

State of Arizona
Department of Liquor Licenses and Control

Created 02/08/2021 @ 10:06:12 AM

Local Governing Body Report

LICENSE

Number:	06070119	Type:	006 BAR
Name:	MACAYO'S		
State:	Pending		
Issue Date:		Expiration Date:	01/31/2022
Original Issue Date:	04/29/1980		
Location:	1474 N LITCHFIELD ROAD GOODYEAR, AZ 85338 USA		
Mailing Address:	1225 N GILBERT ROAD MESA, AZ 85203 USA		
Phone:	(480)696-3079		
Alt. Phone:	(480)329-0149		
Email:	NAVASINGAM@MSN.COM		

Currently, this license has pending applications.

AGENT

Name:	NAVAYOGASINGAM THURASINGAM
Gender:	Male
Correspondence Address:	1225 N GILBERT ROAD MESA, AZ 85203 USA
Phone:	(480)329-0149
Alt. Phone:	
Email:	NAVASINGAM@MSN.COM

OWNER

Name:	KIND HOSPITALITY INC		
Contact Name:	NAVAYOGASINGAM THURASINGAM		
Type:	CORPORATION		
AZ CC File Number:	F07765323	State of Incorporation:	DE
Incorporation Date:	05/07/1996		
Correspondence Address:	1225 N GILBERT ROAD MESA, AZ 85203 USA		
Phone:	(480)329-0149		
Alt. Phone:			
Email:	NAVA@KINDHOSPITALITY.COM		

Officers / Stockholders

Name:	Title:	% Interest:
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KIND HOSPITALITY INC - PRESIDENT/CEO

Name: NAVAYOGASINGAM THURAI SINGAM

Gender: Male

Correspondence Address: 1225 N GILBERT ROAD
MESA, AZ 85203
USA

Phone: (480)329-0149

Alt. Phone:

Email: NAVA@KINDHOSPITALITY.COM

APPLICATION INFORMATION

Application Number: 138155
Application Type: Location Transfer
Created Date: 02/08/2021

QUESTIONS & ANSWERS

006 Bar

- 1) Are you applying for an Interim Permit (INP)?
No
- 4) Does the Business location address have a street address for a City or Town but is actually in the boundaries of another City, Town or Tribal Reservation?
No
- 13) Provide name, address, and distance of nearest school and church. (If less than one (1) mile note footage)
MONTESSORI INTHE PARK
1832 N LITCHFIELD RD GOODYEAR AZ 85395
1500 FT

PALM VALLEY CHURCH
431 N LITCHFIELD RD GOODYEAR AZ 85338
1.3 MI
- 14) Are you one of the following? Please indicate below.
Property Tenant
Sub-tenant
Property Owner
Property Purchaser
Property Management Company
TENANT
- 15) Is there a penalty if lease is not fulfilled?
Yes
What is the penalty?
\$146,728.00
- 16) What is the total money borrowed for the business not including the lease?
Please list lenders/people owed money for the business.
\$0.00
- 17) Is there a drive through window on the premises?
No
- 18) If there is a patio please indicate contiguous or non-contiguous within 30 feet.
contiguous
- 19) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
No

