State of Arizona Department of Liquor Licenses and Control

2019 APR 21 PM 10: 45

Created 04/17/2019 @ 10:08:08 AM

MATER APACHE JUNCTION Local Governing Body Report

LICENSE

Number:

09110057

Type:

009 LIQUOR STORE

Name:

CANYON FOOD MART

State:

Pending

Issue Date:

Expiration Date:

08/31/2019

Original Issue Date:

12/14/1978

Location:

1000 E OLD WEST HIGHWAY

APACHE JUNCTION, AZ 85219

USA

Mailing Address:

1000 E OLD WEST HIGHWAY

APACHE JUNCTION, AZ 85219

USA

Phone:

(480)288-2811 (520)481-2811

Alt. Phone: Email:

CANYONFOODMART@GMAIL.COM

THIS COPY

Currently, this license has pending applications.

AGENT

Name:

HENG CHAO

Gender:

Correspondence Address: 1000 E OLD WEST HIGHWAY

APACHE JUNCTION, AZ 85219

USA

Phone:

Alt. Phone:

Email:

CANYONFOODMART@GMAIL.COM

OWNER

Name:

CANYON FOOD MART LLC

Contact Name:

HENG CHAO

Type:

LIMITED LIABILITY COMPANY

AZ CC File Number: Incorporation Date:

02/03/2009

Correspondence Address: 1000 E OLD WEST HIGHWAY

APACHE JUNCTION, AZ 85219

Phone:

Alt. Phone:

Email:

CANYONFOODMART@GMAIL.COM

Officers / Stockholders

Name:

Title:

State of Incorporation: AZ

% Interest:

Page 1 of 3

APPLICATION INFORMATION

Application Number:

63055

Application Type:

Location / Owner Transfer

Created Date:

04/17/2019

QUESTIONS & ANSWERS

009 Liquor Store

1) 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. Would you like to apply for an Interim Permit?

No

4) 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) Is the Business located within the incorporated limits of the city or town of which it is located?
 Yes
- 6) Does the Business location address have a street address for a City or Town but is actually in the boundaries of another City, Town or Tribal Reservation?

No

15) Please provide name, address, and Distance of nearest school.

CENTRAL COMMUNITY COLLEGE- 3,696 FEET 805 S IDAHO RD APACHE JUNCTION AZ 85119

16) Please provide name, address, and distance of nearest church.

JOHN CALVIN PRESBYTERIAN- 500 FT 1130 E BROADWAY AVE APACHE JUNCTION AZ 85119

17) Are you a tenant? (A person who holds the lease of a property; a lessee)

Yes

18) Is there a penalty if lease is not fulfilled?

No

19) 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)

No

20) Are you the owner?

No

21) Are you a purchaser?

No

22) Are you a management company?

No

23) What is the total money borrowed for the business not including the lease? Please list lenders/people owed money for the business.

0

24) Is there a drive through window on the premises?

No

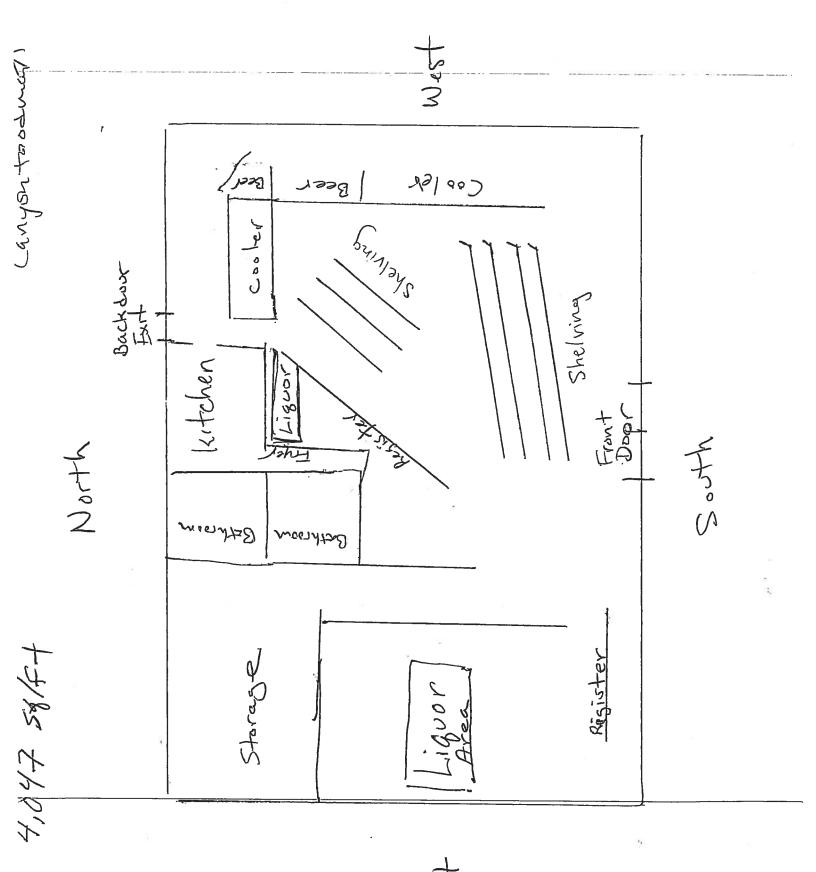
25) Have you provided a diagram of your premises?

