

**State of Arizona
Department of Liquor Licenses and Control**

Created 01/12/2026 @ 01:08:20 PM

Local Governing Body Report

**Received by the
Goodyear City
Clerk's Office
Monday,
January 12, 2026.**

LICENSE

Number:		Type:	012 RESTAURANT
Name:	SLICK CITY ACTION PARK		
State:	Pending		
Issue Date:		Expiration Date:	
Original Issue Date:			
Location:	15305 W MCDOWELL ROAD GOODYEAR, AZ 85395 USA		
Mailing Address:	314 W NORTHVIEW AVENUE PHOENIX, AZ 85021 USA		
Phone:	(602)768-0855		
Alt. Phone:			
Email:	WSTOOKS@APIFOUR.COM		

AGENT

Name:	WADE ALAN STOOKS
Gender:	Male
Correspondence Address:	314 W NORTHVIEW AVENUE PHOENIX, AZ 85021 USA
Phone:	(602)768-0855
Alt. Phone:	
Email:	WSTOOKS@APIFOUR.COM

OWNER

Name:	GRAVITY SOLUTIONS GOODYEAR LLC		
Contact Name:	WADE ALAN STOOKS		
Type:	LIMITED LIABILITY COMPANY		
AZ CC File Number:	23769993	State of Incorporation:	AZ
Incorporation Date:	01/07/2025		
Correspondence Address:	314 W NORTHVIEW AVENUE PHOENIX, AZ 85021 USA		
Phone:	(602)768-0855		
Alt. Phone:			
Email:	WSTOOKS@APIFOUR.COM		

Officers / Stockholders

60th Day
3-13-2026

Name:	Title:	% Interest:
COVER 120 LLC	MEMBER	25.00
WALTON LLC	MemBER	25.00
NOVEL VECTOR LLC	Mgr-Member	22.00
STOOKS LLC	MEMBER	20.00

GRAVITY SOLUTIONS GOODYEAR LLC - Mgr-Member

Name: NOVEL VECTOR LLC
 Contact Name: KEVIN VAN HAZEL
 Type: LIMITED LIABILITY COMPANY
 AZ CC File Number: State of Incorporation:
 Incorporation Date:
 Correspondence Address: 314 W NORTHERN AVENUE
 PHOENIX, AZ 85021
 USA
 Phone: (602)768-0854
 Alt. Phone:
 Email: KEVIN@SLICKCITY.COM

COVER 120 LLC - Member

Name: ROBERT BRUCE CAREY
 Gender: Male
 Correspondence Address: 314 W NORTHERN AVENUE
 PHOENIX, AZ 85021
 USA
 Phone: (602)315-3932
 Alt. Phone:
 Email: ROB.CAREY@ATT.NET

GRAVITY SOLUTIONS GOODYEAR LLC - MEMBER

Name: STOOKS LLC
 Contact Name: WADE ALAN STOOKS
 Type: LIMITED LIABILITY COMPANY
 AZ CC File Number: State of Incorporation:
 Incorporation Date:
 Correspondence Address: 314 W NORTHERN AVENUE
 PHOENIX, AZ 85021
 USA
 Phone: (602)768-0855
 Alt. Phone:
 Email: WSTOOKS@APIFOUR.COM

WALTON LLC - Member

Name: CHARLES THOMAS WALTON JR
Gender: Male
Correspondence Address: 314 W NORTHERN AVENUE
PHOENIX, AZ 85021
USA
Phone: (602)768-0856
Alt. Phone:
Email: CWALTON@APIFOUR.COM

STOOKS LLC - Member

Name: WADE ALAN STOOKS
Gender: Male
Correspondence Address: 314 W NORTHVIEW AVENUE
PHOENIX, AZ 85021
USA
Phone: (602)768-0855
Alt. Phone:
Email: WSTOOKS@APIFOUR.COM

