

CITY COUNCIL REPORT



Meeting Date: April 9, 2013
General Plan Element: *Land Use*
General Plan Goal: **Sustain Scottsdale as a tourist destination.**

ACTION

Beer and Wine Bar Liquor License Request for Holiday Inn Express 12-LL-2013. To consider forwarding a recommendation to the Arizona Department of Liquor Licenses and Control for a Person Transfer of a Series 7 (beer and wine bar) State liquor license for an existing location and new owner.

OWNER

Scottsdale HIX, LLC

APPLICANT CONTACT

Andrea Lewkowitz

LOCATION

3131 N Scottsdale Rd

BACKGROUND

This request is for a Person Transfer of a Series 7 (beer and wine bar) liquor license.

The zoning for this site is Highway Commercial District/Downtown Overlay (C-3 DO), which allows hotels. This establishment is 99,506 sq. ft. including an existing 7,200 sq. ft. patio.

APPLICANT'S PROPOSAL

The applicant is seeking a favorable recommendation on a Person Transfer of a Series 7 (beer and wine bar) liquor license. This allows a beer and wine bar retailer to sell and serve beer and wine, primarily by individual portions, to be consumed on the premises and in the original container for consumption on or off the premises. The applicant has indicated that this establishment will serve liquor between the hours of 5:00 p.m. to 7:00 p.m. in the hotel and 10:00 a.m. to 2:00 a.m. in the

Gift Shop; however, due to State liquor license processing requirements, they are not required to notify the City or the State if they change their hours of operation.

PETITIONS FROM PERSONS IN CLOSE PROXIMITY

The applicant has maintained the required posting notice for the State mandated 20-day period. No petitions or protests pursuant to A.R.S. 4-201.b. were received during the 20 (twenty) day posting period.

OTHER LICENSES & PERMITS

Financial Management

Revenue Collection has reported that the applicant has met City licensing requirements and all fees have been paid.

Spirituos Liquor Tax Permit # Pending.

Scottsdale Transaction Privilege Sales Tax License # Pending.

IMPACT ANALYSIS

Current Planning Department

There will not be any changes to the floor plan.

Public Safety Division.

Police Department: Recommendation No Opposition

Major life safety issues: None noted.

Code Enforcement: There are no current cases of code violations at this time relevant to the liquor license.

STATE GUIDELINES FOR CONSIDERING AN APPLICATION

A.R.S. Section 4-203.A Granting a License for a New Owner for a Certain Location.

A spirituos liquor license shall be issued only after satisfactory showing of the capability, qualifications and reliability of the applicant.

COUNCIL OPTIONS & STAFF RECOMMENDATION

Council Options

The City Council has the option of recommending approval, denial or no recommendation to the Arizona Department of Liquor Licenses and Control.

Staff Recommendation

The City of Scottsdale staff has conducted a review and advises that the license request meets the criteria imposed for determining the capability, qualifications and reliability of the applicant.

Next Steps

The City Council's recommendation of approval, denial or no recommendation will be forwarded to the Department of Liquor Licenses and Control for their consideration. If the application is approved by the Department of Liquor Licenses and Control, the applicant should receive their license from the State within 105 days of original application.

RESPONSIBLE DEPARTMENT(S)


Teri Gleason, Planning Assistant, tgleason@scottsdaleaz.gov
Planning, Neighborhood and Transportation Division

Ronald Bayne, Lieutenant, Patrol Enforcement Section, rbayne@scottsdaleaz.gov
Public Safety Division


Raun Keagy, Planning, Neighborhood and Transportation Director, rkeagy@scottsdaleaz.gov
Planning, Neighborhood and Transportation Division

