

# CITY COUNCIL AGENDA

CITY COUNCIL CHAMBERS . 11465 WEST CIVIC CENTER DRIVE . AVONDALE, AZ 85323

**WORK SESSION**  
**April 7, 2014**  
**6:00 PM**

## CALL TO ORDER BY MAYOR ROGERS

### 1 ROLL CALL BY THE CITY CLERK

### 2 PUBLIC ART MASTER PLAN UPDATE

City Council will review and provide feedback regarding the update to the City's Public Art Master Plan. For information, discussion and direction.

### 3 2014-2015 ANNUAL ACTION PLAN UPDATE

City Council will receive an update on the draft of the City's 2014-15 Annual Action Plan which is required by the U.S. Department of Housing and Urban Development as a condition to receive the Community Development Block Grant (CDBG) and HOME funding. For information, discussion and direction.

### 4 ADJOURNMENT

Respectfully submitted,

A handwritten signature in cursive script that reads "Carmen Martinez".

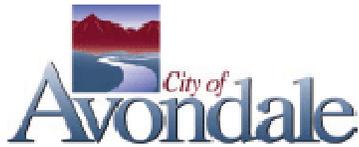
Carmen Martinez  
City Clerk

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# CITY COUNCIL REPORT

**SUBJECT:**

Public Art Master Plan Update

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Tracy Stevens, Development and Engineering Services Director (623) 333-4012

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff will provide an update to the City Council on the Public Art Master Plan update. The Municipal Art Committee made a recommendation to the City Council to approve the plan on February 25, 2014. Staff will present the updated plan as recommended and request feedback from the City Council prior to presenting the plan for a formal action.

**BACKGROUND:**

The City's Public Art Master Plan was originally adopted by the City Council on December 4, 2006. Over the last year the Municipal Art Committee (AMAC) requested that staff update the plan in an effort to create additional art opportunities throughout the City. On February 25, 2014 the Municipal Art Committee made a recommendation of approval of the plan to the City Council.

Avondale's Public Art Master Plan was developed with the AMAC whose charge is to make recommendations to the Avondale City Council on all public art policy matters. The updated document describes what public art is and why it is important, as well as detailing the function of AMAC, its role, its vision, goals, and strategies, and implementation program.

**DISCUSSION:**

Public art reflects the character and quality of life in communities. In addition to the economic benefits that public art can bring to a municipality, it holds an even greater role of creating a "sense of place". Avondale's sense of place has emerged over the last several years into a community that embraces its rich history, puts quality of life at the forefront, and is continuing to build on economic opportunities.

The purpose of the Public Art Master Plan is to integrate a wide variety of artistic elements that are accessible to the public throughout the City, identify opportunities for art in the public realm, identify criteria for selecting and acquiring public art, develop procedures for documenting, maintaining City-owned art, identifying a 5 -year project plan with potential locations, and funding resources.

The Master Plan process included participation and guidance from the Municipal Art Committee, interested art stakeholders, Historic Avondale artists, and the general public. A workshop was held on August 20, 2013 with the committee to solicit ideas and input on the proposed plan. Staff prioritized ideas from the committee with the creation of live/work space and marketing being the most important elements to creating a destination for arts and culture. Staff followed up with a Community Meeting on January 7, 2014 to obtain additional feedback from the community. As a companion to this document, staff also presented the Historic Avondale Design and Development Guidelines (HADDG) as it pertains to the Creative Arts District on Western Avenue identified in the HADDG. In addition, as a companion to the Avondale General Plan 2030 and its Art and Heritage Element this document further defines the General Plan's goals and policies for art.

Upon approval of the updated Art Master Plan staff will continue to work with the Art Committee to complete an Annual Plan and determine specific action items identified within this plan.

**BUDGETARY IMPACT:**

There are no budgetary impacts

**RECOMMENDATION:**

This item is presented for information, discussion and Council direction.

**ATTACHMENTS:**

Click to download

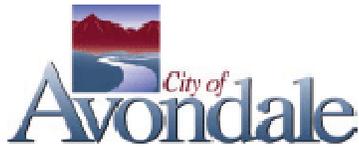
[Art Master Plan Update](#)

## PUBLIC ART MASTER PLAN

DUE TO ITS SIZE, THIS DOCUMENT  
HAS BEEN POSTED SEPARATELY

PLEASE CLICK ON THE LINK BELOW TO VIEW

<http://www.avondale.org/DocumentCenter/View/34162>



# CITY COUNCIL REPORT

**SUBJECT:**

2014-2015 Annual Action Plan Update

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Stephanie Small, Neighborhood and Family Services Director (623) 333-2711

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff is seeking City Council direction on the draft Annual Action Plan which contains recommended budget allocations for CDBG and HOME funds by activity.

**BACKGROUND:**

As an entitlement grantee, the City of Avondale receives annual allocations of CDBG funds from HUD, and HOME funds as a member of the Maricopa County HOME Consortium. HUD has allocated \$601,961 in Community Development Block Grant (CDBG) funds to Avondale for Fiscal Year 2014/15. The City will also receive \$148,229 in HOME Investment Partnership (HOME) funds for Fiscal Year 2014/15.

The federal objective of the CDBG program is to "develop viable urban communities by providing decent housing, a suitable living environment and economic opportunities for low-moderate income persons." The objective of the HOME program is to "create affordable housing opportunities for low-income persons." City of Avondale goals and objectives with respect to CDBG and HOME are defined in the 5-Year Consolidated Plan which was approved by City Council in April 2010. The Consolidated Plan identified the housing, economic and social development needs of low-income and special needs persons and prescribed strategies to address them.

The Annual Action Plan serves as an update to the Consolidated Plan and identifies the goals, strategies and expected outcomes for that program year. HUD requires that local governments involve the public in completing their Annual Action Plans.

**DISCUSSION:**

Neighborhood and Family Services (NFS) completed the public participation process to receive input for the Annual Action Plan. The first public meeting was held on January 15, 2014. The Neighborhood and Family Services Commission reviewed and provided input on the plan on February 26, 2014, at which time the Commission gave their recommendation to request that the Council approve the activities and allocations as recommended by staff. Following these forums, a draft Annual Action Plan was made available to the public for a 30-day comment period. Data gathered from the public participation process to date supports the community priorities which remain as follows: preserve the existing affordable housing stock, increase homeownership opportunities, affirmatively further fair housing in Avondale, support organizations that assist the City's special needs population, support new construction and rehabilitation of affordable rental development, improve public infrastructure and economic conditions in low-income, economically-challenged neighborhoods and to reduce lead based paint hazards in residential dwellings in Avondale. NFS staff, along with the support of the NFS Commission is proposing the following allocations and activities for the 2014/15 Annual Action Plan to City Council.

**CDBG Allocations:**

- 1) Street Reconstruction \$240,784;
- 2) Emergency Home Repair \$160,875;
- 3) Revitalization Area and Small Business Assistance \$39,955;
- 4) Youth Services \$39,955;
- 5) Administration \$120,392.

**HOME Allocations:**

- 1) Home Buyer and Substantial Owner-occupied Rehabilitation Assistance \$138,965;
- 2) Administration \$9,264.

**BUDGETARY IMPACT:**

The use of approximately \$148,229 in HOME funds will require a 25% non-federal match from the City of Avondale which will be included in the proposed budget for next fiscal year. This amounts to approximately \$37,057. CDBG funds do not require match.

**RECOMMENDATION:**

This item is for information, discussion and direction.

**ATTACHMENTS:**

Click to download

- [2014-2015 Annual Action Plan Executive Summary](#)

## **2014/2015 Annual Action Plan Executive Summary**

**Purpose of the Plan:** The U.S. Department of Housing and Urban Development (HUD) is expected to allocate approximately \$572,513 in Community Development Block Grant (CDBG) funds to the City of Avondale for Fiscal year 2014/15 which begins on July 1, 2014 and extends through June 30, 2015. To be eligible to receive the funds the City of Avondale must complete this 2014/2015 Annual Action Plan. The 2010-2014 Consolidated Plan identified the housing and community development needs of low-income and special needs persons and prescribed strategies to address them. HUD requires that local governments involve the public in completing their Annual Action Plan which serves as an update to the 5-year Consolidated Plan. Neighborhood and Family Services (NFS) held a public participation process to receive input for the Annual Action Plan. The first public hearing was held on January 15, 2014. The Neighborhood and Family Services Commission's reviewed, provided comment and resolved to recommend the plan on February 26, 2014. Following these forums a draft Annual Action Plan was made available to the public for the required 30-day comment period beginning on March 4, 2014. Data gathered from the public participation process provided the basis for the goals and strategies outlined herein.

**Geographic Allocation and Priorities:** Avondale is targeting its funds to its low-income neighborhoods of Historic Avondale, Cashion, Las Ligas and Rio Vista. Activities identified as priorities are public services for special needs populations, owner occupied housing rehabilitation, increasing homeownership opportunities, investing in economically challenged low-income neighborhoods and businesses and street and infrastructure improvements.

**Evaluation of Past Performance:** In the first four years of the current 5 year planning cycle, the City of Avondale has achieved the following with its CDBG and HOME funds: 1) Owner Occupied Housing Rehabilitation – 40 emergency and 9 substantial projects with additional projects currently underway; 2) Public Improvements to Infrastructure – project construction nearing completion at five streets in Historic Avondale area; and 3) Youth Job Training and Employment Programs – assisted 40 teens with job training, summer jobs and tuition assistance.

**2010-2014 Consolidated Goals and Objectives:** The following table lists the Goals and Objectives in the City of Avondale's 5-Year Consolidated Plan:

**Proposed Allocations and Activities:** Following the Goals and Objectives table, are two proposed budgets. The first budget is based on the prior year funding levels and the second takes into account the possible impact of approximately a 10% reduction in funding levels.

Consolidated Plan Goals and Strategies 2010-2014	
Goal 1: Reduce Lead Based Paint Hazards in Residential Dwellings in Avondale.	Strategy 1.1: Adhere to HUD Lead Safe Housing Rule 24 CFR Part 35 in the conduct of rehabilitation and demolition activities
	Strategy 1.2: Provide information to housing recipients as well as the general public about the hazards of lead based paint.
Goal 2: Preserve the existing affordable housing stock.	Strategy 2.1 Operate a Single-Family Owner-Occupied Housing Rehabilitation Program to conduct emergency and substantial rehabilitation activities using CDBG, HOME and a variety of other funding sources.
	Strategy 2.2 Operate a weatherization program using Maricopa County funding and a variety of other funding sources.
	Strategy 2.3: Incorporate energy and water efficiency standard in rehabilitation and weatherization programs that reduce utility costs.
Goal 3: Support new construction and rehabilitation of affordable rental development	Strategy 3.1: Pursue partnerships with non-profit and for-profit developers to construct and rehabilitate affordable rental housing.
Goal 4 : Increase homeownership	Strategy 4.1: Operate a homebuyer assistance program using HOME and a variety of other funding sources.
	Strategy 4.2: Assist agencies conducting homeownership activities in Avondale.
Goal 5: Affirmatively further fair housing in Avondale	Strategy 5.1: Implement strategies for removing impediments to Fair Housing identified in the Avondale 2010 Analysis to Impediments to Fair Housing.
	Strategy 5.2: Sponsor Fair Housing educational seminars for city staff and housing industry professionals.
	Strategy 5.3: Maintain a page on the City's website that serves as a public resource for identifying violations of fair housing laws and filing fair housing complaints.
	Strategy 5.4: Assist the elderly and persons with disabilities with accessibility improvements to their residences.
Goal 6: Support organizations that assist the City's special needs population.	Strategy 6.1: Support local and regional agencies that provide shelter, housing and support services homeless and those close to becoming homeless.
	Strategy 6.2: Operate programs that assist low-income and special needs populations in Avondale.
	Strategy 6.3: Operate programs to provide education, job training and recreational activities for youth.
Goal 7: Improve public infrastructure and economic conditions in low-income, economically-challenged neighborhoods.	Strategy 7.1: Improve streets, sidewalks, lighting, water, sewer and drainage infrastructure in low- to moderate-income Block Groups.
	Strategy 7.2: Construct and rehabilitate community facilities and parks as necessary to meet the educational, recreational and social needs of low income and special needs citizens.
	Strategy 7.2: Construct and rehabilitate community facilities and parks as necessary to meet the educational, recreational and social needs of low income and special needs citizens.
	Strategy 7.3: Assist businesses in low income neighborhoods with improving their buildings and business plans.

**Proposed Allocation of CDBG and HOME Funds  
Based on Prior Year Allocations  
Annual Action Plan FY 2014-15**

CDBG – approximately \$572,513

Activity	Amount Proposed	Expected Outcomes
Administration	\$114,503	General Admin
Street and Infrastructure Improvements	\$229,005	5 Streets
Emergency Home Repair	\$153,005	Approximately 16 units
Youth Public Services	\$38,000	15-20 youth – Next Step; 30 youth, iSync program; Educ. Assist. program
Revitalization and Small Business Assistance	\$38,000	Small business technical assistance, uniform signage; re-branding to Historic Avondale, loan fund

HOME - Approximately \$131,872

Administration	\$8,242	General Admin
Homebuyer and Substantial Rehabilitation Assistance	\$123,630	5-7 Units

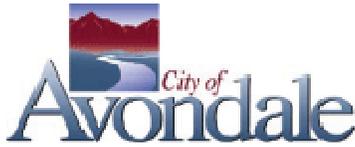
**Proposed Allocation of CDBG and HOME Funds  
Based on 10 % Reduction from Prior Year Funding Levels  
Annual Action Plan FY 2014-15**

CDBG – approximately \$515,261

Activity	Amount Proposed	Expected Outcomes
Administration	\$103,052	General Admin
Street and Infrastructure Improvements	\$206,104	5 Streets
Emergency Home Repair	\$137,705	Approximately 14 – 15 units
Youth Public Services	\$34,200	15-20 youth – Next Step; 30 youth, iSync program; Educ. Assist. program
Revitalization and Small Business Assistance	\$34,200	Small business technical assistance, uniform signage; re-branding to Historic Avondale, loan fund

HOME - Approximately \$118,684

Administration	\$7,417	General Admin
Homebuyer Assistance	\$111,267	4-5 Units



# CITY COUNCIL AGENDA

CITY COUNCIL CHAMBERS . 11465 WEST CIVIC CENTER DRIVE . AVONDALE, AZ 85323

REGULAR MEETING  
April 7, 2014  
7:00 PM

CALL TO ORDER BY MAYOR ROGERS  
PLEDGE OF ALLEGIANCE  
MOMENT OF REFLECTION

**1 ROLL CALL AND STATEMENT OF PARTICIPATION BY THE CITY CLERK**

**2 UNSCHEDULED PUBLIC APPEARANCES**

(Limit three minutes per person. Please state your name.)

**3 CONSENT AGENDA**

Items on the consent agenda are of a routine nature or have been previously studied by the City Council at a work session. They are intended to be acted upon in one motion. Council members may pull items from consent if they would like them considered separately.

**a. APPROVAL OF MINUTES**

1. Work Session of March 17, 2014
2. Regular Meeting of March 17, 2014

**b. APPOINTMENT TO THE AVONDALE JUDICIAL ADVISORY BOARD**

City Council will consider the Council Subcommittee's recommendation for appointment to the Avondale Judicial Advisory Board. The Council will take appropriate action.

**c. SPECIAL EVENT LIQUOR LICENSE - HSA SOFTBALL TOURNAMENT**

City Council will consider a request from Mr. Adam Joseph Maldonado on behalf of Taking the Good Out of People for a special event liquor license to be used in conjunction with an adult softball tournament scheduled for April 12, 2014 at Festival Fields located at 101 E Lower Buckeye in Avondale. The Council will take appropriate action.

**d. LIQUOR LICENSE TEMPORARY EXTENSION OF PREMISES - HILTON GARDEN INN**

City Council will consider a request from Mary Lambert for a temporary extension of premises of a Series 11 Hotel/Motel Liquor License at the Hilton Garden Inn located 11460 W. Hilton Way in Avondale to be used in conjunction with the City's Out and About event on Friday, May 2nd from 6 to 9 pm. The Council will take appropriate action.

**e. SAMPLING LIQUOR LICENSES (9S) - FRY'S FOOD & DRUG STORES #66 AND #112**

City Council will consider two requests from Mr. Robert Joseph Nelson on behalf of Fry's Food & Drug Store #66 located at 10675 Indian School Road and Fry's Food & Drug Store #112 located at 1575 N Dysart Road in Avondale for a Series 9S Liquor License to allow sampling privileges at each store location. The Council will take appropriate action.

**f. LIQUOR LICENSE - SERIES 12 (RESTAURANT) - SMASHBURGER #1393**

City Council will consider a request from Andrea Lewkowitz for a Series12 Restaurant license to sell all spirituous liquors at Smashburger # 1393 located at 9915 West McDowell Road, Suite 101. The Council will take appropriate action.

**g. PURCHASE AND SERVICES AGREEMENT - AMERICAN FUNDING INNOVATORS, INC.**

City Council will consider a request to approve a Purchase and Services Agreement with American Funding Innovators, Inc. to provide a grants management system software solution for a maximum aggregate amount of \$60,000.00 and authorize the Mayor or City Manager and City Clerk to execute the necessary documents. The Council will take appropriate action.

**h. FIRST AMENDMENT TO CONTRACT - THE W.W. WILLIAMS COMPANY**

City Council will consider a request to approve the First Amendment to the contract with W.W. Williams, Inc. for the purchase of a portable 70kVA/56kW generator for use in emergency operation of wastewater collection lift stations in the amount of \$52,231.85 and authorize the Mayor or City Manager and City Clerk to execute the necessary items. The Council will take appropriate action.

**i. SECOND AMENDMENT TO PURCHASE AGREEMENT - 3M COMPANY - TRAFFIC SIGN MATERIALS**

City Council will consider a request to approve the Second Amendment to the Purchase Agreement with 3M Company for the purchase of traffic sign materials for a maximum aggregate amount of \$200,000, and authorize the Mayor, or City Manager and City Clerk to execute the necessary documents. The Council will take appropriate action.

**j. ORDINANCE 1542-414 - AUTHORIZING THE SALE OF PROPERTY**

City Council will consider an ordinance authorizing the sale of approximately 1.24 acres of real property generally located at the northeast corner of Western Avenue and Dysart Road in Historic Avondale and authorizing the Mayor or City Manager and City Clerk to execute all the necessary documents. The Council will take appropriate action.

**4 CONTRIBUTIONS ASSISTANCE PROGRAM AND SUB COMMITTEE APPOINTMENT**

City Council will consider a request to approve the eligibility criteria for the Contributions Assistance Program, appoint a Council Subcommittee to review the applications and recommend funding. The Council will take appropriate action.

**5 PROFESSIONAL SERVICES AGREEMENT - CAROLLO ENGINEERS, INC. - WATER RECLAMATION FACILITY MASTER PLAN**

City Council will consider a request to approve a Professional Services Agreement with Carollo Engineers, Inc. for a Water Reclamation Facility Master Plan in the amount of \$428,341 and authorize the Mayor or City Manager, City Clerk and City Attorney to execute the necessary documents. The Council will take appropriate action.

**6 EXECUTIVE SESSION**

- a. The Council may hold an executive session pursuant to Ariz. Rev. Stat. § 38-431.03 (A)(4) for discussion or consultation with the City Attorney in order to consider its position and instruct the City Attorney regarding negotiations for (i) modifications to the Development Agreement with Gunbo, LLC and (ii) a potential Economic Development Agreement and (iii) pursuant to Ariz. Rev. Stat. § 38-431.03 (A)(1) for discussion regarding process for the appointment of the City Manager.

**7 ADJOURNMENT**

Respectfully submitted,

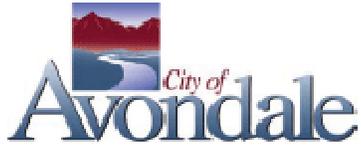
  
Carmen Martinez  
City Clerk

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# CITY COUNCIL REPORT

**SUBJECT:**  
APPROVAL OF MINUTES

**MEETING DATE:**  
April 7, 2014

**TO:** Mayor and Council  
**FROM:** Carmen Martinez, City Clerk (623) 333-1214  
**THROUGH:** David Fitzhugh, Acting City Manager

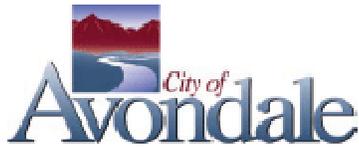
**PURPOSE:**

1. Work Session of March 17, 2014
2. Regular Meeting of March 17, 2014

**ATTACHMENTS:**

[Click to download](#)

No Attachments Available



# CITY COUNCIL REPORT

**SUBJECT:**

Appointment to the Avondale Judicial Advisory Board

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Carmen Martinez, City Clerk (623) 333-1214

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff is recommending approval of the Council Subcommittee's recommendation for appointment to the Avondale Judicial Advisory Board.

**BACKGROUND:**

On October 21, 2013, the City Council established the Judicial Advisory Board to evaluate and recommend to the City Council a list of three of the best qualified applicants for the position of City Judge in cases where there is a vacancy and to evaluate and recommend to the City Council whether a sitting judge should be retained.

Per the ordinance, membership in the Judicial Advisory Board shall include the presiding judge of the Arizona Superior Court for Maricopa County or his designee, an active member of the State Bar Association, an active member of the Maricopa County Bar Association, a municipal court judge and four resident members.

**DISCUSSION:**

On March 4th staff received the names of three nominees from the Arizona State Bar Association. The Council Subcommittee meet with the three candidates during a meet and greet held on Tuesday, March 18th.

The subcommittee is recommending the appointment of Ms. Nonnie L. Shivers to the Avondale Judicial Advisory Board. Per the ordinance, her term will expire on July 1, 2015.

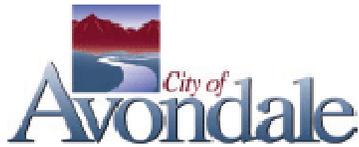
**RECOMMENDATION:**

Staff is recommending approval of the Council Subcommittee's recommendation for appointment of Ms. Nonnie L. Shivers to the Avondale Judicial Advisory Board.

**ATTACHMENTS:**

[Click to download](#)

No Attachments Available



# CITY COUNCIL REPORT

**SUBJECT:**

Special Event Liquor License - HSA Softball  
Tournament

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Carmen Martinez, City Clerk (623) 333-1214

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff is recommending approval of a request from Mr. Adam Joseph Maldonado on behalf of Taking the Good Out of People for a special event liquor license to be used in conjunction with an adult softball tournament scheduled for April 12, 2014 at Festival Fields.

**DISCUSSION:**

The City Clerk's Department has received and application from Mr. Adam Joseph Maldonado on behalf of Taking the Good Out of People for a Special Event Liquor License to be used in conjunction with a softball tournament.

The event is open to the public and will be held at Festival Fields on Saturday, April 12, 2014 from 7:00 am to 10:00 pm; alcohol sales will take place between 10:00 am and 8:00 pm. The required fees have been paid. The Police and Fire Department have reviewed the application and are recommending approval. Their comments are attached.

Staff reviewed the application using the 14 factors set forth in Ordinance 1031-04. The findings are as follows:

1. The event is open to the public
2. A background check of the representative, Mr. Maldonado revealed no contact with the Avondale Police Department
3. The event is a fundraiser.
4. Security measures taken by the applicant - In addition to licensed security, the applicant will hire one off-duty police officer as required by the Avondale Police Department.
5. Beer will be served.
6. Beverages will be dispensed in cans.
7. The event organizer obtained a special event liquor license application last year for a two-day Cinco de Mayo Softball tournament at Festival Fields. The event did not create any disturbances to the surrounding neighborhoods
8. No problems are foreseen for this event in terms or noise, time or length of the event.
9. The event will last 15 hours, but beer will only be sold for 10 hours.
10. Sanitary facilities are available within the park.
11. Zoning designation at this location is Agricultural (AG) and General Industrial (A-1). Development Services staff has indicated that the proposed use will not result in incompatible land uses.
12. Anticipated daily attendance in the liquor area is 80.
13. The event is a softball tournament that will also feature a DJ from a local radio station who will be located away from the alcohol sales area.

14. Per the Police and Engineering Department, no traffic control measures will be necessary as there is ample parking within the park.

**RECOMMENDATION:**

Staff is recommending approval of a request from Mr. Adam Joseph Maldonado on behalf of Taking the Good Out of People for a special event liquor license to be used in conjunction with an adult softball tournament scheduled for Saturday, April 12, 2014 at Festival Fields located at 101 E Lower Buckeye in Avondale.

**ATTACHMENTS:**

Click to download

[Application](#)

[Departmental Review](#)

**ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL**

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



400 W Congress #521  
Tucson AZ 85701-1352  
(520) 628-6595

**APPLICATION FOR SPECIAL EVENT LICENSE**

Fee = \$25.00 per day for 1-10 day events only.  
A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. § 44-6852)

**PLEASE NOTE: THIS DOCUMENT MUST BE FULLY COMPLETED OR IT WILL BE RETURNED.**

**\*\*APPLICATION MUST BE APPROVED BY LOCAL GOVERNMENT**

**DEPT USE ONLY  
LIC#**

1. Name of Organization: TEOP / HSA

2. Non-Profit/I.R.S. Tax Exempt Number: 27-0936747

3. The organization is a: (check one box only)

- Charitable       Fraternal (must have regular membership and in existence for over 5 years)  
 Civic               Political Party, Ballot Measure, or Campaign Committee  
 Religious

4. What is the purpose of this event? Adult softball Tournament.

5. Location of the event: 101 E Lower Buckeye Avenue 85323

Address of physical location (Not P.O. Box)      City      County      Zip

6. Applicant: Maldonado Adam Joseph

7. Applicant's Mailing Address: \_\_\_\_\_

8. Phone Numbers: ( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_

9. Date(s) & Hours of Event: (Remember: you cannot sell alcohol before 10:00 a.m. on Sunday)

	Date	Day of Week	Hours from A.M./P.M.	To A.M./P.M.
Day 1:	<u>4-12-2014</u>	<u>Sat</u>	<u>10 Am</u>	<u>8pm</u>
Day 2:	_____	_____	_____	_____
Day 3:	_____	_____	_____	_____
Day 4:	_____	_____	_____	_____
Day 5:	_____	_____	_____	_____
Day 6:	_____	_____	_____	_____
Day 7:	_____	_____	_____	_____
Day 8:	_____	_____	_____	_____
Day 9:	_____	_____	_____	_____
Day 10:	_____	_____	_____	_____

10. Has the applicant been convicted of a felony in the past five years, or had a liquor license revoked?  
 YES  NO (attach explanation if yes)
11. This organization has been issued a special event license for 1 days this year, including this event  
(not to exceed 10 days per year).
12. Is the organization using the services of a promoter or other person to manage the event?  YES  NO  
If yes, attach a copy of the agreement.
13. List all people and organizations who will receive the proceeds. Account for 100% of the proceeds.  
**THE ORGANIZATION APPLYING MUST RECEIVE 15% of the gross revenues of Alcoholic Beverage Sales.**

Name	Address	Percentage
(Attach additional sheet if necessary)		

14. Knowledge of Arizona State Liquor Laws Title 4 is important to prevent liquor law violations. If you have any questions regarding the law or this application, please contact the Arizona State Department of Liquor Licenses and Control for assistance.

