

Meeting 11/16/17 Agenda 10/17/17

RECEIVED

OCT 2 - 2017



Special Event Liquor License Application Attachment B

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 ☐ 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. 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 _____

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

The Foundation for the Conservation of Arizona's Wildlife		86-0684044
Charity's or Organization's Name		501 (C)#
Amarna Anne Bailey	Director	480-663-3654
Name of Contact at Charity/Organization	Title with Organization	Phone Number
Arizona Bartenders		
On-Site Agent Responsible for Liquor		

How will attendees over the age of 21 be identified? Alcohol will be served by AZ DLLC-Licensed Arizona Bartenders, 12714 W. Rovey Ave., Litchfield Park, AZ 85340.

Arizona Bartenders is trained to require identification from anyone who appears to be under 27 years old.

What controls will be used to keep attendees under the age of 21 from obtaining alcohol at the event? The AGFD post-certified officer will be monitoring the event for any underage drinking. Very few minors are anticipated to attend the event.

Will food be served? ☒ Yes ☐ No If yes, what type of food will be served Catered dinner, breakfast/brunch.

Seating capacity of designated area: # 70

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CITY OF MESA
LICENSING OFFICE

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 12).

SECTION 1 Name of Organization: The Foundation for the Conservation of Arizona's Wildlife

Name of Licensed Contractor **only** (if any): _____

SECTION 2 Non-Profit/IRS Tax Exempt Number: 86-0684044

SECTION 3 Event Location: Arizona Game & Fish Department Region VI

Event Address: 7200 E. University Mesa, AZ 85207

SECTION 4 Applicant must be a member of the qualifying organization and authorized by an Officer, Director, or Chairperson of the Organization.

1. Applicant: Bailey, Amarna Anne REDACTED
Last First Middle Date of Birth

2. Applicant's mailing address: 145 E. University Dr., Suite 5, Mesa, AZ 85201
Street City State Zip

3. Applicant's home/cell phone: () REDACTED Applicant's business phone: (480) 663-3654

4. Applicant's email address: aabailey6@yahoo.com

I, (Print Full Name) Amarna Anne Bailey declare that I am the APPLICANT filing this application as listed above. I have read the application and the contents and all statements are true, correct and complete.

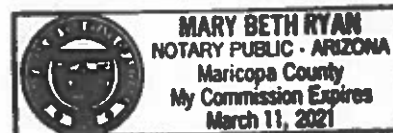
x Amarna Anne Bailey Director 2 October 2017 (480) 143-3654
Signature Title/Position Date Phone Number

The foregoing instrument was acknowledged before me this 2nd October 2017
Day Month Year

State Arizona County of Maricopa

My Commission Expires on: March 11, 2021
Date

Mary Beth Ryan
Signature of Notary Public



SECTION 5 Regarding the Applicant's application for a special event permit, I hereby certify that the Organization meets the criteria in A.R.S. § 4-203.02(E) for the issuance of the permit as indicated by checking one of the boxes below.

- (1) ☐ The Applicant is a political party or a campaign committee supporting a candidate for public office. Please indicate the name of the candidate that the Applicant supports, the office that the candidate seeks, and the month and year that the applicant would first fill the office if successful.

Candidate: _____
Name Office Month/Year

- (2) ☒ The Applicant is a non-profit entity organized in Arizona, or pursuant to the laws of another state that is eligible for designation as a nonprofit entity under Section 501(C) of the internal revenue code of the United States. If the Applicant is applying under option (2) as a nonprofit entity, **please also INITIAL in the space provided next to all following statements to indicate that, to the best of the applicant's knowledge, they are true and correct.**

_____ The Applicant has received a determination letter from the Internal Revenue Service ("IRS") indicating that it is eligible for designation as a nonprofit entity under Section 501(C), eligibility or will be eligible on all days that the special event will occur, or has a pending application with the IRS for such treatment that has not been resolved but that will retroactively cover all days that the special event will occur. (Please provide a copy of either the IRS determination letter or the application (without attachments) with this application).

