LICAP9-01835

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





10/4/19

APR 0 9 2019

| or an Exter prior to the | nsion of Premises from C | ity of Mesa Licensing | Office. This must | LICENSING OFFICE n a Special Event Liquor License be submitted at least 60 days Plan a minimum of 60 days to |
|------------------------------|--|---|---|---|
| Check all th | at apply: | | | |
| | Free/Host Alcohol Beer | Alcohol Sales Beer and Wine | ☐ Host and Sale A☐ Beer, Wine and | Alcohol d Distilled Spirits |
| Do you plan | to secure a: | | | |
| Council. At fees involve | fter city approval, your applie | cation must be submitte can only be obtained b | d to, and approved | nd must be approved by the City by, the State of Arizona. There are zation, 501(C). (Complete the <u>State of</u> |
| liquor licens Extension o | e is already in effect and your feremises Application and si | u want to extend the are ite plan.) | ea where liquor is so | of Premises. This is allowed when a ld. (Complete the <u>State of Arizona</u> |
| If this is an area? No [| Extension of Premises, are t Yes Type of activities | there any other activities staking place: | s taking place except | for the sale of liquor in the extended |
| Please desc well as pr | ribe your security plan to en ivate security roaming, | sure the safe sale or dis ID checks at point o | tribution of alcohol a | at your event Off Duty PD Roaming as I sold without valid ID |
| If applying | g for a Special Event Liqu | or License the follow | ing must be provi | ded: |
| Ultimate I | maginations Inc. | | | 74-2532863 |
| | Organization's Name | Executiv | e Director | 501 (C)# 480-890-2613 |
| Name of Con | tact at Charity/Organization | Title | with Organization | Phone Number |
| | nt Responsible for Liquor tendees over the age of 21 b | pe identified? ID will be | checked at point of s | ale. No alcohol sold without valid ID |
| What contr | ols will be used to keep atte lld without valid ID and I | ndees under the age of D will be checked a | 21 from obtaining al t point of sale. Ro | cohol at the event? No alcohol paming PD and security |
| Will food b | pe served? ■ Yes □ No | If yes, what type of foo | od will be served Foo | od Trucks |
| Seating cap | pacity of designated area: #_ | | _ | |

June 19, 2013



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

| Received D | ate: |
|------------|------|
| Job #: | |
| CSR: | |
| License #: | |

APPLICATION FOR SPECIAL EVENT LICENSE

Fees: \$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.

| . Applicant: Shor | t D | avid | Warren | REDACTED |
|---|------------------------------|--|-------------------------------|---------------------------|
| | ag address: 100 N. Cer | First | Middle Mesa | AZ B5201 |
| | D. | EDACTED | City | 480 State Zip |
| . Applicant's home | /cell phone: () | E224 (2) (2) (2) (2) (2) (2) (2) (2) (2) (2) | _ Applicant's business phone: | (480) 890-2613 |
| Applicant's email | address: david@d | owntownmesa.co | om | |
| ECTION 2 Name of | Organization Candida | ato or Political Barty/Ca | ov.: Ultimate Imagination | ns Inc. |
| ECTION 2 Name of | Organization, Canalac | 74 2532863 | ov | |
| CTION 3 Non-Profi | t/IRS Tax Exempt Numb | per: 14-2332003 | | |
| ECTION 4 Event Lo | cation: Main Street | from Center to Rob | oson, Macdonald from 1st S | St to 1st Ave |
| | . 1 N Macde | onald St. Mesa, A | AZ 85201 | |
| Event Ad | dress: | , , , , , , , , , , , , , , , , , , , | | |
| | | | out may not exceed 10 consecu | five days. |
| See A.R.S. | § 4-244(15) and (17) for leg | al hours of service. | | |
| | | | | |
| | PLEASE FILL OUT A SE | PARATE APPLICATION | FOR EACH "NON-CONSECUTIVE | |
| | PLEASE FILL OUT A SE | PARATE APPLICATION Day of Week | Event Start | License End Time AM/PM |
| DAY 1: | F. 14. | | Event Start | License End |
| DAY 1: DAY 2: | Date | Day of Week | Event Start | License End Time AM/PM |
| | Date | Day of Week | Event Start | License End Time AM/PM |
| DAY 2: | Date | Day of Week | Event Start | License End Time AM/PM |
| DAY 2: DAY 3: | Date | Day of Week | Event Start | License End Time AM/PM |
| DAY 2: DAY 3: DAY 4: | Date | Day of Week | Event Start | License End Time AM/PM |
| DAY 2: DAY 3: DAY 4: DAY 5: | Date | Day of Week | Event Start | License End Time AM/PM |
| DAY 2: DAY 3: DAY 4: DAY 5: DAY 6: | Date | Day of Week | Event Start | License End Time AM/PM |
| DAY 2: DAY 3: DAY 4: DAY 5: DAY 6: DAY 7: | Date | Day of Week | Event Start | License End Time AM/PM |