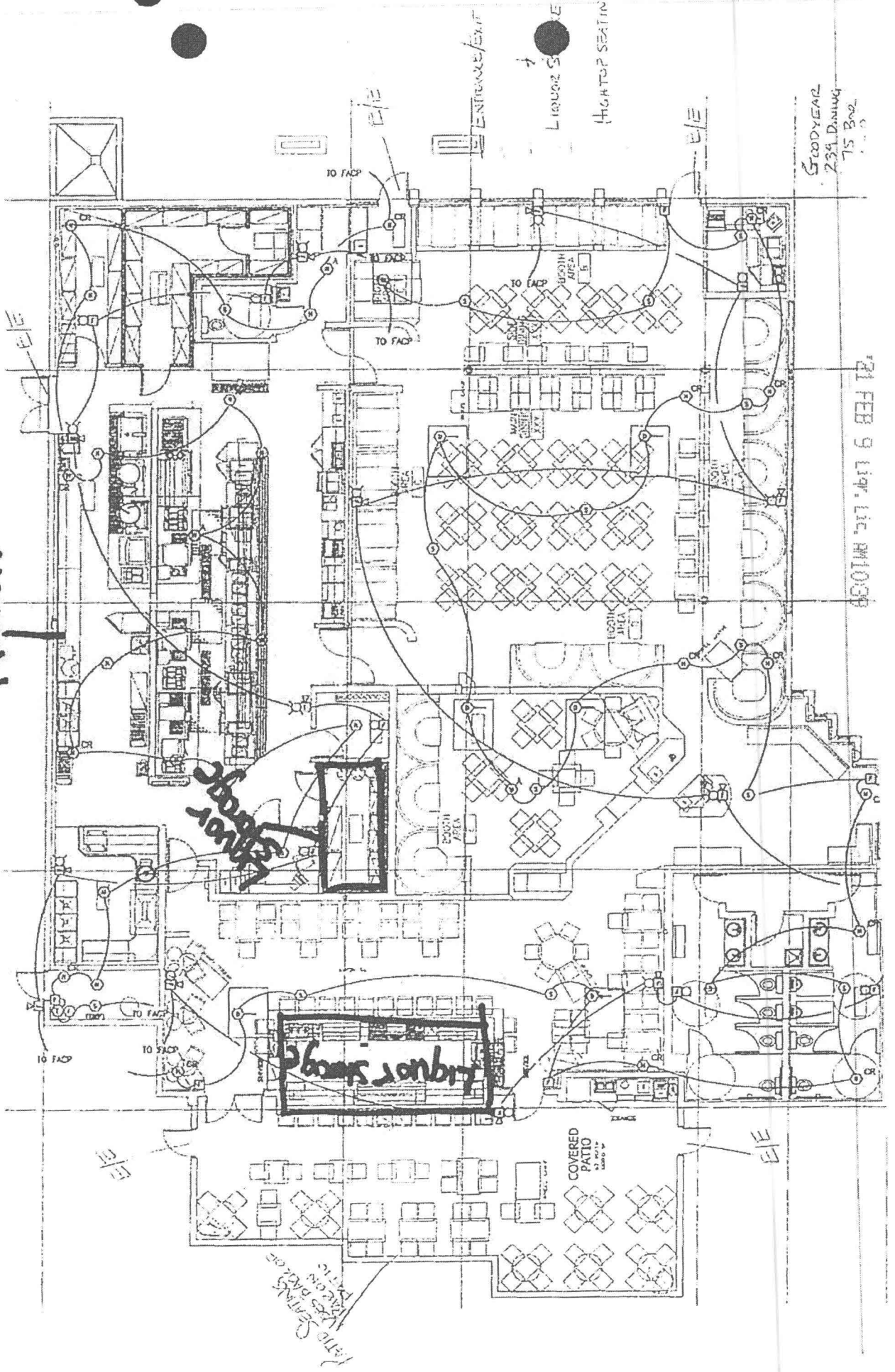
7,937 S.F.

19 MAR 1 11:47 AM '01

Kitchen

Bar

Liquor Storage



STODDYEAR
234 Dining
75 Box

21 FEB 9 11:47 AM '01

21 FEB 9 147. Lic. AM1039



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

QUESTIONNAIRE
A.R.S. § 4-202, 4-210
Type or Print with Black Ink

The fees allowed by R19-1-102 will be charged for all dishonored checks.

FpCurrent 3/1/19

ATTENTION APPLICANT: This is a legally binding document. Please type or print in black ink. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

Attention local governments: Social security and birth date information is confidential. This information may be given to law enforcement agencies for background checks only.

