

#118177  
**Special Event  
Liquor License  
Application  
Attachment B**

Meeting 9/12/16 Agenda 8/23/16

Licensing Office  
55 North Center Street Mailing  
Address:  
PO Box 1466  
Mesa, Arizona 85211-1466  
480-644-2316 Telephone  
480-644-3999 Fax  
www.mesaaz.gov/business/licensing



If you intend to serve alcohol at your special event, 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 provisions outlined. Plan a minimum of 60 days to complete this process.

Check all that apply:

- ☒ Free/Host Alcohol  
☐ Beer  
☐ Alcohol Sales  
☐ Beer and Wine  
☐ Host and Sale Alcohol  
☐ 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. This license can only be obtained by a non-profit organization, 501(C). (Complete the [State of Arizona Special Event Liquor Application](#) and site plan.)

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

If this is an Extension of Premises, are there any other activities taking place except for the sale of liquor in the extended area? No ☐ Yes ☐ Type of activities taking place: \_\_\_\_\_

Please describe your security plan to ensure the safe sale or distribution of alcohol at your event Las Sendas staff will be working the event to serve and all are certified.

**If applying for a Special Event Liquor License the following must be provided:**

Cortney's Place 42-1745079  
Charity's or Organization's Name 501 (C)#  
Justin Watson Dev. and Mktg. Director REDACTED  
Name of Contact at Charity/Organization Title with Organization Phone Number  
Donnette M. Hermes Chief Executive Officer  
On-Site Agent Responsible for Liquor

How will attendees over the age of 21 be identified? All attendees must be 21 or over to participate in the golf event.

Bartenders will be carding before serving.

What controls will be used to keep attendees under the age of 21 from obtaining alcohol at the event? If they are under the age of 21 volunteering they will receive a neon wristband.

Will food be served? ☒ Yes ☐ No If yes, what type of food will be served Lunch and Dinner.

Seating capacity of designated area: # 320



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

Event Date(s):
Event time start/end:
CSR:
License:

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 15).

**SECTION 1** Name of Organization: Cortney's Place

**SECTION 2** Non-Profit/IRS Tax Exempt Number: 42-1745079

**SECTION 3** The organization is a: (check one box only)

- ☒ Charitable ☐ Fraternal (must have regular membership and have been in existence for over five (5) years)  
☐ Religious ☐ Civic (Rotary, College Scholarship) ☐ Political Party, Ballot Measure or Campaign Committee

**SECTION 4** Will this event be held on a currently licensed premise and within the already approved premises? ☒ Yes ☐ No

Las Sendas Golf Club

27-1130605

480-396-4000

Name of Business

License Number

Phone (include Area Code)

**SECTION 5** How is this special event going to conduct all dispensing, serving, and selling of spirituous liquors? Please read R-19-318 for explanation (look in special event planning guide) and check one of the following boxes.

- ☐ 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 NOT USING RETAIL LICENSE, SUBMIT A LETTER OF AGREEMENT FROM THE AGENT/OWNER OF THE LICENSED PREMISE TO SUSPEND THE LICENSE DURING THE EVENT. IF THE SPECIAL EVENT IS ONLY USING A PORTION OF PREMISE, AGENT/OWNER WILL NEED TO SUSPEND THAT PORTION OF THE PREMISE.)

**SECTION 6** What is the purpose of this event? ☒ On-site consumption ☐ Off-site (auction) ☐ Both

**SECTION 7** Location of the Event: Las Sendas Golf Club

Address of Location: 7555 East Eagle Crest Drive Mesa Maricopa AZ 85207

Street

City

COUNTY

State

Zip

**SECTION 8** Will this be stacked with a wine festival/craft distiller festival? ☐ Yes ☐ No

**SECTION 9** Applicant must be a member of the qualifying organization and authorized by an Officer, Director or Chairperson of the Organization named in Section 1. (Authorizing signature is required in Section 13.)

1. Applicant: Watson Justin T 05/11/1988

Last

First

Middle

Date of Birth

2. Applicant's mailing address: 7000 East Shea Blvd, Ste 1430 Scottsdale, AZ 85254

Street

City

State

Zip

3. Applicant's home/cell phone: (REDACTED) Applicant's business phone: (480) 491-5852

4. Applicant's email address: justin@cortneysplace.org



**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.)

2. How many special event licenses have been issued to this location this year? 0  
(The number cannot exceed 12 events per year; exceptions under A.R.S. §4-203.02(D).)

3. Is the organization using the services of a promoter or other person to manage the event? ☐ Yes ☒ No  
(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.

