



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

DLLC USE ONLY

| | |
|----------------|--------------------|
| License # | 12113301 |
| Date Accepted: | 2/22/18 |
| CSR: | <i>[Signature]</i> |

Application for Liquor License
Type or Print with Black Ink

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE
A service fee of \$25 will be charged for all dishonored checks (A.R.S. § 44-6852)

SECTION 1 Type of License

- ☒ Interim Permit
- ☒ New License
- ☐ Person Transfer
- ☐ Location Transfer (series 6, 7 and 9)
- ☐ Probate/ Will Assignment/ Divorce Decree (No Fees)
- ☐ Seasonal

SECTION 2 Type of Ownership

- ☐ J.T.W.R.O.S.
- ☐ Individual
- ☐ Partnership
- ☐ Corporation
- ☒ Limited Liability Co
- ☐ Club
- ☐ Government
- ☐ Trust
- ☐ Tribe
- ☐ Other (Explain) _____

SECTION 3 Type of License

- ☐ Add Sampling Privilege for Series 9 and 10 only (Complete Sampling Privilege application)
A.R.S. § 4-206.01 (G), (H), (I) & (L)
- ☐ Add Growler privileges (restaurant, series 12, license only. 300-foot restriction applies)
A.R.S. § 4-207 (A) & (B)

1. Type of License (restaurant, bar etc.): Series 12 2. LICENSE # (if issued): 12113301

SECTION 4 Applicants

1. Agent's Name: Barnum Last Brenda First Anne Middle P1079671

2. Applicant/Licensee Name: Dotsenko Enterprises LLC B1060484
(Ownership name for type of ownership checked on section 1)

3. Business Name (Doing Business As-DBA): Dirtwater Springs B1003587

4. Business Location Address: 586 W Apache Trail Apache Junction AZ 85226 85129 Pinaleño
(Do not use PO Box) Street City State Zip Code County

5. Mailing Address: 586 W. Apache Trail Apache Junction AZ 85220
(All correspondence will be mailed to this address) Street City State Zip Code

6. Business Phone: 480-983-3478 Daytime Contact Phone: 480-983-3478

7. Email Address: brenda@dirtwatersprings.com

8. Is the Business located within the incorporated limits of the above city or town? ☒ Yes ☐ No
If you checked no, in what City, Town, County or Tribal/Indian Community is this business located? _____

| | | | | |
|---|-----------------|-----------------|----------------|---|
| Department Use Only | | | | |
| Fees: <u>\$100.00</u> | <u>\$100.00</u> | <u>\$50.00</u> | <u>\$92.00</u> | \$ <u>342.00</u> |
| Application | Interim Permit | Site Inspection | Finger Prints | Total of All Fees |
| Is Arizona Statement of Citizenship & Alien Status for State Benefits complete? | | | | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

SECTION 5 Background Check

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD ALONG WITH \$22. PROCESSING FEE PER CARD.

1. If the applicant is an entity, not an individual, answer questions 1 a-b.

a) Date Incorporated/Organized: ~~01/01/18~~ 6/17/15 State where Incorporated/Organized: AZ

b) AZ Corporation or AZ L.L.C. File No: L20135750 Date authorized to do business in AZ 07/14/2015

2. List any individual or entity that own a beneficial interest of 10 % or more and/or controls the license. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure. Attach additional sheets as needed to disclose any controlling person, member, shareholder or general partner who owns a beneficial interest of 10 % or more of the license.

| Last | First | Middle | Title | %Owned | Mailing Address | City | State | Zip |
|----------|------------|-------------------|--------|--------|-----------------|------|-------|-------|
| Barnum | Brenda | A Anne | Member | 33.3 | 939 N 59th St | Mesa | AZ | 85205 |
| Dotsenko | Sviatoslav | I | Member | 33.3 | 939 N 59th St | Mesa | AZ | 85205 |
| Dotsenko | Valeriy | I | Member | 33.3 | 939 N 59th St | Mesa | AZ | 85205 |
| | | | | | | | | |

(Attach additional sheet if necessary)

SECTION 6 Interim Permit

If you intend to operate business while your application is pending you will need an interim permit pursuant to A.R.S.§4-203.01 For approval of an interim permit:

- There **must** be a valid license of the same series issued to the current location you are applying for **OR**
- A Hotel/Motel license is being replaced with a restaurant license pursuant to A.R.S.§4-203.01 (A)

1. Enter license number currently at the location: 12113083

2. Is the license currently in use? ☒ Yes ☐ No If no, how long has it been out of use? _____

I, (Signature) [Signature] declare that I am the CURRENT OWNER, AGENT, OR CONTROLLING PERSON on the stated license and location.

Attach a copy of the license currently issued at this location to this application.

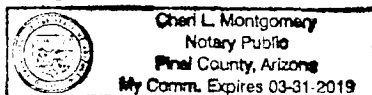
NOTARY

State of Arizona

County of Pinal }

On this 31st Day of January, 2018 before me personally appeared Thomas R Parks
Day Month Year (Print Name of Document Signer)

Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.