_____ The Applicant is not aware of any action by the IRS to revoke, suspend, or otherwise eliminate the Applicant's eligibility under 501(C), or if there is a pending application, the Applicant has not received any indication that the IRS will deny its application and has a good faith basis formed upon a reasonable inquiry into IRS regulations, guidelines, and forms that it is eligible under 501(C).

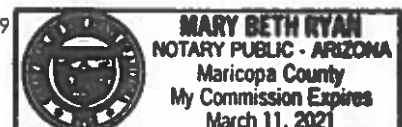
_____ The Applicant understands that if there is a change in circumstances after completing this form that may cause or has caused it to lose its eligibility under 501(C), whether before or after receiving an IRS determination letter, that it has an affirmative duty to notify the Department of Liquor, which may then take appropriate action with regard to the loss of eligibility.

To be completed only by an Officer, Director, or Chairperson of the organization.

I, (Print Full Name) <u>Amarna Anne Bailey</u> declare that I am an Officer, Director, or Chairperson of the organization filing this application as listed above. I have read the application and the contents and all statements are true, correct and complete.			
Signature <u><i>Amarna Anne Bailey</i></u>	Title/ Position <u>Director</u>	Date <u>2 October 2017</u>	Phone Number <u>(480) 663-3654</u>
The foregoing instrument was acknowledged before me this <u>2nd</u> <u>October</u> <u>2017</u>		Day	Month Year
State <u>Arizona</u> County of <u>Maricopa</u>			
My Commission Expires on: <u>March 11, 2021</u>		<u><i>Mary Beth Ryan</i></u> Signature of Notary Public	

SECTION 6 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)

Name of Business License Number Phone (Include Area Code)



SECTION 7 How is this special event going to conduct all dispensing, serving, and selling of spirituous liquors? Please read R-19-318 for explanation 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 USING RETAIL LICENSE, PLEASE SUBMIT A LETTER OF AGREEMENT FROM THE AGENT/OWNER OF THE LICENSED PREMISES TO SUSPEND OR RUN CONCURRENT WITH THE PERMANENT LICENSE DURING THE EVENT. IF THE SPECIAL EVENT IS ONLY USING A PORTION OF THE PREMISES, AGENT/OWNER WILL NEED TO SUSPEND THAT PORTION OF THE PREMISES.)

SECTION 8

What is the purpose of this event? ☒ On-site consumption ☐ Off-site (auction/wine/distilled spirits pull) ☐ Both

SECTION 9

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 days have been issued to this organization during the calendar year? One
(The number cannot exceed 10 days per year.)

3. Is the organization using the services of a promoter or other person to manage the sale or service of alcohol? ☒ Yes ☐ No
(If yes, must be a licensed contractor or licensee of series 6, 7, 11, or 12)

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 The Foundation for the Conservation of Arizona's Wildlife Percentage: 100%

Address 5000 W. Carefree Highway, Phoenix, AZ 85086-5000

Name _____ Percentage: _____

Address _____

Street

City

State

Zip

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 A SPECIAL EVENT UNLESS THEY ARE IN AUCTION WINE OR DISTILLED SPIRITS PULL SEALED CONTAINERS OR THE SPECIAL EVENT LICENSE IS STACKED WITH WINE /CRAFT DISTILLERY FESTIVAL LICENSE.

5. 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.)

One _____ Number of Police Zero _____ Number of Security Personnel ☐ Fencing ☐ Barriers

Explanation: This is a fundraising dinner and breakfast with a live/silent auction of donated sporting goods, artwork and apparel. Security will be provided by an AZGFD Post Certified Officer. Alcohol will

be served by AZ DLLC-Licensed Arizona Bartenders, 12714 W. Rovey Ave., Litchfield Park, AZ 85340.

Arizona Bartenders are trained to require identification from anyone who appears to be under 27 years old.

The event will be located entirely within a secured government compound surrounded by security fencing.