APPROVED BY

Tim Curtis, AICP, Current Planning Director
312-4210 tcurtis@scottsdaleaz.gov

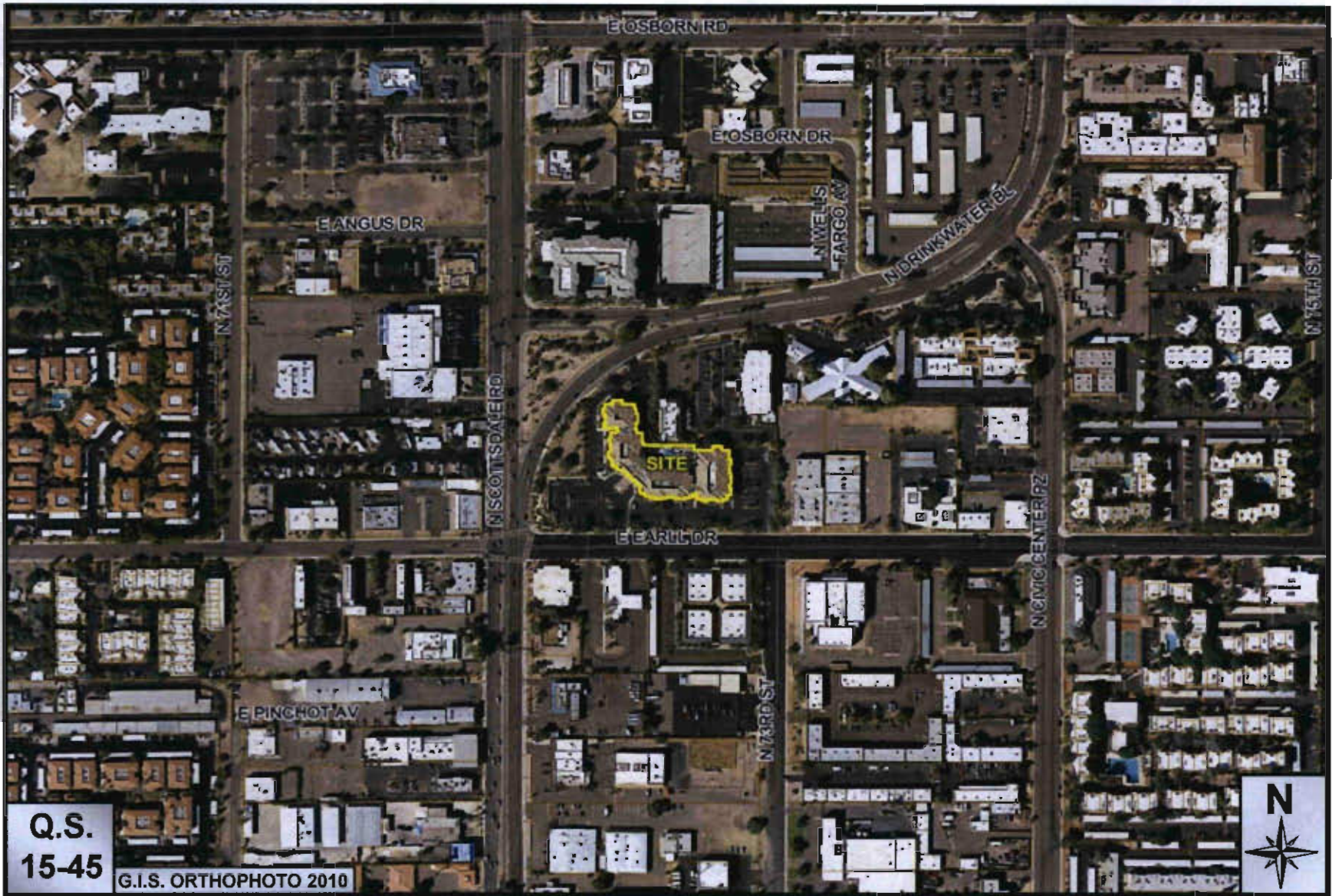
 3/19/2013

Randy Grant, PNT Administrator
312-2664, rgrant@scottsdaleaz.gov

 3/21/13

ATTACHMENTS

- #1: Aerial Map
- #2: Close-up Aerial Map
- #3: City of Scottsdale Applicant Questionnaire
- #4: State Application



Q.S.
15-45

G.I.S. ORTHOPHO 2010

12-LL-2013

Holiday Inn Express

ATTACHMENT #1



Q.S.
15-45
G.I.S. ORTHOPHOTO 2010

12-LL-2013

Holiday Inn Express

ATTACHMENT #2



Liquor License Questionnaire

Please complete all questions and return within 3 business days.

Name of Business: Holiday Inn Express Hotel & Suites

Business Address: 3131 N Scottsdale Road, Scottsdale, AZ 85251

Type of Business (restaurant, bar, grocery, retail) Hotel

Total Gross Square Footage of Establishment: 99,506 sq. ft.

Was there a previous business at this location? Yes No
If yes, list the previous business: Holiday Inn Express Hotel & Suites

Was liquor sold at this location prior to this application? Yes No
If yes, what type of license? Series #7

Is this business currently open? Yes No

If yes, is this business operating with an Interim license? Yes No

If no, what is the proposed opening date? _____

Is this business under construction or being remodeled? Yes No

Does this business have an existing patio? Yes No Dimensions of patio 120 x 60

Does this business have a proposed patio? Yes No Dimensions of patio _____

How many parking spaces are allocated to your business? 200

For Restaurants, Bars and Restaurants/Bars:

Will the bar service area be in excess of 15% of the gross floor area? Yes* No

Will the kitchen be less than 15% of the gross floor area? Yes* No Series #7

Will age verification be required/requested for admittance at any time during business operations? Yes* No

Is a cover charge required for admittance at any time during business operations? Yes* No

Will less than 40% of gross revenues be derived from the sale of prepared food? Yes* No Series #7

*May require a Conditional Use Permit

During what hours will the establishment provide full kitchen service? Kitchen (prep only)

During what hours will the establishment offer liquor sales? Hotel (5-7pm) and Gift Shop (10am-2am)

Gross square footage of kitchen: 300 sq. ft. (+ kitchen storage)

(do not include refrigerators or areas used for storage of food or beverages)

Gross square footage of bar service area: 25 sq. ft.

(includes the floor area under indoor and outdoor bars and the floor area behind the bars used for storage, prep and serving of food or drinks)

Planning, Neighborhood and Transportation Division

7447 E. Indian School Road, Suite 105, Scottsdale, AZ 85251 ♦ Phone: 480-312-7000 ♦ Fax: 480-312-7088



Liquor License Questionnaire

Please complete all questions and return within 3 business days.

Will this business feature any of the following:

Patron Dancing?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No	Karaoke?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No
Live Bands?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No	DJ?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No
Amplified music?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No	Games?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No
Adult Entertainment?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No	Four or more pool tables?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No
After hours?	<input type="checkbox"/> Yes*	<input checked="" type="checkbox"/> No			

*May require a Conditional Use Permit

Applicant Narrative:

ARS 4-201-G: In all proceedings before the governing body of a city or town, the Board of Supervisors of a County or the Board, the applicant bears the burden of showing that the public convenience requires and that the best interest of the community will be substantially served by the issuance of this license.

