

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



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 the 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:

- | | | |
|--|---|---|
| <input type="checkbox"/> Free/Host Alcohol | <input checked="" type="checkbox"/> Alcohol Sales | <input type="checkbox"/> Host and Sale Alcohol |
| <input checked="" type="checkbox"/> Beer | <input type="checkbox"/> Beer and Wine | <input type="checkbox"/> 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 and submit it with this Attachment B.)

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 and submit it with this Attachment B.)

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 _____

Off duty PD and HOG members patrolling event. ID's checked and wristbands issued to 21 and over

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

| | |
|---|-------------------------|
| <u>American Patriots Riders Club</u> | <u>87-3163566</u> |
| Charity's or Organization's Name | 501 (C)# |
| <u>Gary Wiens</u> | <u>Director</u> |
| Name of Contact at Charity/Organization | Title with Organization |
| <u>Yvonne Holmes</u> | Phone Number |
| On-Site Agent Responsible for Liquor | |

How will attendees over the age of 21 be identified? wristbands will be issued to 21 and over

What controls will be used to keep attendees under the age of 21 from obtaining alcohol at the event? _____

Members and off duty patrolling event

Will food be served? Yes No If yes, what type of food will be served Bad AZ BBQ

Seating capacity of designated area: # 40

| |
|---------|
| CSR: |
| Amount: |

RECEIVED
 DEC 28 2023
 CITY OF MESA
 LICENSING OFFICE



SPECIAL EVENT LICENSE

APPLICATION FEE \$25.00 PER DAY

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

| |
|----------------------|
| DLLC USE ONLY |
| Job #: |
| Date Accepted: |
| CSR: |
| License #: |

Application MUST be submitted to the Department of Liquor 10 days prior to the event.

SECTION 1 Applicant must be a member of a qualifying nonprofit organization, political party, or Government entity and authorized by an Officer, Director, or Chairperson of the Organization.

1. Applicant: Wiens Gary Eugene

(Must be an Officer/Member of the Non Profit Entity) Last First Middle

2. Applicant's mailing address: 1117 N Arroyo Ln Gilbert AZ 85264

3. Applicants home/cell phone: [REDACTED] Applicant's business phone: [REDACTED]

4. Applicant's email address: liquorlicense@azlic.com and gw.1004@icloud.com

5. Special Event Name: Hot Rods & Harleys

6. Name of Non-Profit Organization, Candidate or Political Party/Gov.: American Patriots Riders Club

7. Non-Profit/IRS Tax Exempt Number: 87-3163566

8. Arizona Corporation Commission File #: 23285861 If out of State please specify: _____
(Attach letter of good standing)

9. Event Location Name: Desert Wind Harley Davidson

10. Event Address: 922 S Country Cub Dr Mesa AZ 85210

Dates and Hours of Event - Days must be consecutive and may not exceed 10 consecutive days.

****SEPARATE APPLICATION FOR EACH "NON-CONSECUTIVE" DAY****

| Days | Date | Day of Week | Event Start Time AM/PM | License End Time AM/PM |
|---------|----------------|---------------|------------------------|------------------------|
| DAY 1: | <u>2/16/24</u> | <u>Friday</u> | <u>5pm</u> | <u>9pm</u> |
| DAY 2: | _____ | _____ | _____ | _____ |
| DAY 3: | _____ | _____ | _____ | _____ |
| DAY 4: | _____ | _____ | _____ | _____ |
| DAY 5: | _____ | _____ | _____ | _____ |
| DAY 6: | _____ | _____ | _____ | _____ |
| DAY 7: | _____ | _____ | _____ | _____ |
| DAY 8: | _____ | _____ | _____ | _____ |
| DAY 9: | _____ | _____ | _____ | _____ |
| DAY 10: | _____ | _____ | _____ | _____ |

SECTION 2 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.)

2 _____ Number of Police 10 _____ Number of Security Personnel Fencing Barriers

Must explain security measures: 2 off duty PD roaming event. DWHD will have members of the HOG patrolling event, checking ID's and issuing wristbands to 21 and over.

SECTION 3 What is the purpose of this event?

On-site consumption Off-site (auction/wine/distilled spirits pull) Both

How is this special event going to conduct all dispensing, serving, and selling of spirituous liquors?
Check one of the following boxes. (R-19-318)

- A) Special Event being held on an **unlicensed** premises will require approval and signature by the Local Governing Body on page 3. (If checked move to section 4)
- B) Will this event be held on a currently licensed premises and within the already approved and licensed area?
(Must attach a letter from the licensed premises with an explanation of the option checked below)

| Name of Business | License Number | Phone (Include Area Code) |
|--|----------------|---------------------------|
| <input type="checkbox"/> Place license in non-use - <i>Special Event Licensee selling all alcohol without retailer involvement</i> Must attach letter from the location suspending license for duration of special event | | |
| <input type="checkbox"/> Dispense and serve all spirituous liquors under retailer's license - <i>Business operates normally, minimum of 25% of gross revenue from alcohol sales is donated to licensee</i> | | |
| <input type="checkbox"/> Dispense and serve all spirituous liquors under special event - <i>The special event licensee is in charge of selling alcohol that was purchased or donated by the special event licensee. The retailers existing alcohol inventory must be separated from any alcohol used during the special event. Must attach letter from the location suspending license for duration of special event</i> | | |
| <input type="checkbox"/> Split premise between special event and retail location - <i>Both the special event licensee and the retailer will conduct sales of alcohol. (These sales will be done in separate areas. If alcohol is donated or purchased by the special event licensee it must be in a separate area than the alcohol that is dispensed by the licensed retailer.)</i> | | |
| <input type="checkbox"/> Off Sale only - Wine/Distilled Spirits Pull, Live or Silent Auctions - <i>Retailer will still be permitted to conduct all normal sale and service of alcohol.</i> | | |

SECTION 4

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 letter of explanation.