(Affix Seal Above)

[Signature]
Signature of NOTARY PUBLIC

SECTION 7 Probate, Receiver, Bankruptcy Trustee, Assignment, or Divorce Decree of an existing liquor license ARS § 4-204

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD ALONG WITH \$22. PROCESSING FEE PER CARD.

1. Current Licensee's Name: _____

(Exactly as it appears on the license) Last First Middle

2. Assignee's Name: _____

Last First Middle

License Number: _____

ATTACH A COPY OF THE DOCUMENT THAT SPECIFICALLY ASSIGNS THE LIQUOR LICENSE TO THE ASSIGNEE.

SECTION 8 Government (for Cities, Towns or Counties only)

1. Government Entity: _____

2. Person/Designee: _____
Last First Middle Daytime Contact Phone #

A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED.

SECTION 9 ☐ Person to Person – Current Licensee Information ARS§4-203(C), (D), (G)
(Bar and Liquor Stores only – Series 06, 07 and 09)

1. License #: _____

2. Current Agent Name: _____
Last First Middle

3. Current Licensee Name: _____
(Exactly as it appears on the license)

4. Current Business Name: _____
(Exactly as it appears on the license)

5. Current Daytime Phone: _____ Primary Email Address: _____

6. Does current licensee intend to operate the business while this application is pending? ☐ Yes ☐ No

7. I authorize the transfer of this license to the applicant: _____
Signature or Agent or Individual controlling person

NOTARY

State of Arizona)
County of _____)

On this _____ Day of _____, 20____ before me personally appeared _____
Day Month Year (Print Name of Document Signer)

Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.

Signature of NOTARY PUBLIC

(Affix Seal Above)

SECTION 10 Proximity to Church or School - Questions to be completed by 6, 7, 9, 10 and 12G applicants.

A.R.S. §4-207. (A) and (B) state that no **retailer's license** shall be issued for any premises which are at the time the license application is received by the director, within three hundred (300) horizontal feet of a church, within three hundred (300) horizontal feet of a public or private school building with kindergarten programs or grades one (1) through (12) or within three hundred (300) horizontal feet of a fenced recreational area adjacent to such school building.

The above paragraph DOES NOT apply to:

- a) Restaurants that do not sell growlers (A.R.S. §4-205.02) Series 12
- b) Hotel/motel license (A.R.S. §4-205.01) Series 11
- c) Microbrewery (A.R.S. §4-205.08) Series 3
- d) Craft Distillery (A.R.S. §4-205.10) Series 18

- e) Government license (A.R.S. §4-205.03) Series 5
- f) Playing area of a golf course (A.R.S. §4-207 (B)(5))
- g) Wholesaler/Distributor Series 4
- h) Farm Winery Series 13
- i) Producer Series 1

1. Distance to nearest School: 1056 feet Name of School: Apache Trail High School
(If less than one (1) mile note footage) Address: 945 Apache Trail, Apache Junction

2. Distance to nearest Church: 528 feet Name of Church: Family of Faith Bible Church
(If less than one (1) mile note footage) Address: 555 Apache Trail #A, Apache Junction

SECTION 11 Business Financials A.R.S. §4-202(F)

1. I am the:

- ☐ Tenant: a person who holds the lease of a property; a lessee.
☒ Sub-tenant: a person who holds a lease which was given to another person (tenant) for all or part of a property.
☐ Owner
☐ Purchaser
☐ Management Company

2. If the premises is leased give lessors:

Name: Parks Enterprises
Address: 7110th Noble Prairie Way, Florence AZ 85132
Street City State Zip

3. What is the penalty if the lease is not fulfilled? \$ _____ or Other: Closure

4. Total money borrowed for the Business not including lease? \$ \$10,000⁰⁰

Please List Lenders/People you owe money to for business.

| Last | First | Middle | Amount Owed | Mailing Address | City | State | Zip |
|----------|---------|--------|-------------|---------------------------|------|-------|-------|
| Datsenko | Valeriy | I | \$10,000 - | 939 N 59 th St | Mesa | AZ | 85205 |
| | | | | | | | |
| | | | | | | | |

(Attach additional sheet if necessary)

5. Has a license or a transfer license for the premises on this application been denied by the state within the past year?

☐ Yes ☒ No

If yes, attach explanation.

6. Does any spirituous liquor manufacture, wholesaler, or employee have an interest in your business?

☐ Yes ☒ No

If yes, attach explanation.

SECTION 12 Diagram of Premises

Check ALL boxes that apply to your business:

☐ Walk-up or drive-through windows

Patio: ☒ Contiguous

☐ Non-Contiguous within 30 feet

1. Is your licensed premises now closed due to construction, renovation or redesign or rebuild?

☐ Yes ☒ No If yes, what is your estimated completion date? ____/____/____

Please attach a diagram of the premises which clearly show only the areas where spirituous liquor will be sold, served, consumed, dispensed, possessed or stored. Include all entrances, exits, interior walls, bar areas, dining areas, dance floor, stage, game room and the kitchen. **DO NOT INCLUDE** parking lots, living quarters or areas where business is not conducted under this liquor license. When completing your premises diagram, please identify which orientation is North.