SECTION 10 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>12/2/2017</u>	<u>Saturday</u>	<u>5:00pm</u>	<u>9:00pm</u>
DAY 2:	<u>12/3/2017</u>	<u>Sunday</u>	<u>10:00am</u>	<u>1:00pm</u>
DAY 3:	<u> </u>	<u> </u>	<u> </u>	<u> </u>
DAY 4:	<u> </u>	<u> </u>	<u> </u>	<u> </u>
DAY 5:	<u> </u>	<u> </u>	<u> </u>	<u> </u>
DAY 6:	<u> </u>	<u> </u>	<u> </u>	<u> </u>
DAY 7:	<u> </u>	<u> </u>	<u> </u>	<u> </u>
DAY 8:	<u> </u>	<u> </u>	<u> </u>	<u> </u>
DAY 9:	<u> </u>	<u> </u>	<u> </u>	<u> </u>
DAY 10:	<u> </u>	<u> </u>	<u> </u>	<u> </u>

SECTION 11 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.



SPECIAL EVENT SITE-PLAN
(Site-Plan must be submitted with this application.)

Required information (all that apply to this event): Show proximity to buildings/structures, streets, dimensions, tents/canopies, security stations, fencing including height and type, fire features, inflatables, stage location, and any obstacle course. **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 Site-Plan. Please include all the above required information. Visit the following link for an example <http://goo.gl/maps/J78rb>



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 Governing Body Approval Section.

Date Received: _____			
I, _____ (Government Official)	_____ recommend (Title)	<input type="checkbox"/> APPROVAL	<input type="checkbox"/> DISAPPROVAL
On behalf of _____ (City, Town, County)	_____ Signature	_____ Date	_____ Phone

SECTION 13 For Department of Liquor Licenses and Control use only.

<input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL	BY: _____	DATE: ____/____/____
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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.

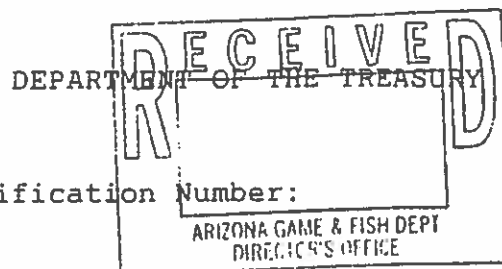
E. A STATE EMPLOYEE MAY NOT INTENTIONALLY OR KNOWINGLY VIOLATE THIS SECTION. A VIOLATION OF THIS SECTION IS CAUSE FOR DISCIPLINARY ACTION OR DISMISSAL PURSUANT TO THE AGENCY'S ADOPTED PERSONNEL POLICY.

F. THIS SECTION DOES NOT ABROGATE THE IMMUNITY PROVIDED BY SECTION 12-820.01 OR 12-820.02.

INTERNAL REVENUE SERVICE
DISTRICT DIRECTOR
O. BOX 2508
VCINNATI, OH 45201

Date: Sept 27 1991

FOUNDATION FOR THE CONSERVATION OF
ARIZONA'S WILDLIFE
2221 W GREENWAY
PHOENIX, AZ 85023-4312



Employer Identification Number:
86-0684044

DLN:
17053271801007

Contact Person:
D. A. DOWNING

Contact Telephone Number:
(513) 241-5199

Our Letter Dated:
September 25, 1991

Addendum Applies:
No

Dear Applicant:

— This modifies our letter of the above date in which we stated that you would be treated as an organization that is not a private foundation until the expiration of your advance ruling period.

Your exempt status under section 501(a) of the Internal Revenue Code as an organization described in section 501(c)(3) is still in effect. Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Code because you are an organization of the type described in section 509(a)(1) and 170(b)(1)(A)(vi).

Grantors and contributors may rely on this determination unless the Internal Revenue Service publishes notice to the contrary. However, if you lose your section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part of the organization that resulted in your loss of such status, or if he or she acquired knowledge that the Internal Revenue Service had given notice that you would no longer be classified as a section 509(a)(1) organization.

If we have indicated in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours,

C. LeRoy Ballard

District Director

Letter 1050 (DO/CG)