GRAVITY SOLUTIONS GOODYEAR LLC - MEMBER

Name: COVER 120 LLC
Contact Name: ROB BRUCE CAREY
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: State of Incorporation:
Incorporation Date:
Correspondence Address: 314 W NORTHERN AVENUE
PHOENIX, AZ 85021
USA
Phone: (602)315-3932
Alt. Phone:
Email: ROB.CAREY@ATT.NET

GRAVITY SOLUTIONS GOODYEAR LLC - MemBER

Name: WALTON LLC
Contact Name: CHARLES THOMAS WALTON JR
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: State of Incorporation:
Incorporation Date:
Correspondence Address: 314 W NORTHVIEW AVENUE
PHOENIX, AZ 85021
USA
Phone: (602)768-0856
Alt. Phone:
Email: CWALTON@APIFOUR.COM

NOVEL VECTOR LLC - Member

Name: KEVIN VAN HAZEL
Gender: Male
Correspondence Address: 314 W NORTHERN AVENUE
PHOENIX, AZ 85021
USA
Phone: (602)768-0854
Alt. Phone:
Email: KEVIN@SLICKCITY.COM

MANAGERS

Name: JOHN ALLEN STOOKS
Gender: Male
Correspondence Address: 314 W NORTHERN AVENUE
PHOENIX, AZ 85021
USA
Phone: (602)578-8430
Alt. Phone:
Email: JACK@SLICKCITY.COM

APPLICATION INFORMATION

Application Number: 375894
Application Type: New Application
Created Date: 12/29/2025

QUESTIONS & ANSWERS

012 Restaurant

- 1) Are you applying for an Interim Permit (INP)?
No
- 2) Are you one of the following? Please indicate below.
Property Tenant
Subtenant
Property Owner
Property Purchaser
Property Management Company
Property Tenant
- 3) Is there a penalty if lease is not fulfilled?
No
- 4) Is the Business located within the incorporated limits of the city or town of which it is located?
Yes
- 5) What is the total money borrowed for the business not including the lease?
Please list each amount owed to lenders/individuals.
0
- 6) Are there walk-up or drive-through windows on the premises?
No

- 7) Does the establishment have a patio?
No
- 8) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
No
- 9) What type of business will this license be used for?
Restaurant

DOCUMENTS

DOCUMENT TYPE	FILE NAME	UPLOADED DATE
MISCELLANEOUS	Flow chart for Goodyear.docx	12/29/2025
DIAGRAM/FLOOR PLAN	diagram.pdf	12/29/2025
RECORDS REQUIRED FOR AUDIT	Audit_Records.pdf	12/29/2025
QUESTIONNAIRE	Charles Walton Personal Questionnaire.pdf	12/29/2025
QUESTIONNAIRE	kevin VanHazel personal questionnaire.pdf	12/29/2025
QUESTIONNAIRE	Rob Carey Personal Questionnaire .pdf	12/29/2025
QUESTIONNAIRE	Wade Stooks Personal Questionnaire.pdf	12/29/2025
RESTAURANT OPERATION PLAN	Restaurant Operation Plan.pdf	12/29/2025
MENU	Menu (2).pdf	12/29/2025
	Documentation for Alien Status.pdf	01/05/2026
	Restaurant Operation Plan.pdf	01/05/2026
	diagram with square footage.pdf	01/06/2026
	Wade Stooks Personal Questionnaire.pdf	01/08/2026
	kevin VanHazel personal questionnaire.pdf	01/08/2026
	Charles Walton Personal Questionnaire.pdf	01/08/2026
	Rob Carey Personal Questionnaire .pdf	01/08/2026
	jack stooks Personal_Info_ Questionnare .pdf	01/08/2026
	jack stooks certificate.pdf	01/08/2026
	jack stooks certificate for completion.pdf	01/08/2026
	Operation Form.pdf	01/08/2026
	wade, charles, kevin and rob owned liquor licenses.pdf	01/08/2026
	2025 alien status.pdf	01/08/2026

Consumption

Alcohol sold

The floor plan of El Comodoro restaurant is divided into several main sections. At the top left is the 'Exit' and 'LOADING DOCK'. The central area contains the 'KITCHEN' and 'RESTAURANT' with numerous tables and chairs. To the right is the 'BAR' and 'PARTY STORAGE'. The bottom left features a 'PLAY AREA' and 'RESTROOMS'. The bottom right shows the 'WAITING AREA' and 'CHECK-IN'. The plan is marked with a grid of letters (A-F) and numbers (1-30) for reference. A scale bar at the top indicates dimensions in feet and inches. A north arrow is located in the upper right corner.