- I have the capability, qualifications and reliability to hold a liquor license because:
Applicant is committed to the responsible sale of alcoholic beverages under Arizona liquor laws. Managers and staff have been, or will be, trained in the techniques of alcohol sales and service to assure proper service to their guests.
- The public convenience requires and the best interest of the community will be substantially served by the issuance of the liquor license because:
Holiday Inn Express Hotel & Suites would like to continue to offer alcoholic beverages to its guests over 21 who request it.
- Please describe your business:
Hotel

The City's forwarding of a recommendation to the AZ Department of Liquor Licenses and Control does not waive and is not a substitute for the Licensee's obligation to comply with all state, local and federal laws, policies and regulations applicable to the license. The Recommendation is not a permit or regulatory approval to hold any events or construct or demolish any improvements. Zoning processes, building permit processes, and similar regulatory requirements may apply to Licensee's contemplated improvements and are completely separate from the Recommendation. Licensee shall be responsible to, separate and apart from this Recommendation, directly obtain all necessary permits and approvals from any and all governmental or other entities including the City's having standing or jurisdiction over the subject areas. For more information regarding zoning processes, building permit processes, and similar regulatory requirements and approvals please call 480-312-2611.

Print Name: Andrea Leinkowitz Signature: Andrea Leinkowitz Date: 3/5/2013
by: Amy Schreff, POA Submit

Planning, Neighborhood and Transportation Division
 7447 E. Indian School Road, Suite 105, Scottsdale, AZ 85251 ♦ Phone: 480-312-7000 ♦ Fax: 480-312-7088

Arizona Department of Liquor Licenses and Control
 800 West Washington, 5th Floor
 Phoenix, Arizona 85007
 www.azliquor.gov
 602-542-5141

12-11-2013

APPLICATION FOR LIQUOR LICENSE
 TYPE OR PRINT WITH BLACK INK

Notice: Effective Nov. 1, 1997, All Owners, Agents, Partners, Stockholders, Officers, or Managers actively involved in the day to day operations of the business must attend a Department approved liquor law training course or provide proof of attendance within the last five years. See page 5 of the Liquor Licensing requirements.

SECTION 1 This application is for a:

- MORE THAN ONE LICENSE
- INTERIM PERMIT *Complete Section 5*
- NEW LICENSE *Complete Sections 2, 3, 4, 13, 14, 15, 16*
- PERSON TRANSFER (Bars & Liquor Stores ONLY)
Complete Sections 2, 3, 4, 11, 13, 15, 16;
- LOCATION TRANSFER (Bars and Liquor Stores ONLY)
Complete Sections 2, 3, 4, 12, 13, 15, 16
- PROBATE/WILL ASSIGNMENT/DIVORCE DECREE
Complete Sections 2, 3, 4, 9, 13, 16 (fee not required)
- GOVERNMENT *Complete Sections 2, 3, 4, 10, 13, 15, 16*

SECTION 2 Type of ownership:

- J.T.W.R.O.S. *Complete Section 6*
- INDIVIDUAL *Complete Section 8*
- PARTNERSHIP *Complete Section 6*
- CORPORATION *Complete Section 7*
- LIMITED LIABILITY CO. *Complete Section 7*
- CLUB *Complete Section 8*
- GOVERNMENT *Complete Section 10*
- TRUST *Complete Section 6*
- OTHER (Explain) _____

SECTION 3 Type of license and fees LICENSE #(s): 07070404

1. Type of License(s): Series #7
 2. Total fees attached: \$222 Department Use Only

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE.
 The fees allowed under A.R.S. 44-6852 will be charged for all dishonored checks.

SECTION 4 Applicant

1. Owner/Agent's Name: Mr. Lewkowitz Andrea Dahlman
 Ms. Last First Middle
 (Insert one name ONLY to appear on license)

2. Corp./Partnership/L.L.C.: Scottsdale HIX, LLC - B1049746
 (Exactly as it appears on Articles of Inc. or Articles of Org.)

3. Business Name: Holiday Inn Express Hotel & Suites B1070534
 (Exactly as it appears on the exterior of premises)

4. Principal Street Location: 3131 N Scottsdale Road Scottsdale Maricopa 85251
 (Do not use PO Box Number) City County Zip

5. Business Phone: (480) 675-7665 Daytime Phone: (602) 200-7222 Email: andrea@lewkowitzlaw.com

6. Is the business located within the incorporated limits of the above city or town? YES NO

7. Mailing Address: 2600 N Central Avenue, Suite 1775, Phoenix, AZ 85004
 City State Zip

8. Price paid for license only bar, beer and wine, or liquor store: Type \$ Type \$

DEPARTMENT USE ONLY

Fees: 100 Application 100 Interim Permit Site Inspection 22 Finger Prints \$ 222
TOTAL OF ALL FEES

Is Arizona Statement of Citizenship & Alien Status For State Benefits complete? YES NO

Accepted by: SG Date: 2/27/13 Lic. # 07070404

SECTION 5 Interim Permit:

1. If you intend to operate business when your application is pending you will need an Interim Permit pursuant to A.R.S. 4-203.01. 13 FEB 27 11:49 LIC. #1931
2. There **MUST** be a valid license of the same type you are applying for currently issued to the location.
3. Enter the license number currently at the location. 07070404
4. Is the license currently in use? YES NO If no, how long has it been out of use? _____

ATTACH THE LICENSE CURRENTLY ISSUED AT THE LOCATION TO THIS APPLICATION.