NOTE: ALL ALCOHOLIC BEVERAGE SALES MUST BE FOR CONSUMPTION AT THE EVENT SITE ONLY.  
**"NO ALCOHOLIC BEVERAGES SHALL LEAVE SPECIAL EVENT PREMISES."**

15. What security and control measures will you take to prevent violations of state liquor laws at this event?  
(List type and number of security/police personnel and type of fencing or control barriers if applicable)

1 # Police  Fencing  
2 # Security personnel  Barriers

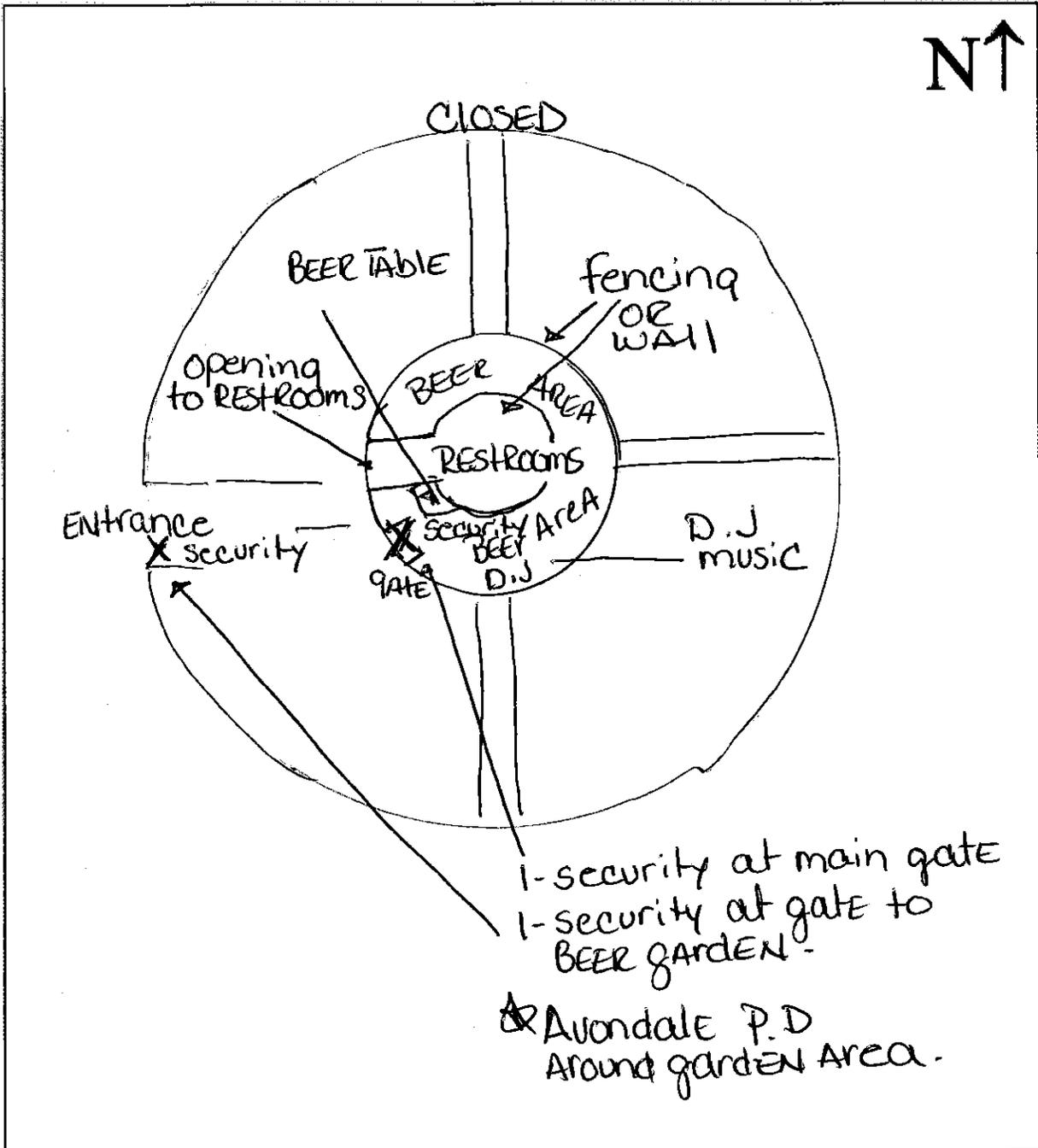
16. Is there an existing liquor license at the location where the special event is being held?  YES  NO  
If yes, does the existing business agree to suspend their liquor license during the time period, and in the area in which the special event license will be in use?  YES  NO  
**(ATTACH COPY OF AGREEMENT)**

\_\_\_\_\_  
Name of Business ( ) Phone Number

17. Your licensed premises is that area in which you are authorized to sell, dispense, or serve spirituous liquors under the provisions of your license. The following page is to be used to prepare a diagram of your special event licensed premises. Please show dimensions, serving areas, fencing, barricades or other control measures and security positions.

**SPECIAL EVENT LICENSED PREMISES DIAGRAM**  
(This diagram must be completed with this application)

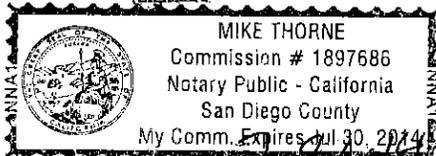
Special Event Diagram: (Show dimensions, serving areas, and label type of enclosure and security positions)  
NOTE: Show nearest cross streets, highway, or road if location doesn't have an address.



**THIS SECTION TO BE COMPLETED ONLY BY AN OFFICER, DIRECTOR OR CHAIRPERSON OF THE ORGANIZATION NAMED IN QUESTION #1**

18. I, Adam Maldonado, declare that I am an Officer/Director/Chairperson appointing the applicant listed in Question 6, to apply on behalf of the foregoing organization for a Special Event Liquor License.

X AMaldonado Chairperson 3.6-14 602-348-1755  
 (Signature) (Title/Position) (Date) (Phone #)



State of California County of Santa Barbara  
 The foregoing instrument was acknowledged before me this 7 March 2014  
 Day Month Year  
 (Signature of NOTARY PUBLIC)

My Commission expires on: 7/30/2014  
 (Date)

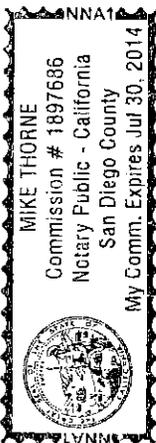
**THIS SECTION TO BE COMPLETED ONLY BY THE APPLICANT NAMED IN QUESTION #6**

19. I, Adam Joseph Maldonado, declare that I am the APPLICANT filing this application as listed in Question 6. I have read the application and the contents and all statements are true, correct and complete.

X ajm  
 (Signature)

State of California County of Santa Barbara  
 The foregoing instrument was acknowledged before me this 7 March 2014  
 Day Month Year  
 (Signature of NOTARY PUBLIC)

My commission expires on: 7/30/2014  
 (Date)



**You must obtain local government approval. City or County MUST recommend event & complete item #20. The local city or county jurisdiction may require additional applications to be completed and additional licensing fees before approval may be granted.**

**LOCAL GOVERNING BODY APPROVAL SECTION**

20. I, \_\_\_\_\_ hereby recommend this special event application  
 (Government Official) (Title)  
 on behalf of \_\_\_\_\_  
 (City, Town or County) (Signature of OFFICIAL) (Date)

**FOR DLLC DEPARTMENT USE ONLY**

Department Comment Section:

\_\_\_\_\_  
 (Employee) (Date)

APPROVED  DISAPPROVED BY: \_\_\_\_\_  
 (Title) (Date)

  
**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

SPECIAL EVENT LIQUOR LICENSE

**ROUTING:**

POLICE DEPARTMENT

FIRE DEPARTMENT

FINANCE DEPARTMENT

DEVELOPMENT SERVICES

---

**APPLICANT'S NAME:** ADAM JOSEPH MALDONADO

**ORGANIZATIONS NAME:** TGOP/HSA

**EVENT ADDRESS:** 101 E. LOWER BUCKEYE

**CITY:** AVONDALE    **STATE:** AZ    **ZIP CODE:** 85323

**PURPOSE OF EVENT:** ADULT SOFTBALL TOURNAMENT

**DEPARTMENTAL COMMENTS:**

APPROVED

DENIED

  
\_\_\_\_\_  
SIGNATURE

*Chief of Police*  
\_\_\_\_\_  
TITLE

*3/19/14*  
\_\_\_\_\_  
DATE

THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: **APRIL 7, 2014**  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: **MARCH 20, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

SPECIAL EVENT LIQUOR LICENSE

**ROUTING:**

POLICE DEPARTMENT

FIRE DEPARTMENT

FINANCE DEPARTMENT

DEVELOPMENT SERVICES

---

**APPLICANT'S NAME:** ADAM JOSEPH MALDONADO

**ORGANIZATIONS NAME:** TGOP/HSA

**EVENT ADDRESS:** 101 E. LOWER BUCKEYE

**CITY:** AVONDALE    **STATE:** AZ    **ZIP CODE:** 85323

**PURPOSE OF EVENT:** ADULT SOFTBALL TOURNAMENT

**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

Jose Y. Doming  
SIGNATURE  
Fire Inspector  
TITLE

3/20/14  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014**  
**PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 20, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

SPECIAL EVENT LIQUOR LICENSE

**ROUTING:**

POLICE DEPARTMENT

FIRE DEPARTMENT

FINANCE DEPARTMENT

DEVELOPMENT SERVICES

---

**APPLICANT'S NAME:** ADAM JOSEPH MALDONADO

**ORGANIZATIONS NAME:** TGOP/HSA

**EVENT ADDRESS:** 101 E. LOWER BUCKEYE

**CITY:** AVONDALE    **STATE:** AZ    **ZIP CODE:** 85323

**PURPOSE OF EVENT:** ADULT SOFTBALL TOURNAMENT

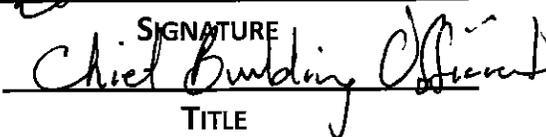
**DEPARTMENTAL COMMENTS:**

APPROVED

DENIED



SIGNATURE



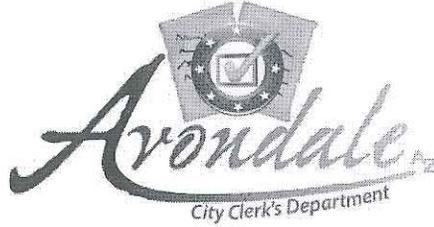
TITLE

3/19/14

DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014**

**PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 20, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

SPECIAL EVENT LIQUOR LICENSE

**ROUTING:**

- POLICE DEPARTMENT
- FIRE DEPARTMENT
- FINANCE DEPARTMENT
- DEVELOPMENT SERVICES

---

**APPLICANT'S NAME:** ADAM JOSEPH MALDONADO

**ORGANIZATIONS NAME:** TGOP/HSA

**EVENT ADDRESS:** 101 E. LOWER BUCKEYE

**CITY:** AVONDALE      **STATE:** AZ      **ZIP CODE:** 85323

**PURPOSE OF EVENT:** ADULT SOFTBALL TOURNAMENT

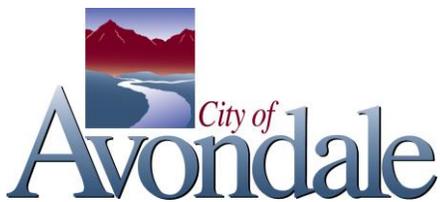
**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

  
\_\_\_\_\_  
SIGNATURE  
*Zoning Specialist*  
\_\_\_\_\_  
TITLE

*3/18/14*  
\_\_\_\_\_  
DATE

THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: **APRIL 7, 2014**  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: **MARCH 20, 2014**



## DEVELOPMENT SERVICES

### MEMORANDUM

---

---

**DATE:** March 18, 2014

**TO:** Carmen Martinez, City Clerk

**PREPARED BY:** Jennifer Fostino, Zoning Specialist 623-333-4022

**SUBJECT:** TGOP/HSA Softball Tournament  
Series 15 Liquor License – Special Event Liquor License  
101 E Lower Buckeye Rd

The site is located on the southeast corner of Central Avenue and Lower Buckeye Road. The building/fields are existing.

A Series 15 Liquor License is exempt from the 300 foot separation requirement from a church, school, or fenced school recreational area.

The General Plan designates the property as Public/Civic. The site is currently zoned Agricultural (AG) and General Industrial (A-1). Park and recreation areas are permitted within the AG zoning district, but is not an allowed use in the A-1 zoning district.

Staff recommends approval of this request.

Attachment: 2013 Aerial Photography  
Zoning Vicinity Map

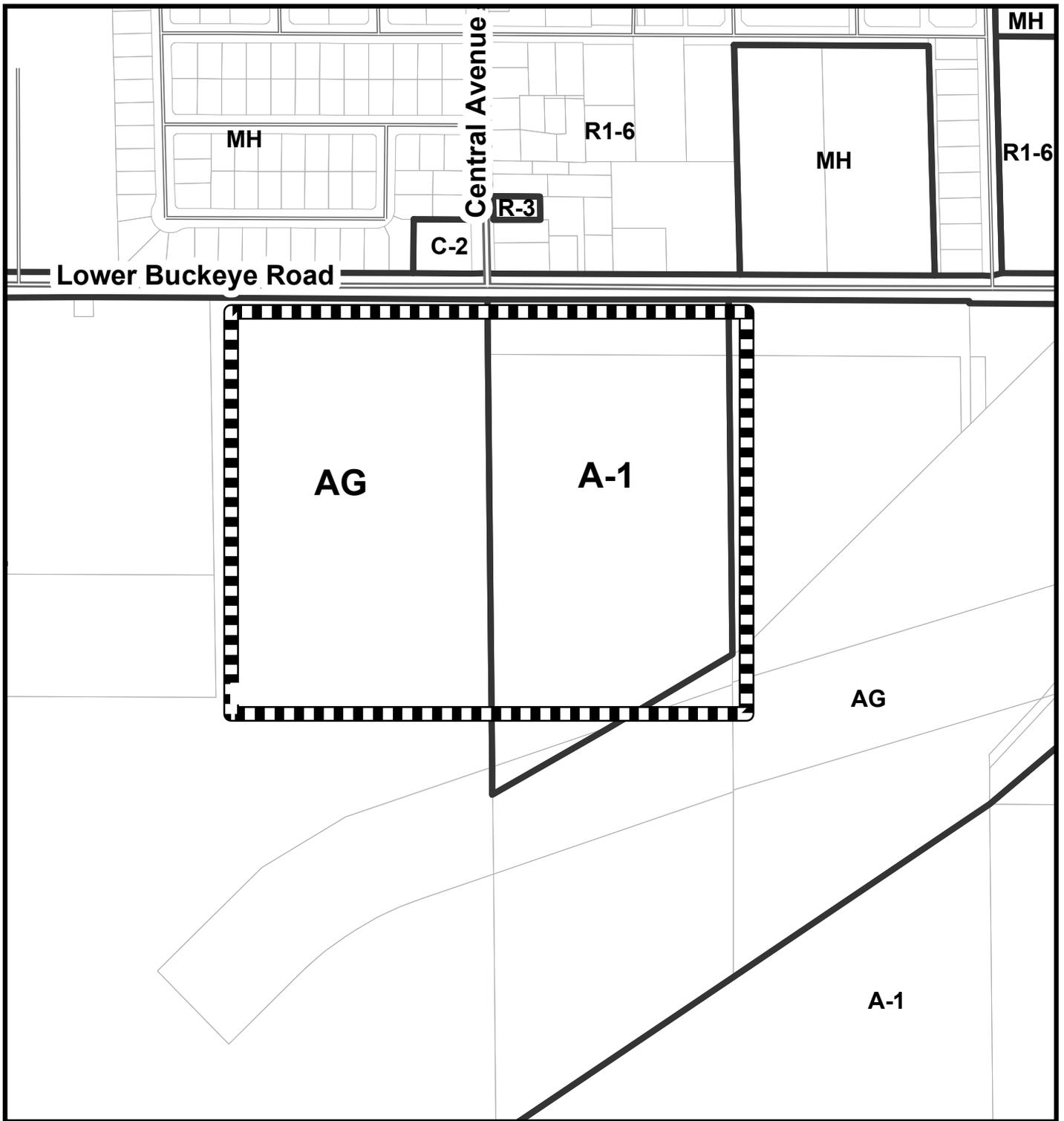


**2013 Aerial Photograph**



**Subject Property**



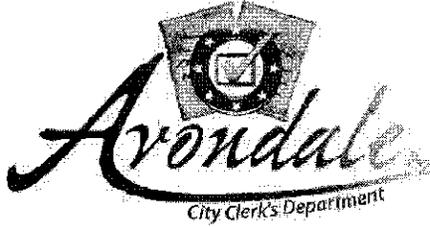


## Zoning Vicinity Map



Subject Property





**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

SPECIAL EVENT LIQUOR LICENSE

**ROUTING:**

POLICE DEPARTMENT

FIRE DEPARTMENT

FINANCE DEPARTMENT

DEVELOPMENT SERVICES

---

**APPLICANT'S NAME:** ADAM JOSEPH MALDONADO

**ORGANIZATIONS NAME:** TGOP/HSA

**EVENT ADDRESS:** 101 E. LOWER BUCKEYE

**CITY:** AVONDALE      **STATE:** AZ      **ZIP CODE:** 85323

**PURPOSE OF EVENT:** ADULT SOFTBALL TOURNAMENT

**DEPARTMENTAL COMMENTS:**

APPROVED

DENIED

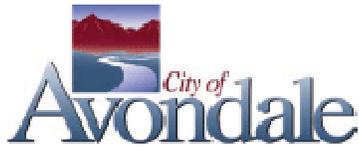
  
SIGNATURE

3/18/14  
DATE

Jay Audit Supervisor  
TITLE

THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014

PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 20, 2014



# CITY COUNCIL REPORT

**SUBJECT:**

Liquor License Temporary Extension of Premises -  
Hilton Garden Inn

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Carmen Martinez, City Clerk (623) 333-1214

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff is recommending approval of a request from Mary Lambert for a temporary extension of premises of a Series 11 Hotel/Motel Liquor License at the Hilton Garden Inn located 11460 W. Hilton Way in Avondale to be used in conjunction with the City's Out and About event on Friday, May 2nd from 6 to 9 pm.

**DISCUSSION:**

Staff has received an application from Mary Lambert for a temporary extension of premises of the Series 11 Hotel/Motel liquor license at Hilton Garden Inn located at 11460 W Hilton Way in Avondale. The extension of premises will be used in conjunction with the City's Out and About event on Friday, May 2nd from 6:00 to 9:00 pm.

This is a city sponsored event that will revolve around the theme of Cinco de Mayo. The event will feature live music and food vendors. Security will provided by private security and Avondale Police Department.

The Police, Fire, Planning and Finance Departments have reviewed the application and have recommended approval by the City Council.

**RECOMMENDATION:**

Staff is recommending approval of a request from Mary Lambert for a temporary extension of premises of a Series 11 Hotel/Motel Liquor License at the Hilton Garden Inn located 11460 W. Hilton Way in Avondale to be used in conjunction with the City's Out and About event on Friday, May 2nd from 6 to 9 pm.

**ATTACHMENTS:**

Click to download

[Application](#)

[Departmental Review](#)

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 05 / 02 / 2014 through 05 / 02 / 2014 List specific purpose for change: Extension of premises permit for Cinco de Mayo event on existing property.

- 1. Licensee's Name: Lambert Mary Louise
2. Mailing Address:
3. Business Name: Hilton Garden Inn LICENSE #: 11073147
4. Business Address: 11460 W Hilton Way, Avondale, Maricopa, Arizona, 85323
5. Business Phone: (623) 882-3351 Residence Phone:
6. Do you understand Arizona Liquor Laws and Regulations? YES NO
7. Have you received approved Liquor Law Training? NO YES If so, when does your Certificate expire? 5 / 21 / 15
8. What security precautions will be taken to prevent liquor violations in the extended area?
9. Does this extension bring your premises within 300 feet of a church or school? YES NO
10. IMPORTANT: ATTACH THE REVISED FLOOR PLAN CLEARLY DEPICTING YOUR LICENSED PREMISES AND WHAT YOU PROPOSE TO ADD.

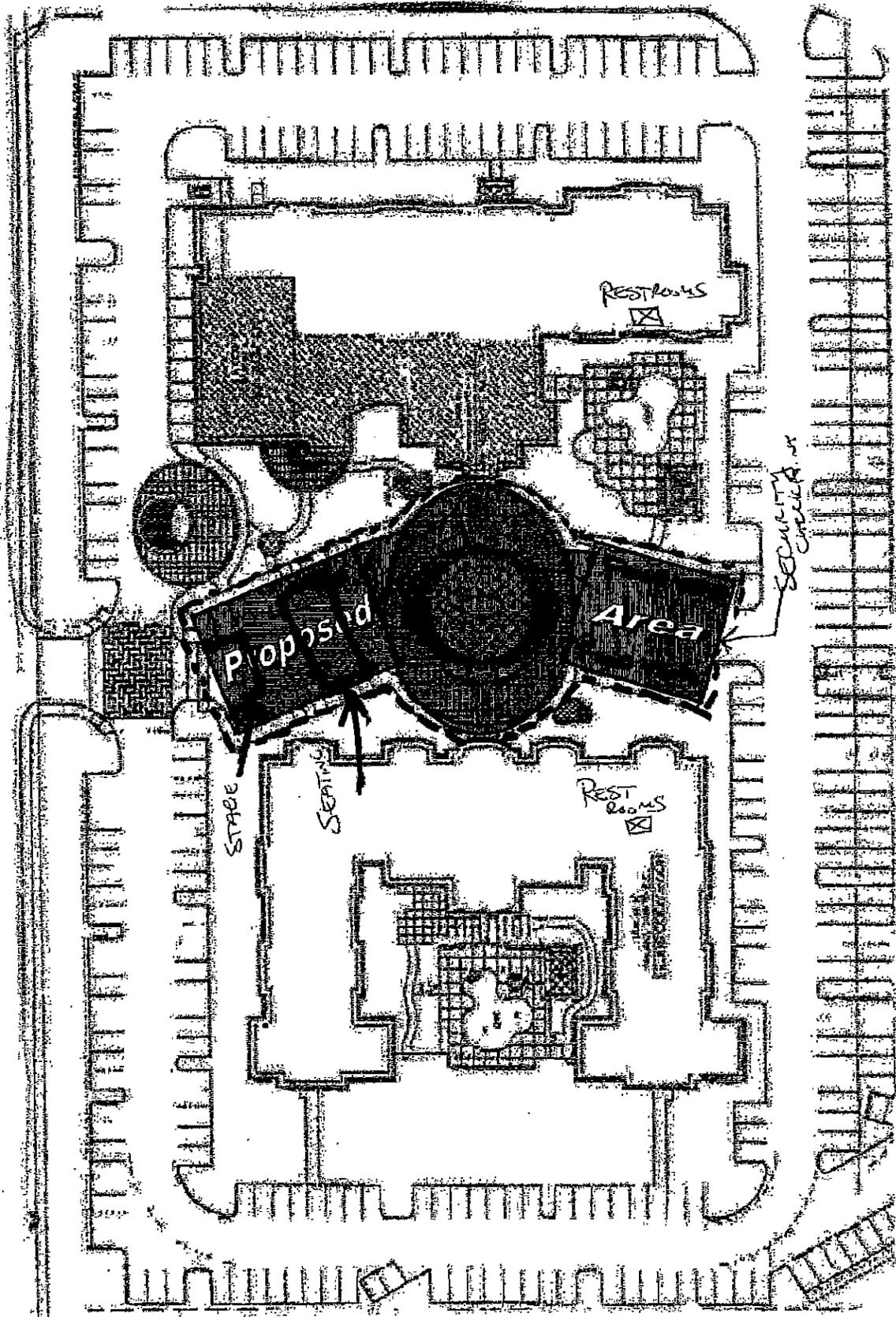
Barrier Exemption: an exception to the requirement of barriers surrounding a patio/outdoor serving area may be requested. Barrier exemptions are granted based on public safety, pedestrian traffic, and other factors unique to a licensed premises. List specific reasons for exemption:
Investigation Recommendation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

\*\*\*\*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, being first duly sworn upon oath, hereby depose, swear and declare, 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.
State of Arizona County of Maricopa
SUBSCRIBED IN MY PRESENCE AND SWORN TO before me this date

(Signature of Owner or Agent)
My commission expires on: 3/9/16
TRACY THOMPSON Notary Public Maricopa, Arizona My Comm. Expires 03-09-16
Day Month Year
Tracy Thompson (Signature of NOTARY PUBLIC)

Investigation Recommendation Approval Disapproval by: Date:
Director Signature required for Disapprovals Date:



Homewood Suites  
 Hilton Garden Inn  
 --- SECURITY CHECKPOINT --- BRIDGES AND SECURITY

Arizona Department of Liquor Licenses and Control  
800 West Washington, 5th Floor  
Phoenix, Arizona 85007  
www.azliquor.gov  
602-542-5147

**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.

Justin Gregory Hudson  
Full Name (please print)

Justin Gregory Hudson  
Signature

5-21-10  
Training Completion Date

5-21-15  
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 checked="" type="checkbox"/> Yes	<input 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

DH Ventures  
Name of Licensee

Hilton Garden Inn  
Business Name  
*Great America Coroll*

11073147  
Liquor License #

**Alcohol Training Program Provider Information**

Discovery Detective Group and Academy  
Company or Individual Name (please print)  
6501 E Greenway Parkway #103-500  
Address

<u>Scottsdale</u>	<u>AZ</u>	<u>85254</u>	<u>(480)</u>	<u>) 951</u>	<u>6545</u>
City	State	Zip	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:

Jacque Bell  
Name of Trainer (please print)

Jacque Bell  
Trainer Signature

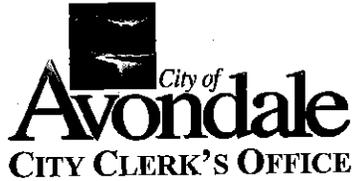
5-21-10  
Date

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.