A. ALL WALL DIMENSIONS ARE TO FACE OF STUDY ROOM REAR WALL & MASONRY
VENEER DIMENSIONS OF ALL DETAILS AS INDICATED PROVIDED BY OWNER.
C. PROVIDE IF STUO WALL AT ELECTRICAL PANELS, REFRIG, W.C. DIMS.
D. RE TO OWNER PROVIDE PLAN FOR LOCATION OF ASBESTY PROTECTION.
E. PROVIDE 1/2" MIN. CLEARANCE FROM WALL TO WALL WITH A MAXIMUM
TRAIL-SPACE OF 75 INCH. FREE EXTERNSHEDS SHALL HAVE A MINIMUM TRAIL-SPACE
24-120 IN. HAVE A CURRENT SERVICE TAP FROM THE FREE EXTERNSHED COMPANY.
F. PROVIDE ACCESSIBLE TO ALL. PROVIDE 1/2" MIN. CLEARANCE FROM WALL TO WALL
HIGHEST OF ALL J.F. MEASURED FROM FLOOR TO THE TOP OF THE WALL. PROVIDE 1/2"
FREE EXTERNSHEDS WITHIN THE FIRST OF THE COOKING APPLIANCES, IN ACCORDANCE
WITH THE ADA 5.03.
F. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS, RE: 5.03. 5.03.
G. 5.03.
H. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
I. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
J. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
K. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
L. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
M. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
N. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
O. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
P. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
Q. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
R. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
S. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
T. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
U. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
V. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
W. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
X. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
Y. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS
Z. PROVIDE 1/2" MIN. CLEARANCE TO COMPLY WITH ADA REQUIREMENTS