2. How many special event days have been issued to this organization during the calendar year? 1

3. Is the Organization using the services of a Special Event Contractor? (A licensee can utilize the services of a special event contractor who may purchase and sell alcohol on behalf of the licensee. If no special event contractor is listed, the licensee is responsible for the sales and service of alcohol.)

Yes No If yes, please provide the Name of the Special Event Contractor: _____

4. Is the organization using the services of a series 6, 7, 11, or 12 licensee to manage the sale or service of alcohol? (Licensees who hold a series 6, 7, 11, or 12 license are automatically qualified to be the special event contractor)

Yes No if yes, please provide the Name of Licensee: _____ License #: _____

5. List the name of the Individual or Organization that will receive revenues, **MUST EQUAL 100 PERCENT.**

Attach additional sheet if necessary.

Name: American Patriot Riders Club Percentage: 100%

Address: 1117 N Arroyo Ln Gilbert AZ 85234
Street City State Zip

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.

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 5 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.



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 governing body before submitting to the Department of Liquor Licenses and Control. Please contact the local governing board for additional information.

APPLICANT SIGNATURE

Declaration:

I, (Print Name) Gary Wiens, declare under penalty of perjury that I am authorized to submit this application. I have read the contents of this application, and to the best of my knowledge believe all statements made on this application to be true, correct and complete.

Gary E Wiens
Signature

LOCAL GOVERNING BODY

Date Received: _____

I, _____ recommend APPROVAL DISAPPROVAL
(Government Official) (Title)

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

The local governing body (city, town or municipality where the fair/festival will take place) 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.

AZDLLC USE ONLY

APPROVAL DISAPPROVAL BY: _____ DATE: _____

ENTITY INFORMATION

Search Date and Time: 1/5/2024 10:39:05 AM

Entity Details

| | |
|--------------------------------|-------------------------------------|
| AMERICAN PATRIOTS RIDERS CLUB | Entity Name: |
| 23285861 | Entity ID: |
| Domestic Nonprofit Corporation | Entity Type: |
| Active | Entity Status: |
| 10/18/2021 | Formation Date: |
| In Good Standing | Reason for Status: |
| 10/19/2021 | Approval Date: |
| 10/18/2021 | Status Date: |
| 10/18/2021 | Original Incorporation Date: |
| Perpetual | Life Period: |
| Any legal purpose | Business Type: |
| 2023 | Last Annual Report Filed: |
| Arizona | Domicile State: |
| 10/18/2024 | Annual Report Due Date: |

Statutory Agent Information

Name:

Gary Eugene Wiens

Appointed Status:

Active 10/19/2021

Attention:

Address:

1117 N Arroyo Ln, GILBERT, AZ 85234, USA

Agent Last Updated:

9/27/2023

E-mail:

Attention:

Mailing Address:

County:

Maricopa

Principal Information

| Title | Name | Attention | Address | Date of Taking Office | Last Updated |
|----------------|-------------------|------------------|---|------------------------------|---------------------|
| Director | Gary Eugene Wiens | | 1117 N Arroyo Ln, GILBERT, AZ, 85234, Maricopa County, USA | 10/18/2021 | 10/19/2021 |
| Vice-President | Debi Clark | | 449 W Nopal Ave, MESA, AZ, 85210, Maricopa County, USA | 10/18/2021 | 10/19/2021 |
| Treasurer | David Clark | | 449 W Nopal Ave, MESA, AZ, 85210, Maricopa County, USA | 10/18/2021 | 10/19/2021 |
| Secretary | Dan Specker | | 434 W Remington Dr, CHANDLER, AZ, 85286, Maricopa County, USA | 10/18/2021 | 10/19/2021 |

Address 

Attention: APRC

Address: 1117 N Arroyo Ln, GILBERT, AZ, 85234, USA

County: Maricopa

Last Updated: 9/27/2023

Entity Principal Office Address

Attention:

Address:

County:

Last Updated:

[Back](#)

[Return to Search](#)

[Return to Results](#)

[Document History](#)

[Name/Restructuring History](#)

[Pending Documents](#)

[Microfilm History](#)



Department of the Treasury
Internal Revenue Service
Tax Exempt and Government Entities
P.O. Box 2508
Cincinnati, OH 45201

AMERICAN PATRIOTS RIDERS CLUB
1117 N ARROYO LN
GILBERT, AZ 85234

Date:
01/12/2022
Employer ID number:
87-3163566
Person to contact:
Name: Customer Service
ID number: 31954
Telephone: (877) 829-5500
Accounting period ending:
December 31
Public charity status:
509(a)(2)
Form 990 / 990-EZ / 990-N required:
Yes
Effective date of exemption:
October 18, 2021
Contribution deductibility:
Yes
Addendum applies:
No
DLN:
26053695002721

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Martin
Director, Exempt Organizations
Rulings and Agreements