Special Event Liquor License Application Attachment B

Licensing Office 55 North Center Street Malling Address: PO Box 1466 Mesa, Artzona 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, Wine and Distilled Spirits (X) WINE ONLY Beer and Wine Do you plan to secure a: (x) SERIES 16 FAIR/FESTIVAL LICENSE ■ Special Event Liquor License - The Special Event Liquor License fee is \$25 and must be approved by the City Council. After dty 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 Bi) Extension of Premises License - There is no fee involved with the Extension of Premises. This is allowed when a Illiquor 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 Sittle plantand sobjects with this attachment Bu 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: X Please describe your security plan to ensure the safe sale or distribution of alcohol at your event we will have an employee @ entrance + 2 employees giving samples, each attendee will get to series to fair festival.

If applying for a Special Event Liquor License the following must be provided: tracks for le samples. Down Time Wines Inc. N/A Charity's or Organization's Name x Colleen M Kaspar Director lowner Name of Contact at Charity/Organization Title with Organization Phone Number x Colleen m Kaspar On-Site Agent Responsible for Liquor X How will attendees over the age of 21 be identified? They will be conded GR I.D. or park pass - Must be 55 - DR What controls will be used to keep attendees under the age of 21 from obtaining alcohol at the event? The location community. Tasting (Activity Hall) is completely endised Yes No 11 yes, what type of food will be served Will food be served? X Seating capacity of designated area: # 40 # open bother will be entable in front of moins employee serving it will be extra sealed bottles will be behind employee serving employee@ main Attachment B July 1, 2020 entrance will guard

In hards.

RECEIVED

OCT 0 2 2023

CITY OF MESA LICENSING OFFICE



CSR:

FAIR/FESTIVAL LICENSE

APPLICATION FEE \$15.00 PER DAY

DLLC USE ONLY
Accepted:

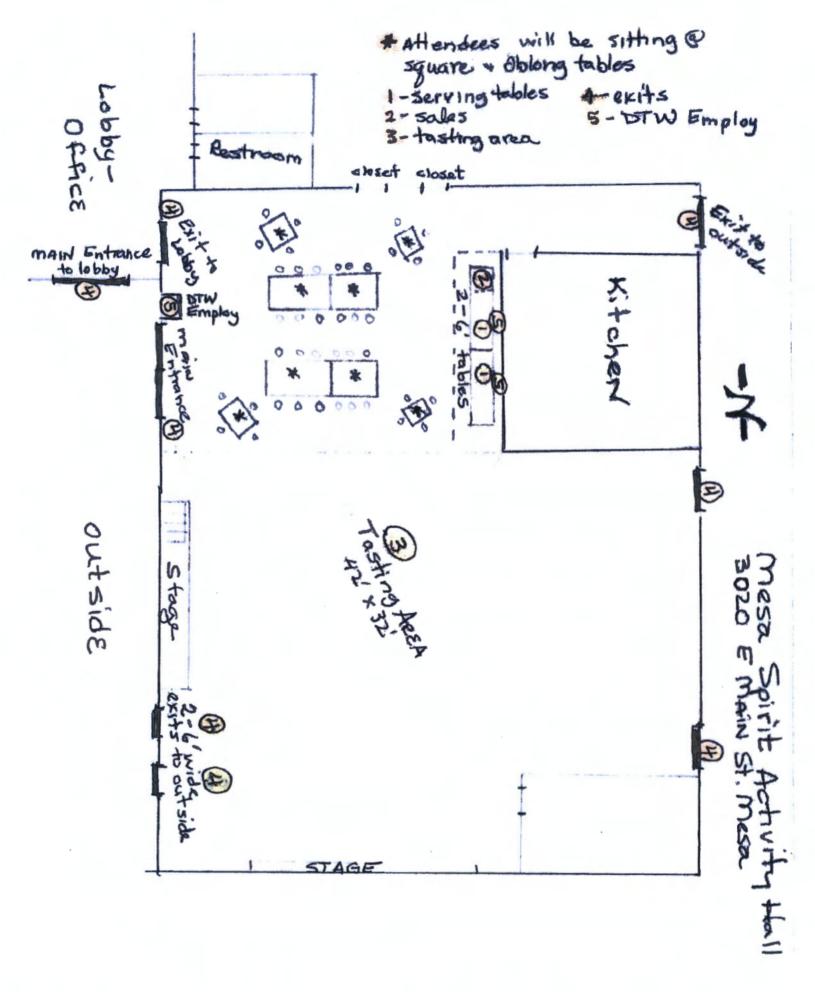
Arizona Dept. of Liquor Licenses and Control 800 W. Washington St. 5th Floor Phoenix, AZ 85007 (602) 542-5141