~~Handwritten scribble~~

liquor storage

3,919 square feet

*no liquor at
small bar
bottle beer only
during large
parties

2. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed areas such as parking lots, living quarters, etc.

3. As stated in A.R.S. §4-207.01 (B), I understand it is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to the service areas or the square footage of the licensed premises, either by increase or decrease.

BB
Applicants Initials

RESTAURANTS AND HOTELS/MOTELS ONLY

(IMPORTANT NOTE: A site inspection must be conducted prior to activation of the license. The fee of \$50.00 will be due and payable upon submitting this application.)

4a. Provide a detailed drawing of the kitchen and dining areas, including the locations of all kitchen equipment and dining furniture, these are required as part of the diagram. A.R.S. §4-205.02(C)

4b. Provide a restaurant operation plan.

SECTION 13 SIGNATURE BLOCK

I, (Signature) [Signature], hereby declare that I am the Owner/Agent filing this application, I have read this document and verify the content and all statements are true, correct and complete, to the best of my knowledge.

NOTARY

State of Arizona }

County of Maricopa }

On this 13th Day of February, 2018 before me personally appeared Brenda A. Burnum
Day Month Year (Print Name of Document Signer)

Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above attached document.

(Affix Seal Above)



[Signature]
Signature of NOTARY PUBLIC

A.R.S. §41-1030. Invalidity of rules not made according to this chapter; prohibited agency action; prohibited acts by state employees; enforcement; notice

B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.

D. THIS SECTION MAY BE ENFORCED IN A PRIVATE CIVIL ACTION AND RELIEF MAY BE AWARDED AGAINST THE STATE. THE COURT MAY AWARD REASONABLE ATTORNEY FEES, DAMAGES AND ALL FEES ASSOCIATED WITH THE LICENSE APPLICATION TO A PARTY THAT PREVAILS IN AN ACTION AGAINST THE STATE FOR A VIOLATION OF THIS SECTION.

E. A STATE EMPLOYEE MAY NOT INTENTIONALLY OR KNOWINGLY VIOLATE THIS SECTION. A VIOLATION OF THIS SECTION IS CAUSE FOR DISCIPLINARY ACTION OR DISMISSAL PURSUANT TO THE AGENCY'S ADOPTED PERSONNEL POLICY.

F. THIS SECTION DOES NOT ABROGATE THE IMMUNITY PROVIDED BY SECTION 12-820.01 OR 12-820.02.

18 FEB 22 10 41 AM '04

STATE OF ARIZONA
DEPARTMENT OF LIQUOR LICENSES
AND CONTROL
ALCOHOLIC BEVERAGE LICENSE
License 12113083

Issue Date: 6/15/2004

Expiration Date: 8/31/2018

Issued To:

THOMAS RICHARD PARKS, Agent
PARKS ENTERPRISES INC, Owner

Location:

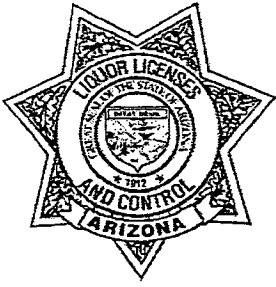
DIRT WATER SPRINGS
586 W APACHE TRAIL
APACHE JUNCTION, AZ 85220

Mailing Address:

THOMAS RICHARD PARKS
PARKS ENTERPRISES INC
DIRT WATER SPRINGS
586 W APACHE TRAIL
APACHE JUNCTION, AZ 85220



POST THIS LICENSE IN A CONSPICUOUS PLACE



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

'18 FEB 22 Lir. Lic. PM 3 04

RESTAURANT OPERATION PLAN

DLIC USE ONLY LICENSE # 12113301

1. Name of restaurant (Please print): Dirtwater Springs
2. List by Make, Model, and Capacity of your: (If you attached a legible copy of your equipment list, only provide the following items:)

| | |
|---------------------------------------|--|
| Grill | 1 CRC 4-burner 24"x48" / 1 24"x24" Jumbo Range |
| Oven | (2) Commercial Range Co. 20"x25"x14" |
| Freezer | McCall Reach In 30"x60"x60" |
| Refrigerator | 1 Larkin 10'x7' walk IN |
| Sink | McCall 24"x24"x13" |
| Dish Washing Facilities | Pro Clean ADS 24" |
| Food Preparation Counter (Dimensions) | 20'x2' Stainless CRC |
| Other | 10x10 Walk In Freezer / 15x15 Walk In Refrigerator |

Char bro.