Name Cortney's Place Percentage: 100%

Address 7000 East Shea Blvd, Ste. 1430 Scottsdale, AZ 85254  
Street City State Zip

Name \_\_\_\_\_ Percentage: \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

5. Please read A.R.S. § 4-203.02 Special event license; rules and R19-1-205 Requirements for a Special Event License.

**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.)

0 Number of Police 4 Number of Security Personnel ☐ Fencing ☐ Barriers

Explanation: Las Sendas will be working the event inside  
with 8 staff total. All staff are certified.

**SECTION 11** Dates and Hours of Event. Days must be consecutive but may not exceed 10 consecutive days.  
See A.R.S. § 4-244(15) and (17) for legal hours of service.

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

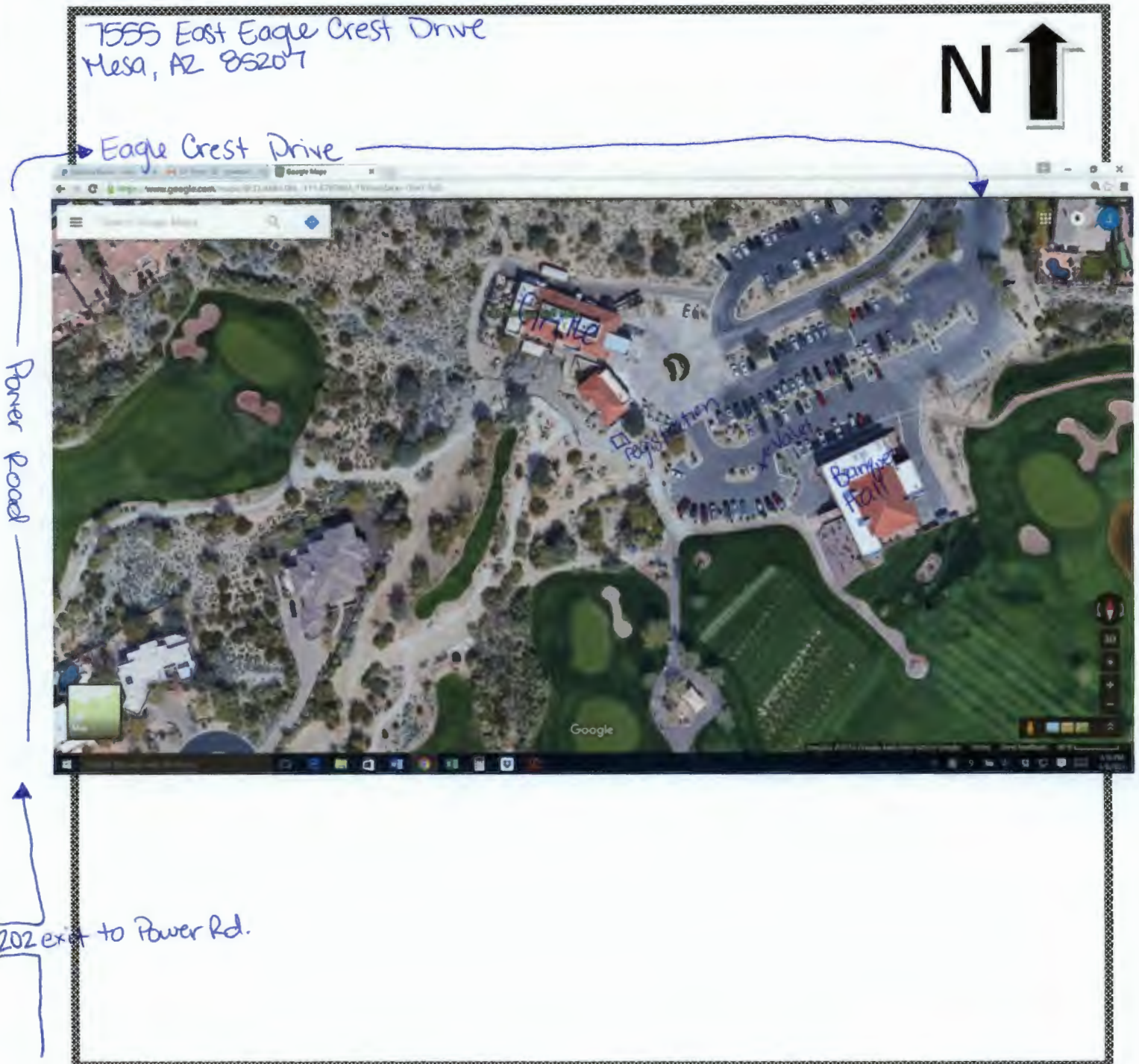
	Date	Day of Week	Event Start Time AM/PM	License End Time AM/PM
DAY 1:	<u>10-25-2016</u>	<u>Tuesday</u>	<u>10:30 AM</u>	<u>9:00 PM</u>
DAY 2:	_____	_____	_____	_____
DAY 3:	_____	_____	_____	_____
DAY 4:	_____	_____	_____	_____
DAY 5:	_____	_____	_____	_____
DAY 6:	_____	_____	_____	_____
DAY 7:	_____	_____	_____	_____
DAY 8:	_____	_____	_____	_____
DAY 9:	_____	_____	_____	_____
DAY 10:	_____	_____	_____	_____

