

**Special Event
Liquor License
Application
Attachment B**

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:

- 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 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: N/A

Please describe your security plan to ensure the safe sale or distribution of alcohol at your event This is a private invitation only event where all invitees will be of legal drinking age. Entrance to the event will be monitored and four directors will provide roaming security and control.

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

<u>Wings of Flight Foundation</u>	<u>26-0816787</u>
Charity's or Organization's Name	501 (C)#
<u>Mike Doyle</u>	<u>Vice President</u>
Name of Contact at Charity/Organization	Title with Organization
<u>Mike Doyle</u>	<u>[REDACTED]</u>
On-Site Agent Responsible for Liquor	Phone Number

How will attendees over the age of 21 be identified? Only invited guests will be allowed in. All invitees are over 21.
At least four (4) directors of the foundation will be in attendance and monitor the event.

What controls will be used to keep attendees under the age of 21 from obtaining alcohol at the event? A professional bartending company will perform alcohol service and verify ages in addition to entrance restrictions and event monitors.

Will food be served? Yes No If yes, what type of food will be served Appetizers, Dinner, Desert
Seating capacity of designated area: # 300

anticipated = 200



RECEIVED
OCT 07 2021
CITY OF MESA
LICENSING OFFICE

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

DLLC USE ONLY

Job #:
Date Accepted:
CSR:
License #:

**SPECIAL EVENT LICENSE APPLICATION
FEE \$25.00 PER DAY**

A service fee of \$25.00 will be charged for all dishonored checks (A.R.S § 44-6852
1-10 days consecutive days only, Cash, Checks or Money Orders Only

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: MIKE DOYLE - WINGS OF FLIGHT FOUNDATION
- 2. Applicant's mailing address: 2633 E. REDGEMWOOD LN GILBERT AZ 85298
Street City State Zip
- 3. Applicants home/cell phone: [REDACTED] Applicant's business phone: [REDACTED]
- 4. Applicant's email address: LARY.CAPTAIN@GMAIL.COM / WINGSOFFLIGHTFOUNDATION.COM

SECTION 2 Name of Non-Profit Organization, Candidate or Political Party/Gov.: WINGS OF FLIGHT FOUNDATION

SECTION 3 Non-Profit/IRS Tax Exempt Number: 26-0816787

SECTION 4 Event Location: 4606 E. FRANKA AVEE DR. MESA AZ 85215

SECTION 5 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.

****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>13 DEC 2021</u>	<u>SATURDAY</u>	<u>6:00 AM</u>	<u>11:59</u>
DAY 2:	_____	_____	_____	_____
DAY 3:	_____	_____	_____	_____
DAY 4:	_____	_____	_____	_____
DAY 5:	_____	_____	_____	_____
DAY 6:	_____	_____	_____	_____
DAY 7:	_____	_____	_____	_____
DAY 8:	_____	_____	_____	_____
DAY 9:	_____	_____	_____	_____
DAY 10:	_____	_____	_____	_____

(no less than = NLT)

SECTION 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.)

Number of Police NLT 4 Number of Security Personnel Fencing Barriers

Explanation: _____

THIS IS A SINGLE DAY (PRIVILE) EVENT HOSTED BY THE A&W PROFIT, CHARITABLE ORGANIZATION. ALL SAVERD GUESTS ARE OF LEGAL DRINKING AGE. NO LOR TIME 4 FOUNDATION MOTORSPORT IN ATTENDANCE. (Rooming venue) (Access Building) SEE AGV.

SECTION 7 Will this event be held on a currently licensed premises and within the already approved premises?

Yes No If yes, Local Governing Body signature is not required.

Name of Business _____ License Number _____ Phone (Include Area Code) _____

SECTION 8 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

SECTION 9 What is the purpose of this event?

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

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 days have been issued to this organization during the calendar year? 1

3. Is the Organization using the services of a Licensed Contractor?

Yes No If yes, please provide the Name of the Licensed 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?

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

5. The applying non-profit organization must receive 25% of the gross revenues of the total liquor sales. List the names of the individuals or organizations who will receive the rest of the proceeds, **MUST EQUAL 100%**.

Name: A&A WINGS OF FLESH FOUNDATION Percentage: 100%

Address: 4626 E. FIGHTER AVE DR MESA AZ 85215
Street City State Zip

Name: WINGS OF FLESH FOUNDATION Percentage: _____

Address: _____
Street City State Zip

SECTION 6 CONT:

WHICH BE RESTRICTED AND THE SINGLE POINT OF ALCOHOL DISTRIBUTION WILL
BE OPERATED BY PROFESSIONAL BARTENDERS.

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.

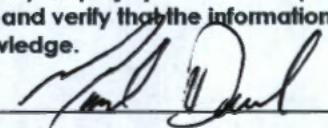
SECTION 11 license premises diagram. The licensed premises for your special event is the area in which you are authorized to sell, dispense or serve alcoholic beverages under the provisions of your license. Please attach a diagram of your special event licensed premises. Please show dimensions, serving areas, fencing, barricades, or other control measures and security position.