3. Attach a copy of your full menu including prices (examples: Breakfast, Lunch, Dinner, and Nonalcoholic beverages).
4. List the seating capacity for:
 - a. Restaurant dining area of your premises: (Do not include patio seating) 124
 - b. Bar area of your premises: 11
 - c. Total dining and bar seating capacity of your premises: 135

5. What Type of dinnerware and utensils are utilized within your restaurant?
☒ Reusable ☐ Disposable ☐ Both

6. 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?) 20 %

7. What percentage of your public premises is used primarily for restaurant dining?
(Do not include kitchen, bar, hi-top tables, or game area.) 90 %

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.)

3- TVs

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.)

Live music 2x a week
Karaoke 1x a week for 1 month

10. Use space below to list how many employees for each position to fully staff your business.

| Position | How many |
|--------------------|----------|
| Cooks | 12 |
| Bartenders | — |
| Hostesses | 1 |
| Managers | 5 |
| Servers | 15 |
| Other (Dishwasher) | 5 |
| Other () | |
| Other () | |

I, Brenda Barnum, hereby declare that I am the APPLICANT filing this application.
(Print full name)

I have read this application and the contents and all statements true, correct and complete.


X 
(Signature of APPLICANT)

NOTARY

State of Arizona County of Maricopa

The foregoing instrument was acknowledged before me this 22 day of February 2018
Day Month Year

My Commission Expires on: 2/21/2021
Date



Signature of Notary Public

OFFICIAL SEAL
JENAKA LYNN WAGNER
NOTARY PUBLIC - State of Arizona
MARICOPA COUNTY
My Comm. Expires February 21, 2021

LIGHTER SIDE

Chef's Salad

Turkey breast, ham, cheese, boiled egg, mushrooms, cucumber and tomatoes in crisp salad greens. Served with garlic toast 14.50

Chicken Caesar Salad

Grilled chicken breast on a bed of green leaf with parmesan cheese and croutons 12.95

Lemon Pepper Chicken

Served with cottage cheese, sliced tomatoes and fruit 14.95

Grilled Sirloin Patty*

Served with cottage cheese, sliced tomatoes and fruit 13.95

Cashew Chicken Salad

Grilled chicken breast, cashews, avocado, tomatoes and cucumbers in salad greens. Served with garlic toast 14.50

Crispy Chicken Salad

Breaded chicken breast on crisp salad greens, shredded cheese and tomatoes, served with garlic toast 13.50

Cobb Salad

Grilled chicken breast, bacon, avocado, tomatoes, boiled egg and bleu cheese crumbles in crisp salad greens. Served with garlic toast 14.95

Garden Salad

Large 7.00 Small 5.50

Soup

A different soup made fresh daily! Cup 4.50 Bowl 7.95

HALF SALADS AVAILABLE

DESSERTS

Home Style Pies 6.00

Cheese, Carrot, Chocolate Sin Cake 6.00

Cobbler with ice cream 6.95

Ice Cream Sundaes 5.95

Shakes 6.50

Floats 5.95

A la Mode Add 1.00

SOFT DRINKS

Free Refills with exception of Sarsaparilla, Juices or Milk

Coffee 3.00

Juices Large 5.00 Small 2.50

Cranberry, Grapefruit, Orange, Pineapple, Tomato, Caramelo

Iced Tea 3.00

Sarsaparilla 3.25

Soft Drinks 3.00

Coke, Diet Coke, Raspberry Tea, Gingerale, Sprite, Dr. Pepper, Lemonade, Powerade

Milk (16 oz.) 3.50

HOUSE WINE

Pinot Grigio, Pinot Noir, Chardonnay, Merlot, White Zinfandel, White Merlot, Chianti, Cabernet Sauvignon Glass 6.00 Half-Carafe 16.95 Full Carafe 27.95

COLD BEER

Amber Bock, Alaskan Amber, Blue Moon

Small 2.75 Medium 4.50 Large 6.50

1/2 Pitcher (30 oz.) 8.50

Full Pitcher (60 oz.) 13.95

Imported Bottles 5.00

Domestic Longnecks 4.00

Non-Alcoholic Beer 3.75

Bud, Bud Light, Coors Light, Miller Lite

Small 2.75 Medium 4.25 Large 6.00

1/2 Pitcher (30oz) 8.50

Full Pitcher (60oz) 13.00

Welcome to

Dirtwater Springs

OWNED AND OPERATED BY DICK & ELAINE PARKS SINCE 1987

★ UNLIMITED HAND SLICED FRIES ★



Home of the 72 Oz. Steak Challenge

The "All Time" STEAK EAT'N CHALLENGE

72oz of U.S. Prime Sirloin

Eat It all yourself and all the FIXIN'S

In 1 hour and you've WON!!!

WE BUY IT!

CALL AHEAD TO ORDER

Limit ONE per year per customer

\$69.95

ALL-YOU-CAN-EAT
ALASKAN COD FISH FRY
With Hand Sliced Fries and Coleslaw

7 Days A Week



Ask About Our
VIP Program

About Dirtwater Springs

By Peter Sordling for Gateway To The San Valley Magazine (Spring 2010)

With a name like Dirtwater Springs and a rustic old western saloon looking building, you have to wonder what you are getting into when you arrive at this establishment. But this is a must stop at the Gateway to Superstition Mountains. We were greeted by Dick Parks, restaurant owner since 1987. Over lunch, he told us history of the Superstition Mountain gas station turned Dirtwater Springs Restaurant.