## SPECIAL EVENT PREMISES DIAGRAM

This diagram **MUST** be submitted with Attachment B

Required information: Dimensions, serving areas, enclosure/barrier type and height (labeled), and security positions. Indicate the nearest cross streets, highway or road, if the location does not have an address. **Providing all the required information will ensure prompt application processing.** The same diagram can be submitted with both the City and State application.

A "bird's eye view" may replace the Special Event Premises Diagram. Please include all the above required information. Visit the following link for an example <http://goo.gl/maps/J78rb>





**SECTION 13** To be completed only by an Officer, Director or Chairperson of the organization named in Section 1.

I, (Print Full Name) Justin Watson declare that I am an Officer, Director or Chairperson of the organization filing this application as listed in Section 9. I have read the application and the contents and all statements are true, correct and complete.

X [Signature] Dev. & Mktg Director REDACTED  
Signature Title/ Position Date Phone Number

The foregoing instrument was acknowledged before me this 11<sup>th</sup> August 2016  
Day Month Year

State AZ County of maricopa

My Commission Expires on: 05/06/2020  
Date

[Signature]   
Signature of Notary Public

**SECTION 14** This section is to be completed only by the applicant named in Section 9.

I, (Print Full Name) Justin Watson declare that I am the APPLICANT filing this application as listed in Section 9. I have read the application and the contents and all statements are true, correct and complete.

X [Signature] Dev. & Mktg Director REDACTED  
Signature Title/ Position Date Phone Number

The foregoing instrument was acknowledged before me this 11<sup>th</sup> August 2016  
Day Month Year

State AZ County of maricopa

My Commission Expires on: 05/06/2020  
Date

[Signature]   
Signature of Notary Public

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: [http://www.azliquor.gov/assets/documents/homepage\\_docs/spec\\_event\\_links.pdf](http://www.azliquor.gov/assets/documents/homepage_docs/spec_event_links.pdf).

**SECTION 15** Local Governing Body Approval Section.

I, \_\_\_\_\_ recommend ☐ APPROVAL ☐ DISAPPROVAL  
(Government Official) (Title)

On behalf of \_\_\_\_\_  
(City, Town, County) Signature Date Phone

**SECTION 16** For Department of Liquor Licenses and Control use only.

☐ APPROVAL ☐ DISAPPROVAL BY: \_\_\_\_\_ 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.



## Exempt Organizations Select Check

[Exempt Organizations Select Check Home](#)

Organizations Eligible to Receive Tax-Deductible Charitable Contributions (Pub. 78 data) - Search Results

The following list includes tax-exempt organizations that are eligible to receive tax-deductible charitable contributions. Click on the "Deductibility Status" column for an explanation of limitations on the deductibility of contributions made to different types of tax-exempt organizations.

Results are sorted by EIN. To sort results by another category, click on the icon next to the column heading for that category. Clicking on that icon a second time will reverse the sort order. Click on a column heading for an explanation of information in that column.

1-1 of 1 results

Results Per Page  

« Prev | 1-1 | Next »

<a href="#">EIN</a> ⌵	<a href="#">Legal Name (Doing Business As)</a> ⌵
42-1745079	Cortneys Place

<a href="#">City</a> ⌵
Scottsdale

<a href="#">State</a> ⌵	<a href="#">Country</a> ⌵
AZ	United States

<a href="#">Deductibility Status</a> ⌵
PC

« Prev | 1-1 | Next »



August 11<sup>th</sup>, 2016

To Whom It May Concern:

Cortney's Place is hosting an event here at Banquet Hall at Las Sendas Golf Club on Tuesday, October 25, 2016. The event will take place from 10:30 a.m. till 9:00 p.m. on the golf course and at the Banquet Hall.

We estimate that 100% of all proceeds raised during the golf event on October 25, 2016, will be going to support **Cortney's Place**, a non-profit organization that serves disabled adults.

Las Sendas Golf Club agrees to suspend their liquor license in the areas listed above for the day of October 25, 2016.

Sincerely,

A handwritten signature in black ink, appearing to read "Wayne McBean", with a long, sweeping horizontal line extending to the right.

Wayne McBean, Owner  
Las Sendas Golf Club