIN OF THE SUN COMMUNITY ASSOCIATION

| | a File Approval Deport |
|--------------------------------------|--|
| | eFile Annual Report |
| Pr | int Annual Report Form |
| | Collapse Exp |
| Corporate Inquiry | |
| File Number | 01605630 |
| Corporation Name | FOUNTAIN OF THE SUN COMMUNITY ASSOCIATION |
| Standing | Check Corporate Status |
| Oomestic Address | |
| 540 S 80TH ST MESA, AZ 85208-6401 | |
| tatutory Agent Information | |
| Agent Name: CARPENTER HAZLEW(| |

Search Time: 10/21/2015 2:11:03 PM

File Number: 01605630

Corporation Name: FOUNTAIN OF THE SUN COMMUNITY ASSOCIATION

Corporate Status Inquiry

This Corporation is in Good Standing

This information is provided as a courtesy and does not constitute legally binding information regarding the status of the entity listed above. To obtain an official Certificate indicating that the entity is in good standing click on Print Certificate and follow printing instructions. To reprint a previously generated Certificate of Good Standing click Reprint Certificate.

Print Certificate (/GoodStanding/PrintInstructions?corpId=%2001605630)

Reprint Certificate (/GoodStanding/Reprint?corpId=%2001605630)

Return to Corporate Details (/Details/Corp?corpId=%2001605630)

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