Early in September 1947, a young boy by the name of Rocky wanted a racehorse. A bar figuring out that he needed \$400 to purchase it, he decided to rob the Superstition Mountain Shell Station and shoot the owner, Katherine Gohn. Rocky was eventually tried, found guilty and sentenced to death. To this day, waitresses and staff say they can occasionally hear the ringing of the old service station bell that sounded as customers drove up. Some even say they have seen the ghost of Katherine Gohn around the restaurant after closing time.

Great Food, Drinks, Family & Friends

586 WEST APACHE TRAIL • APACHE JUNCTION, AZ 85120 • 480-983-DIRT

*BURGERS, STEAKS AND EGGS ARE SERVED COOKED TO ORDER. *Current Department of Health guidelines require us to inform you that consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of foodborne illness, especially if you have certain medical conditions.

(Prices are subject to change without notice)

Rev 4/17

DIRT WATER APPETIZERS

Beer Battered Zucchini 9.95

Beer Battered Mushrooms 9.95

Combo Platter

Boneless Wings, Mushrooms, Cheese Sticks,
Onion Rings 16.50

Onion Rings 9.95

Fried Cheese Sticks 9.95

Nachos

Layers of crispy chips, beans, tomatoes, sour cream,
guacamole, black olives 12.95

ADD Shredded Beef, Ground Beef, Green Chili Pork,
Or Chicken 4.50
Jalapenos on request

Beer Battered Shrimp

Basket of shrimp with two extra jumbo shrimp 12.50

Stuffed Potato Skins 11.50

ADD Shredded Beef, Ground Beef
Or Chicken 3.25

Chicken Wings (12)

Choice of sauce for dipping 12.95
(Hot, Mild, Honey Garlic, Honey BBQ, Spicy BBQ, Honey Hot)

Boneless Chicken Wings (12)

Choice of sauce for dipping 11.95

Cheese Crisp Plain 10.50

Extra Toppings 50¢ Each

ADD Shredded Beef, Ground Beef or Chicken 4.50

Jalapeno Poppers 10.50

Unlimited Hand-Sliced Fries 6.50

Chili Cheese Fries 9.95

Hand sliced fries with chili, cheese and onions

ASK ABOUT SPECIALTY FRIES BASKET
6.50

BUILD YOUR OWN SANDWICH

We build your sandwiches to order, we are now offering soft pretzel buns. Includes your choice of macaroni salad,
coleslaw, fresh fruit, potato salad or unlimited hand sliced fries. Substitute baked potato or salad 1.50

ADD a Salad 3.00 ADD Pepper Jack, Provolone, American, Swiss or Cheddar Jack cheese .75

ADD Avocado, Bacon or Green Chilies 2.00

Dirtwater Burger* (1/2 Lb) 11.95

Add cheese 75¢

Cheeseburger Club* 13.95

Chicken Strips 11.95

Patty Melt*

1/2 lb. patty on rye, with grilled onions and Swiss cheese,
1000 Island dressing on request 11.95

Grilled Chicken Breast Filet 12.95

Buffalo Chicken Sandwich 13.50

Add bacon 2.00

Grilled Reuben

A classic combination of lean corned beef, homemade red
sauerkraut or regular sauerkraut and Swiss cheese,
served on grilled marble rye bread.

1000 Island dressing upon request 12.50

French Dip

Tender thin-sliced prime rib served on a French roll with
au jus for dipping 12.95

ADD provolone and sautéed mushrooms for 2.00

Dirtwater Club

A triple-decker loaded with, ham, turkey, crispy bacon,
American and Swiss cheese, lettuce, sliced tomatoes
and mayo on your choice of toast.
(White, wheat, rye or sourdough) 13.50

Steak Sandwich*

6 oz. charbroiled rib-eye served on a roll
with choice of soup or salad and one side 16.50

Dirtwater Philly

Tender thin-sliced rib-eye or chicken with
melted Swiss, sautéed green peppers and purple onions
served on a fresh roll 12.50

Classic "BLT" 10.95

Croissanwich

Choice of turkey or ham with melted cheese with garnish,
served hot on a fresh croissant 11.50

Substitute Prime Rib 2.00

ASK ABOUT SPECIALTY
1/3 Lb. Burgers 10.95

USDA CHOICE STEAKS

Served with soup or salad and choice of homemade mashed potatoes, baked potato,
twice baked potato or hand sliced French fries

Roasted Prime Rib*

10 oz. 25.95 16 oz. 30.50

Filet Mignon & Shrimp*

Two 4 oz. medallions with
choice of shrimp 28.95

Add Shrimp
\$5.50

Ribeye*

10 oz. 25.95 16 oz. 30.50

T-Bone Steak

16 oz. 29.50

CHUCK WAGON FAVORITES

Served with soup or salad and choice of homemade mashed potatoes, baked potato,
twice baked potato, hand sliced French fries or one of our specialty fries.

