

NOTICE

APPLICATION TO SELL ALCOHOLIC BEVERAGES

DATE POSTED: 9/23/2019

A HEARING ON A LIQUOR LICENSE APPLICATION SHALL BE HELD BEFORE THE

City Council of the City of San Luis

PLACE 1090 E. Union St. - San Luis, AZ DATE/TIME 10/23/2019 @ 7:00 pm

HEARING DATES SUBJECT TO CHANGE, TO VERIFY CALL: 928-341-8520

THE LOCAL GOVERNING BODY WILL RECOMMEND TO THE STATE LIQUOR BOARD WHETHER THE BOARD SHOULD GRANT OR DENY THE LICENSE. THE STATE LIQUOR BOARD MAY HOLD A HEARING TO CONSIDER THE RECOMMENDATION OF THE LOCAL GOVERNING BODY. ANY PERSON RESIDING OR OWNING OR LEASING PROPERTY WITHIN A ONE-MILE RADIUS MAY CONTACT THE STATE LIQUOR BOARD IN WRITING TO REGISTER AS A PROTESTER. TO REQUEST INFORMATION REGARDING PROCEDURES BEFORE THE BOARD AND NOTICE OF ANY BOARD HEARINGS REGARDING THIS APPLICATION, CONTACT THE **STATE LIQUOR BOARD:** 800 W. WASHINGTON, 5TH FLOOR, PHOENIX, AZ. 85007 (602) 542-9789

INDIVIDUALS REQUIRING ADA ACCOMMODATIONS CALL - LOCAL GOVERNING BODY: 928-341-8520 STATE LIQUOR DEPT: (602) 542-9789

POST ONE COPY OF THE APPLICATION FORM BELOW THIS NOTICE.



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

AFFIDAVIT OF POSTING

Date of Posting: September 23, 2019 Date of Posting Removal: October 15, 2019

Applicant's Name: Miller Jeffrey Craig
Last First Middle

Business Address: 1541 n. main Street San Luis 85349
Street City Zip

License #: _____

I hereby certify that pursuant to A.R.S. 4-201, I posted notice in a conspicuous place on the premises proposed to be licensed by the above applicant and said notice was posted for at least twenty (20) days.

Sonia Cornelio City Clerk 928-341-8520
Print Name of City/County Official Title Phone Number

Sonia Cornelio 10/15/2019
Signature Date Signed

Return this affidavit with your recommendations (i.e., Minutes of Meeting, Verbatim, etc.) or any other related documents. If you have any questions please call (602) 542-5141 and ask for the Licensing Division.

State of Arizona
Department of Liquor Licenses and Control

RECEIVED

SEP 23 2019

Created 08/20/2019 @ 02:18:28 PM

Local Governing Body Report

Office of the City Clerk
City of San Luis, Arizona

LICENSE

Number: Type: 012 RESTAURANT
Name: DENNYS #9506
State: Pending
Issue Date: Expiration Date:
Original Issue Date:
Location: 1541 N MAIN STREET
SAN LUIS, AZ 85349
USA
Mailing Address: PO BOX 2502
CHANDLER, AZ 85244
USA
Phone: (928)627-0907
Alt. Phone: (480)730-2675
Email: RHONDA@AZLIC.COM

AGENT

Name: JEFFREY CRAIG MILLER
Gender: Male
Correspondence Address: PO BOX 2502
CHANDLER, AZ 85244
USA
Phone: (480)730-2675
Alt. Phone:
Email: CRAIGMILLER@AZLIC.COM

OWNER

Name: DINE PLUS YUMA LLC
Contact Name: JEFFREY CRAIG MILLER
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: 1961062 State of Incorporation: AZ
Incorporation Date: 03/29/2019
Correspondence Address: PO BOX 2502
CHANDLER, AZ 85244
USA
Phone: (480)730-2675
Alt. Phone:
Email: RHONDA@AZLIC.COM

Officers / Stockholders

Name: Title: % Interest:

DINE PLUS YUMA LLC - Member, Stockholder

Name: EMAD.FAYEK MASAIH
Gender: Male
Correspondence Address: PO BOX 2502
CHANDLER , AZ 85244
USA
Phone: (602)334-5478
Alt. Phone:
Email: FAYEKZAMAN@COX.NET

MANAGERS

Name: KATRINA MARIE ARNOLD
Gender: Female
Correspondence Address: PO BOX 2502
CHANDLER , AZ 85244
USA
Phone: (928)388-4444
Alt. Phone:
Email: KGKARONLD@GMAIL.COM

Name: LORENA MALDONADO
Gender: Female
Correspondence Address: PO BOX 2502
CHANDLER , AZ 85244
USA
Phone: (928)432-5093
Alt. Phone:
Email: LORENAMALDONADO70@GMAIL.COM

Name: DANIEL AGUIRRE
Gender: Male
Correspondence Address: PO BOX 2502
CHANDLER , AZ 85244
USA
Phone: (928)261-3098
Alt. Phone:
Email: BALDERASDANIEL8@GMAIL.COM

APPLICATION INFORMATION

Application Number: 73570

Application Type: New Application
Created Date: 08/20/2019

QUESTIONS & ANSWERS

012 Restaurant

- 1) If you intend to operate the business while your application is pending you will need an interim permit pursuant to A.R.S. §4-203.01. Would you like to apply for an Interim Permit?
If yes, after completing this application, please go back to your Licensing screen, under New License Application choose "Interim Permit" from the drop-down window.
No
- 2) Have you submitted a questionnaire? Each person listed must submit a questionnaire and mail in a fingerprint card along with a \$22. processing fee per card.
Yes
- 5) Are you a tenant? (A person who holds the lease of a property; a lessee).
No
- 6) Is there a penalty if lease is not fulfilled?
Yes
What is the penalty?
STILL OWE TERM
- 7) Are you a sub-tenant? (A person who holds a lease which was given to another person (tenant) for all or part of a property)
Yes
A Document of type INCOMING CORRESPONDENCE is required.
- 8) Are you the owner?
No
- 9) Are you a purchaser?
No
- 10) Are you a management company?
No
- 11) Is the Business located within the incorporated limits of the city or town of which it is located?
Yes
- 12) What is the total money borrowed for the business not including the lease?
Please list lenders/people owed money for the business.
0
- 13) Have you provided a diagram of your premises?
Yes
- 14) Is there a drive through window on the premises?
No
- 15) If there is a patio please indicate contiguous or non-contiguous within 30 feet.
NONE
- 16) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
Yes
If yes, what is your estimated completion date?
09/01/2019
- 17) Have you provided a Restaurant Operation Plan form?
Yes
- 18) Have you provided a Records Required for Audit form?
Yes