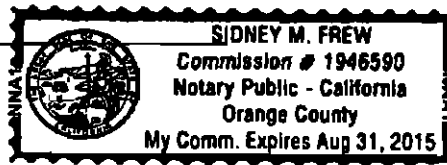
I, Campbell & Sons, Inc. d/b/a Martin A. Campbell, declare that I am the CURRENT OWNER AGENT, CLUB MEMBER, PARTNER, MEMBER, STOCKHOLDER, OR LICENSEE (circle the title which applies) of the stated license and location.

x Mart A Campbell
(Signature)

State of CA County of ORANGE

The foregoing instrument was acknowledged before me this

My commission expires on:
AUG. 31, 2015



15th day of February, 2013
Day Month Year

Sidney M. Frew
(Signature of NOTARY PUBLIC)

SECTION 6 Individual or Partnership Owners:

EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNAIRE (FORM LIC0101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 PROCESSING FEE FOR EACH BARD.

1. Individual:

Last	First	Middle	% Owned	Mailing Address	City State Zip

Partnership Name: (Only the first partner listed will appear on license) _____

General-Limited	Last	First	Middle	% Owned	Mailing Address	City State Zip
<input type="checkbox"/>						
<input type="checkbox"/>						
<input type="checkbox"/>						
<input type="checkbox"/>						

(ATTACH ADDITIONAL SHEET IF NECESSARY)

2. Is any person, other than the above, going to share in the profits/losses of the business? YES NO

If Yes, give name, current address and telephone number of the person(s). Use additional sheets if necessary.

Last	First	Middle	Mailing Address	City, State, Zip	Telephone#

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

License 07070404

Issue Date: 2/23/2005

Expiration Date: 2/28/2014

Issued To:

TRISHA LEIGH RYNO, Agent
CAMPBELL LODGING INC, Owner

Beer & Wine Bar

Mailing Address:

TRISHA LEIGH RYNO
CAMPBELL LODGING INC
HOLIDAY INN EXPRESS HOTEL & SUITES
1800 E IMPERIAL HWY SUITE #120
BREA, CA 92821

Location:

HOLIDAY INN EXPRESS HOTEL & SUITES
3131 N SCOTTSDALE RD
SCOTTSDALE, AZ 85251



POST THIS LICENSE IN A CONSPICUOUS PLACE

SECTION 7 Corporation/Limited Liability Co.:

EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNAIRE (FORM LIC0101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$22 PROCESSING FEE FOR EACH CARD.

- CORPORATION Complete questions 1, 2, 3, 5, 6, 7, and 8.
- L.L.C. Complete 1, 2, 4, 5, 6, 7, and 8.

*13 FEB 27 Lic. Lic. AM 9 32

- 1. Name of Corporation/L.L.C.: Scottsdale HIX, LLC
(Exactly as it appears on Articles of Incorporation or Articles of Organization)
- 2. Date Incorporated/Organized: 02/13/2013 State where Incorporated/Organized: DELAWARE
- 3. AZ Corporation Commission File No.: N/A Date authorized to do business in AZ: N/A
- 4. AZ L.L.C. File No: R-1825437-0 Date authorized to do business in AZ: 02/21/2013
- 5. Is Corp./L.L.C. Non-profit? YES NO
- 6. List all directors, officers and members in Corporation/L.L.C.:

Last	First	Middle	Title	Mailing Address	City	State	Zip
See attached							

(ATTACH ADDITIONAL SHEET IF NECESSARY)

- 7. List stockholders who are controlling persons or who own 10% or more:

Last	First	Middle	% Owned	Mailing Address	City	State	Zip
See attached							

(ATTACH ADDITIONAL SHEET IF NECESSARY)

- 8. If the corporation/L.L.C. is owned by another entity, attach a percentage of ownership chart, and a director/officer/member disclosure for the parent entity. Attach additional sheets as needed in order to disclose personal identities of all owners.

SECTION 8 Club Applicants:

EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNAIRE (FORM LIC0101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$22 PROCESSING FEE FOR EACH CARD.

- 1. Name of Club: _____ Date Chartered: _____
(Exactly as it appears on Club Charter or Bylaws) (Attach a copy of Club Charter or Bylaws)

