

# COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-9200

Fax (520) 432-5016

## APPLICANT INFORMATION

Applicant Name: David James Smith Address: 2909 E. Country Club Drive  
Business Name: Coronado Vineyards City/Zip: Willcox, AZ 85643  
Liquor License #: \_\_\_\_\_ Parcel #: 202-81-162C  
Ownership Type: Corporation Liquor License  Special Event Liquor License   
Partner(s): Doajo David Hicks

## 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:

No additional information is needed from applicant and property owner

## 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.
- The Health Department has no concerns with the liquor license request.

Name: Natalie Johnson RS Title: Division Director Environmental Health  
Signature:  Date: 02/23/2024  
Contact phone: 520-586-8208 Email: njohnson@cochise.az.gov

Return completed form with any attachments by: \_\_\_\_\_

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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:

- The premises for which the license is being applied for is within 300 horizontal feet of a church; or
- 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 site 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

Disapproval



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

Proper Zoning? Y  N

Use permitted by P&Z? Y  N

Date Permit Issued: 4/19/2006

If use not permitted, is it LNC? Y  N

Zoning: RU-2

Permit#: HCP-06-5029

Use Permitted: DOMESTIC FARM WINERY

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: March 7, 2024

Contact phone: 520-803-3966 Email: [damaya@cochise.az.gov](mailto:damaya@cochise.az.gov)

Return completed form with any attachments by: March 8, 2024

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## 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: No significant events in the last five (5) years.

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

Approval



Disapproval



No Recommendation



Name: Joseph Gilbert #0614 Title: Sergeant

Signature: /s/jgilbert #0614 Date: 02-25-2024

Contact phone: 520-353-5639 Email: [jgilbert@cochise.az.gov](mailto:jgilbert@cochise.az.gov)

Return completed form with any attachments by: \_\_\_\_\_

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## TO BE COMPLETED BY THE TREASURER'S OFFICE

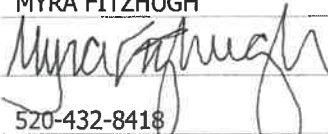
Please advise if the property taxes for the parcel in question are current.

Yes  No

If not, please attach pertinent documentation.

Comments:

Property Tax is current.

Name: MYRA FITZHUGH Title: ACCOUNTING TECHNICIAN  
Signature:  Date: 02/26/2024  
Contact phone: 520-432-8418 Email: MFITZHUGH@COCHISE.AZ.GOV

Return completed form with any attachments by: \_\_\_\_\_



# Cochise County Treasurer

## Tax Statement

**PARCEL: 20281162C4**  
**TWO VINES VINEYARD INC**  
**2909 E COUNTRY CLUB DR**

**WILLCOX, AZ 85643**

**Legal Description:**

POR SW4 SEC 15 BY M&B BEG AT SW COR SAID SEC 15 THN N0DEG 05MIN W2648.07' TO W4 COR SAID SEC 15 THN S84DEG 23MIN E518.32' THN S67DEG 31MIN E165.03' S0DEG 05MIN E2531.08' S89DEG 44MIN W668.13' TO POB SEC 15-13-24 40.04AC

Year	Cert #	Status	Cert Date	Pur Date	Billed	Paid	Int/Fee	Due
2023		TAX			6,187.02	3,093.51	.00	3,093.51
				<b>1st Half</b>	3,093.51	3,093.51	.00	.00
				<b>2nd Half</b>	3,093.51	.00	.00	3,093.51
<b>Parcel Total</b>								<b>3,093.51</b>

Make remittance payable to: Cochise County Treasurer  
PO Box 1778  
Bisbee, AZ 85603  
<http://www.cochise.az.gov/treasurer>

Please return this statement with your remittance.

Contact Info: (520) 432-8400 - (520) 432-8400 - [trsweb@cochise.az.gov](mailto:trsweb@cochise.az.gov)

<b>If paid by last day of February 2024</b>	<b>Statement Total</b>	<b>3,093.51</b>
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