

# COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-9200  
Fax (520) 432-5016

**For internal use only:**  
 Restaurant/Hotel-Motel  
 Club/Government  
 Transfer of Premises

**APPLICANT INFORMATION**

Applicant Name: Andrea Dahlman Lewkowitz Address: 2500 W. Business I-10  
 Business Name: 9 Acre Travel Complex City/Zip: San Simon 85632  
 Liquor License #: Job # 67836 Parcel #: 303-05-001E  
 Ownership Type: n/a Liquor License  Special Event Liquor License   
 Partner(s): n/a

**TO BE COMPLETED BY THE PLANNING & ZONING DEPARTMENT**

Please advise if, at the time the application was filed:

1. The premises for which the license is being applied for is within 300 horizontal feet of a church; or
2. The premises for which the license is being applied for is within 300 horizontal feet of a public or private school, or a fenced recreation area adjacent to a school building.

If so, please attach pertinent documentation and drawings or maps.

Comments: Proposed area not within 300 horizontal feet of a church, public or private school, or fenced recreation area adjacent to a school building.

Based on the above information, the Planning and Zoning Department's recommendation to the Board of Supervisors is:	Approval <input checked="" type="checkbox"/>	Disapproval <input type="checkbox"/>
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**OTHER PERTINENT INFORMATION FOR THE BOARD'S CONSIDERATION:**

Proper Zoning?	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Zoning:	GB (General Business)
Use permitted by P&Z?	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Permit#:	2016-00001097
Date Permit Issued:	01/05/2017	Use Permitted:	Convenience Store and Gas Station
If use not permitted, is it LNC?	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Year LNC Established:	N/A

- The Planning Department will notify the applicant that if any construction is proposed, a Non-Residential Permit must first be submitted and approved by this Department, or if there is a lapse of 12 months of non-operation of the business, a Non-Residential Permit will be required to re-establish the use from this Department.
- The Planning Department will notify the applicant that he/she will be required to obtain the proper permits before operating the business.
- The Planning Department is currently working with the property owner on several zoning-related issues with the subject property.
- The Planning Department is currently working with the property owner on obtaining the proper permits to operate the business.

Name: Dora V Amaya Title: Zoning Administrator  
 Signature: Dora V Amaya Date: July 9, 2019  
 Contact phone: 520.803.3960 Email: [damaya@cochise.az.gov](mailto:damaya@cochise.az.gov)

*Return completed form with any attachments by:* 7/5/2019

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Partner(s): n/a

## TO BE COMPLETED BY THE TREASURER'S OFFICE

Please advise if the property taxes for the parcel in question are current.

Yes      xxx  No

If not, please attach pertinent documentation.

Comments:

Name: KATHLEEN WILSON Title: TAX SPECIALIST 1  
Signature: KATHLEEN WILSON Date: 06/20/2019  
Contact phone: 520-432-8404 Email: KWILSON@cochise.az.gov

*Return completed form with any attachments by:* 7/5/2019

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Partner(s): n/a

## TO BE COMPLETED BY THE SHERIFF'S OFFICE

Please advise if:

1. There have been a significant number of incidents at the named location within five (5) years prior to the application.

If so, please attach pertinent documentation.

Comments: The Sheriff's Office has not had to respond to a significant number of incidents at the above location within the last 5-years.

Based on the above information, the Sheriff's Office recommendation to the Board of Supervisors is:

Approval

Disapproval

No Recommendation

Name: Rich Morales

Title: Lieutenant

Signature: 

Date: 06/20/19

Contact phone: (520)353-5087

Email: RDMorales@cochise.az.gov

Return completed form with any attachments by:

7/5/2019

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Partner(s): n/a

## TO BE COMPLETED BY THE ENVIRONMENTAL HEALTH DEPARTMENT

We would like to request your assistance in reviewing the attached application.

Please provide any pertinent information for the Board's consideration:

## OTHER PERTINENT INFORMATION FOR THE BOARD'S CONSIDERATION:

The Health Department will notify the applicant that he/she will be required to obtain the proper permits before operating the business.

The Health Department is currently working with the property owner on health-related issues with the subject property.

Name: Michael McGee Title: Interim Env Health Director  
Signature:  Date: 6/20/19  
Contact phone: 520-586-8206 Email: mmcgee@cochise.az.gov

Return completed form with any attachments by: 7/5/2019