

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				
CSR:				
Log #:				
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OBTAIN APPROVAL FROM LOCAL GOVERNING BOARD BEFORE SUBMITTING TO THE DEPARTMENT OF LIQUOR

Notice: Allow 30-45 days to process permanent change of premises

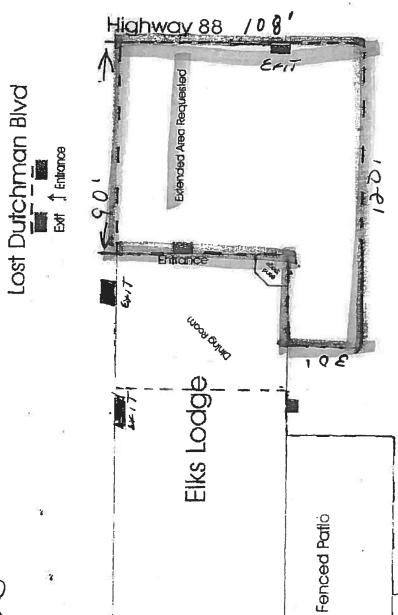
	ange (No Fee) for date(s) of: High School Reunion Mixe		ough 10,05,18	3_list specific	purpose 1	for change:
. Licensee's Name:	Pierson	Cynthia		Dawn	License#:_	14110004
2. Mailing address: F			JUNCTION	AZ		85117
3. Business Name: B	Street		City	State		Zip Code
4. Business Address:	2455 N. APACHE TRAIL/ Hwy 88	& Brown Rd.	APACHE J	UNCTION	AZ	8521
5. Email Address: bp	street oe2349@arizonaelks.org	C	city indypierson@live.	State COM	in the	Zip Code
6. Business Phone Nu	umber: 480-982-2349	C	ontact Phone Nu	mber: <u>480-29</u>	9-0756	7)
☑N/A ☐ Yes ☐ I	mises/patio complete? No If no, what is your e ad Arizona Liquor Laws and Re		etion date?	//_	TY OF A	7018 JUL 2 A.LIO 188
✓ Yes NoP. Does this extensio✓ Yes No	n bring your premises within 3	300 feet of a chu	rch or school?			CEIVED LERK DEPT.
	ed approved Liquor Law Train	ing?			72:	01

12. <u>IMPORTANT:</u> Attach the revised floor plan, clearly depicting your licensed premises along with the new extended area outlined in black marker or ink, <u>if the extended area is not outlined and marked "extension" we cannot accept the application.</u>

Barrier Exemption: an exception to the requirement of barriers surrounding requested. Barrier exemptions are granted based on public safety, pedestric licensed premises. List specific reasons for exemption:							
Approval Disapproval by DLLC:							
I, (signature), hereby declare that I am a C notification. Those read this document and the contents and all statements are true, co	ONTROLLING PERSON/ AGENT filing this prect and complete.						
State of Arizona County of	~						
(Affik Sedi Above)	gnuide emotion, 19925						
GOVERNING BOARD							
After completion, and <u>BEFORE submitting to the Department of Liquor</u> , 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:							
Director Signature required for Disapprovals:	Date:/						

2455 N. Apache TROIL

ApacHe Jonetian EcKs Loage #2349 Cinay Piersand 480-289-0756



Roped Off Area - - -