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

EXTENSION OF PREMISES SERIES

**ROUTING:**

- POLICE DEPARTMENT
- FIRE DEPARTMENT
- DEVELOPMENT SERVICES
- FINANCE

---

**APPLICANT'S NAME: MARY LOUISE LAMBERT**

**BUSINESS NAME: HILTON GARDEN INN**

**ADDRESS: 11460 W. HILTON WAY,**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85323**

**PURPOSE OF EXTENSION: TEMPORARY EXTENSION OF PREMISES FOR CINCO DE MAYO EVENT ON EXISTING PROPERTY**

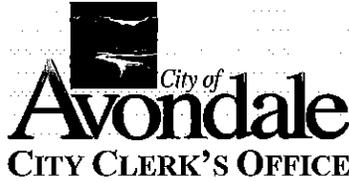
**DEPARTMENTAL COMMENTS:**

- APPROVED  
 DENIED

  
\_\_\_\_\_  
SIGNATURE  
Chief of Police  
\_\_\_\_\_  
TITLE

3/13/14  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 18, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

EXTENSION OF PREMISES SERIES

**ROUTING:**

- POLICE DEPARTMENT
- FIRE DEPARTMENT
- DEVELOPMENT SERVICES
- FINANCE

---

**APPLICANT'S NAME: MARY LOUISE LAMBERT**

**BUSINESS NAME: HILTON GARDEN INN**

**ADDRESS: 11460 W. HILTON WAY,**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85323**

**PURPOSE OF EXTENSION: TEMPORARY EXTENSION OF PREMISES FOR CINCO DE MAYO EVENT ON EXISTING PROPERTY**

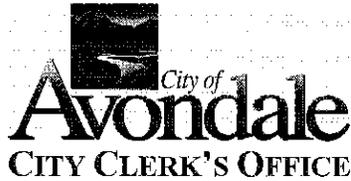
**DEPARTMENTAL COMMENTS:**

- APPROVED  
 DENIED

*Jane Y. Gomez*  
\_\_\_\_\_  
SIGNATURE  
*Fire Inspector*  
\_\_\_\_\_  
TITLE

*3/20/14*  
\_\_\_\_\_  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 18, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

EXTENSION OF PREMISES SERIES

**ROUTING:**

POLICE DEPARTMENT

FIRE DEPARTMENT

DEVELOPMENT SERVICES

FINANCE

---

**APPLICANT'S NAME: MARY LOUISE LAMBERT**

**BUSINESS NAME: HILTON GARDEN INN**

**ADDRESS: 11460 W. HILTON WAY,**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85323**

**PURPOSE OF EXTENSION: TEMPORARY EXTENSION OF PREMISES FOR CINCO DE MAYO EVENT ON EXISTING PROPERTY**

**DEPARTMENTAL COMMENTS:**

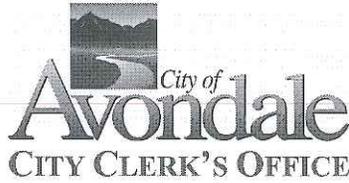
APPROVED

DENIED

  
\_\_\_\_\_  
SIGNATURE  
*Chief Building Official*  
\_\_\_\_\_  
TITLE

*3/12/14*  
\_\_\_\_\_  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 18, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

EXTENSION OF PREMISES SERIES

**ROUTING:**

- POLICE DEPARTMENT
- FIRE DEPARTMENT
- DEVELOPMENT SERVICES
- FINANCE

---

**APPLICANT'S NAME: MARY LOUISE LAMBERT**

**BUSINESS NAME: HILTON GARDEN INN**

**ADDRESS: 11460 W. HILTON WAY,**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85323**

**PURPOSE OF EXTENSION: TEMPORARY EXTENSION OF PREMISES FOR CINCO DE MAYO EVENT ON EXISTING PROPERTY**

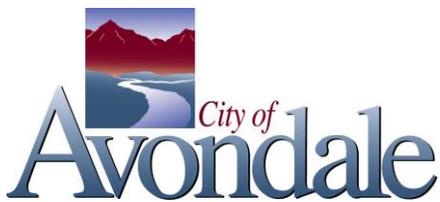
**DEPARTMENTAL COMMENTS:**

- APPROVED
- DENIED

  
\_\_\_\_\_  
SIGNATURE  
Zoning Specialist  
\_\_\_\_\_  
TITLE

3/18/14  
\_\_\_\_\_  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 18, 2014**



## DEVELOPMENT SERVICES

### MEMORANDUM

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**DATE:** March 18, 2014

**TO:** Carmen Martinez, City Clerk

**PREPARED BY:** Jennifer Fostino, Zoning Specialist 623-333-4022

**SUBJECT:** Extension of Premises Series – Cinco de Mayo Event  
Hilton Garden Inn – 11460 W Hilton Way

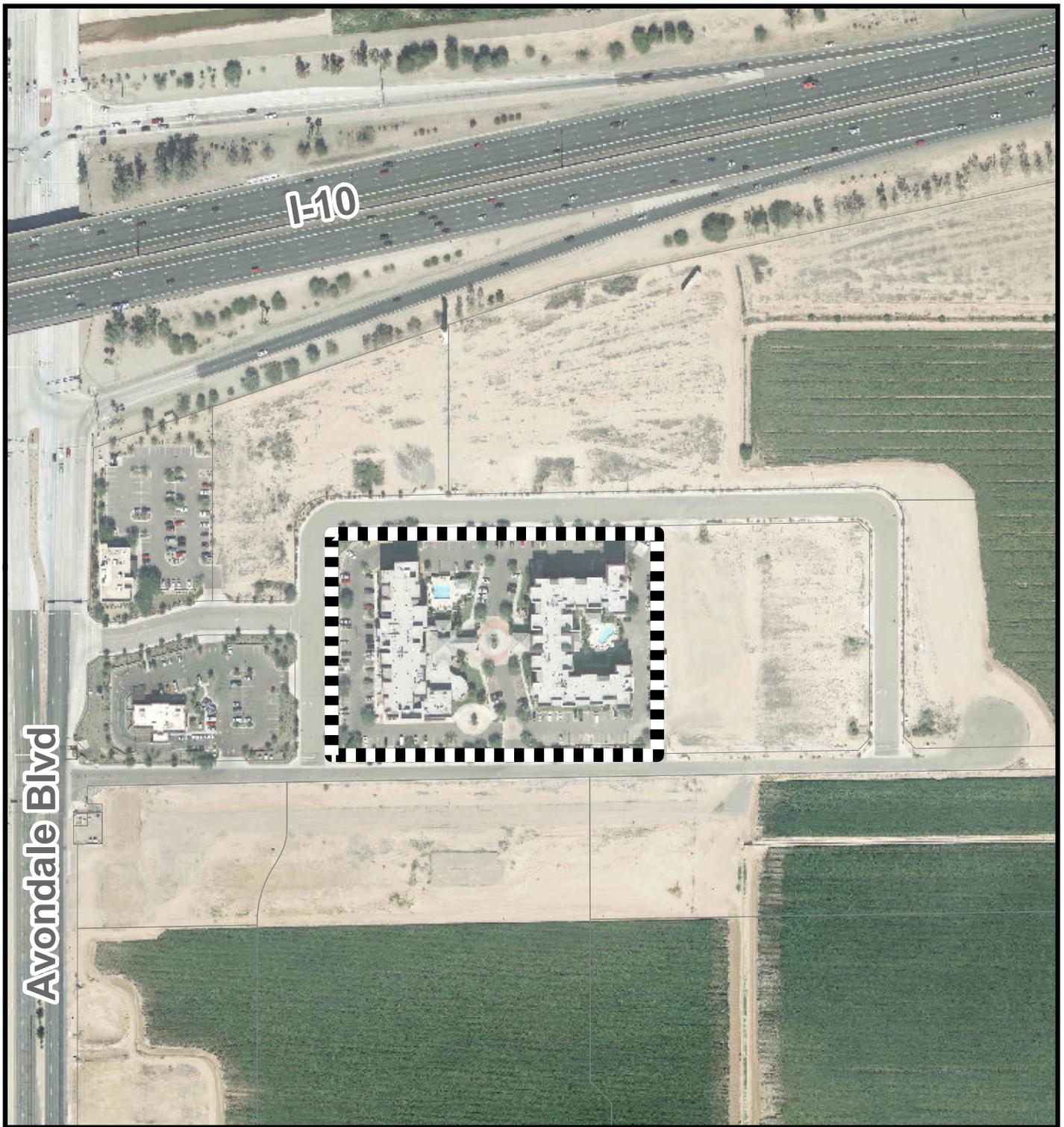
The site is located on the southeast corner of Interstate 10 and Avondale Boulevard. The building is existing.

A temporary extension of premises is exempt from the 300 foot separation requirement from a church, school, or fenced school recreational area.

The General Plan designates the property as Gateway Employment: Retail/Office/Hotel. The site is currently zoned Planned Area Development (PAD). A hotel is a permitted use within the PAD.

Staff recommends approval of this request.

Attachment: 2013 Aerial Photography  
Zoning Vicinity Map

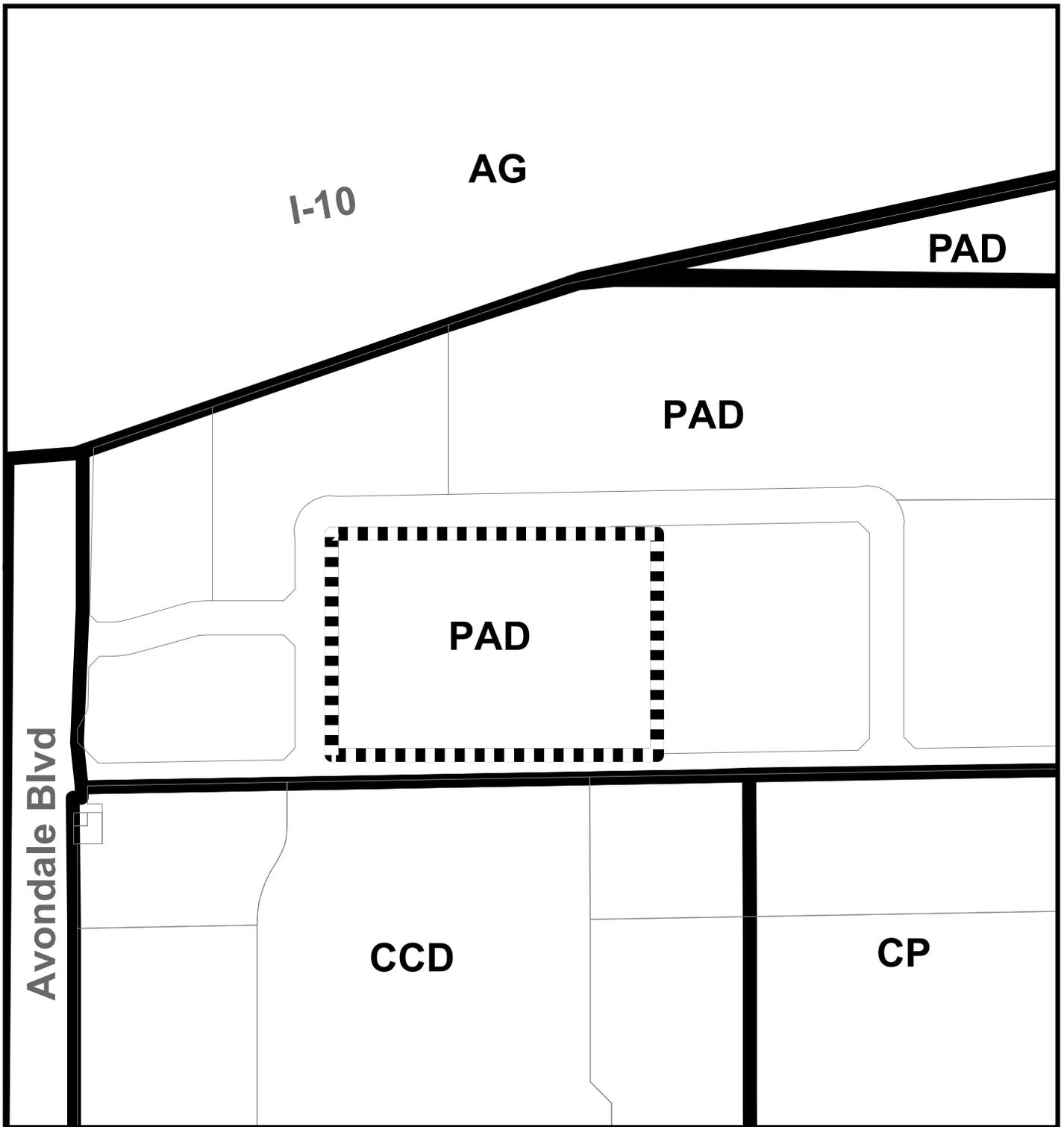


## 2013 Aerial Photograph



Hilton Garden Inn



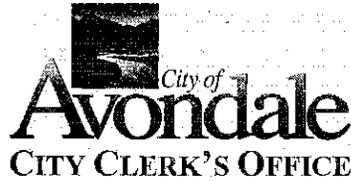


## Zoning Vicinity Map



Hilton Garden Inn





**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

EXTENSION OF PREMISES SERIES

**ROUTING:**

- POLICE DEPARTMENT
- FIRE DEPARTMENT
- DEVELOPMENT SERVICES
- FINANCE

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**APPLICANT'S NAME: MARY LOUISE LAMBERT**

**BUSINESS NAME: HILTON GARDEN INN**

**ADDRESS: 11460 W. HILTON WAY,**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85323**

**PURPOSE OF EXTENSION: TEMPORARY EXTENSION OF PREMISES FOR CINCO DE MAYO EVENT ON EXISTING PROPERTY**

**DEPARTMENTAL COMMENTS:**

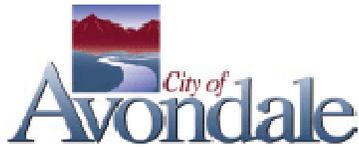
- APPROVED
- DENIED

  
\_\_\_\_\_  
SIGNATURE

3/17/14  
DATE

Tax Audit Supervisor  
TITLE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 18, 2014**



# CITY COUNCIL REPORT

**SUBJECT:**

Sampling Liquor Licenses (9S) - Fry's Food & Drug Stores #66 and #112

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Carmen Martinez, City Clerk (623) 333-1214

**THROUGH:** Charlie McClendon, City Manager

**PURPOSE:**

Staff is recommending approval of two requests from Mr. Robert Joseph Nelson on behalf of Fry's Food & Drug Store #66 located at 10675 Indian School Road and Fry's Food & Drug Store #112 located at 1575 N Dysart Road in Avondale for a Series 9S Liquor License to allow sampling privileges at each store location.

**BACKGROUND:**

A Series 9 Liquor Store License allows the sale of all spirituous liquors in the original unbroken package to be taken off the retailer's premises unopened and be consumed off the premises. A Series 9 Liquor Store License may also obtain sampling privileges subject to the following requirements:

1. Any open product shall be kept locked by the licensee when the sampling area is not staffed.
2. The licensee is otherwise subject to all other provisions of the law. The licensee is liable for any violation of the law committed in connection with the sampling.
3. The licensed retailer shall make sales of sampled products from the licensed retail premises.
4. The licensee shall not charge any customer for the sampling of any products.
5. The sampling shall be conducted under the supervision of an employee of a sponsoring distiller, vintner, brewer, wholesaler or retail licensee.
6. Accurate records of sampling products dispensed shall be retained by the licensee.
7. Sampling shall be limited to three ounces of beer or cooler-type products, one ounce of wine and one ounce of distilled spirits per person, per brand, per day.
8. The sampling shall be conducted only on the licensed premises.

Unlike a Series 9 license, a Series 9S license is not transferable. Upon transfer of a Series 9 License, the new owner of that license must apply for a new Series 9S License if sampling privileges are desired.

**DISCUSSION:**

Staff has received two applications from Mr. Robert Joseph Nelson on behalf of Fry's Food & Drug Stores # 66 and 112 for a Series 9S Liquor License to be used at each of the establishments. Per guidelines issued by the Arizona Department of Liquor Licenses and Control, an application for a Series 9S license should be processed as a new application. Therefore, a notice of Council's intent to consider the request to approve the application was published in the West Valley View on April 1 and 4, 2014 and a copy of each application has been posted at the location for the required minimum 20 days starting March 20, 2014. No comments in favor or against approval of the application have been received.

The Council's recommendation for approval, denial or no recommendation will be forwarded to the Arizona Department of Liquor Licenses and Control for further consideration.

The application has been reviewed by Police, Fire, Development Services and Finance Departments and they are recommending approval of the application. Their comments are attached.

**RECOMMENDATION:**

Staff recommends Council approval of two requests from Mr. Robert Joseph Nelson on behalf of Fry's Food & Drug Store #66 located at 10675 Indian School Road and Fry's Food & Drug Store #112 located at 1575 N Dysart Road in Avondale for a Series 9S Liquor License to allow sampling privileges at each store location.

**ATTACHMENTS:**

**Click to download**

- [Application - Store #66](#)
- [Departmental Review - Store #66](#)
- [Posting Photos - Store #66](#)
- [Vicinity Map - Store #66](#)
- [Application - Store #112](#)
- [Departmental Review - Store #112](#)
- [Posting Photos - Store #112](#)
- [Vicinity Map - Store #112](#)

State of Arizona  
Department of Liquor Licenses and Control

800 W. Washington 5<sup>th</sup> Floor  
Phoenix, Arizona 85007  
(602) 542-5141

**State/Local Government Routing Sheet**  
**Add Sampling Privileges To Active**  
**Liquor Store (series 9) or Beer and Wine Store (series 10) License**

<input checked="" type="checkbox"/> Liquor Store (series 9)
<input type="checkbox"/> Beer and Wine Store (series 10)

The attached form for sampling must be processed within 105 days from this date:

Date Application Received at DLLC: 3/7/2014

Date of 60-days from receipt: 5/6/2014 105-days from receipt: 6/20/2014

If the local governing body has questions regarding the attached sampling form, please call:

DLLC Contact Name: Juanita Esparza

DLLC Contact Phone Number: 602-364-0674 DLLC Contact email: juanita.esparza@azliquor.gov

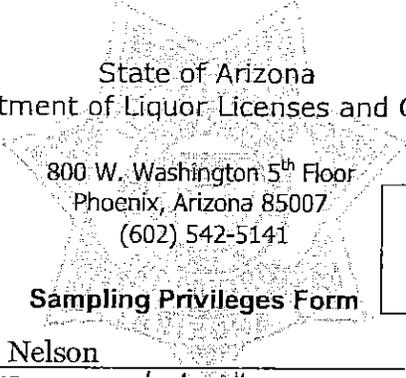
Upon local governing body approval, a new license with a sampling privilege ("S") designation will be issued to this licensee:

For DLLC Use Only	
Current License #: <u>09070642</u>	Date of issuance: <u>12 / 20 / 1999</u>
S License #: _____	Date of issuance: <u>  /  /  </u>
DLLC Contact: <u>Juanita Esparza</u>	DLLC Phone #: <u>602-364-0674</u>

For Local Governing Body Use Only	
Date Receive: _____ / _____ / _____	Date Approved: _____ / _____ / _____
Recommendation: <input type="checkbox"/> Approve <input type="checkbox"/> Protest <input type="checkbox"/> No Recommendation	
I _____, hereby recommend that non-transferrable sampling	
Government Official	
privileges be added to this licensee on behalf of _____	
City, Town or County	
(_____) _____	_____
Phone Number	Email Address

*Arundale, Maricopa*

State of Arizona  
Department of Liquor Licenses and Control



800 W. Washington 5<sup>th</sup> Floor  
Phoenix, Arizona 85007  
(602) 542-5141

Sampling Privileges Form

<input checked="" type="checkbox"/>	Liquor Store (series 9)
<input type="checkbox"/>	Beer and Wine Store (series 10)

Applicant's Name: Robert Joseph Nelson (check one) Owner  Agent

PHN: Public  
Mailing Address:

Street Address or P.O. Box City State County Zip Code

Business Phone Number: (623) 772-0501 Email: N/A

Business Name: Fry's Food & Drug #66 Current License #: 09070642

Physical Location of Business:

10675 W Indian School Rd Avondale AZ Maricopa 85392  
Street Address City State County Zip Code

14 MAR 7 11P. LIC. DIV. 03E

I, Robert Joseph Nelson, understand that, upon approval, sampling privileges for the liquor license identified above will require compliance with the following:

Initial Here

*[Handwritten signature]*

1. the premises shall contain at least five thousand square feet to be eligible for sampling privileges for Beer and Wine Store (series 10) applicants only (A.R.S. §4-206.01(J)).
2. Any open product shall be kept locked by the licensee when the sampling area is not staffed.
3. The licensee is otherwise subject to all other provisions of this title. The licensee is liable for any violation of this title committed in connection with the sampling.
4. The licensed retailer shall make sales of sampled products from the licensed retail premises.
5. The licensee shall not charge any customer for the sampling of any products.
6. The sampling shall be conducted under the supervision of an employee of a sponsoring distiller, vintner, brewer, wholesaler or retail licensee.
7. Accurate records of sampling products dispensed shall be retained by the licensee.
8. Sampling shall be limited to three ounces of beer or cooler-type products, one ounce of wine and one ounce of distilled spirits per person, per brand, per day.
9. The sampling shall be conducted only on the licensed premises.
10. Upon approval of this form, a license for a liquor store with sampling privileges (series 9S) or a beer and wine store with sampling privileges (series 10S) will be issued and mailed to the licensee's address of record. The license must be displayed in a conspicuous public area of the licensed premises that is readily accessible for inspection by any peace officer, distributor, wholesaler or member of the public. (A.R.S. §4-261.01)

11. Liquor store license sampling privileges are not transferable.
12. I have read, understand, and assume responsibility for compliance with A.R.S. §4-206.01.

**A.R.S. §4-206.01. Bar, beer and wine bar or liquor store licenses; number permitted; fee; sampling privileges**

1. Any open product shall be kept locked by the licensee when the sampling area is not staffed.
2. The licensee is otherwise subject to all other provisions of this title. The licensee is liable for any violation of this title committed in connection with the sampling.
3. The licensed retailer shall make sales of sampled products from the licensed retail premises.
4. The licensee shall not charge any customer for the sampling of any products.
5. The sampling shall be conducted under the supervision of an employee of a sponsoring distiller, vintner, brewer, wholesaler or retail licensee.
6. Accurate records of sampling products dispensed shall be retained by the licensee.
7. Sampling shall be limited to three ounces of beer or cooler-type products, one ounce of wine and one ounce of distilled spirits per person, per brand, per day.
8. The sampling shall be conducted only on the licensed premises.

I, Robert Joseph Nelson, attest that I am the OWNER/AGENT filing this form, that I have read, and assume responsibility for compliance with, A.R.S. §4-206.01 at the licensed establishment named on page 1, and verify all statements I have made on this document to be true, correct and complete. I understand that I am responsible for the \$100 issuance fee and the annual \$ 60 renewal fee for these sampling privileges. Sampling privilege renewal fees are due at the same time as the renewal for the "current license #" identified on page 1 of this application.

Signature: [Handwritten Signature] Title: Director of Ops Date: 02/13/14

14 MAR 7 11:41 AM LIC. #11058

**Notarized Signature**

The forgoing instrument was acknowledged before me this 13 of Feb, 2014.  
day month year

Notary Public: Melissa S. Kurtz  
Signature

My commission expires: 10 Aug 2017.  
day month year

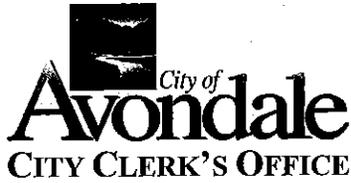


**For DLLC Use Only**

S License #: \_\_\_\_\_ Date of issuance: \_\_\_\_/\_\_\_\_/\_\_\_\_

Issuance fee applicable?  Yes  No  \$100 issuance fee collected

Initials: [Handwritten Initials]



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

LIQUOR STORE W/SAMPLING PRIVILEGES-  
SERIES 9S

**ROUTING:**

- POLICE DEPARTMENT
- FIRE DEPARTMENT
- DEVELOPMENT SERVICES
- FINANCE

---

**APPLICANT'S NAME: ROBERT JOSEPH NELSON**

**BUSINESS NAME: FRY'S FOOD & DRUG #66**

**ADDRESS: 10675 W. INDIAN SCHOOL RD.**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85392**

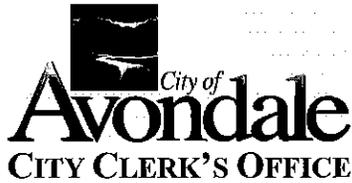
**DEPARTMENTAL COMMENTS:**

- APPROVED  
 DENIED

  
\_\_\_\_\_  
SIGNATURE  
*Chief of Police*  
\_\_\_\_\_  
TITLE

*3/17/14*  
\_\_\_\_\_  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 24, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

LIQUOR STORE W/SAMPLING PRIVILEGES-  
SERIES 9S

**ROUTING:**

POLICE DEPARTMENT  
 FIRE DEPARTMENT  
 DEVELOPMENT SERVICES  
 FINANCE

---

**APPLICANT'S NAME: ROBERT JOSEPH NELSON**

**BUSINESS NAME: FRY'S FOOD & DRUG #66**

**ADDRESS: 10675 W. INDIAN SCHOOL RD.**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85392**

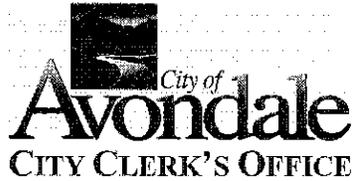
**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

Valorie Russell  
SIGNATURE  
Fire Inspector  
TITLE

3/14/14  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 24, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

LIQUOR STORE W/SAMPLING PRIVILEGES-  
SERIES 9S

**ROUTING:**

POLICE DEPARTMENT  
 FIRE DEPARTMENT  
 DEVELOPMENT SERVICES  
 FINANCE

---

**APPLICANT'S NAME: ROBERT JOSEPH NELSON**

**BUSINESS NAME: FRY'S FOOD & DRUG #66**

**ADDRESS: 10675 W. INDIAN SCHOOL RD.**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85392**

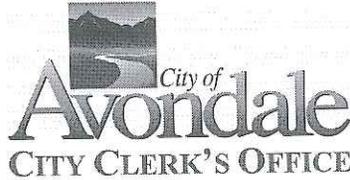
**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

  
\_\_\_\_\_  
SIGNATURE  
*Chief Building Officer*  
\_\_\_\_\_  
TITLE

*3/17/14*  
\_\_\_\_\_  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 24, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

LIQUOR STORE W/SAMPLING PRIVILEGES-  
SERIES 9S

**ROUTING:**

- POLICE DEPARTMENT
- FIRE DEPARTMENT
- DEVELOPMENT SERVICES
- FINANCE

---

**APPLICANT'S NAME: ROBERT JOSEPH NELSON**

**BUSINESS NAME: FRY'S FOOD & DRUG #66**

**ADDRESS: 10675 W. INDIAN SCHOOL RD.**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85392**

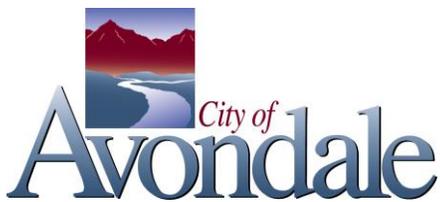
**DEPARTMENTAL COMMENTS:**

- APPROVED
- DENIED

*Henry Fox A*  
SIGNATURE  
*Zoning Specialist*  
TITLE

*3/18/14*  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 24, 2014**



## DEVELOPMENT SERVICES

### MEMORANDUM

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**DATE:** March 18, 2014

**TO:** Carmen Martinez, City Clerk

**PREPARED BY:** Jennifer Fostino, Zoning Specialist (623) 333-4022

**SUBJECT:** Series 9S Liquor License – Sampling Privileges  
Fry's Food & Drug #66  
10675 W Indian School Rd

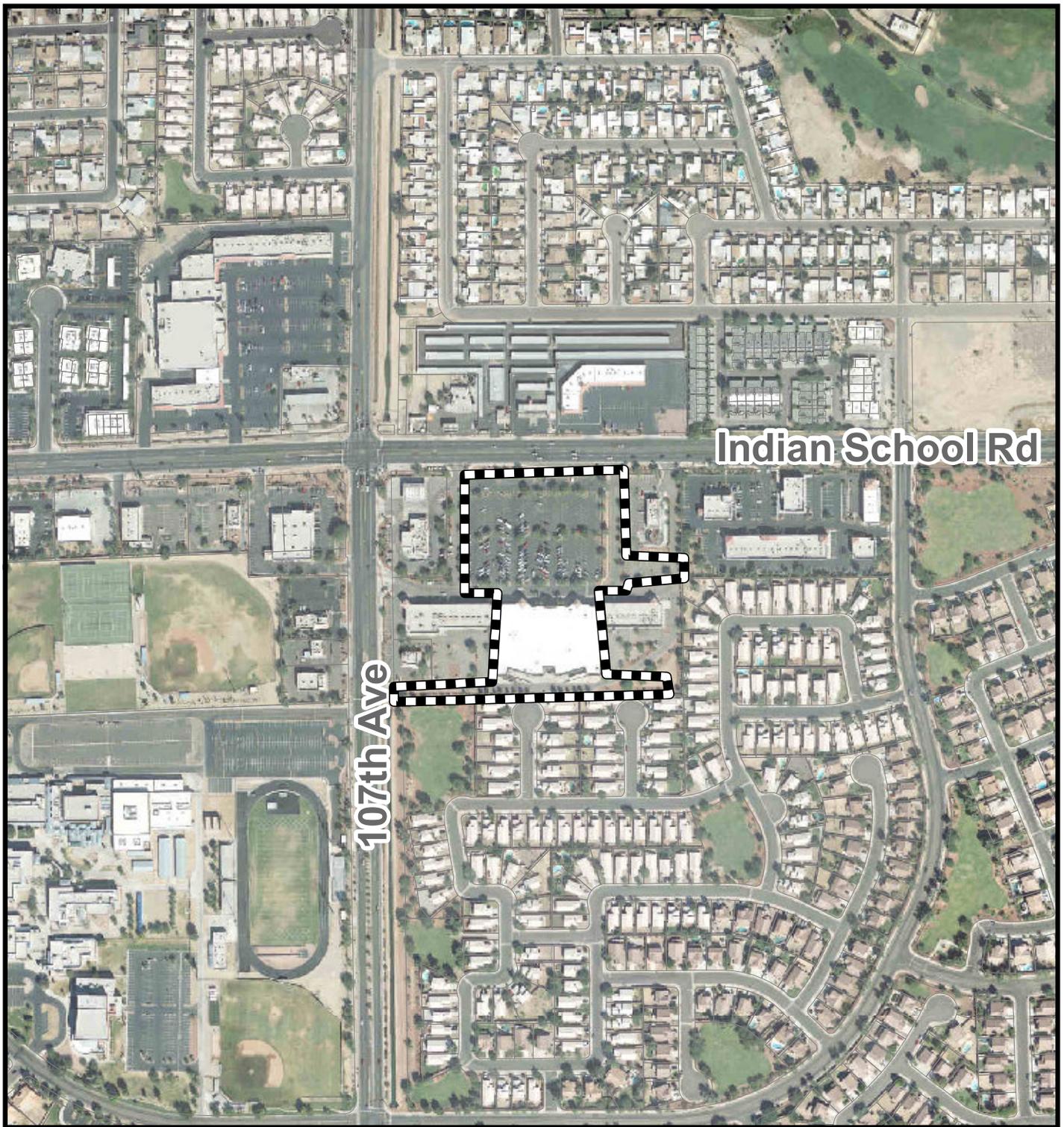
The site is located east of the southeast corner of 107<sup>th</sup> Avenue and Indian School Road. The building is existing.