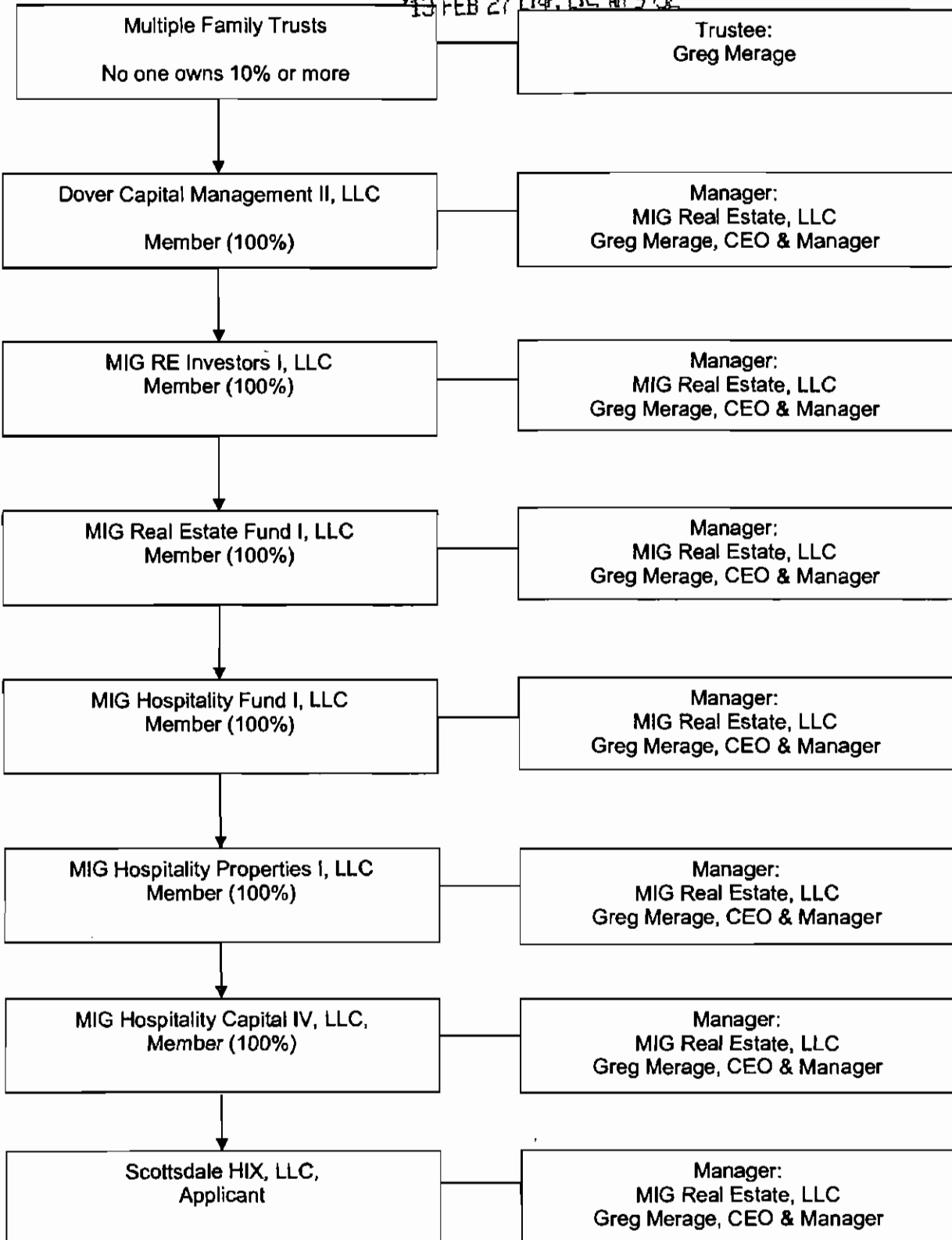
- 2. Is club non-profit? YES NO

- 3. List officer and directors:

Last	First	Middle	Title	Mailing Address	City	State	Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

13 FEB 27 11:49 AM '02



SECTION 9 Probate, Will Assignment or Divorce Decree of an existing Bar or Liquor Store License:

1. Current Licensee's Name: _____
 (Exactly as it appears on license) Last First Middle
 '13 FEB 27 09 Lic. # 9 132
2. Assignee's Name: _____
 Last First Middle
3. License Type: _____ License Number: _____ Date of Last Renewal: _____
4. ATTACH TO THIS APPLICATION A CERTIFIED COPY OF THE WILL, PROBATE DISTRIBUTION INSTRUMENT, OR DIVORCE DECREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THIS APPLICATION.

SECTION 10 Government: (for cities, towns, or counties only)

1. Governmental Entity: _____
2. Person/designee: _____
 Last First Middle Contact Phone Number

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

SECTION 11 Person to Person Transfer:

Questions to be completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY-Series 06,07, and 09).

1. Current Licensee's Name: Ryno Trisha Leigh Entity: Agent
 (Exactly as it appears on license) Last First Middle (Indv., Agent, etc.)
2. Corporation/L.L.C. Name: Campbell Lodging, Inc.
 (Exactly as it appears on license)
3. Current Business Name: Holiday Inn Express Hotel & Suites
 (Exactly as it appears on license)
4. Physical Street Location of Business: Street 3131 N Scottsdale Road
 City, State, Zip Scottsdale, AZ 85251
5. License Type: Series #7 License Number: 07070404
6. If more than one license to be transferred: License Type: N/A License Number: N/A
7. Current Mailing Address: Street 1800 E Imperial Hwy, Suite 120
 (Other than business) City, State, Zip Brea, CA 92821
8. Have all creditors, lien holders, interest holders, etc. been notified of this transfer? YES NO
9. Does the applicant intend to operate the business while this application is pending? YES NO If yes, complete Section 5 of this application, attach fee, and current license to this application.

10. I, _____, hereby authorize the department to process this application to transfer the
 (print full name)
 privilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of these conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue.

I, _____, declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNER
 (print full name)
 STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are true, correct, and complete.

