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

TEMPORARY EXTENSION OF PREMISES /PATIO PERMIT

A NON-REFUNDABLE $100 FEE WILL APPLY

DLLC USE ONLY
Job #:
Date Accepted:
LC:
License #:

OBTAIN APPROVAL FROM LOCAL GOVERNING BOARD BEFORE SUBMITTING TO THE DEPARTMENT OF LIQUOR
APPLICATION MUST BE SUBMITTED TO THE DEPARTMENT OF LIQUOR 30 DAYS PRIOR TO FIRST SCHEDULED DATE

License#: _____

1. Agent Name: Rivers (Last) Lisa (First) (Middle)
2. Business Name: BPOE #2160
3. Business Location Address: 123 N Frontier St (Street) Wickenburg (City) AZ (State) 85390 (Zip Code)
4. Business Phone Number: 9286847714 Contact Phone Number: 9286710729
5. Mailing address: 123 N Frontier St (Street) Wickenburg (City) AZ (State) 85390 (Zip Code)
6. Email Address: bpoe2160@gmail.com
7. Specific purpose for change: Octoberfest Event

8a. Do you understand Arizona Liquor Laws and Regulations? ☑ Yes ☐ No
b. Does this extension bring your premises within 300 feet of a school? ☐ Yes ☑ No

***Dates of the temporary extension* - Must not exceed 6 months**

Date	Day of the Week	Start Time	End Time
10/18/2025	Saturday	10:00 am	10:00 PM

Must provide written notice to the Department of Liquor of any modification 10 days prior to change/addition to scheduled Temporary Extension.

Individuals requiring ADA accommodations please call (602)542-2999

IMPORTANT- REQUIRED ATTACHEMENTS

1. MUST **SUBMIT A SECURITY PLAN** and identify security measures in order to:
   - Provide for the safety of the patrons.
   - Ensure no one under legal drinking age purchases, possesses, or consume alcohol.
   - Prevent unauthorized removal of alcohol from the extended premises.
   - Prevent unauthorized carrying of alcohol onto the extended premises.
2. 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) Lisa Rivers, declare under penalty of perjury that I am authorized by the licensee 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 Lisa Rivers

GOVERNING BOARD

After completion, at least 60 days 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**

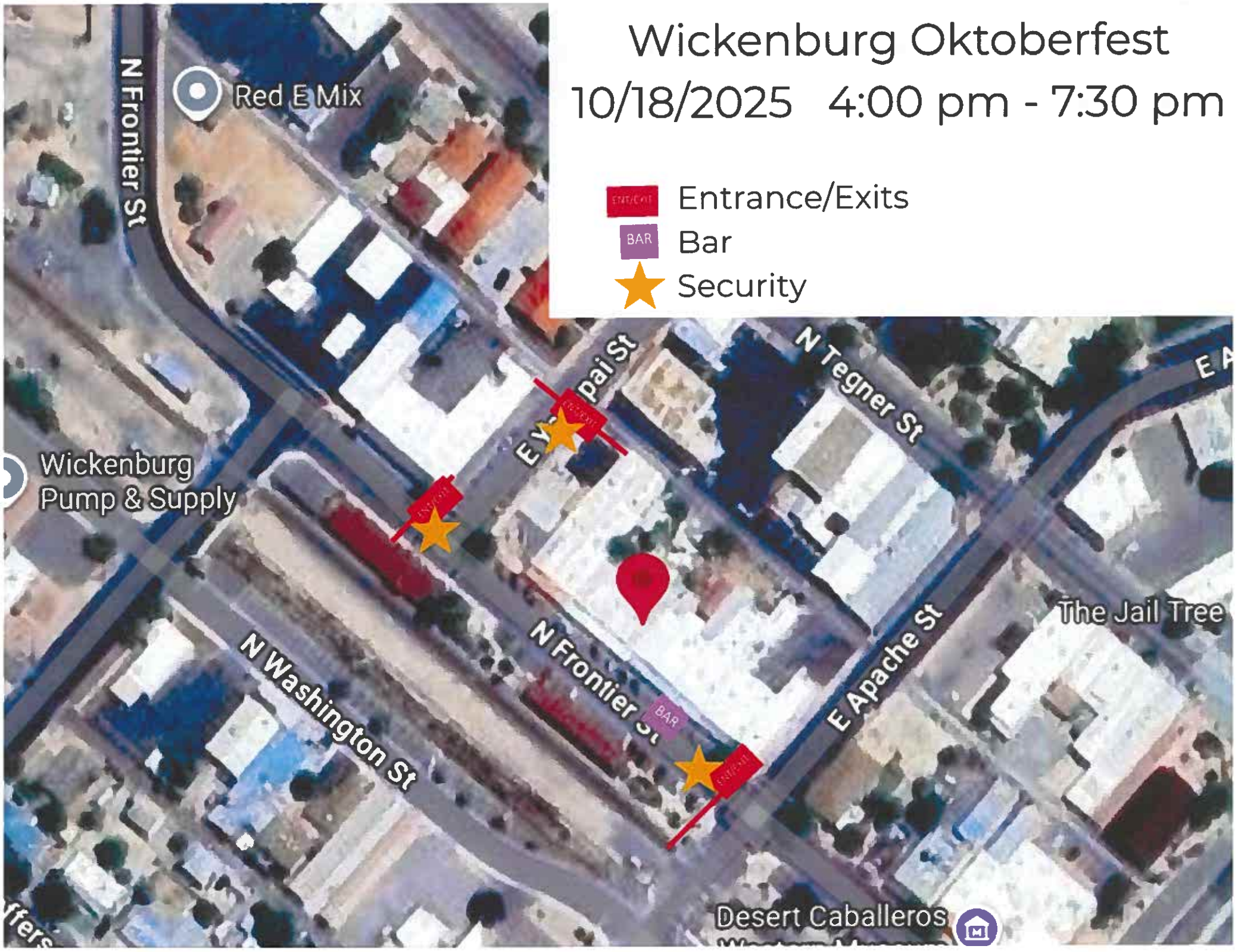
DLLC USE ONLY

Investigations: ☐ **Approval** ☐ **Disapproval** by: _____ Date: ___/___/___

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

Wickenburg Oktoberfest

10/18/2025 4:00 pm - 7:30 pm



Wickenburg Oktoberfest 2025

October 18, 2025

4:00 pm- 7:30 pm

Frontier St. & Yavapai St.