A Series 9S is exempt from the 300 foot separation requirement from a church, school, or fenced school recreational area.

The General Plan designates the property as Local Commercial. The property is zoned Planned Area Development (PAD). A grocery store is a permitted within the PAD.

Staff recommends approval of this request.

Attachment: 2013 Aerial Photo  
Zoning Vicinity Map

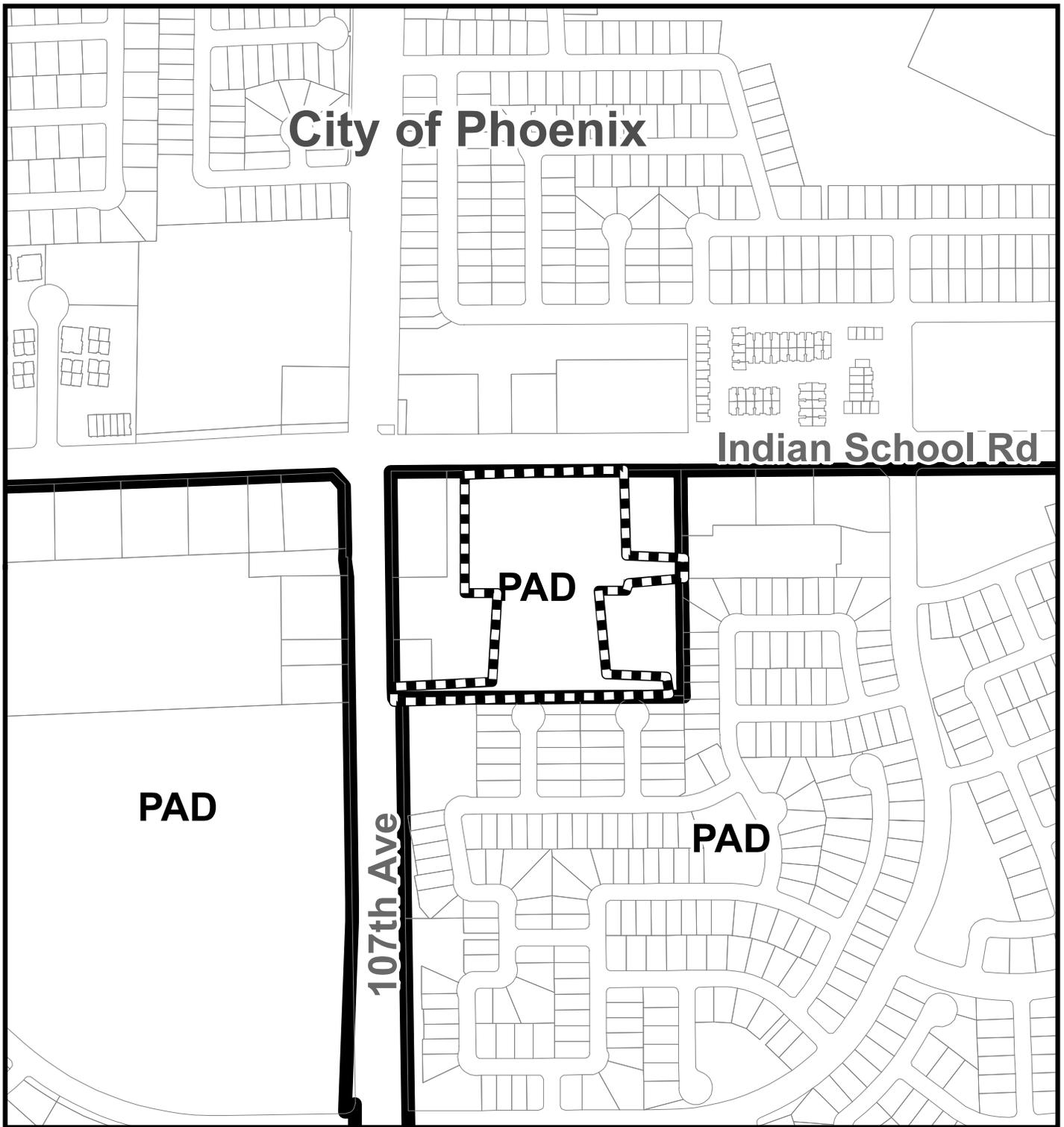


## 2013 Aerial Photograph



Fry's Food & Drug #66



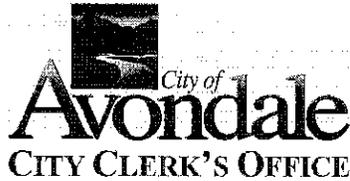


## Zoning Vicinity Map



Fry's Food & Drug #66





**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

LIQUOR STORE W/SAMPLING PRIVILEGES-  
SERIES 9S

**ROUTING:**

POLICE DEPARTMENT  
 FIRE DEPARTMENT  
 DEVELOPMENT SERVICES  
 FINANCE

---

**APPLICANT'S NAME: ROBERT JOSEPH NELSON**

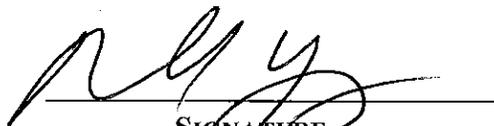
**BUSINESS NAME: FRY'S FOOD & DRUG #66**

**ADDRESS: 10675 W. INDIAN SCHOOL RD.**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85392**

**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

  
\_\_\_\_\_  
SIGNATURE  
*Tax Audit Supervisor*  
\_\_\_\_\_  
TITLE

*3/17/14*  
\_\_\_\_\_  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 24, 2014**

# NOTICE

APPLICATION TO SELL ALCOHOLIC BEVERAGES  
DATE POSTED: MARCH 17, 2014

A HEARING ON A LIQUOR LICENSE APPLICATION  
SHALL BE HELD BEFORE THE AVONDALE CITY COUNCIL

LOCATION: 11465 WEST CIVIC CENTER DRIVE  
DATE: MONDAY, APRIL 7, 2014  
AT 7:00 PM.

(HEARING DATES SUBJECT TO CHANGE,  
TO VERIFY CALL: 623-333-1200)

**\*\*SERIES 09S: LIQUOR STORE LICENSE WITH  
SAMPLING PRIVILEGES\*\***

THE LOCAL GOVERNING BODY WILL RECOMMEND TO THE STATE LIQUOR BOARD  
WHETHER THE BOARD SHOULD GRANT OR DENY THE LICENSE. THE STATE LIQUOR  
BOARD MAY HOLD A HEARING TO CONSIDER THE RECOMMENDATION OF THE LOCAL  
GOVERNING BODY. ANY PERSON RESIDING OR OWNING OR LEASING PROPERTY  
WITHIN A ONE-MILE RADIUS MAY CONTACT THE STATE LIQUOR BOARD IN WRITING  
TO REGISTER AS A PROTESTER. TO REQUEST INFORMATION REGARDING PROCEDURE  
S BEFORE THE BOARD AND NOTICE OF ANY BOARD HEARINGS REGARDING:

**Fry's Food & Drug #66**  
**10675 W. Indian School**  
**Avondale, AZ. 85392**

THIS APPLICATION, CONTACT: STATE LIQUOR BOARD - 800 W. WASHINGTON, 5TH  
FLOOR, PHOENIX, AZ 85007 STATE LIQUOR DEPT: (602) 542-9789  
INDIVIDUALS REQUIRING ADA ACCOMMODATIONS CALL THE  
CITY CLERK AT: 623-333-1200.

State of Arizona  
Department of Liquor Licenses and Control  
800 W. Washington 5th Floor  
Phoenix, Arizona 85007  
(602) 542-9789

State/Local Government Routing Sheet  
Add Sampling Privileges To Active  
Liquor Store (series 9) or Beer and Wine Store (series 10) License

Liquor Store (series 9)  
 Beer and Wine Store (series 10)

The attached form for sampling must be processed within 105 days from this date:

Date Application Received at DLLC: 3/7/2014

Date of 60-days from receipt: 5/1/2014

105-days from receipt: 4/20/2014

If the local governing body has questions regarding the attached sampling form, please call:

DLLC Contact Name: Juanita Esparza

DLLC Contact Phone Number: 602-544-0474

DLLC Contact email: juanita.esparza@azdhs.gov

Upon local governing body approval, a new license with a sampling privilege ("S") designation will be issued to this licensee.

For DLLC Use Only

Current License #: 0967642

Date of issuance: 12/20/1988

S License #:

Date of issuance: / /

DLLC Contact: Juanita Esparza

DLLC Phone #: 602-544-0474

For Local Governing Body Use Only

Date Received: / /

Date Approved: / /

Recommendation:  Approve  Protest  No Recommendation

I, \_\_\_\_\_, hereby recommend that non-transferable sampling

privileges be added to this license on behalf of \_\_\_\_\_  
City, Town or County

February 2013

Avondale, Maricopa



Bakery-DeB

35¢  
BigK  
LUNCH

29

AT THE STORE  
WE HAVE  
A GREAT  
SALE



**FRY'S FOOD & DRUG**  
**10675 W INDIAN SCHOOL RD**  
**#66**  
**1 Mile Buffer**

**Legend**

**PLACES OF WORSHIP**

- CHURCH

**Liquor License**

- SERIES 5
- SERIES 6
- SERIES 7
- SERIES 9
- SERIES 9S
- SERIES 10
- SERIES 11
- SERIES 12
- SERIES 15
- SERIES 16
- SCHOOLS



State of Arizona  
Department of Liquor Licenses and Control

800 W. Washington 5<sup>th</sup> Floor  
Phoenix, Arizona 85007  
(602) 542-5141

**State/Local Government Routing Sheet**  
**Add Sampling Privileges To Active**  
**Liquor Store (series 9) or Beer and Wine Store (series 10) License**

Liquor Store (series 9)  
 Beer and Wine Store (series 10)

The attached form for sampling must be processed within 105 days from this date:

Date Application Received at DLLC: 3/7/2014

Date of 60-days from receipt: 5/6/2014 105-days from receipt: 6/20/2014

If the local governing body has questions regarding the attached sampling form, please call:

DLLC Contact Name: Juanita Esparza

DLLC Contact Phone Number: 602-364-0674 DLLC Contact email: juanita.esparza@azliquor.gov

Upon local governing body approval, a new license with a sampling privilege ("S") designation will be issued to this licensee:

For DLLC Use Only

Current License #: 09070337 Date of issuance: 1 / 20 / 1989

S License #: \_\_\_\_\_ Date of issuance: \_\_\_\_\_

DLLC Contact: Juanita Esparza DLLC Phone #: 602-364-0674

For Local Governing Body Use Only

Date Receive: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Approved: \_\_\_\_/\_\_\_\_/\_\_\_\_

Recommendation:  Approve  Protest  No Recommendation

I \_\_\_\_\_, hereby recommend that non-transferrable sampling  
Government Official

privileges be added to this licensee on behalf of \_\_\_\_\_  
City, Town or County

(\_\_\_\_) \_\_\_\_\_  
Phone Number Email Address

*Arundale, Maricopa*

**SEE  
AMENDMENT**

State of Arizona  
Department of Liquor Licenses and Control

800 W. Washington 5<sup>th</sup> Floor  
Phoenix, Arizona 85007  
(602) 542-5141

**Sampling Privileges Form**

<input checked="" type="checkbox"/>	Liquor Store (series 9)
<input type="checkbox"/>	Beer and Wine Store (series 10)

Applicant's Name: Robert Joseph Nelson

(check one) Owner  Agent

*Att. Bus. Lic.*

Mailing Address: \_\_\_\_\_  
Street Address or P.O. Box City State County Zip Code

Business Phone Number: (623) 925-0267 Email: N/A

Business Name: Fry's Food & Drug #112 Current License #: 09070337

Physical Location of Business:

1571 N Dysart Rd Avondale AZ Maricopa 85323  
Street Address City State County Zip Code

I, Robert Joseph Nelson, understand that, upon approval, sampling privileges for the liquor license identified above will require compliance with the following:

Initial/Here

*[Handwritten signature/initials]*

1. the premises shall contain at least five thousand square feet to be eligible for sampling privileges for Beer and Wine Store (series 10) applicants only (A.R.S. §4-206.01(J)).
2. Any open product shall be kept locked by the licensee when the sampling area is not staffed.
3. The licensee is otherwise subject to all other provisions of this title. The licensee is liable for any violation of this title committed in connection with the sampling.
4. The licensed retailer shall make sales of sampled products from the licensed retail premises.
5. The licensee shall not charge any customer for the sampling of any products.
6. The sampling shall be conducted under the supervision of an employee of a sponsoring distiller, vintner, brewer, wholesaler or retail licensee.
7. Accurate records of sampling products dispensed shall be retained by the licensee.
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9. The sampling shall be conducted only on the licensed premises.
10. Upon approval of this form, a license for a liquor store with sampling privileges (series 9S) or a beer and wine store with sampling privileges (series 10S) will be issued and mailed to the licensee's address of record. The license must be displayed in a conspicuous public area of the licensed premises that is readily accessible for inspection by any peace officer, distributor, wholesaler or member of the public. (A.R.S. §4-261.01)

24 APR 7 2 09 PM '12  
Att. Bus. Lic. #11032

State of Arizona  
Department of Liquor Licenses and Control

800 W. Washington 5<sup>th</sup> Floor  
Phoenix, Arizona 85007  
(602) 542-5141

Sampling Privileges Form

- Liquor Store (series 9)  
 Beer and Wine Store (series 10)

Applicant's Name: \_\_\_\_\_ (check one) Owner  Agent

Mailing Address: \_\_\_\_\_  
Street Address or P.O. Box City State County Zip Code

Business Phone Number: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Business Name: Fry's Food & Drug #112 Current License #: \_\_\_\_\_

Physical Location of Business:  
1575 N. Dysart Rd. Avondale AZ Maricopa 85323  
Street Address City State County Zip Code

I, \_\_\_\_\_, understand that, upon approval, sampling privileges for the liquor license identified above will require compliance with the following:

Initial Here

- \_\_\_\_\_ 1. the premises shall contain at least five thousand square feet to be eligible for sampling privileges for Beer and Wine Store (series 10) applicants only (A.R.S. §4-206.01(J)).
- \_\_\_\_\_ 2. Any open product shall be kept locked by the licensee when the sampling area is not staffed.
- \_\_\_\_\_ 3. The licensee is otherwise subject to all other provisions of this title. The licensee is liable for any violation of this title committed in connection with the sampling.
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- \_\_\_\_\_ 5. The licensee shall not charge any customer for the sampling of any products.
- \_\_\_\_\_ 6. The sampling shall be conducted under the supervision of an employee of a sponsoring distiller, vintner, brewer, wholesaler or retail licensee.
- \_\_\_\_\_ 7. Accurate records of sampling products dispensed shall be retained by the licensee.
- \_\_\_\_\_ 8. Sampling shall be limited to three ounces of beer or cooler-type products, one and one-half ounce of wine and one ounce of distilled spirits per person, per brand, per day.
- \_\_\_\_\_ 9. The sampling shall be conducted only on the licensed premises.
- \_\_\_\_\_ 10. Upon approval of this form, a license for a liquor store with sampling privileges (series 9S) or a beer and wine store with sampling privileges (series 10S) will be issued and mailed to the licensee's address of record. The license must be displayed in a conspicuous public area of the licensed premises that is readily accessible for inspection by any peace officer, distributor, wholesaler or member of the public. (A.R.S. §4-261.01)

14 MAR 10 09:11 AM '09

AMENDMENT

11

- 1. Liquor store license sampling privileges are not transferable.
- 12. I have read, understand, and assume responsibility for compliance with A.R.S. §4-206.01.

**A.R.S. §4-206.01. Bar, beer and wine bar or liquor store licenses; number permitted; fee; sampling privileges**

- 1. Any open product shall be kept locked by the licensee when the sampling area is not staffed.
- 2. The licensee is otherwise subject to all other provisions of this title. The licensee is liable for any violation of this title committed in connection with the sampling.
- 3. The licensed retailer shall make sales of sampled products from the licensed retail premises.
- 4. The licensee shall not charge any customer for the sampling of any products.
- 5. The sampling shall be conducted under the supervision of an employee of a sponsoring distiller, vintner, brewer, wholesaler or retail licensee.
- 6. Accurate records of sampling products dispensed shall be retained by the licensee.
- 7. Sampling shall be limited to three ounces of beer or cooler-type products, one ounce of wine and one ounce of distilled spirits per person, per brand, per day.
- 8. The sampling shall be conducted only on the licensed premises.

I, Robert Joseph Nelson, attest that I am the OWNER/AGENT filing this form, that I have read, and assume responsibility for compliance with, A.R.S. §4-206.01 at the licensed establishment named on page 1, and verify all statements I have made on this document to be true, correct and complete. I understand that I am responsible for the \$100 issuance fee and the annual \$ 60 renewal fee for these sampling privileges. Sampling privilege renewal fees are due at the same time as the renewal for the "current license #" identified on page 1 of this application.

Signature: [Handwritten Signature] Title: Director of Ops Date: 2/19/14

14 MAR 7 4 49 PM '14

Notarized Signature

The forgoing instrument was acknowledged before me this 19 of Feb, 2014.  
day month year

Notary Public: Melissa S. Kurtz  
Signature

My commission expires: 10 Aug 2017  
day month year

OFFICIAL SEAL

MELISSA S. KURTZ

Notary Public - State of Arizona

MARICOPA COUNTY

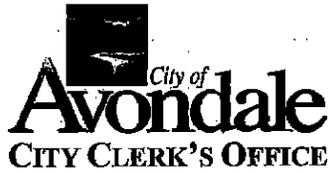
My Comm. Expires Aug. 10, 2017

For DLLC Use Only

S License #: \_\_\_\_\_ Date of issuance: \_\_\_\_/\_\_\_\_/\_\_\_\_

Issuance fee applicable?  Yes  No  \$100 issuance fee collected

Initials: [Handwritten Initials]



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

LIQUOR STORE W/SAMPLING PRIVILEGES-  
SERIES 9S

**ROUTING:**

- POLICE DEPARTMENT  
 FIRE DEPARTMENT  
 DEVELOPMENT SERVICES  
 FINANCE

---

**APPLICANT'S NAME: ROBERT JOSEPH NELSON**

**BUSINESS NAME: FRY'S FOOD & DRUG #112**

**ADDRESS: 1571 N. DYSART ROAD (SEE APP.AMENDMENT-1575 N. DYSART RD.)**

**CITY: AVONDALE STATE: AZ ZIP CODE: 85323**

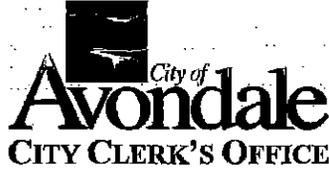
**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

  
\_\_\_\_\_  
SIGNATURE  
*Chief of Police*  
TITLE

*3/18/14*  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 24, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

LIQUOR STORE W/SAMPLING PRIVILEGES-  
SERIES 9S

**ROUTING:**

POLICE DEPARTMENT  
 FIRE DEPARTMENT  
 DEVELOPMENT SERVICES  
 FINANCE

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**APPLICANT'S NAME: ROBERT JOSEPH NELSON**

**BUSINESS NAME: FRY'S FOOD & DRUG #112**

**ADDRESS: 1571 N. DYSART ROAD (SEE APP.AMENDMENT-1575 N. DYSART RD.)**

**CITY: AVONDALE STATE: AZ ZIP CODE: 85323**

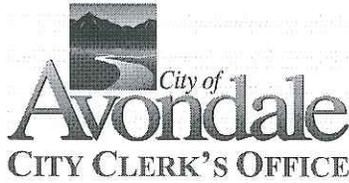
**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

Valorie Russell  
SIGNATURE  
Fire Inspector  
TITLE

3/17/14  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 24, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

LIQUOR STORE W/SAMPLING PRIVILEGES-  
SERIES 9S

**ROUTING:**

POLICE DEPARTMENT  
 FIRE DEPARTMENT  
 DEVELOPMENT SERVICES  
 FINANCE

---

**APPLICANT'S NAME: ROBERT JOSEPH NELSON**

**BUSINESS NAME: FRY'S FOOD & DRUG #112**

**ADDRESS: 1571 N. DYSART ROAD** (See amendment: 1575 N. Dysart Rd.)

**CITY: AVONDALE STATE: AZ ZIP CODE: 85323**

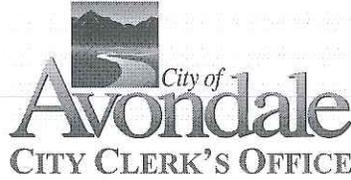
**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

  
\_\_\_\_\_  
SIGNATURE  
*Chief Building Officer*  
\_\_\_\_\_  
TITLE

*3/17/14*  
\_\_\_\_\_  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 24, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

LIQUOR STORE W/SAMPLING PRIVILEGES-  
SERIES 9S

**ROUTING:**

POLICE DEPARTMENT  
 FIRE DEPARTMENT  
 DEVELOPMENT SERVICES  
 FINANCE

---

**APPLICANT'S NAME: ROBERT JOSEPH NELSON**

**BUSINESS NAME: FRY'S FOOD & DRUG #112**

**ADDRESS: 1575 N. DYSART ROAD**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85323**

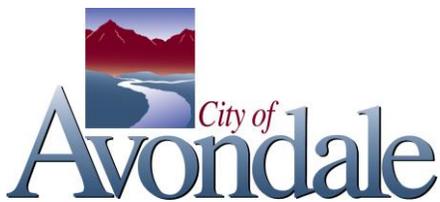
**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

*Jimmy Foster*  
\_\_\_\_\_  
SIGNATURE  
*Zoning Specialist*  
\_\_\_\_\_  
TITLE

*3/18/14*  
\_\_\_\_\_  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 24, 2014**



## DEVELOPMENT SERVICES

### MEMORANDUM

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**DATE:** March 17, 2014

**TO:** Carmen Martinez, City Clerk

**PREPARED BY:** Jennifer Fostino, Zoning Specialist (623) 333-4022

**SUBJECT:** Series 9S Liquor License – Sampling Privileges  
Fry's Food & Drug #112  
1575 N Dysart Rd

The site is located east of the southeast corner of Dysart Road and McDowell Road. The building is existing.

A Series 9S is exempt from the 300 foot separation requirement from a church, school, or fenced school recreational area.

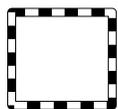
The General Plan designates the property as Freeway Commercial. The property is zoned Community Commercial (C-2). A grocery store is a permitted within the C-2 zoning district.

Staff recommends approval of this request.

Attachment: 2013 Aerial Photo  
Zoning Vicinity Map

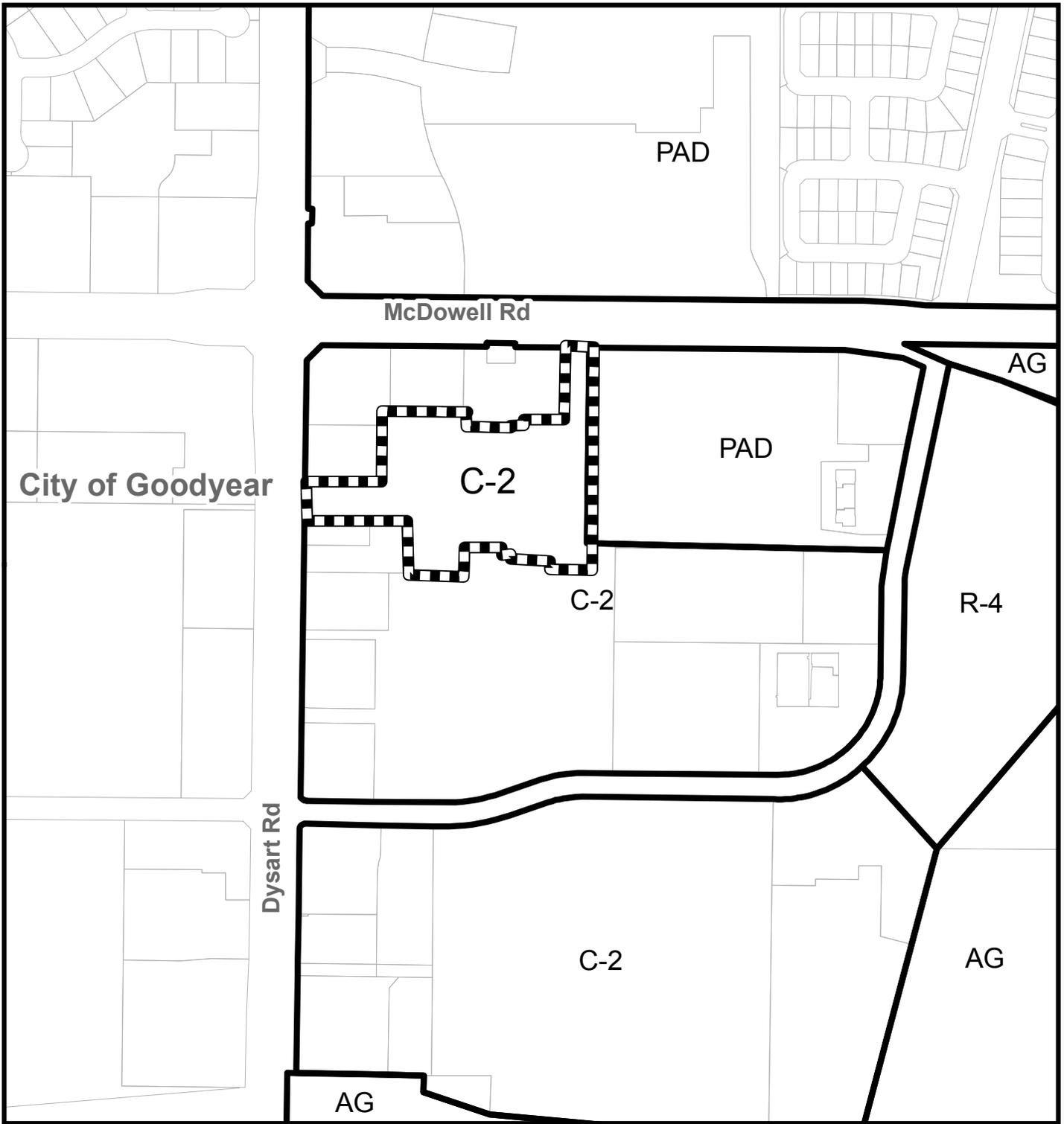


## 2013 Aerial Photograph



Fry's Food & Drug #112



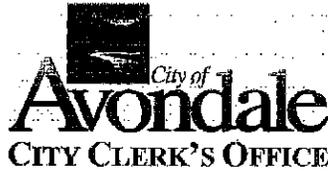


## Zoning Vicinity Map



Fry's Food & Drug #112





**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

LIQUOR STORE W/SAMPLING PRIVILEGES-  
SERIES 9S

**ROUTING:**

POLICE DEPARTMENT  
 FIRE DEPARTMENT  
 DEVELOPMENT SERVICES  
 FINANCE

---

**APPLICANT'S NAME: ROBERT JOSEPH NELSON**

**BUSINESS NAME: FRY'S FOOD & DRUG #112**

**ADDRESS: 1571 N. DYSART ROAD (SEE APP.AMENDMENT-1575 N. DYSART ROAD)**

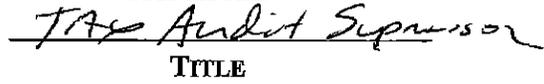
**CITY: AVONDALE STATE: AZ ZIP CODE: 85323**

**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

  
SIGNATURE

  
DATE

  
TITLE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014  
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 24, 2014**

# NOTICE

## APPLICATION TO SELL ALCOHOLIC BEVERAGES DATE POSTED: MARCH 17, 2014

A HEARING ON A LIQUOR LICENSE APPLICATION  
SHALL BE HELD BEFORE THE AVONDALE CITY COUNCIL

**LOCATION: 11465 WEST CIVIC CENTER DRIVE**  
**DATE: MONDAY, APRIL 7, 2014**  
**AT 7:00 PM.**

(HEARING DATES SUBJECT TO CHANGE,  
TO VERIFY CALL: 623-333-1200)

### **\*\*SERIES 09S: LIQUOR STORE LICENSE WITH SAMPLING PRIVILEGES\*\***

THE LOCAL GOVERNING BODY WILL RECOMMEND TO THE STATE LIQUOR BOARD WHETHER THE BOARD SHOULD GRANT OR DENY THE LICENSE. THE STATE LIQUOR BOARD MAY HOLD A HEARING TO CONSIDER THE RECOMMENDATION OF THE LOCAL GOVERNING BODY. ANY PERSON RESIDING OR OWNING OR LEASING PROPERTY WITHIN A ONE-MILE RADIUS MAY CONTACT THE STATE LIQUOR BOARD IN WRITING TO REGISTER AS A PROTESTER. TO REQUEST INFORMATION REGARDING PROCEDURES BEFORE THE BOARD AND NOTICE OF ANY BOARD HEARINGS REGARDING:

**Fry's Food & Drug #112,  
1575 N. Dysart Road  
Avondale, AZ. 85323**

THIS APPLICATION, CONTACT: STATE LIQUOR BOARD - 800 W. WASHINGTON, 5TH FLOOR, PHOENIX, AZ 85007 STATE LIQUOR DEPT: (602) 542-9789  
INDIVIDUALS REQUIRING ADA ACCOMMODATIONS CALL THE CITY CLERK AT: 623-333-1200.