 (Signature of CURRENT LICENSEE)

State of _____ County of _____
 The foregoing instrument was acknowledged before me this _____
 Day Month Year

My commission expires on: _____

 (Signature of NOTARY PUBLIC)

13 FEB 27 Liq. Lic. AM 9:32

BILL OF SALE

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, CAMPBELL LODGING, INC. ("Seller") hereby sells, grants and transfers to SCOTTSDALE HIX, LLC, a DE limited liability company ("Buyer"), all right title and interest in and to Arizona Liquor License No. 07070404 ("the License").

Seller warrants that it is the lawful owner of the License, that the License is free and clear of all claims, liens, or encumbrances, and that the undersigned is authorized to execute all documents necessary to effect transfer of the License.

This Bill of Sale shall be binding on Seller, its successor and assigns, and shall inure to the benefit of Buyer, its successors and assigns.

CAMPBELL LODGING, INC.

2/7/13
Date

By: MARTIN CAMPBELL
Its VP

STATE OF ^{CALIF.} ARIZONA)
County of ^{ORANGE} ~~Maricopa~~) ss.

SUBSCRIBED AND SWORN to before me this 7TH day of FEBRUARY, 2013, by MARTIN A. CAMPBELL.

My Commission Expires:
Aug. 31, 2015

Sidney M. Frew
Notary Public



SECTION 12 Location to Location Transfer: (Bars and Liquor Stores ONLY)

APPLICANTS CANNOT OPERATE UNDER A LOCATION TRANSFER UNTIL IT IS APPROVED BY THE STATE

13 FEB 27 Lique. Lic. # 9 02

1. Current Business: Name _____
(Exactly as it appears on license) Address _____
2. New Business: Name _____
(Physical Street Location) Address _____
3. License Type: _____ License Number: _____
4. If more than one license to be transferred: License Type: _____ License Number: _____
5. What date do you plan to move? _____ What date do you plan to open? _____

SECTION 13 Questions for all in-state applicants excluding those applying for government, hotel/motel, and restaurant licenses (series 5, 11, and 12):

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) Restaurant license (§ 4-205.02)
- b) Hotel/motel license (§ 4-205.01)
- c) Government license (§ 4-205.03)
- d) Fenced playing area of a golf course (§ 4-207 (B)(5))

1. Distance to nearest school: 2,112 ft. Name of school Howard S. Gray School
Address 7575 E Earll Drive, Scottsdale, AZ 85251
City, State, Zip _____
2. Distance to nearest church: 1,584 ft. Name of church God's Grace Church
Address 3214 N 70th Street, Scottsdale, AZ 85251
City, State, Zip _____
3. I am the: Lessee Sublessee Owner Purchaser (of premises)
4. If the premises is leased give lessors: Name _____
Address _____
City, State, Zip _____
- 4a. Monthly rental/lease rate \$ _____ What is the remaining length of the lease ___ yrs. ___ mos.
- 4b. What is the penalty if the lease is not fulfilled? \$ _____ or other _____
(give details - attach additional sheet if necessary)
5. What is the total **business** indebtedness for this license/location excluding the lease? \$ 0
Please list lenders you owe money to.

Last	First	Middle	Amount Owed	Mailing Address	City State	Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

6. What type of business will this license be used for (be specific)? Hotel

SECTION 13 - continued

7. Has a license or a transfer license for the premises on this application been denied by the state within the past one (1) year?

YES NO If yes, attach explanation.

8. Does any spirituous liquor manufacturer, wholesaler, or employee have any interest in your business? YES NO

9. Is the premises currently licensed with a liquor license? YES NO If yes, give license number and licensee's name:

License # 07070404 (exactly as it appears on license) Name Trisha Leigh Ryno

SECTION 14 Restaurant or hotel/motel license applicants:

1. Is there an existing restaurant or hotel/motel liquor license at the proposed location? YES NO
If yes, give the name of licensee, Agent or a company name:

_____ and license #: _____
Last First Middle

2. If the answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application is pending; consult A.R.S. § 4-203.01; and complete SECTION 5 of this application.

3. All restaurant and hotel/motel applicants must complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor Licenses and Control.

4. As stated in A.R.S. § 4-205.02.G.2, a restaurant is an establishment which derives at least 40 percent of its gross revenue from the sale of food. Gross revenue is the revenue derived from all sales of food and spirituous liquor on the licensed premises. By applying for this hotel/motel restaurant license, I certify that I understand that I must maintain a minimum of 40 percent food sales based on these definitions and have included the Restaurant Hotel/Motel Records Required for Audit (form LIC 1013) with this application.

applicant's signature

As stated in A.R.S. § 4-205.02 (B), I understand it is my responsibility to contact the Department of Liquor Licenses and Control to schedule an inspection when all tables and chairs are on site, kitchen equipment, and, if applicable, patio barriers are in place on the licensed premises. With the exception of the patio barriers, these items are not required to be properly installed for this inspection. Failure to schedule an inspection will delay issuance of the license. If you are not ready for your inspection 90 days after filing your application, please request an extension in writing, specify why the extension is necessary, and the new inspection date you are requesting. To schedule your site inspection visit www.azliquor.gov and click on the "Information" tab.

applicants initials

SECTION 15 Diagram of Premises: (Blueprints not accepted, diagram must be on this form)

1. Check ALL boxes that apply to your business:

Entrances/Exits Liquor storage areas Patio: Contiguous
 Service windows Drive-in windows Non Contiguous

2. Is your licensed premises currently closed due to construction, renovation, or redesign? YES NO
If yes, what is your estimated opening date? _____

month/day/year

3. Restaurants and hotel/motel applicants are required to draw a detailed floor plan of the kitchen and dining areas including the locations of all kitchen equipment and dining furniture. Diagram paper is provided on page 7.