Chicken Fried Steak

Tender cube steak battered and fried,
served with chicken gravy 14.50

Fried or Baked Chicken

Large tender portion 17.95

Boneless Chicken Breast

Fried or grilled 15.50

Grilled Pork Chop

One 12 oz. thick-cut chop 17.95

Ground Sirloin Steak*

Sautéed mushrooms and onions with gravy 15.95

Barbecued Ribs

Half slab of St. Louis style pork ribs 18.95

Add half slab 11.95

Jumbo Fried Shrimp

Five lightly battered and crispy fried 18.50

Fried Catfish

Lightly battered and crispy fried or
served cajun style 17.95

Alaskan Cod

Broiled or deep-fried 18.95

Ham Steak Dinner (8 oz.) 14.50

Liver & Onions (8 oz.) 14.50

SOUTH OF THE BORDER

All entrees come with beans & rice.

Can be served Enchilada Style (Red Sauce ADD \$2.00) (Green Chile with Pork ADD \$2.95)

Small side of Sour Cream or Guacamole: 2 oz. 1.50 4 oz. 2.50

MEXICAN COMBO PLATES

Served with beans and rice, guacamole and sour cream.

★ Choose any two items 13.95 ★ Choose any three items 15.95

Ground Beef Taco ~ Bean Tostada ~ Cheese Enchilada

Burritos

Bean 8.95

Ground Beef, Chicken,

Shredded Beef

or Green Chili Pork 11.95

Request guacamole & sour cream

Chimichanga

Ground Beef, Chicken,

Shredded Beef

or Green Chili Pork 11.75

Request guacamole & sour cream

Taco

Ground Beef, Chicken,

Shredded Beef 9.75

Taco Salad

A crisp flour tortilla filled with lettuce,
tomatoes, cheese and black olives.

Choice of chicken, ground beef
or shredded beef with a side of
guacamole and sour cream 12.50

Tostadas

Bean 8.50

Ground Beef, Chicken,

Shredded Beef

or Green Chili Pork 9.75

Enchilada

Cheese 8.95

Ground Beef, Chicken, Shredded

Beef or Green Chili Pork 9.75

Homemade Chili

Served with fresh tortilla

Green Chili Pork

Bowl 9.50 Cup 5.95

Chuckwagon Chili

Spicy and hot with cheese & onions

Bowl 9.50 Cup 4.95

*BURGERS, STEAKS AND EGGS ARE SERVED COOKED TO ORDER. *Current Department of Health guidelines require us to inform you that consuming raw
or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of foodborne illness, especially if you have certain medical conditions.

*BURGERS, STEAKS AND EGGS ARE SERVED COOKED TO ORDER. *Current Department of Health guidelines require us to inform you that consuming raw
or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of foodborne illness, especially if you have certain medical conditions.

SECTION III – ALIEN STATUS DECLARATION

To be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of a document from the attached list or other document as evidence of your status.

Name of document provided

Qualified Alien Status (8 U.S.C. §§ 1621(a)(1),-1641(b) and (c))

- ☐ 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA)
- ☐ 2. An alien who is granted asylum under Section 208 of the INA.
- ☐ 3. A refugee admitted to the United States under Section 207 of the INA.
- ☐ 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- ☐ 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- ☐ 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- ☐ 7. An alien who is a Cuban/Haitian entrant.
- ☐ 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme cruelty in the United States.

Nonimmigrant Status (8 U.S.C. § 1621(a)(2))

- ☐ 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Non immigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101(a)(15).

Alien Paroled into the United States for Less Than One Year (8 U.S.C. § 1621(a)(3))

- ☐ 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA

Other Persons (8 U.S.C § 1621(c)(2)(A) and (C))

- ☐ 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- ☐ 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia, 48 U.S.C. § 1901 et seq.];
- ☐ 13. A foreign national not physically present in the United States.

Otherwise Lawfully Present

- ☐ 14. A person not described in categories 1-13 who is otherwise lawfully present in the United States.

PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. § 1621(a).



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

18 FEB 22 11:47 AM 304

**ARIZONA STATEMENT OF CITIZENSHIP
OR ALIEN STATUS FOR STATE PUBLIC BENEFITS**

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrant, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

SECTION I – APPLICANT INFORMATION

INDIVIDUAL OWNER/AGENT NAME (Print or type)

Brenda Anne Barnum

SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION

Are you a citizen or national of the United States?

☒ Yes

☐ No

If Yes, indicate place of birth:

City Johnson City State (or equivalent) New York Country or Territory United States

If you answered Yes, 1) Attach a legible copy of a document from the attached list.

2) Name of document: Arizona Driver License
Go to Section IV.

If you answered No, you must complete Section III and IV.