1. EXISTING ELECTRICAL EQUIPMENT TO REMAIN.
2. EXISTING WALL-MOUNTED FREE EXTINGUISHER TO REMAIN.
3. EXISTING RECONCRETE STIFF WALLS TO REMAIN.
4. EXISTING FINE ROOF TO REMAIN.
5. EXISTING ROOF LAGGER AND ACCESS WALK TO REMAIN.
6. EXISTING ROOF DRAINAGE TO REMAIN.
7. EXISTING CLEAN-OUTS TO REMAIN.
8. EXISTING COLUMNS TO REMAIN.
9. EXISTING FIBER TO REMAIN.
10. EXISTING EXTERIOR DOOR TO REMAIN.
11. EXISTING SLOPED DOOR TO REMAIN.
12. EXISTING INTERIOR DOOR TO REMAIN.
13. EXISTING OVERHEAD DOOR TO REMAIN.
14. EXISTING FIRE DEPARTMENT CONNECTION TO REMAIN.
15. EXISTING DOWNSTAIR HALL TO REMAIN.
16. EXISTING DUST SHED TO REMAIN.
17. EXISTING HYDROKUT STUD WALL TO REMAIN.
18. EXISTING CONCRETE WALL TO REMAIN.
19. EXISTING GLAZING TO REMAIN.
20. EXISTING SHAVED HALL TO REMAIN.
21. NEW ROOF PLY TO COMPLY WITH 2015 IBC SECTION 424
22. NEW DUST OFF PLAZARD SIGN W/ BRASSLE STRIP AS PER IBC SECTION 1015.
23. NEW DIRECTIONAL ROOF LIGHTS TO REMAIN.
24. NEW MOON-POOD FURNITURE TO BE PROVIDED BY YOUANT.
25. NEW METAL GLASS RAIL BAR CHAIRS.
26. NEW SIGN TO BE CENTER AT 10' P. REFER TO ELECTRICAL DRAWINGS FOR POWER AND DATA.
27. NEW MAINTENANCE OCCUPANCY SIGN PER 2015 IBC SECTION 1004.5
28. NEW SIGN SUPPLIER: BELLFLOW BLUZE, REFER TO ELECTRICAL. PROVIDE RAILS BEHIND WHITEBURY VISIBILITY CLEARANCE IS LESS THAN 8'0". G.C. TO COORDINATE TOTAL LOCATION OF SIGN WITH OTHERS.
29. NEW DUST SHED, RE: 1/4" X 1/2".
30. DASHED LINE INDICATES FULL-HIGH ROOF SLOPPY ARCHIVE, RE: 1/4" X 1/2" X 1/2".
31. ALIGNED TO PERPENDICULAR BELLOW BLUZE, REFER TO ELECTRICAL.
32. AIRTRACK TO BE PROVIDED BY BELLOW BLUZE.
33. NEW PLANT AREA, SUPPLIER: BELLFLOW BLUZE, AND RAILS TO BE PROVIDED BY TENANTE, G.C. TO COORDINATE FINAL LOCATION WITH OTHERS.
34. NEW CLOUTS, SUPPLIER: BELLFLOW BLUZE, AND RAILS TO BE PROVIDED BY TENANTE, G.C. TO COORDINATE FINAL LOCATION WITH OTHERS.
35. NEW MOON-FIXED AREA COMPLIANT TABLE SEATING, TABLE HEIGHT AT 30" X 42".
36. NEW AREA COMPLIANT ROOFER SEATING, TABLE HEIGHT AT 30" X 42".
37. NEW MOON-FIXED AREA COMPLIANT TABLE SEATING, TABLE HEIGHT AT 30" X 42".
38. NEW TRAFFIC BAILED GATED AREA INTERCEPTOR LOCATED BELLOW GATED, REFER TO PLUMBING.
39. NEW AREA TO BE GATED OFF. AREAS WILL NOT BE ACCESSIBLE TO AUTOMOBILES.

 EXISTING EXTERIOR WALL TO REMAIN
 EXISTING INTERIOR WALL TO REMAIN
 NEW INTERIOR WALL

 INDICATES DOOR NUMBER - SEE DOOR SCHEDULE SHEET ALSO
 INDICATES ROOM NUMBER
 DETAIL REFERENCE
 DETAIL SHEET NUMBER
 INDICATES WALL/PARTITION TYPE
 FIRE RISK AND CLEARANCE
 ROOF LADDER
 FIRE DEPARTMENT CONNECTION
 FIC
 INDICATES FIRE RETARDANT TYPE 2A/010C PER EVERY 3.00 S.F. AND 75-0" MAX. TRAVEL DISTANCE - PROVIDE AT LOCATIONS REQUIRED BY FIRE MARSHAL OR AUTHORITY
 WALKWAY IDENTIFICATION

- WALL TYPE E1: EXISTING EXTERIOR CONCRETE WALL
 - EXISTING WALL ASSEMBLY TO BE VERIFIED IN FIELD
- WALL TYPE E2: EXISTING PLUMBING WALL - NOT USED
 - EXISTING WALL ASSEMBLY TO BE VERIFIED IN FIELD
- WALL TYPE E3: EXISTING INTERIOR WALL
 - EXISTING WALL ASSEMBLY TO BE VERIFIED IN FIELD
- WALL TYPE E4: EXISTING CORNERING WALL
 - EXISTING WALL ASSEMBLY TO BE VERIFIED IN FIELD
- WALL TYPE E5: EXISTING PARTIAL HEIGHT FURB-OUT
 - EXISTING WALL ASSEMBLY TO BE VERIFIED IN FIELD
- WALL TYPE E6: NEW INTERIOR FULL-HEIGHT WALL, NO 2" P.O.C.
 - 2" P.O.C. MEAL STUDS AT 24" O.C.
 - 1" LAYER #4 @ 6" DIA. INTERIOR - FULL HEIGHT
 - DRILL TO MATCH EXISTING WALL
 - 1" LAYER #4 @ 6" DIA. INTERIOR