Office Memorandum

State of Arizona  
Department of Liquor Licenses and Control  
800 W. Washington 5th Floor  
Phoenix, Arizona 85007  
(602) 542-9141

State/Local Government Routing Sheet  
Add Sampling Privileges To Active  
Liquor Store (series 9) or Beer and Wine Store (series 10) License

Liquor Store (series 9)  
 Beer and Wine Store (series 10)

The attached form for sampling must be processed within 105 days from this date:  
Date Application Received at DLLC: 3/17/2014  
Date of 60-days from receipt: 5/16/2014 105-days from receipt: 4/20/2014  
If the local governing body has questions regarding the attached sampling form, please call:  
DLLC Contact Name: Juanita Espinoza  
DLLC Contact Phone Number: 602-542-9674 DLLC Contact email: juanita.esc@alcohol.az.gov  
Upon local governing body approval, a new license with a sampling privilege ("S") designation will be issued to this licensee.

For DLLC Use Only  
Current License #: 01108337 Date of issuance: 1/20/2010  
S License #: \_\_\_\_\_ Date of issuance: \_\_\_\_\_  
DLLC Contact: Juanita Espinoza DLLC Phone #: 602-542-9674

For Local Governing Body Use Only  
Date Received: \_\_\_\_\_ Date Approved: \_\_\_\_\_  
Recommendation:  Approve  Protest  No Recommendation  
I, \_\_\_\_\_, Government Official, hereby recommend that non-transferable sampling privileges be added to this license on behalf of \_\_\_\_\_ City, Town or County  
( ) Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
February 2013 *Avondale, Maricopa*

# fray's

## FOOD & DRUG

1575





**Legend**

**PLACES OF WORSHIP**

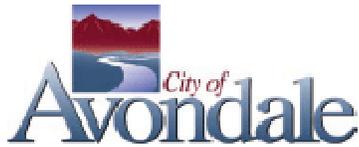
- CHURCH

**Liquor License**

- SERIES 5
- SERIES 6
- SERIES 7
- SERIES 9
- SERIES 9S
- SERIES 10
- SERIES 11
- SERIES 12
- SERIES 15
- SERIES 16
- SCHOOLS

**FRY'S FOOD & DRUG**  
**1575 N DYSART RD**  
**#112**  
**1 Mile Buffer**





# CITY COUNCIL REPORT

**SUBJECT:**

Liquor License - Series 12 (Restaurant) -  
Smashburger #1393

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Carmen Martinez, City Clerk, (623) 333-1214

**THROUGH:** David Fitzhugh, Acting City Manager (623) 333-1014

**PURPOSE:**

Staff is recommending approval of a request from Andrea Lewkowitz for a Series12 Restaurant license to sell all spirituous liquors at Smashburger # 1393 located at 9915 West McDowell Road, Suite 101.

**DISCUSSION:**

The City Clerk's Department has received an application for a Series12 Restaurant license to sell all spirituous liquors from Ms. Andrea Lewkowitz at Smashburger #1393 located at 9915 West McDowell Road, Suite 101, Avondale, Arizona. The fees in the amount of \$1,350 have been paid.

The establishment has been licensed since 2009, but a change in ownership requires that a new licensed be obtained.

As required by state law and city ordinance, the application was posted for the required period of time starting March 17, 2014. A notice was published in the West Valley View on April 1 and 4, 2014. No comments were received.

The Arizona Department of Liquor License and Control has accepted the submitted application as complete. The Development Services, Finance, Police and Fire Departments have reviewed the application and are recommending approval. Their comments are attached.

**RECOMMENDATION:**

Staff recommends that the City Council approve the request from Ms Andrea Lewkowitz for a Series 12 (Restaurant) liquor license at Smashburger #1393 located at 9915 West McDowell Road, Suite 101, Avondale.

**ATTACHMENTS:**

Click to download

- [Application](#)
- [Review by Departments](#)
- [Vicinity Map](#)
- [Posting Photos](#)

Arizona Department of Liquor Licenses and Control

800 West Washington, 5th Floor
Phoenix, Arizona 85007
www.azliquor.gov
602-542-5141

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 6
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): 12079815

1. Type of License(s): Series 12
2. Total fees attached: \$ 250.00 (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: Ms. Lewkowicz Andrea Dahlman
2. Corp./Partnership/L.L.C.: Smashburger Acquisition Phoenix, LLC
3. Business Name: Smashburger #1393 B1042876
4. Principal Street Location: 9915 W. McDowell Rd. Suite 101 Avondale Maricopa 85392
5. Business Phone: 623.936.3020 Daytime Phone: Email:
6. Is the business located within the incorporated limits of the above city or town? YES NO
7. Mailing Address:
8. Price paid for license only bar, beer and wine, or liquor store: Type \$ Type \$

DEPARTMENT USE ONLY

Table with 5 columns: Fees, Application (100.00), Interim Permit (100.00), Site Inspection (50.00), Finger Prints (6), TOTAL OF ALL FEES (\$ 250.00)

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

Accepted by: C. Bejar Date: 2-25-14 Lic. # 12079815

**SECTION 5 Interim Permit:**

14 FEB 2014 10:03

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.
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. 12078176
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, Andrea Dahlman Lewkowicz, 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.

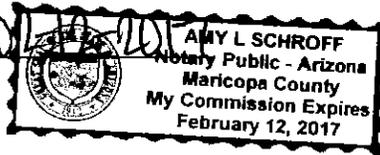
X [Signature]  
(Signature)

State of Arizona County of Maricopa

The foregoing instrument was acknowledged before me this

10 day of February 2014  
Day Month Year

My commission expires on 2/12/2017



[Signature]  
(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 \$22 PROCESSING FEE FOR EACH CARD.

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"/>						

) Y R A S S E C E N F I T

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 12078176

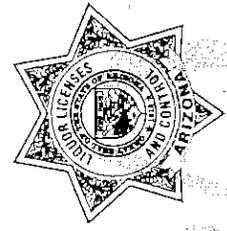
Issue Date: 2/2/2010      Expiration Date: 3/31/2014

Issued To:  
ANDREA DAHLMAN LEWKOWITZ, Agent  
SUNWEST BURGERS LLC, Owner

Location:  
SMASHBURGER #1072  
9915 W MCDOWELL RD STE 101  
AVONDALE, AZ 85392

Restaurant

Mailing Address:  
ANDREA DAHLMAN LEWKOWITZ  
SUNWEST BURGERS LLC  
SMASHBURGER #1072  
2600 N CENTRAL AVE SUITE 1775  
PHOENIX, AZ 85004



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.

114 FEB 20 11:07 AM Dept #11087

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

1. Name of Corporation/L.L.C.: Smashburger Acquisition Phoenix, LLC  
(Exactly as it appears on Articles of Incorporation or Articles of Organization)
2. Date Incorporated/Organized: 12/16/2013 State where Incorporated/Organized: Delaware
3. AZ Corporation Commission File No.: 04495023 Date authorized to do business in AZ: 12/16/2013
4. AZ L.L.C. File No.: R1892554-S Date authorized to do business in AZ: 12/18/2013
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 flow chart				See attached flow chart		

(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	
Se attached flow chart				3900 East Mexico Ave, Suite 1200, Denver, CO 80210		
<b>SEE AMENDMENT</b>						

(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)

**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.*

\*14 FEB 24 Lic. Lic. #1040

- Name of Corporation/L.L.C.: Smashburger Acquisition Phoenix, LLC (Exactly as it appears on Articles of Incorporation or Articles of Organization)
- Date Incorporated/Organized: 12/16/2013 State where Incorporated/Organized: Delaware
- AZ Corporation Commission File No.: \_\_\_\_\_ Date authorized to do business in AZ: \_\_\_\_\_
- AZ L.L.C. File No: R1892554-5 Date authorized to do business in AZ: 12/18/2013
- Is Corp./L.L.C. Non-profit?  YES  NO
- List all directors, officers and members in Corporation/L.L.C.:

Last	First	Middle	Title	Mailing Address	City State Zip
See attached flow chart				See attached flow chart	

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

Last	First	Middle	% Owned	Mailing Address	City State Zip
See attached flow chart				3900 East Mexico Ave, Suite 1200, Denver, CO 80210	

(ATTACH ADDITIONAL SHEET IF NECESSARY)

- 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:**

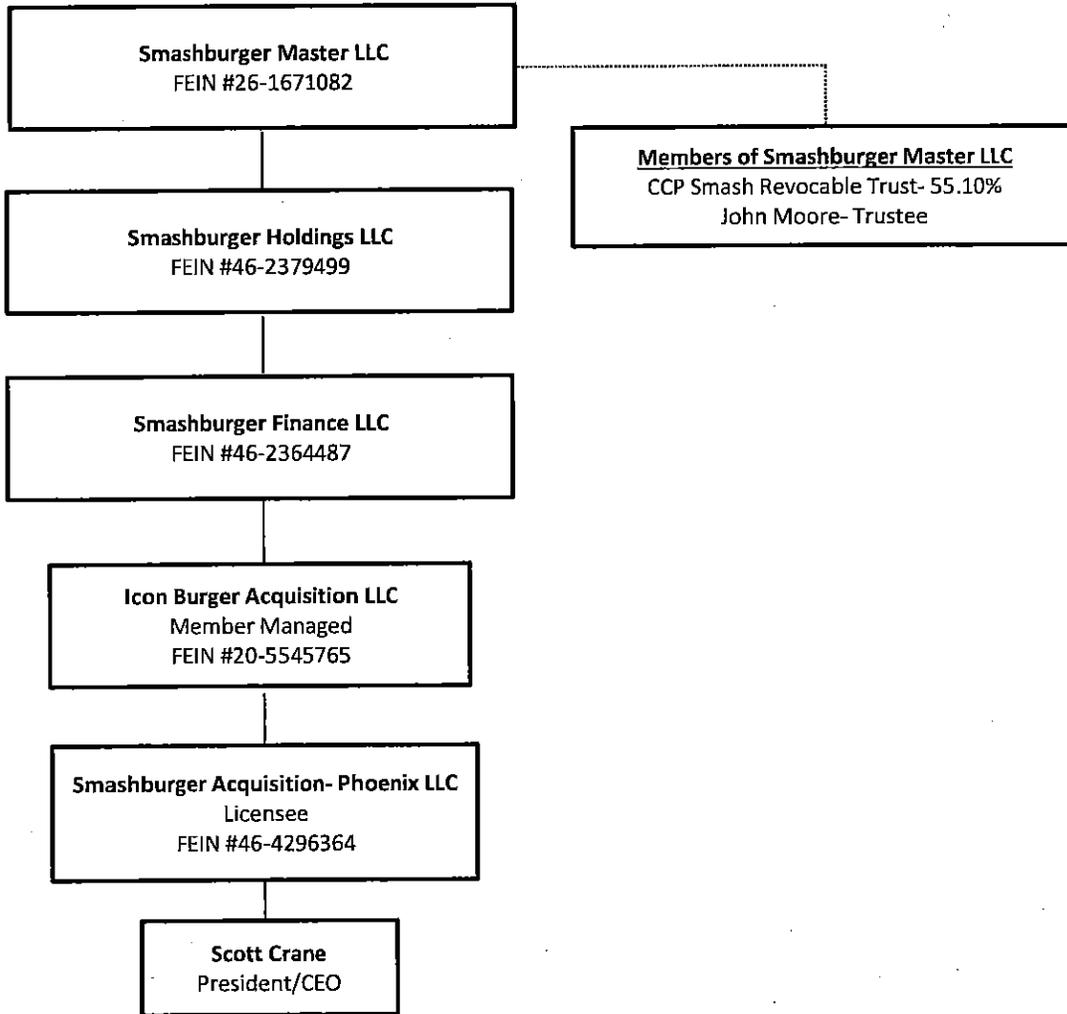
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- Name of Club: \_\_\_\_\_ Date Chartered: \_\_\_\_\_  
(Exactly as it appears on Club Charter or Bylaws) (Attach a copy of Club Charter or Bylaws)
- Is club non-profit?  YES  NO
- List officer and directors:

Last	First	Middle	Title	Mailing Address	City State Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

**Smashburger Acquisition Phoenix, LLC**

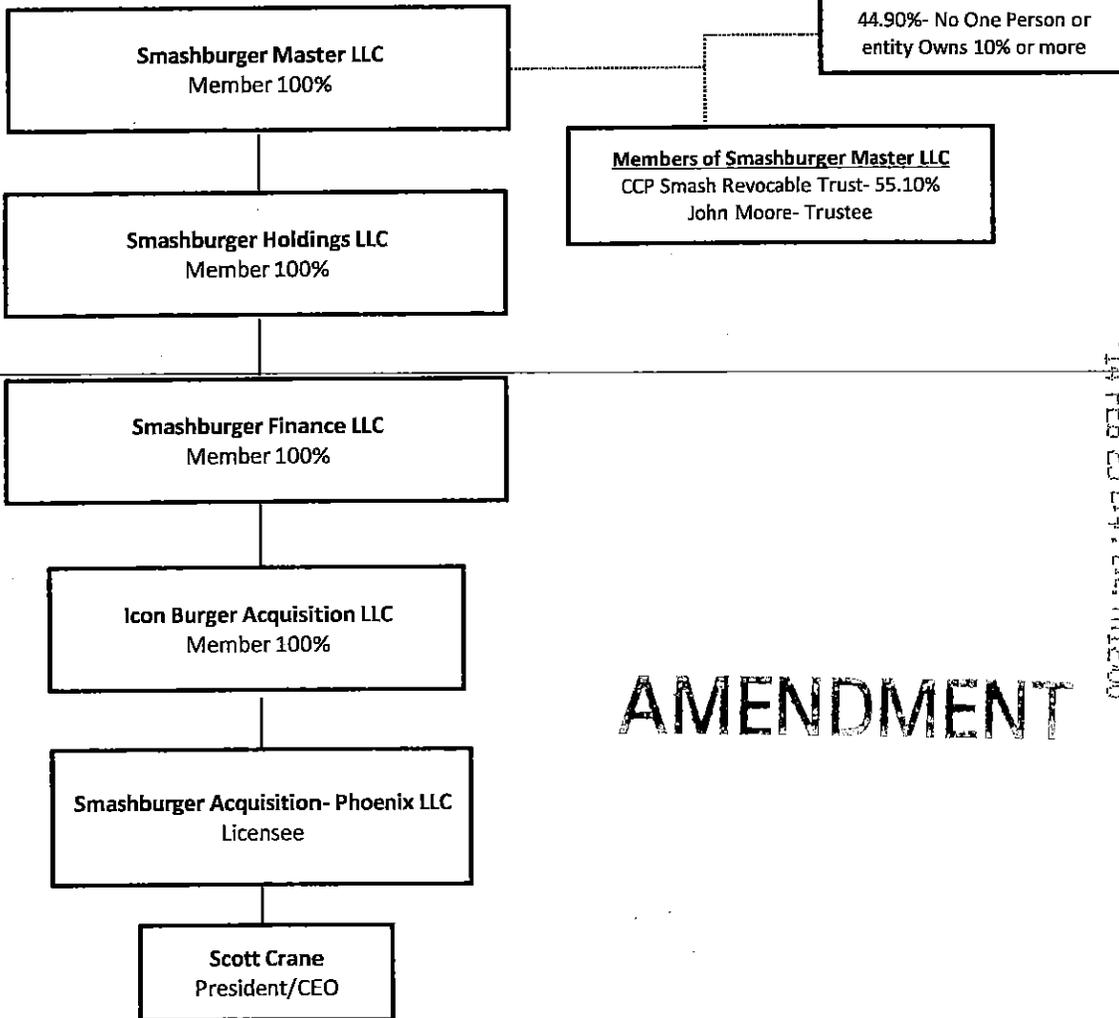


**Corporate Mailing Address:**  
Smashburger Corp.  
3900 East Mexico Avenue  
Suite # 1200  
Denver, CO 80210

**SEE  
AMENDMENT**

14 FEB 20 10:47 AM 1037

**Smashburger Acquisition Phoenix, LLC**



**AMENDMENT**

14 FEB 25 09:11 AM M1200

**Corporate Mailing Address:**  
Smashburger Corp.  
3900 East Mexico Avenue  
Suite # 1200  
Denver, CO 80210

**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
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: \_\_\_\_\_ Entity: \_\_\_\_\_  
(Exactly as it appears on license) Last First Middle (Indiv., Agent, etc.)
2. Corporation/L.L.C. Name: \_\_\_\_\_  
(Exactly as it appears on license)
3. Current Business Name: \_\_\_\_\_  
(Exactly as it appears on license)
4. Physical Street Location of Business: Street \_\_\_\_\_  
City, State, Zip \_\_\_\_\_
5. License Type: \_\_\_\_\_ License Number: \_\_\_\_\_
6. If more than one license to be transferred: License Type: \_\_\_\_\_ License Number: \_\_\_\_\_
7. Current Mailing Address: Street \_\_\_\_\_  
(Other than business) City, State, Zip \_\_\_\_\_
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)

14 FEB 20 11 49 AM '07

**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

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? \_\_\_\_\_

14 FEB 20 11:49 AM 1007

**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: 3168 ft. Name of school Rio Vista Elementary School  
 Address 10237 W. Encanto Blvd. Avondale Az. **SEE**

2. Distance to nearest church: 3168 ft. Name of church Westridge Kingdom Hall **AMENDMENT**  
 Address 10142 W. Encanto Blvd. Avondale, AZ.

3. I am the:  Lessee  Sublessee  Owner  Purchaser (of premises)  
 City, State, Zip \_\_\_\_\_

4. If the premises is leased give lessors: Name Jessica Vercellino (602) 667-6685  
 Address 7200 West Bell Rd. Suite J-103 Glendale, AZ 85301  
 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? \$ \_\_\_\_\_  
 Please list lenders you owe money to.

Last	First	Middle	Amount Owed	Mailing Address	City State	Zip
N/A						

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

**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

1. Current Business: Name 14 FEB 27 Liq. Lic. # 5 28  
 (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? \_\_\_\_\_

**AMENDMENT**

**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: 3168 ft. Name of school Rio Vista Elementary School  
 Address 10237 W. Encanto Blvd. Avondale Az.  
 City, State, Zip \_\_\_\_\_

2. Distance to nearest church: 3168 ft. Name of church Westridge Kingdom Hall  
 Address 10142 W. Encanto Blvd. Avondale, AZ.  
 City, State, Zip \_\_\_\_\_

3. I am the:  Lessee  Sublessee  Owner  Purchaser (of premises)

4. If the premises is leased give lessors: Name Jessica Vercellino- Raintree Pad 2, LLC  
 Address Attn: Joseph R. Walters 7200 West Bell Rd. Ste J-103 Glendale, AZ 85301  
 City, State, Zip \_\_\_\_\_

4a. Monthly rental/lease rate \$ 4,826.25-5,273.12 What is the remaining length of the lease 5 yrs. 9 mos.

4b. What is the penalty if the lease is not fulfilled? \$ \_\_\_\_\_ or other Termination  
 (give details - attach additional sheet if necessary)

5. What is the total **business** indebtedness for this license/location excluding the lease? \$ 4,022.00  
 Please list lenders you owe money to.

Last	First	Middle	Amount Owed	Mailing Address	City State	Zip
N/A						

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

**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 # 12078176 (exactly as it appears on license) Name Sunwest Burger LLC

**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:  
Sunwest Burgers LLC and license #: 12078176  
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.

[Signature]  
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](http://www.azliquor.gov) and click on the "Information" tab.

[Initials]  
applicant's initials

**SEE  
AMENDMENT**

**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 spiritous 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.

[Signature]  
applicant's initials

14 FEB 20 11:41 AM Dept 41037

**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 # \_\_\_\_\_ (exactly as it appears on license) Name ANDREA DAHLMAN LEWKOWITZ

**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:  
LEWKOWITZ ANDREA DAHLMAN 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~~  
**AMENDMENT**

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](http://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:
- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Entrances/Exits | <input type="checkbox"/> Liquor storage areas | Patio: <input type="checkbox"/> Contiguous |
| <input type="checkbox"/> Service windows | <input type="checkbox"/> Drive-in windows     | <input type="checkbox"/> 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 spiritous 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.

See Attached.

14 FEB 20 11:49 AM '14 #1037

**SECTION 16** Signature Block

I, Scott Allan Crane, 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 [Signature]  
(signature of applicant listed in Section 4, Question 1)

State of Colorado County of Denver

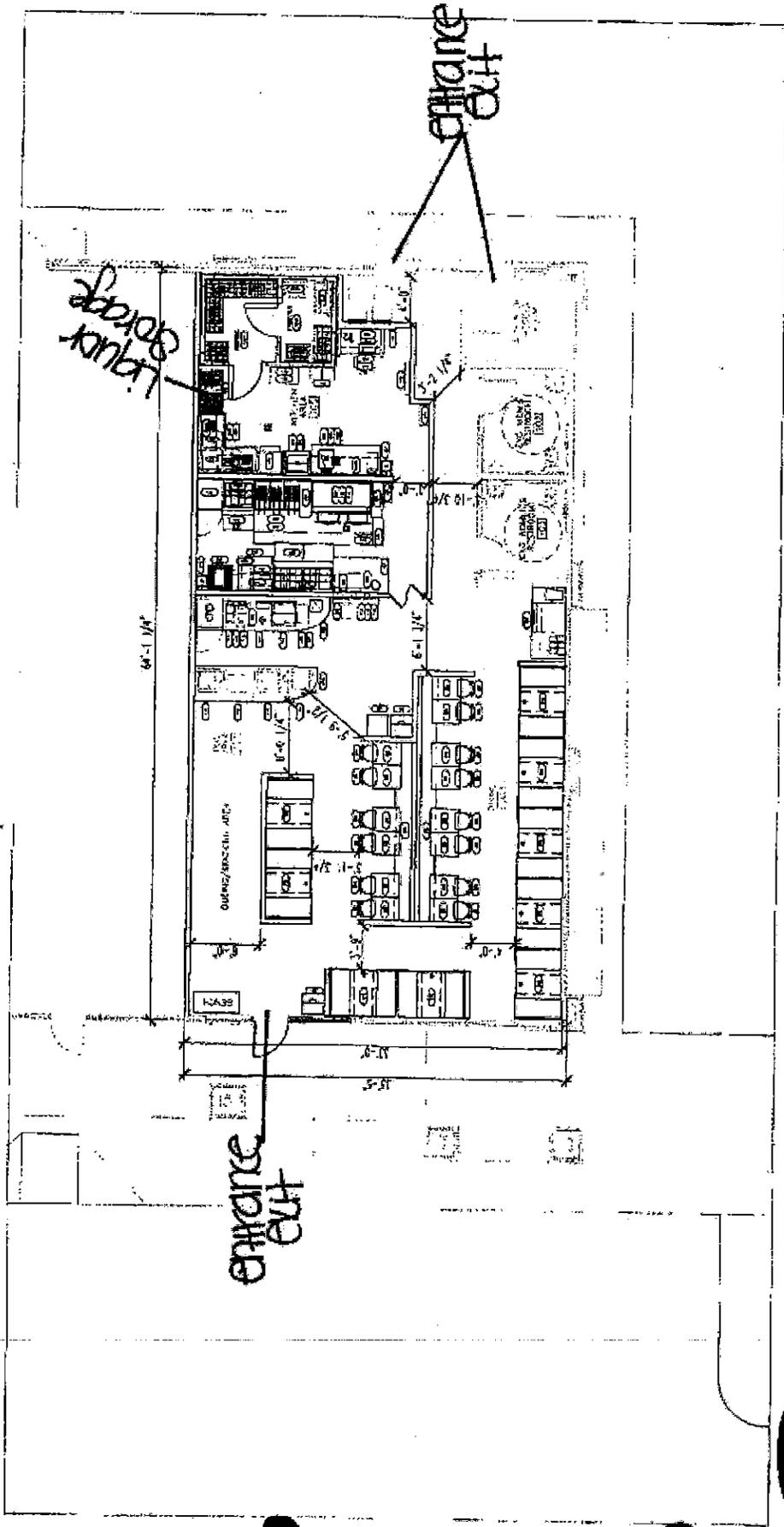
DaSha M. LANDRY  
NOTARY PUBLIC  
STATE OF COLORADO  
NOTARY ID 20124056865  
MY COMMISSION EXPIRES AUGUST 24, 2016

My commission expires on: 24 08 2016  
Day Month Year

The foregoing instrument was acknowledged before me this  
7<sup>th</sup> of February, 2014  
Day Month Year  
[Signature]  
signature of NOTARY PUBLIC

1

floor dimensions 62'1" x 2



**GHA**  
 Architects / Development  
 Parkway Plaza I  
 1100 Oak Ridge  
 Suite 100  
 Dallas, Texas 75240  
 Tel: 972-992-8888  
 Fax: 972-992-8888

**SMASH BURGER - GATEWAY CROSSING - PFP-B**  
**AVONDALE, AZ**  
**STORE# TBD**



2,159 SF.  
 KITCHEN - 64 SQFT  
 FRIED - N/A  
 TOTAL - 64 SQFT

14 FEB 20 11:47 AM Dept: ARCHIT



ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

RESTAURANT OPERATION PLAN

AMENDMENT

LICENSE # 12079815

1. List by Make, Model and Capacity of your:

Grill	SEE ATTACH LIST
Oven	
Freezer	
Refrigerator	
Sink	
Dish Washing Facilities	
Food Preparation Counter (Dimensions)	
Other	

2. Print the name of your restaurant: SMASHBURGER # 1393

3. Attach a copy of your menu (Breakfast, Lunch and Dinner including prices).

4. List the seating capacity for:

- a. Restaurant area of your premises (do not include patio seating) [ 64 ]
- b. Bar area of your premises [ + 0 ]
- c. Total area of your premises [ 64 ]

5. What type of dinnerware and utensils are utilized within your restaurant?

- Reusable       Disposable

6. Does your restaurant have a bar area that is distinct and separate from the restaurant seating? (If yes, what percentage of the public floor space does this area cover).  Yes \_\_\_\_\_ %  No

7. What percentage of your public premises is used primarily for restaurant dining? (Does not include kitchen, bar, cocktail tables or game area.) 100 %

\*Disabled individuals requiring special accommodations, please call (602) 542-9027



# Proposal

7/14/2009

To:

Consumer Capital Partners  
 David Biederman  
 1515 Arapahoe Street  
 Tower One, Tenth Floor  
 Denver, CO 80202  
 Phone: (303) 592-3831  
 Fax: (303) 592-3895

From:

W. West Equipment & Furnishings  
 Co.  
 Cory Sanders  
 Project Manager  
 9355 Northfield Blvd.  
 Denver, CO 80238  
 Phone: (303) 289-9378  
 Fax: (303) 289-9505

Item	Qty	Description	Sell Each	Sell Total
200		To Go Counter - By Owner		
201		Queue Rope - By Owner		
202		Back Counter - By Owner		
203		Transaction Counter - By Owner		
204		Beverage Counter - By Owner		
205		Menu Boards - By Owner		
206		Hightop Table - By Owner		
206.1	1	ea <b>TABLE BASES</b> American Tables & Seating Model No. TBLBS 1 Lot of table bses consisting of:		*09 OCT 19 11:49. Lic. PM 2 52
	2	ea TR24M-WATS Table Base, 24" dia. base, 4" column dia., dining height, black (purchased with ATS top)		
	2	ea BAR-4M Table Base Column Only, 4" dia., bar height, includes spider, black		
<b>Extended Total for Item No. 206.1:</b>				
207		Tables - By Owner's Millworker		
208.1/212.1	1	ea <b>TABLE BASES</b> American Tables & Seating Model No. TBLBS 1 Lot of table bses consisting of:		
	6	ea T2430M-WATS Table Base, 24" x 30" base spread, 3" column dia., dining height, black (purchased with ATS top)		
	6	ea T3636M-WATS Table Base, 36" x 36" base spread, 4" column dia., dining height, black (purchased with ATS top)		
<b>Extended Total for Item No. 208.1/212.1:</b>				
209	8	ea <b>CHAIR, SIDE, INDOOR</b> MTS Seating Model No. 809 GR15 Deco Chair, Designer Classics, metal slat back, pullover seat, premium metal base glide with rubber silencer, grade 9 uph.		
	8	ea 5 year structural frame warranty, std. (no charge)		
	8	ea Frame finish - Standard powdercoat:		
	8	ea M-8 Metaltone - Quicksilver		
	8	ea POS - Standard upholstered pull-over seat (no charge)		

- 8 ea Harmony Suede- Mill is Pointe  
201 945 1228 - Grade 9
- 8 ea Architexx pose - Kirsch Grade 15  
Color is scarlet

**Extended Total for Item No. 209:**

- 210 9 ea **BAR STOOL**  
MTS Seating Model No. 809-30 GR15  
Deco Bar Stool, Designer Classics, metal slat back, pullover seat, footrest  
w/cover, premium metal base glide with rubber silencer, grade 9 uph.
- 9 ea 5 year structural frame warranty, std. (no charge)
- 9 ea Frame finish - Standard powdercoat:
- 9 ea M-8 Metaltone - Quicksilver
- 9 ea POS - Standard upholstered pull-over seat (no charge)
- 9 ea Architexx pose - Kirsch Grade 15
- 9 ea SSF - optional silver footrest cover (no charge)  
Color is scarlet

**Extended Total for Item No. 210:**

- 212/215 1 ea **BOOTHWORK**  
MSW Inc. Model No. SBBTHS  
Boothwork: smashburger signature booths w/smooth back booth w/1-1/8"  
maple side bolsters and top caps, maple veneered out side finished backs,  
booths are finished on both sides, seats are high density foam on solid  
wood substrate w/cotton or dacron fillers, waterfall cushions style,  
upholstered booth backs w/lower density foams fillers. Fabric for backs -  
Knoll textile abacus - K715-8, Harmony Suede- Mill is Pointe 201 945 1228  
- Red vinyl. Booth seats are Anzea, pattern - laughing cow, color  
aluminum. CONSISTING OF:
- 1 ea WB 10' Wall bench
- 4 ea 48S 48" Single booth
- 4 ea 48D 48" Double booth (one with a 3'0" partial double)
- 8 ea FRTPNLS 48" Lumicor Ovalesque frost panels

**Extended Total for Item No. 212/215:**

214 Trash/Tray Stand - By Owner

- 100 1 ea **REFRIGERATED COUNTER, GRIDDLE STAND**  
Delfield Model No. F2962C  
Refrigerated Low-Profile Equipment Stand, 62"W, two-section, (4) drawers  
(pans not included), stainless steel top & drawer fronts, front non-spill  
edge, ABS interior sides, casters, side-mounted refrigeration sys.  
w/electric condensate evaporator, 1/5 hp, NSF7
- 1 ea 115v/60/1-ph, NEMA 5-15P, std.
- 1 ea 5 year compressor warranty (net)
- 1 ea Casters, 4" in lieu of 6"

**Extended Total for Item No. 100:**

- 101 1 ea **FRYER BATTERY**  
Dean Industries Model No. 3-HD50G-C  
High Efficiency Decathlon Fryer, Gas-Fired, floor model, 43-50 lb. fat  
capacity, rack type basket support, computer controls, s/s pot, door &  
sides, 6" adjustable steel legs, 100,000 BTU, Energy Star
- 1 ea Natural gas
- 1 ea 120v/60/1-ph, fryer control
- 1 ea Electronic ignition

09 OCT 19 11:47 AM 252

- 1 ea 85UFF(3) Super Cascade Fryer Filter, built-under (3) fryers, 4 GPM pump, internally plumbed oil drain/return lines, w/filter starter kit: sample of powder, 25 papers, cleanout rod, gloves & brush, (add to SM40G, SM50G, SM50GDD, D50G, D50GDD, HD50, HD50GDD & HD60 fryers)
- 1 ea 120v/60/1-ph, 6.2 amps for filter system
- 1 ea Casters are std. w/built-in filters

**Extended Total for Item No. 101:**

- 102 1 ea **GAS HOSE DISCONNECT**  
Dormont Manufacturing Model No. 16100KITS48  
Safety System Moveable Gas Connector Kit, 1" inside dia., 48" long, covered with stainless steel braid, coated with blue antimicrobial PVC, 1 Snap Fast™ QD, 1 SwivelMAX™, 1 full port valve, 1 elbow, coiled restraining cable with hardware, limited lifetime warranty

**Extended Total for Item No. 102:**

- 103 Pan Rack - By Smallwares Supplier

- 104 1 ea **TOASTER, ELECTRIC CONVEYOR TYPE**  
A. J. Antunes & Co. Model No. VCT-1000 Packed: each  
(9210709) Vertical Contact Toaster w/two-sided heated platen, countertop design, approximately 28 sec. pass thru time, (10) Teflon® sheets, 6' grounded power cord, NEMA #5-15P, 208-240V, 60 Hz, 2600-3455 watts, 12.5-14.4 amps  
smashburger special model number
- 1 ea BF-1 (7000236) Bun feeder, automatic gravity feed, attaches to VCT-25/50/2000
- 1 ea BW-1 (7000238) Butter pan & wheel, stainless steel, attaches to VCT-25/50/2000

**Extended Total for Item No. 104:**

- 105 1 ea **REFRIGERATED COUNTER, SANDWICH TOP**  
Delfield Model No. D4460N-24M-A5  
Mega Top Refrigerator, two-section, 60"W, 2.7 cu. ft, (4) drawers, stainless steel top w/polyethylene cutting board & (24) 1/6 size plastic pans, ABS interior sides, stainless steel front & sides, 2" casters, front-breathing rear-mounted (R404A) refrigeration sys., 1/2 hp
- 1 ea 115v/60/1-ph, NEMA 5-15P std.
- 1 ea Self-Contained refrigeration, std.
- 1 ea 5 year compressor warranty (net)
- 1 ea 1 Yr. Service & labor contract (net)
- 1 ea Flat lift-off lid in lieu of std.

**Extended Total for Item No. 105:**

- 106 Food Warmer - By Smallwares Supplier

- 107 1 ea **FREEZER, DROP-IN**  
Randell Model No. 9552A  
Drop-in Freezer/Plate Chiller, 12 gallon, top opening w/4 insulated hinged covers, s/s interior & top, corrosion resistant steel exterior, self-contained refrigeration system, bottom mount 1/3 HP
- 1 ea LW1 1 yr. labor warranty (NET)
- 1 ea CW5 5 yr. compressor warranty (NET)
- 1 ea 115v/60/1, standard

**Extended Total for Item No. 107:**

- 108 1 ea **BAR MIXER**  
Waring Model No. DMC201DC  
Bar Mixer, counter mounted, 2 speed motor, triple head, auto start/stop, hi/lo speed control, die-cast motor frame & die-cast chrome motor housing, s/s splash panel, NSF, CSA & UL listed

\*09 OCT 19 11:41 AM '09

7/14/2009

- 1 ea Standard 1-year limited warranty
- 1 ea 120v, 50/60Hz, std.

**Extended Total for Item No. 108:**

- 
- 109 1 ea **FOOD WARMER, COUNTERTOP, ELECTRIC**  
Merco/Savory Model No. FFHS-16 Packed: each  
Fried Food Holding Station, countertop, electric, pre-set thermostatically controlled air temp. of 230°F, removable product dividers, product tray & grease tray, on/off switch, s/s construction, 1.4kw, UL, cUL, UL-EPH
- 1 ea One year parts and labor warranty
  - 1 ea 27007 - 120 volts, 1 phase, 15 amps, NEMA 5-15P (cord & plug located at left rear)

**Extended Total for Item No. 109:**

- 
- 110 1 ea **GRIDDLE, COUNTER UNIT, GAS**  
Garland/US Range Model No. G24-60GTHX  
G24 Series Griddle, gas, 60"W, countertop, 60" x 24" x 3/4" thick smooth steel griddle plate, Snap-Action thermostatic controls, king size grease bucket (1-3/4 gal. capacity), welded splash guard on rear & ends, s/s front, black sides, 150,000 BTU (Garland)
- 1 ea Natural gas, 5,300 ft

**Extended Total for Item No. 110:**

- 
- 111 1 ea **GAS HOSE DISCONNECT**  
Dormont Manufacturing Model No. 16100KITS48  
Safety System Moveable Gas Connector Kit, 1" inside dia., 48" long, covered with stainless steel braid, coated with blue antimicrobial PVC, 1 Snap Fast™ QD, 1 SwivelMAX™, 1 full port valve, 1 elbow, coiled restraining cable with hardware, limited lifetime warranty

**Extended Total for Item No. 111:**

- 
- 112 1 ea **ICE BIN, DROP-IN**  
Glastender Model No. DI-IB24  
Ice Bin, drop-in design, 71-lbs ice capacity, stainless steel top & liner

**Extended Total for Item No. 112:**

- 
- 113 1 ea **ICE CREAM DIPPING CABINET**  
Delfield Model No. N227  
Ice Cream Dipping Cabinet, drop-in type, with self-contained refrigeration, 12 gallon capacity, 5.3 Amp, NSF, 1/4 hp, Energy Star
- 1 ea 115v/60/1-ph, NEMA 5-15P, std.
  - 1 ea 5 year compressor warranty (net)
  - 1 ea WARDEL001 One year service and labor contract (net)

**Extended Total for Item No. 113:**

- 
- 114 1 ea **REFRIGERATED COUNTER, SANDWICH TOP**  
Delfield Model No. D4432N-12M  
Mega Top Refrigerator, single-section, 32"W, 2.7 cu. ft, (2) drawers, stainless steel top w/polyethylene cutting board & (12) 1/8 size plastic pans, ABS interior sides, stainless steel front & sides, 2" casters, front-breathing rear-mounted (R404A) refrigeration sys., 1/5 hp
- 1 ea 115v/60/1-ph, NEMA 5-15P std.
  - 1 ea Self-Contained refrigeration, std.
  - 1 ea 5 year compressor warranty (net)
  - 1 ea 1 Yr. Service & labor contract (net)

**Extended Total for Item No. 114:**

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- 118 3 ea **HEAT LAMP, BULB TYPE**  
 Merco/Savory Model No. 500-C POLISHED Packed: each  
 Contempo® Warmer Lamp, infrared spot lamp, hanging cord mount,  
 individual lamp assembly, with one lamp, shade style 500 - 6" dia. x 7.5"H,  
 polished finish (specify)
- 3 ea 120 volts, 1 phase, std.
- 3 ea 000373SP White Bulb, coated, 120v
- 3 ea Required Mounting Adaptor: Trac-Heat Bar, (plug-in style) add suffix "-T"  
 to model number
- 1 ea Up to 4-ft. Trac-Heat Bar, black, (plug-in style)-120V only, dead end, 12-ft.  
 cord w/plug (maximum of (4) 250W lamps per bar, 10-amp rating)
- 3 ea Polished nickel finish
- 3 ea Black cord, C-Mount - std. specify length from ceiling to bottom of shade,  
**Extended Total for Item No. 118:**

119 CO2 Tank - By Vendor

120 Walk-in Cooler - Existing

- 121 1 ea **UTILITY SHELF**  
 Advance Tabco Model No. K-245  
 Utility Shelf, 8" wide x 24" long  
**Extended Total for Item No. 121:**

- 122 1 ea **REFRIGERATOR, UNDERCOUNTER, REACH-IN**  
 Delfield Model No. UC4427N  
 Undercounter Refrigerator, Reduced Height, single-section, 27"W, 5.7 cu.  
 ft. (1) door, stainless steel top, front & sides, ABS interior, 2" casters,  
 front-breathing rear-mounted refrigeration system, 1/5 hp
- 1 ea 115v/60/1-ph, NEMA 5-15P std.
- 1 ea Self-contained refrigeration, std.
- 1 ea 5 year compressor warranty (net)
- 1 ea \*\*\*\* Door hinged on left \*\*\*\*  
**Extended Total for Item No. 122:**

- 123 1 ea **TEA BREWER**  
 Bunn-O-Matic Model No. 36700.0013  
 TB3Q Automatic Iced Tea Brewer, 3-gallon capacity, 1680 watt tank  
 heater, 26.7 gallon/hour, single brewer, with 8.12" extension, Quickbrew  
 system, for brewing into portable dispenser (sold separately), 120v/60/1,  
 1730 watts, 14.4amp, NEMA 5-15P
- 1 ea 34100.0000 TDO-4 Oval Iced Tea Dispenser, solid plastic lid, side  
 handles, 4 gallon capacity, for use with all BUNN brewers & others, faucet  
 indicates sweetened or unsweetened tea (Contact factory for pricing)  
**Extended Total for Item No. 123:**

- 125 1 ea **ICE MAKER, CUBE-STYLE**  
 Manitowoc Model No. SY-0854A Packed: each  
 S-Series Ice Maker, cube-style, air-cooled, self-contained condenser, up to  
 870-lb approximately/24 hours, stainless steel finish, half-dice size cubes,  
 ENERGY STAR® Qualified
- 1 ea 3 year parts & labor warranty
- 1 ea 5 year parts & labor warranty on evaporator
- 1 ea 5- year parts & 3- year labor warranty on compressor
- 1 ea 208-230v/60/1ph, std.  
**Extended Total for Item No. 125:**

126 Soda Dispenser - By Vendor

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127	1	ea	<b>FIRE PROTECTION SYSTEM</b> Captive-Aire Model No. R102 Fire protection system to cover all equipment under the exhaust hood, all exposed piping to be chrome, s/s box for tanks & includes installation. (DOES NOT INCLUDE INSTALLATION OF GAS VALVE, ELECTRICAL WORK OR FIRE ALARM WIRING.) <b>Extended Total for Item No. 127:</b>
128			Soda Rack - By Vendor
129	1	ea	<b>DRY STORAGE SHELVING</b> LPI Model No. DRYSTOR 1 Lot of (4) sections dry storage shelving consisting of: 4 ea MA2442C Shelf, wire, 24"W x 42"L, chrome-plated finish, (packed 4 per carton) 4 ea MG072C Post, 72" high, chrome-plated finish <b>Extended Total for Item No. 129:</b>
130	1	ea	<b>WORKTABLE</b> Custom Model No. WT Work Table 80" x 36" w/casters <b>Extended Total for Item No. 130:</b>
131	1	ea	<b>COOLER/FREEZER SHELVING</b> LPI Model No. CLR/FRZSHELV 1 Lot of (10) sections cooler/freezer shelving consisting of: 4 ea MA1836GN Shelf, wire, 18"W x 36"L, green epoxy finish, (packed 4 per carton) 8 ea MA1842GN Shelf, wire, 18"W x 42"L, green epoxy finish, (packed 4 per carton) 8 ea MA1848GN Shelf, wire, 18"W x 48"L, green epoxy finish, (packed 4 per carton) 20 ea MG072GN Post, 72" high, green epoxy finish 1 ea 7 year limited warranty against naturally occurring rust, std. <b>Extended Total for Item No. 131:</b>
132			Pass Shelf Window - By General Contractor
135	1	ea	<b>DROP-IN SINK</b> Glastender Model No. DI-HS14 Hand Sink, drop-in type, 14" wide, 9-1/4" x 11-1/2" x 6" deep bowl, stainless steel constr'n, includes deck mounted gooseneck faucet, studs for countertop mounting, 1-1/2" IPS drain fitting <b>Extended Total for Item No. 135:</b>
136			Cash Register(s) - By Owner
137			Trash Receptacle(s) - By Owner
138			Office Furniture - By Owner
139			Condiment Dispenser - By Owner
140			Lockers - By Owner
141	3	ea	<b>FREEZER, REACH-IN</b> Delfield Model No. 6125XL-S Freezer, Reach-in, single-section, 20.0 cu.ft., top mounted self-contained refrigeration, stainless steel front, alum. ends, ABS interior, (3) epoxy coated wire shelves, solid hinged full height door, casters, 1/2 hp, Energy Star 3 ea 115v/60/1 with cord & NEMA 5-15P, std 3 ea 1 Yr parts and labor, 5 Yr compressor warranty std. 1 ea **** Door hinged on right **** 2 ea **** Door hinged on left ****

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**Extended Total for Item No. 141:**

142 1 ea **WORKTABLE**  
 Custom Model No. WT  
 Work Table 36" x 36" w/casters

**Extended Total for Item No. 142:**

143 Syrup Pumps - By Owner

144 1 ea **DISHTABLE SORTING SHELF**  
 Custom Model No. SLANT-21-X  
 Slanted Rack Shelf, wall mount, 21" long, holds 1 glass/dish rack, 18/304  
 s/s, includes wall brackets

**Extended Total for Item No. 144:**

145A 1 ea **SHELF, WALL-MOUNTED**  
 Custom Model No. WSD-3612-I  
 Shelf, wall-mounted, 3 feet long, 12" wide, 18/430 series stainless steel

**Extended Total for Item No. 145A:**

145A 2 ea **SHELVING, WALL-MOUNTED**  
 SSP, Inc Model No. EWMS-1224-X Packed: each  
 E-Series Shelf, wall-mounted, 12" x 24", (2) wall brackets included, 18/430  
 stainless steel construction, NSF (Flyer Pricing)

**Extended Total for Item No. 145A:**

145B 5 ea **SHELF, WALL-MOUNTED**  
 Custom Model No. WSD-3612-I  
 Shelf, wall-mounted, 3 feet long, 12" wide, 18/430 series stainless steel

**Extended Total for Item No. 145B:**

145C Office Wall Shelving - By Owner

145D 3 ea **SHELVING, WALL-MOUNTED**  
 SSP, Inc Model No. EWMS-1460-X Packed: each  
 E-Series Shelf, wall-mounted, 14" x 60", (2) wall brackets included, 18/430  
 stainless steel construction, NSF (Flyer Pricing)

**Extended Total for Item No. 145D:**

146 1 ea **FAT VAT TRANSPORTER**  
 Worcester Industrial Products Corp. Model No. SS-611-TL  
 Fat Vat, safe oil transport system holds 40 lb. (5.3 gallon)

**Extended Total for Item No. 146:**

147 3 ea **SHELF, WALL-MOUNTED**  
 Custom Model No. WSD-9614  
 Shelf, wall-mounted, 8'0" feet long, 14" wide, 16 gauge 430 stainless steel

**Extended Total for Item No. 147:**

148 Syrup Rail - By General Contractor

149 Safe - By Owner

175 Dish Washer - By Vendor

176 Water Heater - By Owner

177 2 ea **SINK, HAND**  
 Universal Stainless Model No. EHS-1L  
 Economy Hand Sink, wall model, 12" wide x 10" front-to-back x 6" deep,  
 left splash, non-drip edge on 3 sides, includes splash mounted faucet,  
 basket drain & wall brackets, stainless steel construction

**Extended Total for Item No. 177:**

\*09 OCT 19 11:41 AM '09

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178 1 ea **DIPPERWELL**  
Fisher Model No. 3041 Packed: each  
Dipperwell, w/faucet, 6" dia., overflow insert, stainless steel, drain, 1-1/2" x 4" tailpiece

**Extended Total for Item No. 178:**

179 Mop Sink - By P.C.

180 1 ea **WORKTABLE W/SINK**

Custom Model No. WT wsink

Work Table 7'0" x 30" w/18"x 24" sink, lever drain and undershelf

1 ea Fisher 3312 Faucet, deck-mounted, 8" C.C. mixing valve, 10" swing spout, with 1/2" inlets

**Extended Total for Item No. 180:**

184 1 ea **SINK, THREE (3) COMPARTMENT**

Universal Stainless Model No. CS-3N1824-2D-24

Corner Sink, three compartment, 24" left & right-hand drainboards, (2)24" front-to-back x 18" wide comp. and (1)24" x 24" comp., 12" deep, with 9" high splash, galvanized legs, 16/300 series stainless steel

3 ea US-LD Twist Handle Lever Drain, 1-1/2" or 2" drain

**Extended Total for Item No. 184:**

184.1 1 ea **PRE-RINSE UNIT**

Fisher Model No. 2210-WB Packed: each

Pre-Rinse Assembly, wall-mounted mixing valve, 8" adjustable centers, with spring action flexible gooseneck, with spray head (1.15 gallons per minute @ 60 PSI), with wall bracket

1 ea 2901-16 Add-On Faucet, for rigid control valves, 16" swing spout

1 ea 3252 Faucet, wall/backsplash mount, 8" adjustable centers, 10" swing spout, 1/2" inlets

**Extended Total for Item No. 184.1:**

195 1 ea **EXHAUST HOOD**

Captive-Aire Model No. EXH

10'6" long hood, w/perforated make up air plenum, 3" air space and lights, 18" high max closure panels, wall flashing

1 ea FANS includes exhaust fan w/ curb

1 ea ELEC Electrical System for the hood controls and Ansul

1 ea GGXD Grease Guard XD Unit

INSTALLED BY G.C./M.C.

**Extended Total for Item No. 195:**

197 2 ea **WORKTABLE**

Custom Model No. WT

Work Table 12" x 36" w/undershelf and adjustable legs

**Extended Total for Item No. 197:**

KDI-1 1 ea **DELIVER & SET**

W. West Equipment & Furnishings Model No. unavailable

Installation of the above listed items supplied by W. West, uncrate, move into building, set in place, level, silicone after GC's subcontractors make final connections, remove all trash to the GC's on site trash dumpster and wipe down equipment. (DOES NOT INCLUDE ANY FINAL CONNECTIONS, HANGING EXHAUST HOODS, INSTALLING WALL FLASHING AND CLOSURE PANELS, MOUNTING FAUCETS, HANGING DISPOSAL, PERMITS, TRASH DUMPSTER CHARGES OR WEEKEND/HOLIDAY LABOR.)

1 ea DEL Delivery charge to the jobsite for the equipment and furniture.

**Extended Total for Item No. KDI-1:**

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KDI-2 1 ea **REFRIGERATION INSTALLATION**

W. West Equipment & Furnishings Model No. unavailable

Includes hanging coils, piping refrigeration lines from coils to compressors on building roof, set compressors on building roof, and wrap freezer drain line with heater, start-up and provide (1)one year service warranty.

(DOES NOT INCLUDE ANY FINAL ELECTRICAL CONNECTIONS, DRAIN LINES, ROOF CURB, CURB CAPS, PITCH POCKETS, WALL, OR ROOF PENETRATIONS.)

**Extended Total for Item No. KDI-2:**

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# OUR FAVORITES

CLASSIC RECIPES.

## CLASSIC SMASH™

American cheese, **SMASH SAUCE**, ketchup, lettuce, tomato, pickles and onion on an egg bun.

## BACON CHEESEBURGER

Applewood-smoked **BACON**, **AMERICAN CHEESE**, yellow mustard, ketchup, pickles and onion on an egg bun.

## AVOCADO CLUB CHICKEN

**FRESH AVOCADO**, applewood-smoked **BACON**, lettuce, tomato, ranch dressing and mayo on a multi-grain bun.

## SMASHFRIES®

Tossed with **ROSEMARY**, olive oil and garlic.

# smashburger.

SIGNATURE RECIPES.

## REGIONAL BURGERS

Our regional burgers are designed specifically to represent unique **LOCAL FLAVORS**. Check specific market menu for your options.

## BBQ, BACON & CHEDDAR

BBQ sauce, applewood-smoked **BACON**, cheddar and **HAYSTACK ONIONS** on an egg bun.

## TRUFFLE MUSHROOM SWISS

**TRUFFLE** mayo, sautéed **BABY PORTABELLA MUSHROOMS** and aged Swiss on an egg bun.

## SPICY BAJA

**FRESH JALAPEÑOS**, **GUACAMOLE**, pepper jack, lettuce, tomato, onion and chipotle mayo on a spicy chipotle bun.

## AVOCADO CLUB

**FRESH AVOCADO**, applewood-smoked **BACON**, lettuce, tomato, ranch dressing and mayo on a multi-grain bun.

## SPICY VEGGIE BLACK BEAN

**FRESH JALAPEÑOS**, **GUACAMOLE**, pepper jack, lettuce, tomato, onion and chipotle mayo on a spicy chipotle bun.

## CREATE YOUR OWN BURGER

American cheese, egg bun and your choice of any of our **FREE** sauces and toppings or **\$1 PREMIUM** add-ons below.

SMALL, REGULAR, AND BIG  
SIZES AVAILABLE



## \$1 PREMIUM ADD-ONS

APPLEWOOD-SMOKED BACON  
GRILLED MUSHROOMS  
FRESH SLICED AVOCADO  
GUACAMOLE  
FRIED EGG

## FREE SAUCES & TOPPINGS

Smash Sauce  
Spicy Chipotle  
BBQ  
Ranch  
Yellow Mustard  
Ketchup  
Mayo  
Fresh Jalapeños  
Grilled Onions  
Red Onion  
Lettuce  
Tomato  
Pickles

# SHAKES & MALTS

OREO®, NUTTER BUTTER®,  
BUTTERFINGER®

VANILLA, CHOCOLATE, STRAWBERRY



# SMASHCHICKEN®

©14 FEB 24 U.S. Lic. #1040

100% TENDER MARINATED CHICKEN.

## BBQ, BACON & CHEDDAR

BBQ sauce, applewood-smoked **BACON**, cheddar and **HAYSTACK ONIONS** on an egg bun.

## TRUFFLE MUSHROOM SWISS

TRUFFLE mayo, sautéed **BABY PORTABELLA MUSHROOMS** and aged Swiss on an egg bun.



## SPICY BAJA

FRESH **JALAPEÑOS**, **GUACAMOLE**, pepper jack, lettuce, tomato, onion and chipotle mayo on a spicy chipotle bun.



## AVOCADO CLUB

FRESH **AVOCADO**, applewood-smoked **BACON**, lettuce, tomato, ranch dressing and mayo on a multi-grain bun.

## CLASSIC

Lettuce, tomato, pickles, red onion and mayo on a **MULTI-GRAIN** bun.

# SALADS

FRESH, CRISP GREENS.

SALAD OPTIONS SUBJECT TO AVAILABILITY

## HARVEST

Fresh greens, balsamic tomatoes, raisins, **DRIED CRANBERRIES**, sunflower seeds, pumpkin seeds, and **BLUE CHEESE** topped with **BALSAMIC** vinaigrette.



## CLASSIC COBB

Fresh greens, fried egg, applewood-smoked **BACON**, tomatoes, onions, cheddar and **BLUE CHEESE** topped with buttermilk ranch dressing.