4. The diagram (a detailed floor plan) you provide is required to disclose only the area(s) where spirituous liquor is to be sold, served, consumed, dispensed, possessed, or stored on the premises unless it is a restaurant (see #3 above).

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

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 boundaries, entrances, exits, added or deleted doors, windows or service windows, or increase or decrease to the square footage after submitting this Initial drawing.



applicants initials

SECTION 15 Diagram of Premises

4. In this diagram please show only the area where spirituous liquor is to be sold, served, consumed, dispensed, possessed or stored. It must show all entrances, exits, interior walls, bars, bar stools, hi-top tables, dining tables, dining chairs, the kitchen, dance floor, stage, and game room. Do not include parking lots, living quarters, etc. When completing diagram, North is up ↑.

If a legible copy of a rendering or drawing of your diagram of premises is attached to this application, please write the words "diagram attached" in box provided below.

Diagram attached

13 FEB 27 10:11 AM '13

SECTION 16 Signature Block

I, Andrea Dahlman Lewkowitz, hereby declare that I am the OWNER/AGENT filing this application as stated in Section 4, Question 1. I have read this application and verify all statements to be true, correct and complete.

X *[Handwritten Signature]*
(signature of applicant listed in Section 4, Question 1)

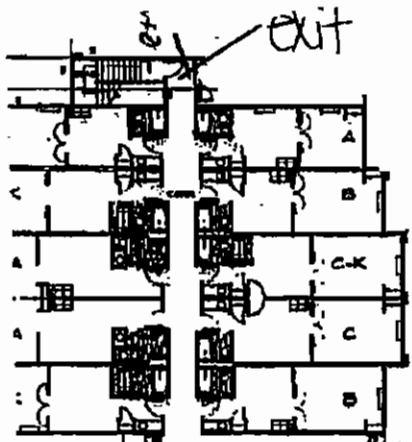
State of Arizona County of Maricopa

The foregoing instrument was acknowledged before me this 210 of February, 2013
Day Month Year

[Handwritten Signature]
signature of NOTARY PUBLIC

My commission expires on: 12 02 2017
AMY L. SCHROFF Day Month Year
Notary Public - Arizona
Maricopa County
My Commission Expires
February 12, 2017