SCALE: 1/16" = 1'-0"

(1)



Arizona Department of Liquor Licenses and Control
<https://www.azliquor.gov>
(602) 542-5141

DLIC USE ONLY

Job #:	375894
Date Accepted:	12-29-2025
LC:	Chaya
License #:	

RESTAURANT OPERATION PLAN

RESTAURANT SERIES 12 AND
HOTEL/MOTEL SERIES 11 ONLY

1. Name of restaurant (Please print): Slick City Action Park
2. Must indicate the equipment below by Make, Model, and Capacity:

LIST ONLY THE FOLLOWING - NO ATTACHMENTS

Grill	Single turbo chef Double Deck Grill
Oven	Single turbo chef Double Deck oven
Freezer	3 individual Galaxy/177CF
Refrigerator	2 Pepsi Fridges
Sink	2 handwashing stations
Dish Washing Facilities	one 6 foot 3' comp sink
Food Preparation Counter (Dimensions)	three individual 4ft by 6.5ft tables
Other	

3. Attach a copy of your FULL menu with pricing INCLUDING NON-ALCOHOLIC BEVERAGES

4. What percentage of your public premises is used primarily for restaurant dining?

(Do not include kitchen, bar, hi-top tables, or game area.) 12 %

5. Does your restaurant have a bar area that is distinct and separate from the dining area? ☐ YES ☒ No

(If yes, what percentage of the public floor space does this area cover?) _____ %

6. List the seating capacity for:

a) Restaurant dining area of your premises:
(DO NOT INCLUDE PATIO SEATING)

[113]

b) Bar area

[+ 0]

TOTAL [= 113]

7. What type of dinnerware is primarily used in your restaurant?

☐ Reusable

☒ Disposable

☐ Both

8. Does your restaurant contain any games, televisions, or any other entertainment?

☒ Yes

☐ No

If yes, specify what types and how many (examples: 4-TV's, 2-Pool Tables, 1-Video Game, etc.)

8 advertisement TV's

3 regular TV's for entertainment

10 arcade games

1 photo booth

13 slides

Air court / 2

jungle gym area

9. Do you have live entertainment or dancing?

☐ Yes

☒ No

If yes, what type and how often (example: DJ-2 x a week, Karaoke-2 x a month, Live Band-1 x a month, etc.)

10. List number of employees for each position:

Position	How many
Cooks	2
Bartenders	0
Hostesses	0
Managers	4
Servers	0
Other (cafe staff)	15
Other (action monitors)	40
Other ()	

I, (Print Full Name) Wade Stooks, hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Applicant Signature: Wade Stooks

	Price
Party ICEE - Party ICEE	\$ 2.82
Party Pizza - Party Pizza	\$ 14.91
Pizza - Whole Pizza	\$ 15.25
Powerade - Powerade	\$ 3.54
Thrill Party - Thrill Party	\$ 27.10
Bottle of Water - Bottle of Water	\$ 2.52
Bottle Soda - Bottle Soda	\$ 3.49
Bottled Tea - Bottled Tea	\$ 2.81
Candy - Candy	\$ 1.97
Chicken Tenders - Chicken Tenders	\$ 5.46
Chicken Wings - 10 Piece Chicken Wings	\$ 10.13
Chicken Wings - 5 Piece Chicken Wings	\$ 6.07
Chips - Chips	\$ 1.99
Churros - Churros	\$ 4.55
CitySocks - CitySocks	\$ 4.03
CitySocks - Events - CitySocks - Events	\$ 3.03
Combos - Combo - 5 Piece Wings	\$ 12.16
Combos - Combo - Chicken Strips	\$ 11.14
Combos - Combo - ICEE Upgrade	\$ 1.00
Combos - Combo - Personal Pizza	\$ 12.16
Combos - Combo - Pretzel Bites	\$ 9.99
Beer (Can)	\$ 7.99
Wine (Glass)	\$ 9.99