4	,	02) 542 5141			
Application type:	Craft Distillery	//Wine Fair	□ Craft D	Distillery/Wine Festive	ıl
SECTION 1					
1. Agent/Individual's Nam	Colleen Kaspar		Liquor Licens	se #: 13073029	
2. Premises Name: Dowr	n Time Wines, Inc.	Conto	act Phone #:		
3. Mailing Address: 393	Form When or Creft Distillery W Warner Rd ste 109	9 Chandler	AZ	Farm Winery or Craft Distillery 85225	Vin Ho
	Street Address 3020 E Main St Street Address	Clty	State AZ	# Code #5217	75
5. Email address: inglo@	Street Address downtimewines.com	City	State	Zip Code	
	n a permanently licensed pre		ne already appro	ved location?	No
If yes, must attach letter	from Agent/Owner verifying	permission and ev	ent dates.		
Must provide the perma	nent Liquor License/Special I	Event License at the	event location:		
SECTION 2 Date & Hours	: A total of 150 days per cale	ndar year permitted	d.		

Days	Date	Day of Week	Event Start Time AM/PM	License End Time
DAY 1.	Dec 6, 2023	Monday	3.30pm	5.30pm 15 10/24/23
DAT Z	Jan 8, 2024	Monday	3.30pm	5.30pm 15 10/24/23
DAT 5:	Feb 5, 2024	Monday	9:80pm	5,30pm 15 10/24/2
DAY 4:	Mar 4, 2024	Monday	3:30pm	5:30pm
DAY 5;		·		
DAY 6:				and the second section of

AMENDMENT

SECTION 3			
1. List the number of days you have held a licensed Fair/Festival in the cur	rent calendar year 1		
2. What security and control measures will you take to prevent violations of A11 em plonees have have have cut fical check for under age - wine store be	f state liquor laws at the how - employed hund empl	is event?	HOOR H
Number of Police Officers on Site:		☑No	tabl
Number of Security Personnel on Site: 0 Additional Information: tasting is in community room	Barriers Yes	⊌∾ unitv-	
3. I have taken responsible steps to ensure individuals operating the fair/fe who serve, sell, or furnish liquor at this fair/festival have knowledge of Ar	stival licensed premise	s and employ	
SECTION 4 Licensed premises diagram.			
The licensed premises for your fair/festival is the area you are authorized to sunder the provisions of your license identified in Section 1, line #2 of this your special event licensed premise. Please include dimensions of the preor other control measures and security positions.	application. Please a	ttach a diagn	om of
ATTACH DIAG	RAM <		
SIGNATURE			and the second
Declaration: College Kaspar	complete.	perjury that st of my knowl	l am edge
Declaration: 1, (Print Name) Colleen Kaspar authorized to submit this application. I have read the contents of this app	signature signature signature	y require add	edge itional equire
Declaration: I, (Print Name) Colleen Kaspar authorized to submit this application. I have read the contents of this application and the contents of this application to be true, correct and the contents made on this application to be true, correct and the contents of the correct and the contents of the correct and the c	signature signature signature	y require add	edge itional equire
Declaration: I. (Print Name) Colleen Kaspar authorized to submit this application. I have read the contents of this application to be true, correct and on this application to be true, correct and	signature signature signature	y require add dvance they n	edge Ilional equire led.
Declaration: I. (Print Name) Olieen Kaspar authorized to submit this application. I have read the contents of this application to be true, correct and one of this applicat	signature signature signature al will take place) mannent as to how far in a quired before approva	y require add dvance they n	edge Ilional equire led.
I. (Print Name) I. (Print Name) I. (Print Name) Colleen Kaspar authorized to submit this application. I have read the contents of this application to be true, correct and on this application to	signature Signature al will take place) manuent as to how far in a quired before approva	y require add dvance they n I may be gran	edge Ilional equire led.
Declaration: I. (Print Name) authorized to submit this application. I have read the contents of this application all statements made on this application to be true, correct and contents all statements made on this application to be true, correct and contents are contents and submitted. Please check with local government of the completed and submitted. Please check with local government applications to be submitted. Additional licensing fees may also be read to be completed. Additional licensing fees may also be read to be completed. Additional licensing fees may also be read to be content of the c	signature Signature al will take place) manuent as to how far in a quired before approva	y require add dvance they n I may be gran	edge Ilional equire led.