| (LIS | nat type of security and control me type and number of police/security per | easures will you take to prevent violations sonnel and type of fencing or control barriers, if | of liquor laws at this applicable.) | s event? |
|---------------------------------|---|--|--|--|
| 7 | Number of Police 6 | Number of Security Personnel | Fencing | ☑ Barriers |
| Explanation | Off Duty DD will room avent as w | ell as hired security. ID will be checked at | | The state of the s |
| | without valid ID will be se | | | |
| | Will bo o | orvou. | | |
| | | | | |
| SECTION 7 Will | I this event be held on a currently lic yes, Local Governing Body Signatur | ensed premise and within the already apple not required) | proved premises? | Yes 🗹 No |
| | Name of Business | License Number | Phone (Include A | rea Code) |
| 310 | for explanation and check one of | duct all dispensing, serving, and selling of spithe following boxes. | pirituous liquors? Ple | ase read R-19- |
| | license in non-use | | | |
| Disper | nse and serve all spirituous liquors un | der retailer's license | | |
| Osplit pr | nse and serve all spirituous liquors un remise between special event and l | der special event | | |
| (IF USING RETAIL | LICENSE, PLEASE SUBMIT A LETTER OF A | GREEMENT FROM THE AGENT/OWNER OF THE L | ICENSED PREMISES TO USING A PORTION C | SUSPEND OR RU OF THE PREMISE |
| SECTION 9 Wh | at is the purpose of this event? | | | |
| On-site cons | umption Off-site (auction/wine | /distilled spirits pull) | | |
| SECTION 10 | | | | |
| 1. Has the app □Yes ☑No (| licant been convicted of a felony, (If yes, attach explanation.) | or had a liquor license revoked within th | e last five (5) years? | |
| 2. How many s (The number co | pecial event days have been issue annot exceed 10 days per year.) | ed to this organization during the calendo | ar year? ¶ 9 | |
| 3. Is the Organ | nization using the services of a Lice | ensed Contractor? | | |
| □Yes ☑No I | f yes, please provide the following: | Name of Licensed Contractor: | | <u> 834 Sab</u> |
| 4. Is the organiz | zation using the services of a series | 6, 7, 11, or 12 licensee to manage the sa | lle or service of alco | hol? |
| | | : Name of Licensee | | |
| 5. List all peop applying mu | le and organizations who will rec st receive 25% of the gross revenue | eive the proceeds. Account for 100% or es of the special event liquor sales. Attact | of the proceeds. The | e organization le if necessary |
| Name Ultin | | Percentage: 1 | | |
| Address | | | | |
| Name | | Percentage: _ | | |
| | | | | TACON STREET |
| | Street | City | State | Zip |
| /8/2019 | | 2 2 12 | | |

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.

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.

ATTACH DIAGRAM

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. 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.

| Print Full Name) C.S. § 4-210(A)(2) and (3) that I have read a lit I have made herein are true and correct to DCAL GOVERNING BOARD | o the best of my knowled | going and verify | y of perjury and that the motorn | nation and states |
|---|--------------------------|------------------|----------------------------------|-------------------|
| Date Received: | | | | |
| (Government Official) | (Title) | recommend | DAPPROVAL | ☐ DISAPPROVA |
| On behalf of(City, Town, County) | | | te , | Phone |
| LIC USE ONLY | | | | |

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

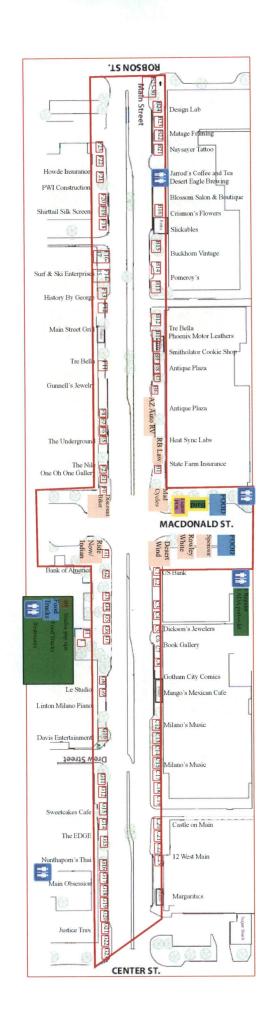
B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or 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.

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Q HELP (

MENU ≡

< Back to Search Results

Home > Tax Exempt Organization Search > Ultimate Imaginations Inc.

Ultimate Imaginations Inc.

EIN: 74-2532863 | Mesa, AZ, United States

Publication 78 Data

Organizations eligible to receive tax-deductible charitable contributions. Users may rely on this list in determining deductibility of their contributions.

On Publication 78 Data List: Yes

Deductibility Code: PC

Copies of Returns (990, 990-EZ, 990-PF, 990-T) 👨

Electronic copies (images) of Forms 990, 990-EZ, 990-PF or 990-T returns filed with the IRS by charities and non-profits.

> Tax Year 2016 Form 990

Organization Name: Ultimate Imaginations Inc

EIN: 74-2532863

Tax Period:201706 **Return ID:**276138

Filing Type:

Return Type: 990

Copy of Return: 2016 Form 990 Filing

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Page Last Reviewed or Updated: 6-Jul-2018

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