Arizona Department of Liquor Licenses and Control
<https://www.azliquor.gov>
(602) 542-5141

25 12 31 Lic. Dept. AR DLIC USE ONLY

Job #:	305894
Date Accepted:	12-29-2025
LC:	Chaya
License #:	

RECORDS REQUIRED FOR AUDIT RESTAURANT/HOTEL/MOTEL

In the event of an audit, you will be asked to provide to the Department any documents necessary to determine Compliance with A.R.S. §4-205.02(G). Such documents requested may include however, are not limited to:

1. Name of restaurant (Please print): Slick City Action Park
2. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises.
3. A list of **all** food and liquor vendors
4. The restaurant menu used during the audit period
5. A price list for alcoholic beverages during the audit period
6. Mark-up figures on food and alcoholic products during the audit period
7. A recent, **accurate** inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
8. Monthly Inventory Figures - beginning and ending figures for food and liquor
9. Chart of accounts (copy)
10. Financial Statements-Income Statements-Balance Sheets
11. **General Ledger**
 - A. Sales Journals/Monthly Sales Schedules
 - 1) Daily sales Reports (to include the name of each waitress/waiter, bartender, etc. with sales for that day)
 - 2) Daily Cash Register Tapes - Journal Tapes and Z-tapes
 - 3) Dated Guest Checks
 - 4) Coupons/Specials/Discounts
 - 5) Any other evidence to support income from food and liquor sales
 - B. Cash Receipts/Disbursement Journals
 - 1) Daily Bank Deposit Slips
 - 2) Bank Statements and canceled checks
12. **Tax Records**
 - A. Transaction Privilege Sales, Use and Severance Tax Return (copies)
 - B. Income Tax Return - city, state and federal (copies)
 - C. Any supporting books, records, schedules or documents used in preparation of tax returns

13. Payroll Records

- A. Copies of all reports required by the State and Federal Government
- B. Employee Log (A.R.S. §4-119)
- C. Employee time cards (actual document used to sign in and out each workday)
- D. Payroll records for all employees showing hours worked each week and hourly wages

14. Off-site Catering Records (must be complete and separate from restaurant records)

- A. All documents that support the income derived from the sale of food off the license premises.
- B. All documents which support purchases made for food to be sold off the licensed premises.
- C. All coupons/specials/discounts

The sophistication of record keeping varies from establishment to establishment. Regardless of each licensee's accounting methods, the amount of gross revenue derived from the sale of food and liquor must be substantially documented.

REVOCATION OF YOUR LIQUOR LICENSE MAY OCCUR IF YOU FAIL TO COMPLY WITH A.R.S. §4-210(A)7 AND A.R.S. §4-205.02(G).

A.R.S. §4-210(A) 7

The licensee fails to keep for two years and make available to the department upon reasonable request all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of spirituous liquors and, in the case of a restaurant or hotel-motel licensee, all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of food.

A.R.S. §4-205.02(M)

For the purpose of this section:

Restaurant: an establishment that derives **at least forty percent (40%)** of its gross revenue from the sale of food

Gross revenue: the revenue derived from all sales of food and spirituous liquor on the licensed premises regardless of whether the sales of spirituous liquor are made under a restaurant license issued pursuant to this section or under any other license that has been issued for the premises pursuant to this article.

Declaration:

I, (Print Name) Wade Stooks, declare under penalty of perjury that I am authorized to submit this application. I have read the contents and to the best of my knowledge believe all statements made on this application to be true, correct, and complete.

Signature: Wade Stooks

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH RECORDS REQUIRED BY THE STATE