

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

Date payment received _____
CSR Initials _____

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT

THIS APPLICATION MUST BE RETURNED TO THE DEPARTMENT OF LIQUOR

Permanent change of area of service. A non-refundable \$50 fee will apply. Specific purpose for change: _____

Temporary change for date(s) of: 6/29/13 through 6/29/13 List specific purpose for change: Modified Motorcycle Association, Charitable Bikini Bike Wash

- Licensee's Name: Maclean Alexander Douglas
Last First Middle
- Mailing Address: HCT Box 212 Strawberry AZ 85544
City State Zip
- Business Name: FLYING GRIZZLY LICENSE #: 07070008
- Business Address: 5079 Hwy 87 Strawberry GILA AZ 85544
City COUNTY State Zip
- Business Phone: () _____ Residence Phone: 970 970-6718 OR
- Do you understand Arizona Liquor Laws and Regulations? YES NO Fax #: () _____
- Have you received approved Liquor Law Training? NO YES If so, when does your Certificate expire? 03/15/2017
- What security precautions will be taken to prevent liquor violations in the extended area? Fencing and Security Personnel
- Does this extension bring your premises within 300 feet of a church or school? YES NO
- IMPORTANT: ATTACH THE REVISED FLOOR PLAN CLEARLY DEPICTING YOUR LICENSED PREMISES AND WHAT YOU PROPOSE TO ADD.**

Barrier Exemption: an exception to the requirement of barriers surrounding a patio/outdoor serving area may be requested. Barrier exemptions are granted based on public safety, pedestrian traffic, and other factors unique to a licensed premises. List specific reasons for exemption: _____

N/A

Investigation Recommendation Approval Disapproval by: _____ Date: 1/1

****After completing sections 1-10, 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.

This change in premises is RECOMMENDED by the local Board of Supervisors, City Council or Designate:

(Authorized Signature)

(Title)

(Agency)

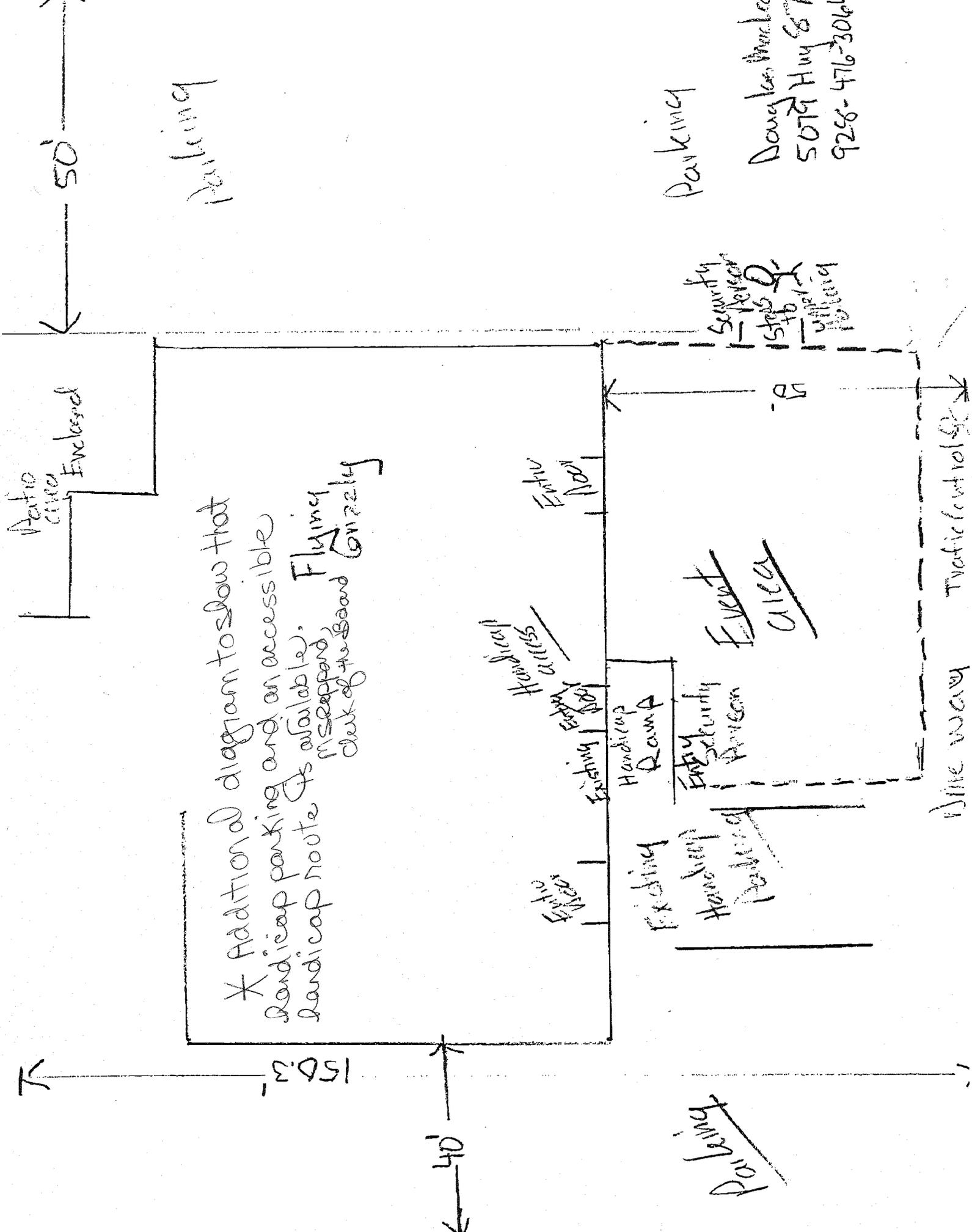
I, Alexander Douglas Maclean being first duly sworn upon oath, hereby depose, swear and declare, (Print full name)
under penalty of perjury, that I am the APPLICANT making the foregoing application. I have read this application and the contents and all statements are true, correct and complete.