QUESTIONNAIRE IS TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT AND MANAGER BEING DISCLOSED TO THE DEPARTMENT. EACH PERSON COMPLETING THIS FORM MUST SUBMIT A BLUE OR BLACK LINED FINGERPRINT CARD ALONG WITH A \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE. FOR AN ADDITIONAL \$13 FEE, FINGERPRINTS MAY BE DONE AT THE DEPARTMENT OF LIQUOR WHEN ACCOMPANIED BY A COMPLETED APPLICATION.

Liquor License#: Job# 138155

1. Check the
Appropriate
Box →

☒ Controlling Person

☒ Agent

☐ Premises Manager
(complete all questions except #12)

2. Name: Thuraisingam Navayogasingam Birth Date: [REDACTED] (NOT a public record)
Last First Middle
3. Social Security #: [REDACTED] Driver License #: [REDACTED] State: Arizona
4. Place of birth: Tg. Malim, Perak, Malaysia Height: 5' 6" Weight: 190 Eyes: Br Hair: BLK
City State COUNTRY (not county)
5. Name of current/most recent spouse: Thuraisingam Leticia Emilia Birth Date: [REDACTED] (NOT a public record)
Last First Middle
6. Are you a bona fide resident of Arizona? ☒ Yes ☐ No If yes, what is your date of residency: 05-01-1993
7. Daytime telephone number: 480-329-0149 E-mail address: navasingam@Kindhospitality.com
8. Business Name: Macayo's Business Phone: 480 / 696 / 3079
9. Business Location Address: 1474 N LITCHFIELD ROAD GOODYEAR AZ MARICOPA 85395
Street (do not use PO Box) City State County Zip

10. List your employment or type of business during the past five (5) years. If unemployed, retired, or student, list residence address.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
05/2005	CURRENT	CEO	Kind Hospitality Inc, 1225 N. Gilbert Road, Mesa Az 85203

(ATTACH ADDITIONAL SHEET IF NECESSARY)

11. Provide your residence address information for the last five (5) years: A.R.S. §4-202(D)

FROM Month/Year	TO Month/Year	RESIDENTIAL Street Address
8/2003	CURRENT	4617 East Grove Circle, Mesa AZ 85206

(ATTACH ADDITIONAL SHEET IF NECESSARY)

12. As a Controlling Person or Agent, will you be physically present and operating the licensed premises?
If you answered YES, then answer #13 below. If NO, skip to #14. ☒ Yes ☐ No
13. Have you attended a DLLC approved Basic & Management Liquor Law Training Course within the past 3 years? ☒ Yes ☐ No
14. Have you been cited, arrested, indicted, convicted, or summoned into court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past five (5) years? ☐ Yes ☒ No
15. Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summonses pending against you? (Do not include civil traffic tickets.) A.R.S. §4-202,4-210 ☐ Yes ☒ No
16. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? ☐ Yes ☒ No
17. Have you had a liquor application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) ☐ Yes ☒ No
18. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) ☐ Yes ☒ No

If you answered "YES" to any Question 14 through 18 **YOU MUST** attach a signed statement.
Give complete details including dates, agencies involved and dispositions.

CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED

NOTARY

I (Print Full Name) Navayogasingam Thuraisingam hereby declare that I am the Agent/ Controlling Person / Premises Manager filing this application. I have read this document and verify the contents and all statements are true, correct and complete, to the best of my knowledge.

Signature: _____

State of AZ

County of Maricopa

The foregoing instrument was acknowledged before me this

3

Day

Day of

Month

February

Year

My Commission Expires on: 10-12-2024

Date



BRIAN DURETTE
Notary Public - Arizona
Maricopa County
Commission # 588940
My Comm. Expires Oct 12, 2024

Signature of Notary

The Licensee has authorized the person named on this questionnaire to act as manager for the above license.

PRINT NAME: _____ SIGNATURE: _____