



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

DLIC USE ONLY

CSR:

Log #:

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT

OBTAIN APPROVAL FROM LOCAL GOVERNING BOARD BEFORE SUBMITTING TO THE DEPARTMENT OF LIQUOR

Notice: Allow 30-45 days to process permanent change of premises

Permanent change of area of service. A non-refundable \$50. Fee will apply. Specific purpose for change:

Temporary change (No Fee) for date(s) of: 05/29/21 through 05/29/21 list specific purpose for change:

American Legion Riders Post 52 15th Annual Bikefest

- Licensee's Name: Wilson Keith License#: 14020001
Last First Middle
- Mailing address: 12 Theater Dr. Sierra Vista Az 85635
Street City State Zip Code
- Business Name: American Legion Post 52
- Business Address: 12 Theater Dr. Sierra Vista Az 85635
Street City State Zip Code
- Email Address: horse1861@centurylink.net
- Business Phone Number: 520-459-6050 Contact Phone Number: 520-249-6103
- Is extension of premises/patio complete?
 N/A Yes No If no, what is your estimated completion date? 05 / 29 / 21
- Do you understand Arizona Liquor Laws and Regulations?
 Yes No
- Does this extension bring your premises within 300 feet of a church or school?
 Yes No
- Have you received approved Liquor Law Training?
 Yes No
- What security precautions will be taken to prevent liquor violation s in the extended area? A 6' chain link fence will be erected around the perimeter, Sgt. at Arms will be providing security

12. **IMPORTANT:** Attach the revised floor plan, clearly depicting your licensed premises along with the new extended area outlined in black marker or ink, if the extended area is not outlined and marked "extension" we cannot accept the application.

Barrier Exemption: an exception to the requirement of barriers surrounding a patio/outdoor serving area may be requested. Barrier exemptions are granted based on public safety, pedestrian traffic, and other factors unique to a licensed premises. List specific reasons for exemption:

Approval Disapproval by DLLC: _____ Date: ____/____/____

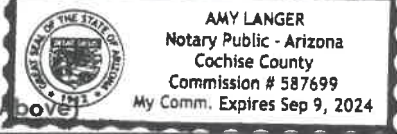
Notary

I, (Signature) [Signature], hereby declare that I am a **CONTROLLING PERSON/ AGENT** filing this notification. I have read this document and the contents and all statements are true, correct and complete.

State of Arizona)
County of Cochise)

On this 31st Day of March, 20 21 before me personally appeared Dave Sutherland
(Print Name of Document Signer)

Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.



[Signature]
Signature of NOTARY PUBLIC

GOVERNING BOARD

After completion, and **BEFORE submitting to the Department of Liquor**, please take this application to your local Board of Supervisors, City Council or Designate for their recommendation. This recommendation is not binding on the Department of Liquor.

Approval Disapproval

Authorized Signature _____ Title _____ Agency _____ Date _____

DLLC USE ONLY

Investigation Recommendation: Approval Disapproval by: _____ Date: ____/____/____

Director Signature required for Disapprovals: _____ Date: ____/____/____

Road Closure Map

E Theater Dr

Google Earth

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100 ft