## BAJA COBB

Fresh greens, applewood-smoked **BACON**, sliced jalapeños, **GUACAMOLE**, cheddar, tomatoes and onions topped with spicy chipotle dressing.

# FRIES & SIDES

SOMETHING FOR EVERYONE.

## FRENCH FRIES

## SMASHFRIES®

## SWEET POTATO FRIES

## HAYSTACK ONIONS

## VEGGIE FRITES

Flash-fried carrot sticks and green beans.

## SIDE GARDEN SALAD



# KIDS MEALS

For kids 12 and under.

Served with fries and a kids soft drink or milk.

**KIDS SMASH™ CHICKEN STRIPS**

**HOT DOG**

# BEVERAGES

*Coca-Cola* FOUNTAIN DRINKS

ICED TEA

BEER VARIETIES ALSO AVAILABLE IN SOME LOCATIONS

\*All Smashburger vegetarian items have no meat, poultry, fish or seafood by ingredients. Please be aware that due to our kitchen operations, including shared cooking and preparation areas, it is possible for any food item to come into contact with animal products.

8. Does your restaurant contain any games or television?  Yes  No  
If yes, specify what types and how many of each type (Televisions, Pool tables, Video Games, Darts, etc).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Do you have live entertainment or dancing?  Yes  No  
(If yes, what type and how often?)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Use space below or attach a list of employee positions and their duties to fully staff your business.

The restaurant will consist of the following:  
- 2 shifts / store  
- Each shift → 5-10 employees  
- Employees will be cooks, cashiers, shift managers, Assistant managers + general manager.

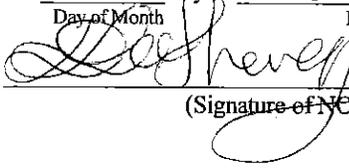
14 FEB 20 11:41 AM Dept #1037

I, Scott Allan Crane, hereby declare that I am the APPLICANT filing this application. I have  
(Print full name)  
read this application and the contents and all statements true, correct and complete.

X   
(Signature of APPLICANT)

State of Colorado County of Denver  
The foregoing instrument was acknowledged before me this  
7<sup>th</sup> day of February, 2014.  
Day of Month Month Year

My commission expires on: 8/24/16

  
(Signature of NOTARY PUBLIC)

DaSha M. LANDRY  
NOTARY PUBLIC  
STATE OF COLORADO  
NOTARY ID 20124056865  
MY COMMISSION EXPIRES AUGUST 24, 2016

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

**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 RECORDS REQUIRED BY THE STATE**

In the event that your business is audited by the Department of Liquor, you will be asked to provide documentation of compliance with A.R.S. §4-205.02(H). Other documents that may be required for audit include and 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 reflecting prices during the audit period.
4. A price list for alcoholic beverages on menu 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, etc).
10. General Ledger
  - A. Sales Journals/Monthly Sales Schedules
    - 1) Daily Sales Reports (to include the name of wait staff, 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
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 to be consumed off of the licensed premises
  - B. All documents which support purchases made for food to be consumed off of the licensed premises
  - C. All coupons/specials/discounts

14 FEB 26 11:41 AM Dept RR 4 27

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.

**REVOCAION 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(H)**

**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 (H)**

1. "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.

2. "Restaurant" means an establishment which derives at least forty per cent of its gross revenue from the sale of food, including sales of food for consumption off the licensed premises if the amount of these sales included in the calculation of gross revenue from the sale of food does not exceed fifteen percent of all gross revenue of the restaurant.

I, Scott Allan Crane have read and fully understand all aspects of this statement.  
Print Full Name (first, middle, last)

[Signature]  
Signature of Licensee

**Notary**

State of Colorado County of Denver  
State County

The foregoing instrument was acknowledged before me this

24 day of February, 2014  
Day Month Year

My Commission Expires on: 5 July 2017  
Day Month Year

[Signature]  
Signature of Notary

JENNA FRIEDERICH  
NOTARY PUBLIC  
STATE OF COLORADO  
NOTARY ID 20134041865  
MY COMMISSION EXPIRES JULY 5, 2017

14 FEB 26 10:41 AM '14

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

AZ CORPORATION COMMISSION  
FILED

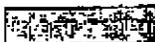
AZ Corp. Commission



04495023

DEC 16 2013

FILE NO. R-1892584-S



DO NOT WRITE ABOVE THIS LINE! RESERVED FOR ACD USE ONLY.

**APPLICATION FOR REGISTRATION  
OF FOREIGN LIMITED LIABILITY COMPANY**

*Please read Instructions L025!*

1. **ENTITY TYPE** - check only one to indicate the type of entity applying for registration:

LIMITED LIABILITY COMPANY

PROFESSIONAL LIMITED LIABILITY COMPANY

2. **NAME IN STATE OR COUNTRY OF FORMATION (FOREIGN NAME)** - enter the exact, true name of the foreign LLC:

Smashburger Acquisition - Phoenix LLC

3. **NAME TO BE USED IN ARIZONA (ENTITY NAME)** - identify the name the foreign LLC will use in Arizona by checking 3.1 or 3.2 (check only one), and follow instructions:

3.1  Name in state or country of formation, with no changes or additions - go to number 4 and continue.

3.2  Fictitious name - check this if the foreign LLC's name in its state or country of formation is not available for use in Arizona or if that name does not contain an LLC identifier, and enter the name in number 3.3 below. **NOTE** - a resolution of the company adopting the fictitious name must be attached to and submitted with this form.

3.3 If you checked 3.2, enter or print the name to be used in Arizona:

4. **PROFESSIONAL LIMITED LIABILITY COMPANY SERVICES** - If professional LLC is checked in number 1 above, describe the professional services that the professional LLC will provide (examples: law firm, accounting, medical):

5. **FOREIGN DOMICILE** - list the state or country in which the foreign LLC was formed:

Delaware

6. **DATE OF FORMATION IN FOREIGN DOMICILE:** 12/12/2013

7. **PURPOSE OR GENERAL CHARACTER OF BUSINESS** - describe or state the purpose of the foreign LLC or the general character of the business it proposes to transact in Arizona:

Restaurant management and to engage in any lawful act or activity for which limited liability companies may be organized.

FORM 001  
REV. 2012

Arizona Corporation Commission - Corporations Division  
Page 1 of 3

AZCCOM-0000013 Webform Client Online

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<b>8. STATUTORY AGENT IN ARIZONA:</b>					
<b>8.1 REQUIRED</b> - give the name (can be an individual or an entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent:			<b>8.2 OPTIONAL</b> - Mailing address in Arizona of statutory agent, if different from street address (can be a P.O. Box):		
National Registered Agents, Inc. Statutory Agent name (required)					
Attention (optional) 2390 East Camelback Road			Attention (optional)		
Address 1			Address 1		
Address 2 (optional) City Phoenix		State AZ	Zip 85016	Address 2 (optional) City State Zip	
<b>8.3 REQUIRED</b> - the Statutory Agent Acceptance form M002 must be submitted along with this Application For Registration.					

**9. PRINCIPAL OFFICE ADDRESS - FOREIGN DOMICILE STREET ADDRESS** - see *Instructions 10251* - give the physical or street address (not a P. O. Box) of the foreign LLC required to be maintained in its state of organization, or, if not so required, of the foreign LLC's statutory agent in its state or country of organization:

Attention (optional) 160 Greenbree Drive, Suite 101		
Address 1		
Address 2 (optional) Dover		DE 19904
City	State or Province	Zip
Country UNITED STATES		

**10. OPTIONAL - ARIZONA KNOWN PLACE OF BUSINESS ADDRESS:**

**10.1** Is the Arizona known place of business street address the same as the street address of the statutory agent?  Yes - go to the next page and continue.  
 No - complete number 10.2 and continue.

**10.2** If you answered "no" to number 10.1, give the physical or street address (not a P.O. Box) of the known place of business of the LLC in Arizona:

Attention (optional)		
Address 1		
Address 2 (optional)		
City	State or Province	Zip
Country		

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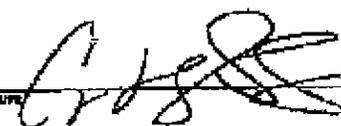
**COMPLETE NUMBER 11 OR NUMBER 12 - NOT BOTH.**

11. **MANAGER-MANAGED LLC** - see *Instructions L0251* - check this box  If management of the LLC is vested in a manager or managers, and complete and attach the Manager Structure Attachment form L040. *The filing will be rejected if it is submitted without the attachment.*

12. **MEMBER-MANAGED LLC** - see *Instructions L0251* - check this box  If management of the LLC is reserved to the members, and complete and attach the Member Structure Attachment form L041. *The filing will be rejected if it is submitted without the attachment.*

13. **SIGNATURE:** By checking the box marked "I accept" below, I acknowledge *under penalty of perjury* that this document together with any attachments is submitted in compliance with Arizona law:

I ACCEPT

Signature:  Printed Name: Courtney L. Seely Date: 12-13-2013

**REQUIRED** - check only one and fill in the corresponding blank if signing for an entity:

<input type="checkbox"/> I am the individual Manager of this manager-managed LLC or I am signing for an entity manager named:	<input type="checkbox"/> I am a Member of this member-managed LLC or I am signing for an entity member named:	<input checked="" type="checkbox"/> I am a duly authorized agent for this LLC.
---	---	--

Filing Fee: \$190.00 (regular processing) Expedited processing - add \$35.00 to filing fee. All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100
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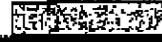
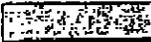
Please be advised that A.C.C. forms reflect only the minimum regulations required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.  
 All documents filed with the Arizona Corporation Commission are public records and are open for public inspection.  
 If you have questions after reading the Instructions, please call 602-542-3328 or Contact Arizona any 602-944-8888.

L0251.001  
Rev: 2010

Arizona Corporation Commission - Corporate Division  
Page 3 of 4

Agencies - do not file within 10 days of date

14 FEB 25 14y. Lic. # 9 17



DO NOT WRITE ABOVE THIS LINE; RESERVED FOR AOC USE ONLY.

**MEMBER STRUCTURE ATTACHMENT**

1. **ENTITY NAME** - give the exact name of the LLC (foreign LLCs - give name in domestic state or country):  
**Smashburger Acquisition - Phoenix LLC**

2. **A.C.C. FILE NUMBER (IF KNOWN)** \_\_\_\_\_  
 Find the A.C.C. file number on the upper corner of filed documents OR on our website at: <http://www.azcc.gov/DM/Signs/Corporations>

3. Check one box only to indicate what document the Attachment goes with:

Articles of Organization       Articles of Amendment  
 Application for Registration       Articles of Amendment to Application for Registration

4. **MEMBERS** - give the name and address of all Members. If more space is needed, use another Member Structure Attachment form.

Smashburger Phoenix JV LLC							
Name 1515 Arapahoe Street				Name			
Address 1 Tower 1, 10th Floor				Address 1			
Address 2 (optional)				Address 2 (optional)			
Denver	CO	80202					
City	State or Province	Zip	City	State or Province	Zip	Country	
Country	UNITED STATES						
Name				Name			
Address 1				Address 1			
Address 2 (optional)				Address 2 (optional)			
City	State or Province	Zip	City	State or Province	Zip	Country	
Country							
Name				Name			
Address 1				Address 1			
Address 2 (optional)				Address 2 (optional)			
City	State or Province	Zip	City	State or Province	Zip	Country	
Country							

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DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

**STATUTORY AGENT ACCEPTANCE**

Please read Instructions M0021

1. **ENTITY NAME** - give the exact name in Arizona of the corporation or LLC that has appointed the Statutory Agent:

Stromberger Acquisition - Phoenix LLC

2. **A.C.C. FILE NUMBER** (if entity is already incorporated or registered in AZ):

Find the A.C.C. file number on the upper corner of filed documents OR on our website at: <http://www.azcc.gov/Divisions/Corporations>

3. **STATUTORY AGENT NAME** - give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be either an individual or an entity):

National Registered Agents, Inc.

- 3.1 Check one box:
- The statutory agent is an Individual (natural person).
  - The statutory agent is an Entity.

**STATUTORY AGENT SIGNATURE:**

By the signature appearing below, the individual or entity named in number 3 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the entity replaces the statutory agent or the statutory agent resigns, whichever occurs first.

By typing or entering my name and checking the box marked "I accept" below, I intend to affix my electronic signature and (or through my physical signature appearing below) I acknowledge under penalty of perjury that this document is submitted in compliance with Arizona law.

I ACCEPT

Note: If the statutory agent is an individual, the signature must match exactly the name listed in number 3.

Char McAdow Char McAdow - Asst. Secretary 12/16/2013  
 Signature Printed Name Date

**REQUIRED** - check only one:

<input type="checkbox"/> Individual as statutory agent: I am signing on behalf of myself as the individual	<input checked="" type="checkbox"/> Entity as statutory agent: I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity.
--	---

Filing Fee: None All fees are nonrefundable - see instructions.	Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100
--	---

Please be advised that A.C.C. forms collect only the minimums provided required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business. All documents filed with the Arizona Corporation Commission are public record and are open for public inspection. If you have questions after reading the instructions, please call 602-542-6026 or (toll-free Arizona only) 800-943-5913.

M005.001  
Rev. 2010

Arizona Corporation Commission - Corporations Division  
Page 1 of 1

A2002N-2004017 Printed Electronically

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SMASHBURGER ACQUISITION - PHOENIX LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF DECEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SMASHBURGER ACQUISITION - PHOENIX LLC" WAS FORMED ON THE TWELFTH DAY OF DECEMBER, A.D. 2013.

5448243 8300

131429199

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



*[Handwritten Signature]*  
 Jeffrey W. Bullock, Secretary of State  
 AUTHENTICATION: 0984287

DATE: 12-16-13

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'14 FEB 25 11:47. Lic. #1917

# STATE OF ARIZONA



## Office of the CORPORATION COMMISSION

### CERTIFICATE OF REGISTRATION

To all to whom these presents shall come, greeting:

I, Jodi A. Jerich, Executive Director of the Arizona Corporation Commission, do hereby certify that

**\*\*\*SMASHBURGER ACQUISITION - PHOENIX LLC\*\*\***

a foreign limited liability company organized under the laws of the jurisdiction of Delaware did obtain a Certificate of Registration in Arizona on the 16th day of December 2013.

This certificate relates only to the legal authority of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 18th Day of December, 2013, A. D.



*Jodi A. Jerich*  
\_\_\_\_\_  
Jodi A. Jerich, Executive Director

By: *[Signature]*  
\_\_\_\_\_



FEB 24 2014

14 FEB 25 17. 11. PM 5 07

FILE NO: R-18925545

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

**ARTICLES OF AMENDMENT  
TO APPLICATION FOR REGISTRATION OF FOREIGN LLC**

*Read the Instructions L017i*

1. **ENTITY NAME** – give the exact name of the LLC as currently shown in A.C.C. records:

Smashburger Acquisition – Phoenix LLC

2. **A.C.C. FILE NUMBER:** R-1892554-5

Find the A.C.C. file number on the upper corner of filed documents OR on our website at: <http://www.azcc.gov/Divisions/Corporations>

**CHECK THE BOX NEXT TO EACH CHANGE BEING MADE AND  
COMPLETE THE REQUESTED INFORMATION FOR THAT CHANGE.**

3.  **LLC NAME CHANGE – NAME IN STATE OR COUNTRY OF FORMATION** (Foreign Name)  
– type or print the exact NEW name:

4.  **LLC NAME CHANGE – NAME USED IN ARIZONA** (Entity Name) – type or print the exact  
NEW name:

5.  **ENTITY TYPE CHANGE** – check one and follow instructions:  
 Changing to a PROFESSIONAL LLC – number 6 must also be completed.  
 Changing to a NON-PROFESSIONAL LLC (professional LLC becoming a regular LLC).

6.  **PROFESSIONAL SERVICES CHANGE** – list the NEW type of professional services  
the professional LLC will render:

7.  **FOREIGN DOMICILE CHANGE** – list the NEW domicile state or country:

8.  **PURPOSE / CHARACTER OF BUSINESS CHANGE** – state the NEW purpose or character  
of business:

9.  **MEMBERS CHANGE (CHANGE IN MEMBERS)** – *see Instructions L017i* – if a change is  
being made with respect to one or more members, complete and attach the **Amendment  
Attachment for Members** form L044. *The filing will be rejected if it is submitted without the  
attachment.*

10.  **MANAGERS CHANGE (CHANGE IN MANAGERS)** – see *Instructions L017i* – if a change is being made with respect to one or more managers, complete and attach the Amendment Attachment for Managers form L043. *The filing will be rejected if it is submitted without the attachment.*

11.  **MANAGEMENT STRUCTURE CHANGE** – see *Instructions L017i* – check only one box below and follow instructions:

**CHANGING TO MANAGER-MANAGED LLC** – complete and attach the Manager Structure Attachment form L040. *The filing will be rejected if it is submitted without the attachment.*

**CHANGING TO MEMBER-MANAGED LLC** – complete and attach the Member Structure Attachment form L041. *The filing will be rejected if it is submitted without the attachment.*

12.  **ADDRESS IN FOREIGN DOMICILE (PRINCIPAL OFFICE ADDRESS) CHANGE** – list the NEW address:

Attention (optional)		
Address 1		
Address 2 (optional)		
City	State or Province	Zip
Country		

13.  **ARIZONA KNOWN PLACE OF BUSINESS ADDRESS CHANGE:**

13.1 Is the **NEW** Arizona known place of business address the same as the **street address** of the statutory agent?  Yes – go to number 14 and continue.

No – go to number 13.2 and continue.

13.2 If you answered "No" to number 13.1, give the **NEW physical or street address** (not a P.O. Box) of the known place of business of the LLC in Arizona:

Attention (optional)		
Address 1		
Address 2 (optional)		
City	State or Province	Zip
Country		

14.  **STATUTORY AGENT CHANGE – NEW AGENT APPOINTED** – see *Instructions L017i*:

**14.1 REQUIRED** – give the **name** (can be an individual or an entity) and **physical or street address** (not a P.O. Box) in Arizona of the NEW statutory agent:

**14.2 OPTIONAL** - Mailing address in Arizona of NEW Statutory Agent, if different from street address (can be a P.O. Box):

Statutory Agent Name			Attention (optional)		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State	Zip	City	State	Zip
<b>14.3 REQUIRED</b> – the Statutory Agent Acceptance form M002 must be submitted along with these Articles of Amendment					

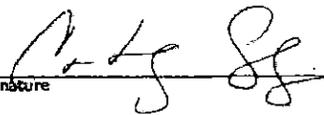
14 FEB 25 11:49 Lic. # 800

<b>15. <input type="checkbox"/> STATUTORY AGENT CHANGE – ADDRESS OF EXISTING STATUTORY AGENT –</b> complete 15.1 and/or 15.2:					
<b>15.1 NEW physical or street address</b> (not a P.O. Box) in Arizona of the existing statutory agent:			<b>15.2 NEW mailing address</b> in Arizona of the existing statutory agent (can be a P.O. Box):		
Attention (optional)			Attention (optional)		
Address 1			Address 1		
Address 2 (optional)		State	Zip	Address 2 (optional)	
City				City	

**16.  OTHER AMENDMENT** – if an amendment was made that was not addressed by the check boxes on this form, then you must attach to these Articles of Amendment a complete copy of the amendment.

**SIGNATURE:** By checking the box marked "I accept" below, I acknowledge *under penalty of perjury* that this document together with any attachments is submitted in compliance with Arizona law.

I ACCEPT


Courtney L. Seely
2.21.2014

Signature
Printed Name
Date

**REQUIRED** – check only one and fill in the corresponding blank if signing for an entity:

<input type="checkbox"/> I am the individual <b>Manager</b> of this manager-managed LLC or I am signing for an <b>entity manager</b> named:	<input type="checkbox"/> I am a <b>Member</b> of this member-managed LLC or I am signing for an <b>entity member</b> named:	<input checked="" type="checkbox"/> I am a duly <b>authorized agent</b> for this LLC.
---	---	---

Filing Fee: \$25.00 (regular processing) Expedited processing – add \$35.00 to filing fee. All fees are nonrefundable - see Instructions.	Mail: Arizona Corporation Commission – Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100
---	---

Please be advised that A.C.C. forms reflect only the **minimum** provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business. All documents filed with the Arizona Corporation Commission are **public record** and are open for public inspection. If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

**AMENDMENT ATTACHMENT FOR MEMBERS**

1. **ENTITY NAME** – give the exact name of the LLC as currently shown in A.C.C. records:  
 Smashburger Acquisition - Phoenix LLC

2. **A.C.C. FILE NUMBER:** R-1892554-5  
 Find the A.C.C. file number on the upper corner of filed documents OR on our website at: <http://www.azcc.gov/Divisions/Corporations>.

3. **Check one box only to indicate what document the Attachment goes with:**  
 Articles of Amendment      Articles of Amendment to Application for Registration

4. **MEMBERS CHANGE** – use one block per person - FOR MEMBERS CURRENTLY SHOWN IN A.C.C. RECORDS - list the name of each member being changed, and below that provide any new information for that member (new name and/or address), then check all boxes that apply to indicate the change being made for that member. FOR NEW MEMBERS – in a separate block, list the name in the NEW Name blank and give the address, and check the appropriate box. If more space is needed, use another Amendment Attachment for Members form.

Smashburger Phoenix JV LLC			Name currently shown in ACC records		
Name currently shown in ACC records			Icon Burger Acquisition LLC		
NEW Name			NEW Name		
1515 Arapahoe Street			1515 Arapahoe Street		
Address 1			Address 1		
Tower 1, 10th Floor			Tower 1, 10th Floor		
Address 2 (optional)			Address 2 (optional)		
Denver	CO	80202	Denver	CO	80202
City	State or Province	Zip	City	State or Province	Zip
UNITED STATES			UNITED STATES		
Country			Country		
<input type="checkbox"/> Address change	<input type="checkbox"/> Add as 20% or more member		<input type="checkbox"/> Address change	<input checked="" type="checkbox"/> Add as 20% or more member	
<input type="checkbox"/> Name change	<input type="checkbox"/> Add as less than 20% member		<input type="checkbox"/> Name change	<input type="checkbox"/> Add as less than 20% member	
	<input checked="" type="checkbox"/> Remove member			<input type="checkbox"/> Remove member	
Name currently shown in ACC records			Name currently shown in ACC records		
NEW Name			NEW Name		
Address 1			Address 1		
Address 2 (optional)			Address 2 (optional)		
City	State or Province	Zip	City	State or Province	Zip
Country			Country		
<input type="checkbox"/> Address change	<input type="checkbox"/> Add as 20% or more member		<input type="checkbox"/> Address change	<input type="checkbox"/> Add as 20% or more member	
<input type="checkbox"/> Name change	<input type="checkbox"/> Add as less than 20% member		<input type="checkbox"/> Name change	<input type="checkbox"/> Add as less than 20% member	
	<input type="checkbox"/> Remove member			<input type="checkbox"/> Remove member	

**ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL**

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

**QUESTIONNAIRE**

**Attention all Local Governing Bodies: Social Security and Birthdate Information is Confidential. This information may be given to local law enforcement agencies for the purpose of background checks only but must be blocked to be unreadable prior to posting or any public view.**

**Read carefully. This instrument is a sworn document. Type or print with BLACK INK. An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.**

TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT OR MANAGER. EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD AVAILABLE AT THIS OFFICE. FINGERPRINTS ON FBI-APPROVED CARDS ARE ACCEPTED FROM LAW ENFORCEMENT AGENCIES, BONA FIDE FINGERPRINT SERVICES, OR THE DEPARTMENT OF LIQUOR. THE DEPARTMENT CHARGES A \$13 FEE.

In addition to other fingerprint fees, a \$22 DPS background check fee will be charged for each fingerprint card.

The fees allowed by A.R.S. § 44-6852 will be charged for all dishonored checks.

**Liquor License #**

12079815

(If the location is currently licensed)

1. Check appropriate box →  Controlling Person  Agent  Manager (Only)  
 (Complete Questions 1-19) (Complete All Questions except # 14, 14a & 21)  
 Controlling Person or Agent must complete #21 for a Manager Controlling Person or Agent must complete # 21

2. Name: Lewkowitz Andrea Dahlman Date of Birth: \_\_\_\_\_  
 Last First Middle (NOT a Public Record)

3. Social Security Number: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ State: Arizona  
 (NOT a public record) (NOT a public record)

4. Place of Birth: Mankato MN USA Height: 5'8 Weight: 135 Eyes: Hzl Hair: Blonde  
 City State Country (not county)

5. Marital Status  Single  Married  Divorced  Widowed

6. Name of Current or Most Recent Spouse: Lewkowitz Harold Jerome N/A Date of Birth: \_\_\_\_\_  
 (List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden (NOT a public record)

7. You are a bona fide resident of what state? Arizona If Arizona, date of residency: \_\_\_\_\_

8. Telephone number to contact you during business hours for any questions regarding this document. \_\_\_\_\_

9. If you have been an Arizona resident for less than three (3) months, submit a copy of your Arizona driver's license or voter registration card.

10. Name of Licensed Premises: Smashburger #1393 Premises Phone: (623) 936-3020

11. Physical Location of Licensed Premises Address: 9915 W McDowell Rd Suite 101 Avondale Maricopa 85392  
 Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years. If unemployed part of the time, list those dates. List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (street address, city, state & zip)
04/2009	CURRENT	Attorney	Lewkowitz Law 2600 N. Central Avenue, #1775, Phoenix, AZ 85004
12/2003	04/2009	Attorney	Lewkowitz Law 3101 N. Central Avenue, #200, Phoenix, AZ 85012

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION ↓

13. Indicate your residence address for the last five (5) years:

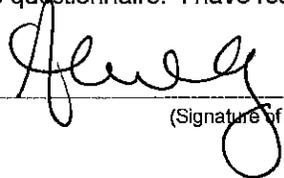
FROM Month/Year	TO Month/Year	Rent or Own	RESIDENTIAL Street Address If rented, attach additional sheet with name, address and phone number of landlord	City	State	Zip
02/1998	CURRENT	OWN				

**If you checked the Manager box on the front of this form skip to # 15**

14. As a Controlling Person or Agent, will you be physically present and operating the licensed premises?  
If you answered YES, how many hrs/day? \_\_\_\_\_, and **answer #14a below**. If NO, skip to #15.  YES  NO
- 14a. Have you attended a DLLC-approved Liquor Law Training Course within the past 5 years? (Must provide proof)  
**If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license.**  YES  NO
15. Have you been cited, arrested, indicted or summoned into court for violation of ANY law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past ten (10) years?  
In addition, please include all traffic tickets and complaints within the last ten (10) years that resulted in a warrant for arrest AND any traffic tickets and complaints that are alcohol or drug-related.  YES  NO
16. Are there ANY administrative law citations, compliance actions or consents, criminal arrest, indictments or summonses PENDING against you or ANY entity in which you are now involved? Include only criminal traffic tickets and complaints.  YES  NO
17. Have you or any entity in which you have held ownership, been an officer, member, director or manager EVER had a business, professional or liquor application or license rejected, denied, revoked, suspended or fined in this or any other state?  YES  NO
18. Has anyone EVER filed suit or obtained a judgment against you, the subject of which involved fraud or misrepresentation?  YES  NO
19. Are you NOW or have you EVER held ownership, been a controlling person, been an officer, member, director or manager on any other liquor license in this or any other state?  YES  NO

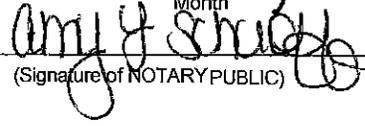
If any answer to Questions 15 through 19 is "YES" YOU MUST attach a signed statement.  
Give complete details including dates, agencies involved, and dispositions.  
**SUBSTANTIVE CHANGES TO THIS APPLICATION WILL NOT BE ACCEPTED**

20. I, Andrea Dahlman Lewkowicz, hereby declare that I am the APPLICANT/REPRESENTATIVE  
(print full name of Applicant)  
filing this questionnaire. I have read this questionnaire and all statements are true, correct and complete.

x   
(Signature of Applicant)

State of Arizona County of Maricopa

The foregoing instrument was acknowledged before me this  
12 day of FEBRUARY, 2014  
Month Year

  
(Signature of NOTARY PUBLIC)

My commission expires 02 2017  
Notary Public - Arizona  
Maricopa County  
My Commission Expires  
February 12, 2017

**COMPLETE THIS SECTION ONLY IF YOU ARE A CONTROLLING PERSON OR AGENT APPROVING A MANAGER'S APPLICATION**

21. The applicant hereby authorizes the person named on this questionnaire to act as manager for the named liquor license.  
The manager named must be at least 21 years of age.