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 |
|--------------------|------------------|--|
| 11/12 | CURRENT | 939 N. 59 th St Mesa Az 85205 |
| | | |
| | | |
| | | |

(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 ^{BB}
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) Brenda Barnum 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: [Signature]
My Commission Expires 01-03-2021
Date

State of Arizona County of Maricopa
The foregoing instrument was acknowledged before me this

13th Day of February, 2018
Day Month Year

[Signature]
Signature of Notary

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

PRINT NAME: Brenda Barnum

SIGNATURE: [Signature]

18 FEB 22 11:47 AM 304



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.

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#: 12113301

1. Check the Appropriate Box →

| | | |
|--|---|--|
| <input checked="" type="checkbox"/> Controlling Person | <input checked="" type="checkbox"/> Agent | <input type="checkbox"/> Premises Manager (complete all questions except #12) |
|--|---|--|

2. Name: Barnum Brenda Anne Birth Date: _____
Last First Middle (NOT a public record)

3. Social Security #: _____ Driver License#: 314872049 State: AZ

4. Place of birth: Johnson City, NY USA Height: 5'6" Weight: 240 Eyes: BR Hair: BR
City State COUNTRY (not county)

5. Name of current (most recent) spouse: Barnum Jason Mathew Birth Date: _____
Last First Middle (NOT a public record)

6. Are you a bona fide resident of Arizona? ☒ Yes ☐ No If yes, what is your date of residency: 07/2001

7. Daytime telephone number: 480 246 0802 E-mail address: brenda@dirtywater-springs.com

8. Business Name: Dirtwater Springs Business Phone: 480, 983, 3478

9. Business Location Address: 586 W. Apache Trail Apache Junction AZ 85220 Pinal
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) |
|--------------------|------------------|-------------------------------|---|
| 11/16 | CURRENT | manager | Dirtwater Springs 586 W. Apache Trail Apache Junction, AZ 85220 |
| 4/12 | current | web marketing | Datsenko Enterprises 959 W. 59th St Mesquite AZ 85105 |
| | | | |
| | | | |

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

- A. All documents which 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(G)

For the purpose of this section:

- 1. "Restaurant" means an establishment which derives **at least forty percent (40%)** of its gross revenue from the sale of food
- 2. "Gross revenue" means 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.

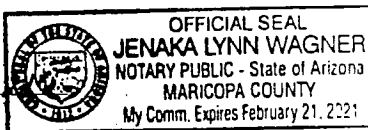
NOTARY

I, (Print Full Name) Brenda Anne Barnum, have read and understand all aspects of this statement

X (Signature) [Signature]
Controlling Person / Agent

State of Arizona County of Maricopa
the foregoing instrument was acknowledged before me this

My commission expires on: 2/21/2018



22 of February 2018
Day Month Year

[Signature]
Signature of NOTARY PUBLIC

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



Arizona Department of Liquor Licenses and
Control

800 W Washington 5th Floor
Phoenix, AZ 85007-2934
www.azliquor.gov
(602) 542-5141

18 FEB 22 10:41 AM 3:04

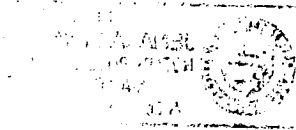
RECORDS REQUIRED FOR AUDIT

Applies to Series 11 (Hotel/Motel W/Restaurant) & Series 12 (Restaurant) Only

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DLLC RECORDS

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. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises.
2. A list of **all** food and liquor vendors
3. The restaurant menu used during the audit period
4. A price list for alcoholic beverages during the audit period
5. Mark-up figures on food and alcoholic products during the audit period
6. A recent, **accurate** inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
7. Monthly Inventory Figures - beginning and ending figures for food and liquor
8. Chart of accounts (copy)
9. Financial Statements-Income Statements-Balance Sheets
10. 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
11. 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
12. 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 work day)
 - D. Payroll records for all employees showing hours worked each week and hourly wages



SECTION IV - DECLARATION

All applicants must complete this section.

I declare under penalty of perjury under the laws of the state of Arizona that the answers and evidence I have given are true and correct to the best of my knowledge.

Brenda Anne Barnum

Individual Owner/Agent Printed Name

2/13/18

Today's Date

[Signature]

Individual Owner/Agent Signature

EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS

You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing authorized presence in the United State includes the following:

1. An Arizona driver license issued after 1996 or an Arizona non-operating identification card.
2. A driver license issued by a state that verifies lawful presence in the United States.
3. A birth certificate or delayed birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time)
4. A United States certificate of birth abroad.
5. A United States passport. ***Passport must be signed***
6. A foreign passport with a United States visa.
7. An I-94 form with a photograph.
8. A United States citizenship and immigration services employment authorization document or refugee travel document.
9. A United States certificate of naturalization.
10. A United States certificate of citizenship.
11. A tribal certificate of Indian blood.
12. A tribal or bureau of Indian affairs affidavit of birth.
13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

18 FEB 22 Lic. Lic. RM 3 04

Arizona

DRIVER LICENSE

USA

NOT FOR FEDERAL IDENTIFICATION



9 CLASS D
9a END NONE 4d DLN B14872049
12 REST NONE 3 DOB
1 BARNUM
2 BRENDA A
8 939 N 59TH ST
MESA, AZ 85205-5538



4b EXP 4a ISS 12/26/2016
15 SEX F 18 EYES BRO
16 HGT 5'-06" 19 HAIR BRO
17 WGT 230 lb

DONOR ♥

5 DD 6147C7906B1705B6

[Signature]



CLASS: D-Operator
ENDORSEMENTS:
None

RESTRICTIONS:
None

Rev 02/14/2014

You Must Report a
Change of Address
Within 10 Days

11/20/1976



16361AZ0041027570301



18 FEB 22 Lic. Lic. # 334

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.