Alexander Douglas Maclean State of AZ County of GILA
(Signature of Owner or Agent) SUBSCRIBED IN MY PRESENCE AND SWORN TO before me this date

My commission expires on: 5/30/2015
Debra J. Varnath Day Month Year
(Signature of NOTARY PUBLIC)

Investigation Recommendation Approval Disapproval by: _____ Date: 1/1

Director Signature required for Disapprovals _____ Date: 1/1



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CERTIFICATE OF TITLE 4 TRAINING COMPLETION

Do Not Duplicate This Form

Certificates must be completed by a state-approved training course provider, in black ink, on an original form.

JAMES MACLEAN

Full Name (please print)

Signature

20 March 2012

Training Completion Date

March 19, 2017

Certificate Expiration Date

(MANAGEMENT - 5 years from completion date)
(BASIC - 3 years from completion date)

Type of Training Completed (check Yes or No)

<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	BASIC	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	ON SALE
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	MANAGEMENT	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	OFF SALE
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	BOTH	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	OTHER

If Trainee Is Employed By A Licensee

Name of Licensee

Business Name

Liquor License #

Alcohol Training Program Provider Information

Arizona Alcohol Traffic & Firearms

Company or Individual Name (please print)

P.O. Box 6252

Address

Chandler, AZ 85246

City

State

Zip

(480) 664-0389

Daytime Contact Phone #

I certify the above named individual has successfully completed the training specified above in accordance with Arizona Revised Statute, Arizona Administrative Code, and the training course curriculum approved by the Department of Liquor Licenses and Control:



Jared Repinski

Name of Trainer (please print)

20 March 2012

Date

Pursuant to A.R.S. 4-112(G)(2), mandatory Title 4 liquor law training is required prior to the issuance of all new liquor license applications submitted after November 1, 1997.

The persons(s) required to attend both the BASIC and MANAGEMENT Title 4 liquor law training, on- or off-sale, will include all of the following:
Owner(s)
Licensee/agent or manager(s) actively involved in daily business operation

A valid (not expired) Certificate of Title 4 Training Completion must be submitted to the Department of Liquor Licenses and Control before a liquor license application is considered complete.

Before acceptance of a manager's questionnaire and/or agent change for an existing liquor license, proof of attendance for the BASIC and MANAGEMENT Title 4 liquor law training (on- or off-sale) is required.

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DOUGLAS MACLEAN

Full Name (please print)

[Handwritten Signature]
Signature

16 March 2012

Training Completion Date

March 15, 2017

Certificate Expiration Date

(MANAGEMENT - 5 years from completion date)
(BASIC - 3 years from completion date)

Type of Training Completed (check Yes or No)

- | | | | | | |
|---|-----------------------------|------------|---|--|----------|
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | BASIC | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | ON SALE |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | MANAGEMENT | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | OFF SALE |
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | BOTH | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | OTHER |

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Jared Repinski

Name of Trainer (please print)

[Handwritten Signature]
Trainer Signature

16 March 2012

Date

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