ENTITY INFORMATION

Search Date and Time: 9/22/2023 3:22:31 PM

Entity Details

Entity Name:

DOWN TIME WINES, INC.

Entity ID:

20748431

Entity Type:

Domestic For-Profit (Business) Corporation

Entity Status:

Active

Formation Date:

3/9/2016

Reason for Status:

In Good Standing

Approval Date:

3/24/2016

Status Date:

3/11/2022

Original Incorporation Date:

3/9/2016

Life Period:

Perpetual

Business Type:

Other - PRODUCTION AND SALES OF WINE

Last Annual Report Flied:

2023

Domicile State:

Arizona

Annual Report Due Date:

3/9/2024

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Original Publish Date:

Statutory Agent Information

Name:

COLLEEN KASPAR

Appointed Status:

Active 8/7/2023

Attention:

Address:

393 WEST WARNER RD SUITE 109, CHANDLER, AZ 85225, USA

Agent Last Updated:

8/7/2023

E-mail:

Attention:

Mailing Address:

1647 E CHICAGO ST , CHANDLER, AZ 85225, USA

County:

Maricopa

Principal Information

Title	Name	Attention	Address	Date of Taking Office	Last Updated
Director	BASIL KASPAR	orde norgen en de konstituen en e	1647 E CHICAGO STREET, CHANDLER, AZ, 85225, Maricopa County, USA	3/9/2016	2/25/2019
Director	COLLEEN KASPAR	annual from the closed as all contingent the first the big guided cross of	1647 E CHICAGO STREET, CHANDLER, AZ, 85225, Maricopa County, USA	3/9/2016	2/25/2019
Shareholder	COLLEEN MARIE KASPAR	100,000 - 00,000 - 00,000 - 00,000 - 00,000 - 00 - 00 - 00 - 00 - 00 - 00 - 00 - 00 - 00 - 00 - 00 - 00 - 00 -	NOT REQUIRED, NOT REQUIRED, XXXXX	12/31/9999	1/13/2018
Shareholder	BASIL MICHAEL KASPAR	aragine as limitesta araginarizatesta esta de parel parel en esta de parel en esta en esta en esta en esta en e	NOT REQUIRED, NOT REQUIRED, XXXXX	12/31/9999	1/13/2018

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Title	Name	Attention	Address	Date of Taking Office	Last Updated
Officer	COLLEEN KASPAR	COURT THE PROPERTY OF THE PROP	1647 E. CHICAGO STREET, CHANDLER, AZ, 85225, Maricopa County, USA	3/9/2016	2/25/2019

Page 1 of 1, records 1 to 5 of 5

Address @

Attention: Basil M Kaspar

Address: 1647 E CHICAGO STREET, CHANDLER, AZ, 85225, USA

County: Maricopa

Last Updated: 8/7/2023

Entity Principal Office Address

Attention:

Address:

County:

Last Updated:



Document History Nan

Name/Restructuring History

Pending Documents

Microfilm History