



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

DLLC USE ONLY

Job #:
Date Accepted:
LC:
License #:

**PERMANENT EXTENSION OF
PREMISES/PATIO PERMIT**
NON-REFUNDABLE \$50.00 FEE WILL APPLY

OBTAIN APPROVAL FROM LOCAL GOVERNING BOARD BEFORE SUBMITTING TO THE DEPARTMENT OF LIQUOR
****Notice: Allow 30-45 days to process permanent change of premises****

License#: 012070002030

Specific purpose for change: Add existing pool are to premise map, did not include originally

1. Agent Name: Huyer, Deborah M
2. Business Name:

Last	First	Middle
<u>Lakeside Grill @ Estrella</u>		
3. Business Location Address: 17665 W. Elliot Road, Goodyear Az 85338
4. Mailing address:

Street	City	State	Zip Code
<u>18549 W. Western Star Blvd, Goodyear AZ 85338</u>			
5. Email Address:

Street	City	State	Zip Code
<u>info@lakesidegrillestrella.com</u>			
6. Business Phone Number: 6232363047 Contact Phone Number: 2069471193
7. Is extension of premises/patio complete? ☐ N/A ☒ Yes ☐ No
If no, what is your estimated completion date? _____
8. Do you understand Arizona Liquor Laws and Regulations? ☒ Yes ☐ No
9. Does this extension bring your premises within 300 feet of a school? ☐ Yes ☒ No
10. Have you received approved Liquor Law Training? ☒ Yes ☐ No
11. What security precautions will be taken to prevent liquor violations in the extended area?

Brightly colored cups will be used to identify all alcoholic beverages, a server is assigned to the area, entry into the area requires check in at desk and resident ID card

IMPORTANT

MUST ATTACH A DIAGRAM, clearly depicting your licensed premises along with the new extended area, *If the extended area is not outlined and marked "extension" we cannot accept the application.*

BARRIER

☐ 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: _____

SIGNATURE

Declaration:

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



Signature

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

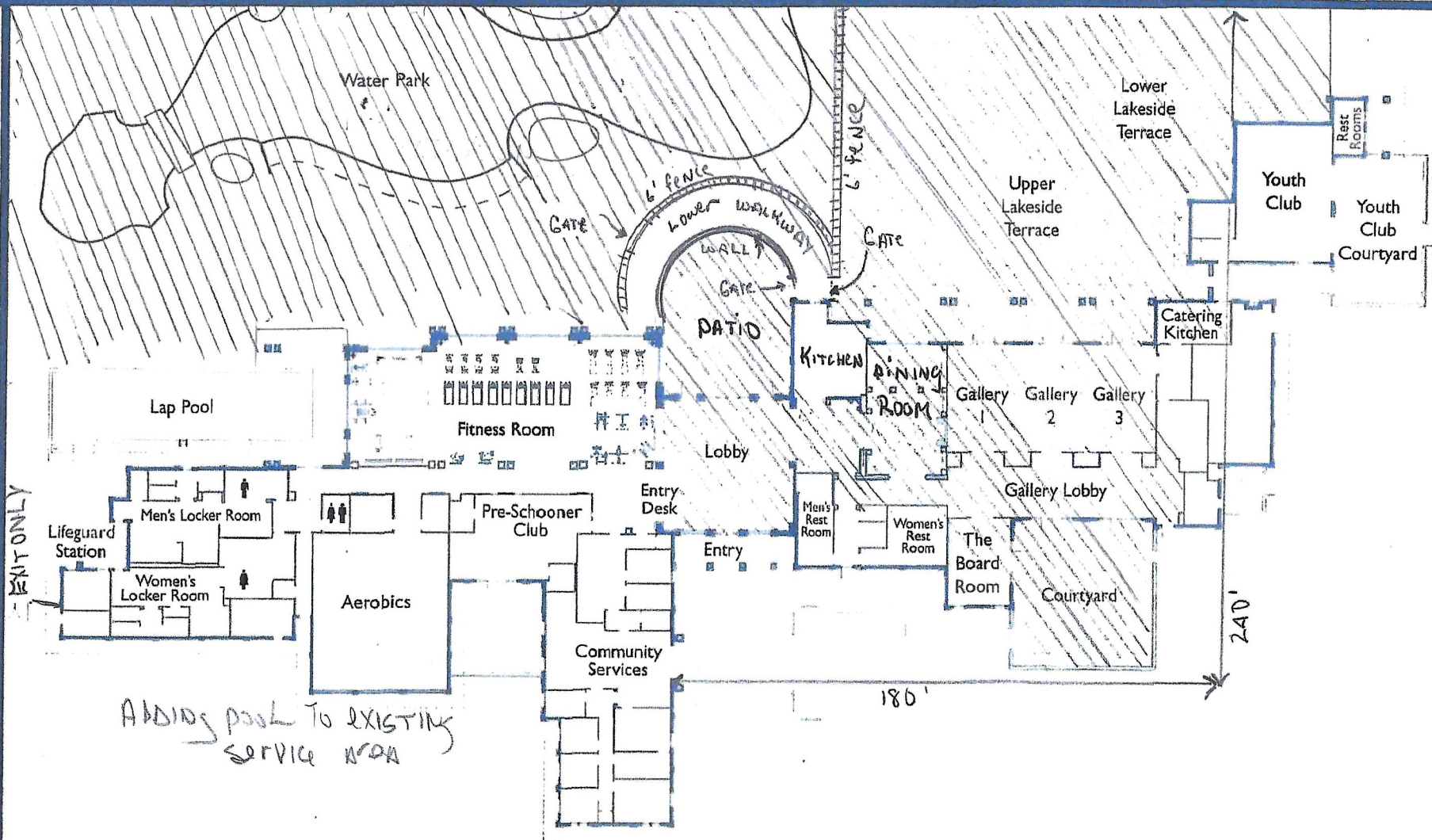
Agency

Date

DLLC USE ONLY

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

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



STARPOINTE
Residents Club

17665 West Elliot Road
Goodyear, AZ 85338
623-386-1949



ADDING POOL AREA TO EXISTING LICENSE
POOL IS FULLY FENCED WITH ACCESS
THROUGH CLUB FRONT DESK + RESIDENT
I.D. CARD.