Scottsdale Road

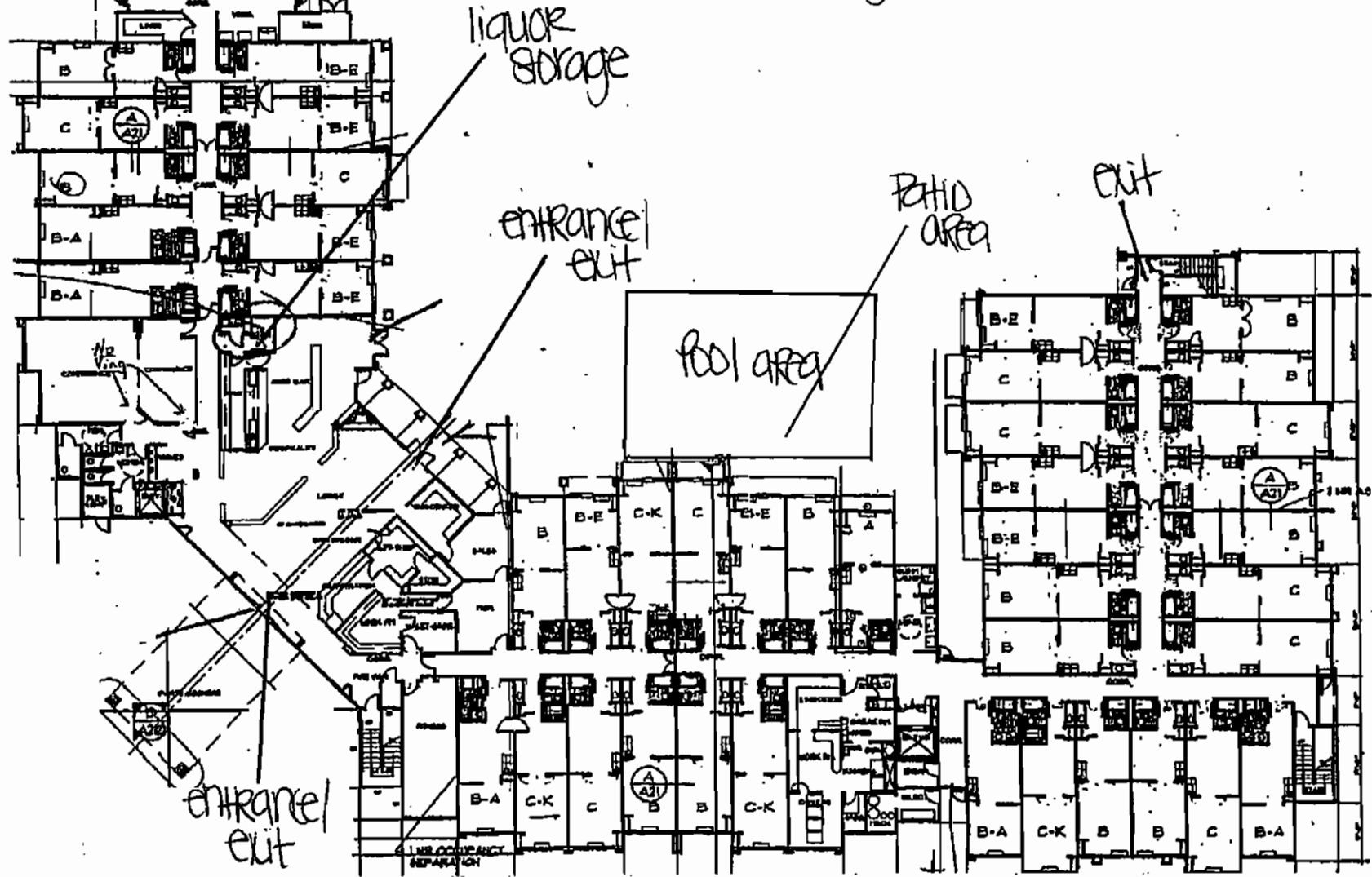


Holiday Inn Express Hotel & Suites

Hotel area: approx. 98,900 sqft

Dining area: approx. 1000 sqft

3-story, 1109 rooms



entrance/exit

liquor storage

entrance/exit

pool area

Patio area

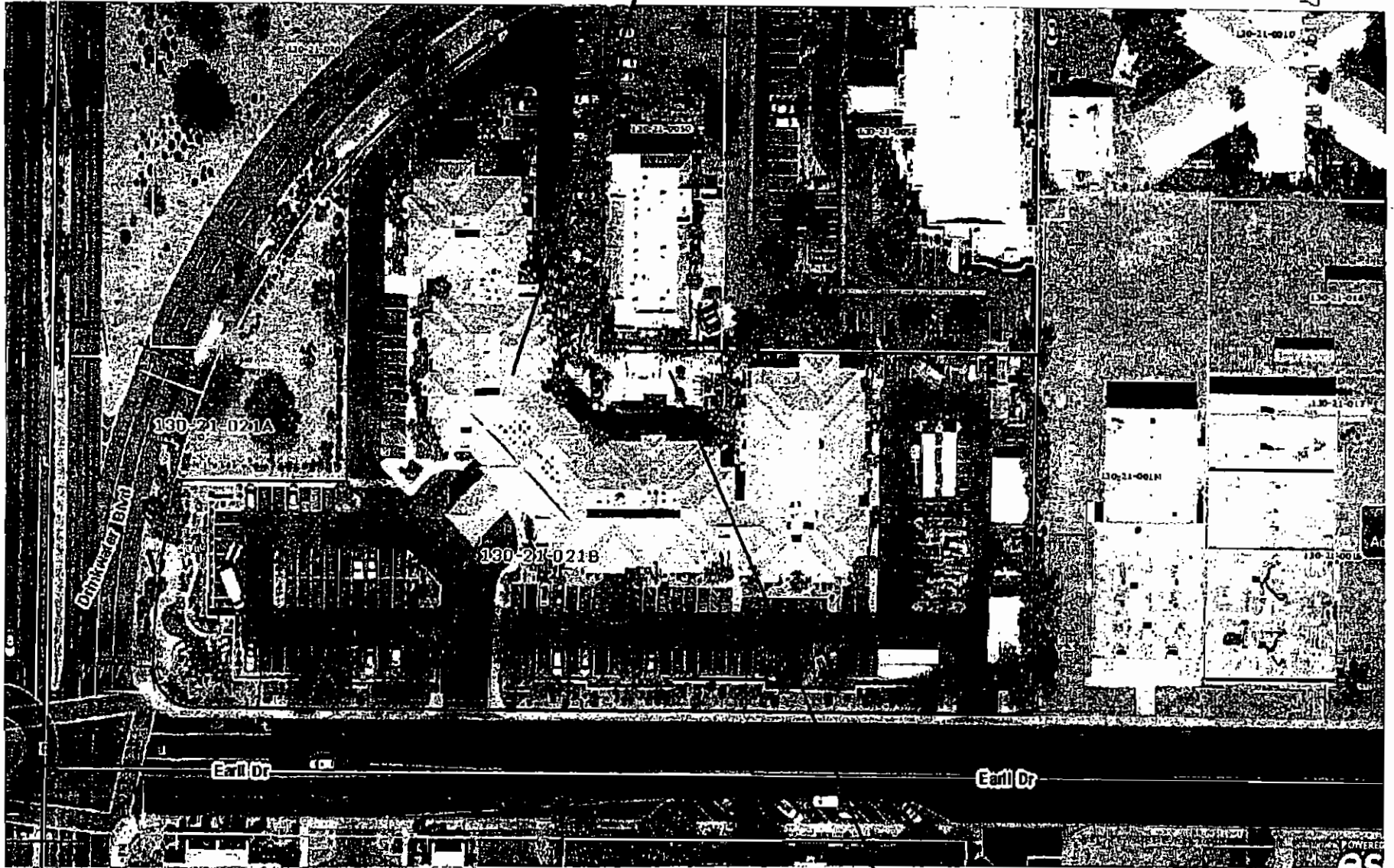
exit

FAB II DRILL

13 FEB 27 11:04 AM '92

Holiday Inn Express Hotel & Suites

13 FEB 27



DIXON AREA