

COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-9200

Fax (520) 432-5016

APPLICANT INFORMATION

Applicant Name: Kimberly Brant Address: 229 N Frontage Rd
Business Name: Sun Sites Café LLC City/Zip: Pearce 85625
Liquor License #: 124704 Parcel #: 114-14-188
Ownership Type: LLC Liquor License Special Event Liquor License
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 a significant number of calls for service to 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: 12/11/2020

Contact phone: (520)805-5672

Email: RDMorales@cochise.az.gov

Return completed form with any attachments by: 12.4.2020

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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:

Has a current fixed food facility license with Cochise County Environmental Health

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: Natalie Johnson Title: Environmental Health Specialist III, R.S.
Signature:  Date: 12/11/2020
Contact phone: 520-586-8208 Email: njohnson@cochise.az.gov

Return completed form with any attachments by: 12/4/2020

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For internal use only:

- Restaurant/Hotel-Motel
- Club/Government
- Transfer of Premises

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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#:	10-5019
Date Permit Issued:	March 18, 2010	Use Permitted:	Restaurant
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: November 25, 2020
 Contact phone: 520-803-3966 Email: damaya@cochise.az.gov

Return completed form with any attachments by: 11/30/2020

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XXAPPLICANT INFORMATION

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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.

XXX Yes No

If not, please attach pertinent documentation.

Comments:

THE FIRST HALF OF 2020 TAXES HAVE BEEN PAID

Name: KATHLEEN WILSON Title: TAX SPECIALIST 1
Signature: KATHLEEN WILSON Date: 12/14/2020
Contact phone: 5204328404 Email: KWILSON@COCHISE.AZ.GOV

Return completed form with any attachments by: 12/4/2020

[List](#) | [Full Year](#) ▼ | Interest Date:  | As of Date:  | [Payment](#) | [Bidd](#)

ParcelNo	Acct #	Year	Status	Billed	Paid	Interest	Due	Owner
1141418807		2020	TAX	3,128.14	1,564.07	0.00	1,564.07	BROTE DENNIS N SR
				3,128.14	1,564.07	0.00	1,564.07	