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.

SIGNATURE

I, (Print Full Name) Mike Doyle hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Applicant Signature: 

GOVERNING BOARD

Date Received: _____

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

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

DLLC 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.

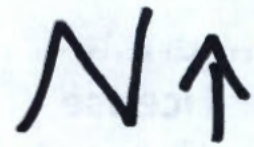
D. This section may be enforced in a private civil action and relief may be awarded against the state. The court may award reasonable attorney fees, damages and all fees associated with the license application to a party that prevails in an action against the state for a violation of this section.

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.

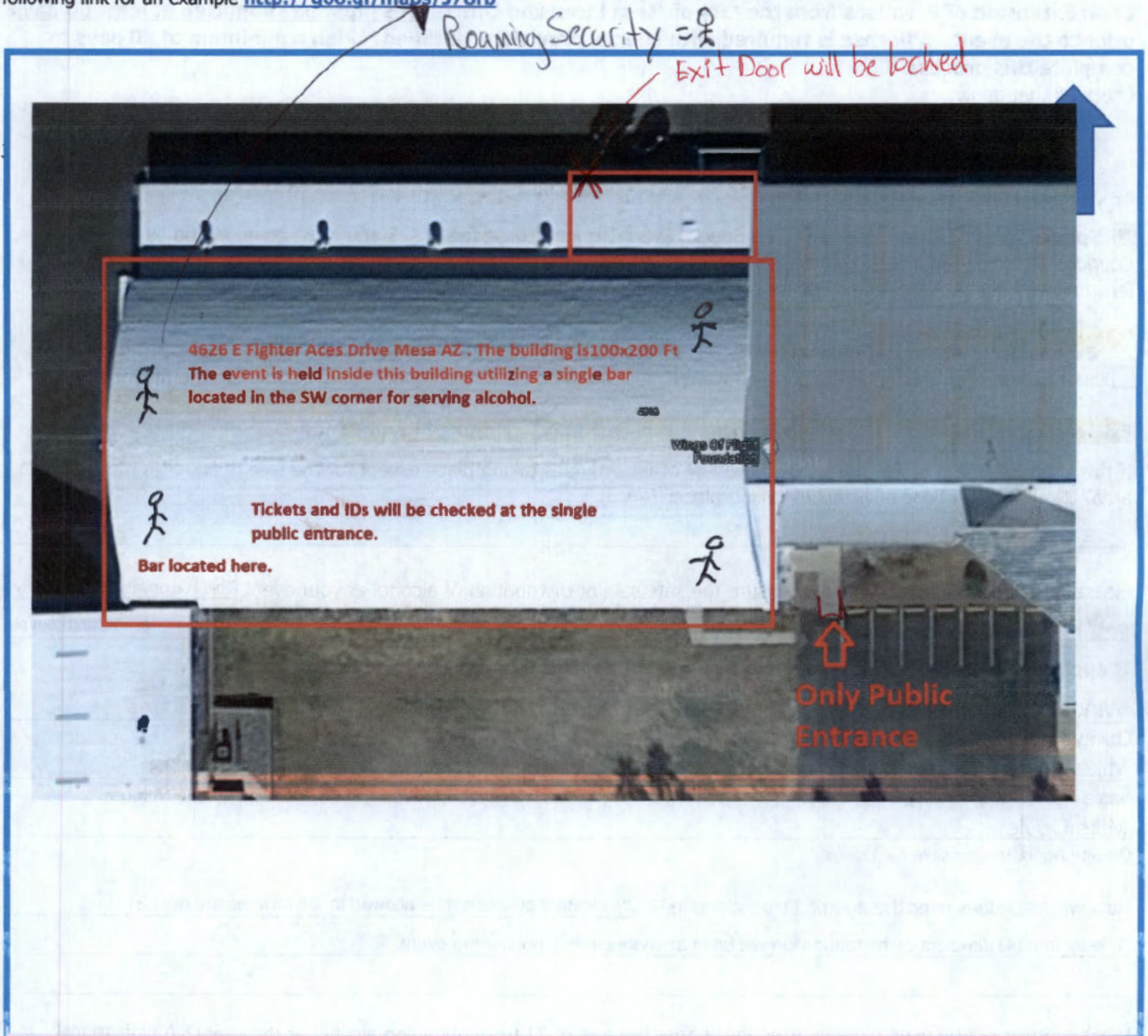
SPECIAL EVENT PREMISES DIAGRAM

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>



N ↑





[Home](#) > [Tax Exempt Organization Search](#) > [Wings Of Flight Foundation](#)

[< Back to Search Results](#)

Wings Of Flight Foundation

EIN: 26-0816787 | --, --, United States

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 2019 Form 990PR

Organization Name:

Wings Of Flight Foundation

EIN:

26-0816787

Tax Period:

201909

Return ID:

1809435

Filing Type:

E

Return Type:

990PR

Copy of Return:

[2019 Form 990PR Filing](#)

> Tax Year 2018 Form 990PF