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#: 12113301

1. Check the Appropriate Box →

☒ Controlling Person

☐ Agent

☐ Premises Manager

(complete all questions except #12)

2. Name: Dotsenko Sviatoslav I Birth Date: _____

3. Social Security #: _____ Driver License#: D02718149 State: AZ

4. Place of birth: Ufa Russia Height: 6'0" Weight: 190 Eyes: BRO Hair: BRO

5. Name of current/most recent spouse: _____ Birth Date: _____

6. Are you a bona fide resident of Arizona? ☒ Yes ☐ No If yes, what is your date of residency: 2002

7. Daytime telephone number: 480-734-9206 E-mail address: slava@dotsenkoweb.com

8. Business Name: Dörtwader Springs Business Phone: 480, 983, 3478

9. Business Location Address: 586 W Apache Trail, Apache Junction, AZ, Pinal, 85220

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) |
|-----------------|---------------|-------------------------------|--|
| 9/11 | CURRENT | Sr. web developer | Extension Media 18th St. San Francisco, CA 94107 |
| | | | |
| | | | |
| | | | |

(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 |
|--------------------|------------------|------------------------------|
| 11/12 | CURRENT | 939 n 59th st Mesa, AZ 85205 |
| | | |
| | | |
| | | |
| | | |

(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) Sviatoslav Dotsenko 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: Sviatoslav Dotsenko

State of Arizona County of Maricopa

The foregoing instrument was acknowledged before me this

13th Day of February, 2018

Day Month Year

[Signature]
Signature of Notary

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

PRINT NAME: _____

SIGNATURE: _____



*18 FEB 22 Lic. #13 04

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.

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.

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Liquor License#: 12113301

1. Check the Appropriate Box →

☒ Controlling Person

☐ Agent

☐ Premises Manager

(complete all questions except #12)

2. Name: DOTSENKO VALERIY I Birth Date: _____
Last First Middle (NOT a public record)

3. Social Security #: _____ Driver License #: D04343969 State: AZ

4. Place of birth: Ufa Russia Height: 5'8" Weight: 200 Eyes: BLU Hair: BLN
City State COUNTRY (not county)

5. Name of current/most recent spouse: _____ Birth Date: ____/____/____
Last First Middle (NOT a public record)

6. Are you a bona fide resident of Arizona? ☒ Yes ☐ No If yes, what is your date of residency: 2002

7. Daytime telephone number: 480 703 2662 E-mail address: val@dotsenkoweb.com

8. Business Name: Dirtwater Springs Business Phone: 480/983/3478

9. Business Location Address: 586 W Apache Trail Apache Junction AZ Pinal 85220
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 | EMPLOYER NAME OR NAME OF BUSINESS (Street Address, City, State & Zip) |
|--------------------|------------------|-------------------------------|--|
| 01/2015 | CURRENT | Software Engineer | Optimize LLC 80 E Rio Salado Pkwy #814 |
| 1/2011 | 01/2015 | Freelance Web Dev | 939 N. 59th St. Mesa |
| 9/2011 | 10/2014 | Software Engineer | Optimize LLC 80 E Rio Salado Az 85205 |
| | | | Pkwy #814 Tempe AZ 85281 |

(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 |
|--------------------|------------------|---|
| 11/2012 | CURRENT | 939 N 59 th St, Mesa, AZ 85205 |
| | | |
| | | |
| | | |
| | | |

(ATTACH ADDITIONAL SHEET IF NECESSARY)

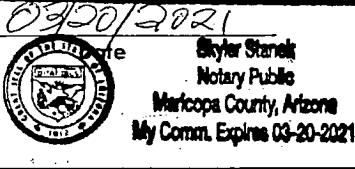
12. As a Controlling Person or Agent, will you be physically present and operating the licensed premises?
If you answered YES, then answer #13 below. If NO, skip to #14. ☐ Yes ☒ No
13. Have you attended a DLLC approved Basic & Management Liquor Law Training Course within the past 3 years? ☐ Yes ☐ No
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) VALERIE I DOTSSENKO 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: [Signature] State of Arizona County of Maricopa
The foregoing instrument was acknowledged before me this
My Commission Expires on: 03/20/2021 22nd Day of February, 2018
Day Month Year
 [Signature]
Signature of Notary

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

PRINT NAME: _____ SIGNATURE: _____