Yes

26) If there is a patio please indicate contiguous or non-contiguous within 30 feet

NONE
27) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?

s your licensed premises now closed due to construction, renovation or redesign or rebuild' No



Iast

STATE OF ARIZONA

DEPARTMENT OF LIQUOR LICENSES AND CONTROL

ALCOHOLIC BEVERAGE LICENSE



Expiration Date: 8/31/2019

ssue Date: 9/11/2018

LIZABETH ANN TAYLOR, Agent CCM FOOD TOWN INC. Owner

FOOD TOWN IGA \$251 N ROBSON BOULEVARD STE 15 ELOY, AZ 85131 WSA

Mailing Address:

RCCM.FOOD TOWN INC TOOD TOWNIGH ELOY, AZ 85131



POST THIS LICENSE IN A CONSPICUOUS PLACE

Escrow # 17291-KA

BILL OF SALE

IN CONSIDRATION OF THE SUM OF:

lawful currency of the United States of America, and other valuable consideration, receipt of which is hereby acknowledged, the SELLER:

CIRGADYNE INC.

hereby grants, bargains, sells and transfer unto the BUYER:

CANYON FOOD MART LLC

as his, her or their heirs, personal representatives, or assigns, to have and to hold forever, the following described personal property, goods chattels:

State of Arizona Series #09 Liquor License #09110057

FURTHERMORE, Seller warrants that he, she or they are the lawful owner of said goods and hereby certifies, under oath that he, she, or they have the right to sell the same as aforesaid and that the above described property is free and clear of all claims, liens and other encumbrances whatsoever, EXCEPT, as specified herein. Seller further agrees to warrant and defend same against the lawful claims and demands of all persons whomsoever.

Effective date of this Bill of Sale is

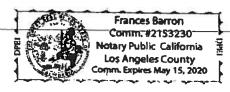
CIRGADYNE INC.

By:

State of: Californic

County: LOS Angeles

Acknowledge, under oath, before me on this Het day of September, 3018



Escrow # 17299-KA

BILL OF SALE

IN CONSIDRATION OF THE SUM OF:

lawful currency of the United States of America, and other valuable consideration, receipt of which is hereby acknowledged, the SELLER:

RCCM FOOD TOWN INC

hereby grants, bargains, sells and transfer unto the BUYER:

CIRGADYNE INC.

as his, her or their heirs, personal representatives, or assigns, to have and to hold forever, the following described personal property, goods chattels:

State of Arizona Series #09 Liquor License #09110057

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Effective date of this Bill of Sale is

RCCM FOOD TOWN INC

State of: Wisconsin

County: Fond dulae

Acknowledge, under oath, before me on this 19th day of September, 2018.



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.

. Check the				Liquor Li	cense#:	091100	157 /	1000井 6	30
Appropriate Box		Controlling Person	☑ Agent		(comple		s Manag stions ex	er cept #12)	
2. Name:	Chao	Heng)			Bir	th Date		
3. Social Securit	Last	First	ior l'agnes 4	Middle				(NOT a public re	cord)
o. social seconi	у #.	Di	er License#			Sto			
4. Place of birth	City	State COUNTRY	(not county)	Height:	Weight:		yes: bro	wn Hair:	
5. Name of curr	rent/most recent	spouse:		First	Mid	dle B	irth Date	(NOT a public re	ecord)
	na fide resident		□No If yes,	what is your o	date of resic	lency:			
7. Daytime tele	phone number:	520-481-2811	E-m	ail address: <u>C</u>	anyonfo	odmart	@gma	il.com	175
8. Business Nam	_{ne:} Canyon F	ood Mart	•			_ Business I	Phone: 4	80 288 2	2811
9. Business Loca	ation Address: 1	000 E Old We	st Hwy	Apache					
		Street (do not use PO E	lox)	City	State		County	Zip	
10. List vour em	olovment or type	of business during th	ne past five (5) vears liture	employed r	atired or s	tudent li	rt recidence	addra

	FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
	2/3/2009	CURRENT	Member/C-store	Canyon Food Mart LLC, 1000 E Old West Hwy, Apache علو طرقة, Az 85119
				Toule a PA
!				Junchen 6-2

(ATTACH ADDITIONAL SHEET IF NECESSARY)

1		ddress information for the last five (5) years: A.R.S. §4-202(D)		
FROM Month/Year	TO Month/Year	RESIDENTIAL Street Address		
10/1/2013	CURRENT			
		(ATTACH ADDITIONAL SHEET IF NECESSARY)		
12. As a Contro If you answ	olling Person or ered YES, then	Agent, will you be physically present and operating the licensed premises? a answer #13 below. If NO, skip to #14.	✓ Yes No	
13. Have you a years?	ittended a DLI	LC approved Basic & Management Liquor Law Training Course within the past 3	Yes V	
14. Have you b law or ordir	een <u>cited, arr</u> nance, regard	ested, indicted, convicted, or summoned into court for violation of ANY criminal less of the disposition, even if dismissed or expunged, within the past five (5) years?	Yes V	
15. Are there <u>A</u> summonses	<u>NY</u> administra s <u>pending</u> aga	tive law citations, compliance actions or consents, criminal arrests, indictments or inst you? (Do not include civil traffic tickets.) A.R.S.§4-202,4-210	Yes V	
16. Has anyone	e <u>EVER</u> obtaine	ed a judgement against you the subject of which involved fraud or misrepresentation	^ç ∐Yes ☑ No	
17. Have you h within the lo	nad a liquor ap ast five years?	oplication or license rejected, denied, revoked or suspended in or outside of Arizona A.R.S.§4-202(D)	Yes V	
18. Has an ent denied, re	tity in which yo evoked or susp	ou are or have been a controlling person had an application or license rejected, ended in or outside of Arizona within the last five years? A.R.S.§4-202(D)	_Yes ☑Vo	
	If you ans <u>G</u>	wered " <u>YES</u> " to any Question 14 through 18 <u>YOU MUST</u> attach a <u>signed statement</u> . ive complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED		
		NOTADY		
	Llong C	<u>NOTARY</u>		
I (Print Full Name) Heng Chao I (Print Full Name) Heng Chao 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: State of Ar 12014 County of Mar 1 COPA The foregoing instrument was acknowledged before me this				
M Commission Expires Maricopa County My Commission Expires My Commission Expires				
	August	20, 2019 Signification Notary		
The Licensee has authorized the person named on this questionnaire to act as manager for the above License.				
PRINT NAME: Heng Chao SIGNATURE: //m/4				
PRINT NAME: _		SIGNATURE:	 	

1/11/2018

Page 2 of 2 Individuals requiring ADA accommodations please call (602) 542-2999



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

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) Heng Chao				
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:				
Mongkol Borey State (or equivalent) Battambang Country or Territory Cambodia				
If you answered Yes , 1) Attach a legible copy of a document from the attached list.				
2) Name of document: Go to Section IV.				

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

SECTION III – ALIEN STATUS DECLARATION
o be completed by applicants who are not citizens or nationals of the United States. Please indicate alien status checking the appropriate box. Attach a legible copy of a document from the attached list or other document evidence of your status.
Permanent Resident
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 persor 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 Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Reput 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

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).

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

Otherwise Lawfully Present

		
All applicants must complete this section.		
I declare under penalty of perjury under the	laws of the state	e of Arizona that the answers and e
true and correct to the best of my knowledge		

evidence I have given are true and correct to the best of my knowledge.

SECTION IV - DECLARATION

Heng Chao	
Individual Owner/Agent Printed Name	
//n6/2	4/10/19
instividual Owner/Agent Signature	Today's Date

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.
- A United States passport. ***Passport must be signed***
- 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.