State of \_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this

x \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
Signature of Controlling Person or Agent (circle one) Month Year

\_\_\_\_\_  
(Signature of NOTARY PUBLIC)

\_\_\_\_\_  
Print Name

My commission expires on: \_\_\_\_\_  
Day Month Year

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

SEE  
AMENDMENT

QUESTIONNAIRE

Attention all Local Governing Bodies: Social Security and Birthdate information is Confidential. This information may be given to local law enforcement agencies for the purpose of background checks only but must be blocked to be unreadable prior to posting or any public view.

Read carefully. This instrument is a sworn document. Type or print with BLACK INK. An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.

TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT, OR MANAGER. EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD AVAILABLE AT THIS OFFICE. FINGERPRINTS ON FBI-APPROVED CARDS ARE ACCEPTED FROM LAW ENFORCEMENT AGENCIES, BONA FIDE FINGERPRINT SERVICES, OR THE DEPARTMENT OF LIQUOR. THE DEPARTMENT CHARGES A \$13 FEE.

In addition to other fingerprint fees, a \$22 DPS background check fee will be charged for each fingerprint card.

The fees allowed by A.R.S. § 44-6852 will be charged for all dishonored checks.

Liquor License #

12079815

(If the location is currently licensed)

1. Check appropriate box →	<input checked="" type="checkbox"/> Controlling Person (Complete Questions 1-19)	<input type="checkbox"/> Agent (Complete Questions 1-19)	<input type="checkbox"/> Manager (Only) (Complete All Questions except # 14, 14a & 21)
	Controlling Person or Agent must complete #21 for a Manager		Controlling Person or Agent must complete # 21

2. Name: Crane Scott Allan Date of Birth: \_\_\_\_\_  
Last First Middle (NOT a Public Record)

3. Social Security Number: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ State: CO  
(NOT a public record) (NOT a public record)

4. Place of Birth: Denison, IW Height: 6" 1' Weight: 260 Eyes: Brwn Hair: Brwn  
City State Country (not county)

5. Marital Status Single Married  Divorced Widowed

6. Name of Current or Most Recent Spouse: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden (NOT a public record)

7. You are a bona fide resident of what state? Colorado If Arizona, date of residency: \_\_\_\_\_

8. Telephone number to contact you during business hours for any questions regarding this document. \_\_\_\_\_

9. If you have been an Arizona resident for less than three (3) months, submit a copy of your Arizona driver's license or voter registration card.

10. Name of Licensed Premises: Smashburger #1393 Premises Phone: 623-936-3020

11. Physical Location of Licensed Premises Address: 9915 W. McDowell Rd. Suite 101 Avondale maricopa 85392  
Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years. If unemployed part of the time, list those dates. List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (street address, city, state & zip)
Nov. 2007	CURRENT	Pres./CEO	Smashburger - 3900 East Mexico Ave, Suite 1200, Denver, CO 80210
			see attached for balance of employment history

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION ↓

13. Indicate your residence address for the last five (5) years:

FROM Month/Year	TO Month/Year	Rent or Own	RESIDENTIAL Street Address If rented, attach additional sheet with name, address and phone number of landlord	City	State	Zip
1/2009	CURRENT	Own				
01/2007	01/2009	Own				

**ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL**

800 W Washington 5th Floor

Phoenix AZ 85007-2934

(602) 542-5141

**AMENDMENT**

**QUESTIONNAIRE**

**Attention all Local Governing Bodies: Social Security and Birthdate information is Confidential. This information may be given to local law enforcement agencies for the purpose of background checks only but must be blocked to be unreadable prior to posting or any public view.**

**Read carefully. This instrument is a sworn document. Type or print with BLACK INK. An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.**

TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT, OR MANAGER. EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD AVAILABLE AT THIS OFFICE. FINGERPRINTS ON FBI-APPROVED CARDS ARE ACCEPTED FROM LAW ENFORCEMENT AGENCIES, BONA FIDE FINGERPRINT SERVICES, OR THE DEPARTMENT OF LIQUOR. THE DEPARTMENT CHARGES A \$13 FEE.

In addition to other fingerprint fees, a \$22 DPS background check fee will be charged for each fingerprint card.

The fees allowed by A.R.S. § 44-6852 will be charged for all dishonored checks.

**Liquor License #**

see attached

(If the location is currently licensed)

1. Check appropriate box →	<input checked="" type="checkbox"/> <b>Controlling Person</b> (Complete Questions 1-19) Controlling Person or Agent must complete #21 for a Manager	Agent (Complete All Questions <u>except</u> # 14, 14a & 21) Controlling Person or Agent must complete # 21	Manager (Only) (Complete All Questions <u>except</u> # 14, 14a & 21) Controlling Person or Agent must complete # 21
----------------------------	---	--	---

2. Name: Crane Scott Allan Date of Birth: \_\_\_\_\_  
Last First Middle (NOT a Public Record)

3. Social Security Number: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ State: CO  
(NOT a public record) (NOT a public record)

4. Place of Birth: Denison, IW, USA Height: 6" 1' Weight: 260 Eyes: Brwn Hair: Brwn  
City State Country (not county)

5. Marital Status: Single Married  Divorced Widowed

6. Name of Current or Most Recent Spouse: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden (NOT a public record)

7. You are a bona fide resident of what state? Colorado If Arizona, date of residency: \_\_\_\_\_

8. Telephone number to contact you during business hours for any questions regarding this document: \_\_\_\_\_

9. If you have been an Arizona resident for less than three (3) months, submit a copy of your Arizona driver's license or voter registration card.

10. Name of Licensed Premises: Smashburger #1393 Premises Phone: 623-936-3020

11. Physical Location of Licensed Premises Address: 9915 W. McDowell Rd. Suite 101  
Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years. If unemployed part of the time, list those dates. **List most recent 1st.**

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (street address, city, state & zip)
Nov. 2007	CURRENT	Pres./CEO	Smashburger - 3900 East Mexico Ave, Suite 1200, Denver, CO 80210

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION ↑

13. Indicate your residence address for the last five (5) years: ↓

FROM Month/Year	TO Month/Year	Rent or Own	RESIDENTIAL Street Address If rented, attach additional sheet with name, address and phone number of landlord	City	State	Zip
1/2009	CURRENT	Own				
01/2007	01/2009	Own				

If you checked the Manager box on the front of this form skip to # 15

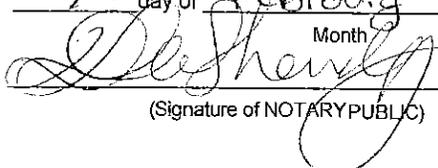
14. As a Controlling Person or Agent, will you be physically present and operating the licensed premises? YES  NO  
 If you answered YES, how many hrs/day? \_\_\_\_\_, and **answer #14a below**. If NO, skip to #15.
- 14a. Have you attended a DLLC-approved Liquor Law Training Course within the past 5 years? (Must provide proof) YES  NO  
**If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license.**
15. Have you been cited, arrested, indicted or summoned into court for violation of ANY law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past ten (10) years? YES  NO  
 In addition, please include all traffic tickets and complaints within the last ten (10) years that resulted in a warrant for arrest AND any traffic tickets and complaints that are alcohol or drug-related.
16. Are there ANY administrative law citations, compliance actions or consents, criminal arrest, indictments or summonses PENDING against you or ANY entity in which you are now involved? Include only criminal traffic tickets and complaints. YES  NO
17. Have you or any entity in which you have held ownership, been an officer, member, director or manager EVER had a business, professional or liquor application or license rejected, denied, revoked, suspended or fined in this or any other state?  YES NO
18. Has anyone EVER filed suit or obtained a judgment against you, the subject of which involved fraud or misrepresentation? YES  NO
19. Are you NOW or have you EVER held ownership, been a controlling person, been an officer, member, director or manager on any other liquor license in this or any other state?  YES  NO  
*see attached*

If any answer to Questions 15 through 19 is "YES" YOU MUST attach a signed statement.  
 Give complete details including dates, agencies involved, and dispositions.  
**SUBSTANTIVE CHANGES TO THIS APPLICATION WILL NOT BE ACCEPTED**

14 FEB 20 11:49 AM 2016

20. I, Scott Allan Crane, hereby declare that I am the APPLICANT/REPRESENTATIVE  
 (print full name of Applicant)  
 filing this questionnaire. I have read this questionnaire and all statements are true, correct and complete.

X   
 (Signature of Applicant)

State of Colorado County of Denver  
 The foregoing instrument was acknowledged before me this  
2<sup>nd</sup> day of February, 2016  
 Month Year  
  
 (Signature of NOTARY PUBLIC)

My commission expires on: 24 09 2016  
 Day Month Year

**DaSha M. LANDRY**  
**NOTARY PUBLIC**  
**STATE OF COLORADO**  
 NOTARY ID 20174058865  
 MY COMMISSION EXPIRES AUGUST 21, 2018

**COMPLETE THIS SECTION ONLY IF YOU ARE A CONTROLLING PERSON OR AGENT APPROVING A MANAGER'S APPLICATION**

21. The applicant hereby authorizes the person named on this questionnaire to act as manager for the named liquor license.  
 The manager named must be at least 21 years of age.

State of \_\_\_\_\_ County of \_\_\_\_\_  
 The foregoing instrument was acknowledged before me this  
 \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
 Month Year  
 X \_\_\_\_\_  
 Signature of Controlling Person or Agent (circle one)  
 \_\_\_\_\_  
 Print Name  
 \_\_\_\_\_  
 (Signature of NOTARY PUBLIC)  
 My commission expires on: \_\_\_\_\_  
 Day Month Year

Liquor License Violations

March 4, 2014

Smashburger Liquor License Violations

Location	Entity Name on Liquor License	EIN#	Date & Alleged Violation	Resolution / Penalty
Eagan, MN Store #1068	Smashburger Acquisition - Minneapolis LLC	26-3904169	7/5/2010 - Alcohol served to a minor	Civil Penalty - Paid \$500.00
Roseville, MN Store #1030	Smashburger Acquisition - Minneapolis LLC	26-3904169	9/13/2011 - Alcohol served to a minor	Civil Penalty - Paid \$250.00
Golden Valley, MN Store #1024	Smashburger Acquisition - Minneapolis LLC	26-3904169	8/23/2013 - Sale of alcohol to a minor	Acceptance Penalty Signed, paid a \$300 admin fee & one day suspension set for 10/21/2013
Edina, MN Store #1272	Smashburger Acquisition - Minneapolis LLC	26-3904169	11/13/2013 - Sales of alcohol to a minor	Administrative Penalty Citation letter only (no signing) -paid \$500 1 <sup>st</sup> violation fee - due 11/25/13
Overland Park, KS Store #1076	Smashburger Acquisition - Kansas LLC	45-3857992	5/16/2012 - Alcohol served to a minor	Civil Penalty - Paid \$500.00
Lafayette, CO Store #1001	Smashburger Acquisition - Boulder LLC	20-5000947	5/19/2012 - Alcohol served to a minor	Civil Penalty - Paid \$200.00 & signed stipulation agreement/order
Lafayette, CO Store #1001	Smashburger Acquisition - Boulder LLC	20-5000947	9/28/2013 - Alcohol served to a minor	2/26/14 gave notification to state to move forward on stipulation agreement for suspension of license - 10/16/13 rec'd notice of violation at store
Dillon, CO Store #1017	Smashburger Acquisition - Boulder LLC	20-5000947	7/16/2012 - Alcohol served to a minor	Civil Penalty - Paid \$200.00 & signed stipulation

ST 1 PM '14 ET RHH AT

*John*  
Scott Crane

Liquor License Violations

				agreement/order
Wheaton, IL Store #1145	Smashburger Acquisition - Chicago LLC	27-2823452	11/25/2013 - Alcohol served to a minor	2/13/14 will need to pay fine of \$500 - awaiting doc's from court - 1/16/14 received cert. mail letter for hearing on 2.13.14 to determine if violation occurred.
Elmhurst, IL Store #1147	Smashburger Acquisition - Chicago LLC	27-2823452	11/5/2012 - Alcohol served to a minor	Citation dismissed; no fine
Elmhurst, IL Store #1147	Smashburger Acquisition - Chicago LLC	27-2823452	7/5/2013 - Alcohol served to a minor	10/8/13 Sent entry of plea back to Mayor's office & copy to Mayor's attorney - Awaiting outcome of penalty fine from Mayor's office.
Bolingbrook, IL Store #1112	Smashburger Acquisition - Chicago LLC	27-2823452	6/5/2013 - Sale of alcohol to a minor	Civil Penalty - Paid \$250.00 & signed settlement letter
Bolingbrook, IL Store #1112	Smashburger Acquisition - Chicago LLC	27-2823452	5/8/2013 - Transfer of liquor to or from another location	Civil Penalty - Paid \$500.00 & signed settlement letter
Bloomingtondale, IL Store #1116	Smashburger Acquisition - Chicago LLC	27-2823452	5/23/13 - Store did not have the original liquor license posted nor did they have warning pregnancy signs posted	Civil Penalty - Paid \$250.00 & signed settlement letter
Arlington Heights, IL Store #1104	Smashburger Acquisition - Chicago LLC	27-2823452	7/17/2013 - Sale of alcohol to a minor	12/6/13 - Fine & Cost Assessment of \$1,132.40 to Village of Arlington Heights 10/21/13 hearing - 2 counts.

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*SLW*  
Scott Crane

Liquor License Violations

Batavia, IL Store #1102	Smashburger Acquisition - Chicago LLC	27-2823452	8/1/2013 - Sale of alcohol to a minor	Civil Penalty - Paid \$500.00 & signed plea agreement
Pearland, TX Store #1182	Smashburger Acquisition - HOU LLC	26-3127336	8/23/13 - Sale of alcohol to a minor	No admin action will be taken upon the company - 1 <sup>st</sup> occurrence

- Smashburger Acquisition Boulder LLC (#1001, #1016 & #1017) as of March 2014 have the Bars Program

14 MAR 13 Lique. Lic. PM 1:15

*John*  
Scott Crane

State of Colorado )  
 )  
County of Denver )

AFFIDAVIT

AFFIDAVIT WITH RESPECT TO Question #19 on the Liquor License Questionnaire form pending with the State of Arizona

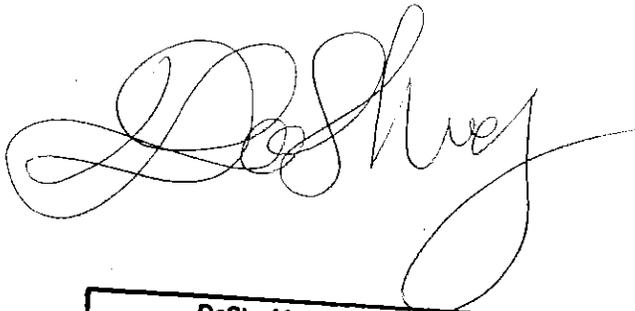
Scott Allan Crane, President and CEO  
Smashburger Acquisition Phoenix, LLC dba Smashburger

Hereby declares that I have been and am currently an officer of Smashburger Acquisition Phoenix, LLC and my name has been associated with various liquor licenses in the following states:

California, Arizona, Nevada, Illinois, Nebraska, Minnesota Virginia, Texas, Florida, Washington DC, Utah, Oklahoma, Colorado, Kansas and Maryland .

By:   
Scott Allan Crane- President & CEO  
Smashburger Acquisition Phoenix, LLC dba  
Smashburger

Subscribed and sworn to me this 14<sup>th</sup> day of February 2014



Dasha M. LANDRY  
NOTARY PUBLIC  
STATE OF COLORADO  
NOTARY ID 20124056865  
MY COMMISSION EXPIRES AUGUST 24, 2016

14 FEB 20 11:47 AM 1037

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

SEE  
AMENDMENT

QUESTIONNAIRE

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Read carefully. This instrument is a sworn document. Type or print with BLACK INK. An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.

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Liquor License #

12079815

(If the location is currently licensed)

1. Check appropriate box →

<input checked="" type="checkbox"/> Controlling Person (Complete Questions 1-19) Controlling Person or Agent must complete #21 for a Manager	<input type="checkbox"/> Agent (Complete All Questions except # 14, 14a & 21) Controlling Person or Agent must complete # 21	<input type="checkbox"/> Manager (Only) (Complete All Questions except # 14, 14a & 21) Controlling Person or Agent must complete # 21
--	--	---

2. Name: Moore, John Murrell Date of Birth: \_\_\_\_\_  
Last First Middle (NOT a Public Record)

3. Social Security Number: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ State: CO  
(NOT a public record) (NOT a public record)

4. Place of Birth: Chicago, IL Height: 6'1" Weight: 260 Eyes: Blu Hair: Brwn  
City State Country (not county)

5. Marital Status Single  Married  Divorced  Widowed

6. Name of Current or Most Recent Spouse: Deborah L. Chapman-Moore Date of Birth: \_\_\_\_\_  
(List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden (NOT a public record)

7. You are a bona fide resident of what state? Colorado If Arizona, date of residency: \_\_\_\_\_

8. Telephone number to contact you during business hours for any questions regarding this document. \_\_\_\_\_

9. If you have been an Arizona resident for less than three (3) months, submit a copy of your Arizona driver's license or voter registration card.

10. Name of Licensed Premises: Smashburger #1393 Premises Phone: 623-936-3020

11. Physical Location of Licensed Premises Address: 9915 W. McDowell Rd. Ste. 107, Avondale, AZ 85392  
Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years. If unemployed part of the time, list those dates. List most recent 1st

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (street address, city, state & zip)
09/03	CURRENT	CEO/Pres.	Consumer Capital Parnters - 3900 E. Mexico Dr. Denver, CO 80210

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION ↑

13. Indicate your residence address for the last five (5) years:

FROM Month/Year	TO Month/Year	Rent or Own	RESIDENTIAL Street Address If rented, attach additional sheet with name, address and phone number of landlord	City	State	Zip
7/2007	CURRENT	Own				

14 FEB 20 11:47 AM 1037  
14 FEB 20 11:47 AM 1037

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

**AMENDMENT**

**QUESTIONNAIRE**

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**Liquor License #**

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(If the location is currently licensed)

1. Check appropriate box →	<input checked="" type="checkbox"/> Controlling Person (Complete Questions 1-19)	<input type="checkbox"/> Agent (Complete Questions 1-19)	<input type="checkbox"/> Manager (Only) (Complete All Questions <u>except</u> # 14, 14a & 21)
	Controlling Person or Agent must complete #21 for a Manager		Controlling Person or Agent must complete # 21

2. Name: Moore, John Murrell Date of Birth: \_\_\_\_\_  
 Last First Middle (NOT a Public Record)

3. Social Security Number: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ State: CO  
 (NOT a public record) (NOT a public record)

4. Place of Birth: Chicago, IL, USA Height: 6'1" Weight: 260 Eyes: Blu Hair: Brwn  
 City State Country (not county)

5. Marital Status Single  Married Divorced Widowed

6. Name of Current or Most Recent Spouse: Deborah L. Chapman-Moore Date of Birth: \_\_\_\_\_  
 (List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden (NOT a public record)

7. You are a bona fide resident of what state? Colorado If Arizona, date of residency: \_\_\_\_\_

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11. Physical Location of Licensed Premises Address: 9915 W. McDowell Rd. Suite 101 Avondale Maricopa, 85392  
 Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years. If unemployed part of the time, list those dates. List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (street address, city, state & zip)
09/03	CURRENT	CEO/Pres.	Consumer Capital Parnters - 3900 E. Mexico Dr. Denver, CO 80210

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION ↑ ↓

13. Indicate your residence address for the last five (5) years:

FROM Month/Year	TO Month/Year	Rent or Own	RESIDENTIAL Street Address If rented, attach additional sheet with name, address and phone number of landlord	City	State	Zip
7/2007	CURRENT	OWN				

If you checked the Manager box on the front of this form skip to # 15

14. As a Controlling Person or Agent, will you be physically present and operating the licensed premises? YES  NO
- If you answered YES, how many hrs/day? \_\_\_\_\_, and **answer #14a below**. If NO, skip to #15.
- 14a. Have you attended a DLLC-approved Liquor Law Training Course within the past 5 years? (Must provide proof) YES  NO
- If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license.
15. Have you been cited, arrested, indicted or summoned into court for violation of ANY law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past ten (10) years? YES  NO
- In addition, please include all traffic tickets and complaints within the last ten (10) years that resulted in a warrant for arrest AND any traffic tickets and complaints that are alcohol or drug-related.
16. Are there ANY administrative law citations, compliance actions or consents, criminal arrest, indictments or summonses PENDING against you or ANY entity in which you are now involved? Include only criminal traffic tickets and complaints. YES  NO
17. Have you or any entity in which you have held ownership, been an officer, member, director or manager EVER had a business, professional or liquor application or license rejected, denied, revoked, suspended or fined in this or any other state? YES  NO
18. Has anyone EVER filed suit or obtained a judgment against you, the subject of which involved fraud or misrepresentation? YES  NO
19. Are you NOW or have you EVER held ownership, been a controlling person, been an officer, member, director or manager on any other liquor license in this or any other state?  YES  NO

If any answer to Questions 15 through 19 is "YES" YOU MUST attach a signed statement.  
Give complete details including dates, agencies involved, and dispositions.  
**SUBSTANTIVE CHANGES TO THIS APPLICATION WILL NOT BE ACCEPTED**

20. I, John Murrell Moore, hereby declare that I am the APPLICANT/REPRESENTATIVE  
(print full name of Applicant)  
filing this questionnaire. I have read this questionnaire and all statements are true, correct and complete.

X John M Moore  
(Signature of Applicant)

State of Colorado County of Denver

The foregoing instrument was acknowledged before me this  
18<sup>th</sup> day of February, 2014  
Month Year

Michelle Rose Diment  
(Signature of NOTARY PUBLIC)

MICHELLE ROSE DIMENT  
NOTARY PUBLIC  
STATE OF COLORADO  
NOTARY ID 20144002447  
MY COMMISSION EXPIRES JANUARY 16, 2018

16 1 2014  
Day Month Year

**COMPLETE THIS SECTION ONLY IF YOU ARE A CONTROLLING PERSON OR AGENT APPROVING A MANAGER'S APPLICATION**

21. The applicant hereby authorizes the person named on this questionnaire to act as manager for the named liquor license. The manager named must be at least 21 years of age.

State of \_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this

X \_\_\_\_\_  
Signature of Controlling Person or Agent (circle one)

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
Month Year

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
(Signature of NOTARY PUBLIC)

My commission expires on: \_\_\_\_\_  
Day Month Year

14 FEB 20 11:17 AM DEPT 111037

State of Colorado )  
 )  
County of Denver )

AFFIDAVIT

AFFIDAVIT WITH RESPECT TO Question #19 on the Liquor License Questionnaire form pending with the State of Arizona

John Murrell Moore, Trustee  
CCP Smash Revocable Trust- Member of Smashburger  
Master LLC

Hereby declares that I have been and am currently the trustee associated with Smashburger Master LLC and my name has been or currently is associated with the following liquor licenses, for these locations:

Colorado

Fast Casual Pizza Denver LLC dba Live Basil Pizza

California

- Smashburger Acquisition SoCal, LLC dba Smashburger
- Smashburger Acquisition San Francisco, LLC dba Smashburger
- Smashburger Acquisition Sacramento, LLC dba Smashburger

Arizona

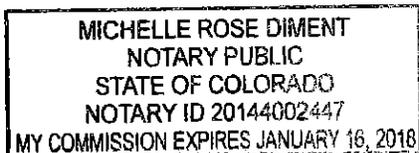
- Smashburger Acquisition Phoenix, LLC dba Smashburger

By: John Murrell Moore

John Murrell Moore  
Smashburger Acquisition Phoenix, LLC dba  
Smashburger

Subscribed and sworn to me this 25<sup>th</sup> day of February

M. Diment



14 FEB 27 11:09 AM 1110

**ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL**

800 W Washington 4th Floor  
Phoenix AZ 85007-2934  
(602) 542-5141

**QUESTIONNAIRE**

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In addition to other fingerprint fees, a \$22 DPS background check fee will be charged for each fingerprint card.

The fees allowed by A.R.S. § 44-6852 will be charged for all dishonored checks.

**Liquor License #**  
12079815  
(If the location is currently licensed)

1. Check appropriate box →	<b>Controlling Person</b> (Complete Questions 1-19) Controlling Person or Agent must complete #21 for a Manager	<b>Agent</b> (Complete All Questions <u>except</u> # 14, 14a & 21) Controlling Person or Agent must complete # 21	<input checked="" type="checkbox"/> <b>Manager (Only)</b> (Complete All Questions <u>except</u> # 14, 14a & 21) Controlling Person or Agent must complete # 21
----------------------------	---	---	--

2. Name: RISKE KURT THEODORE Date of Birth: \_\_\_\_\_  
Last First Middle (NOT a Public Record)

3. Social Security Number: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ State: ARIZONA  
(NOT a public record) (NOT a public record)

4. Place of Birth: PHOENIX ARIZONA USA Height: 6"2' Weight: 195 Eyes: Blue Hair: Blonde  
City State Country (not county)

5. Marital Status  Single  Married  Divorced  Widowed

6. Name of Current or Most Recent Spouse: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden (NOT a public record)

7. You are a bona fide resident of what state? ARIZONA If Arizona, date of residency: \_\_\_\_\_

8. Telephone number to contact you during business hours for any questions regarding this document. \_\_\_\_\_

9. If you have been an Arizona resident for less than three (3) months, submit a copy of your Arizona driver's license or voter registration card.

10. Name of Licensed Premises: SMASHBURGER # 1393 Premises Phone: 623-936-3020

11. Physical Location of Licensed Premises Address: 9915 W. Mc Dowell Rd. Ste. 101 Avondale Maricopa 85392  
Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years. If unemployed part of the time, list those dates. List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS <small>(street address, city, state &amp; zip)</small>
02/2014	CURRENT	General Manager	Smashburger 3900 E Mexico Ave. Ste 1200 Denver CO., 80210
5/2004	02/2014	General Manager	Sunwest Restaurant Concepts 6360 E Thomas Rd. # 100, Scottsdale AZ 85251

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION ↑ ↓

13. Indicate your residence address for the last five (5) years:

FROM Month/Year	TO Month/Year	Rent or Own	RESIDENTIAL Street Address <small>If rented, attach additional sheet with name, address and phone number of landlord</small>	City	State	Zip
12/2006	CURRENT	OWN				

If you checked the Manager box on the front of this form skip to # 15

14 FEB 27 11a, Lic. #1540

- 14. As a Controlling Person or Agent, will you be physically present and operating the licensed premises?  
If you answered YES, how many hrs/day? \_\_\_\_\_, and **answer #14a below**. If NO, skip to #15. YES NO
- 14a. Have you attended a DLLC-approved Liquor Law Training Course within the past 5 years? (Must provide proof)  
If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license. YES NO
- 15. Have you been cited, arrested, indicted or summoned into court for violation of ANY law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past ten (10) years?  
In addition, please include all traffic tickets and complaints within the last ten (10) years that resulted in a warrant for arrest AND any traffic tickets and complaints that are alcohol or drug-related. YES  NO
- 16. Are there ANY administrative law citations, compliance actions or consents, criminal arrest, indictments or summonses PENDING against you or ANY entity in which you are now involved? Include only criminal traffic tickets and complaints. YES  NO
- 17. Have you or any entity in which you have held ownership, been an officer, member, director or manager EVER had a business, professional or liquor application or license rejected, denied, revoked, suspended or fined in this or any other state? YES  NO
- 18. Has anyone EVER filed suit or obtained a judgment against you, the subject of which involved fraud or misrepresentation? YES  NO
- 19. Are you NOW or have you EVER held ownership, been a controlling person, been an officer, member, director or manager on any other liquor license in this or any other state?  YES NO  
*See Attached*

If any answer to Questions 15 through 19 is "YES" YOU MUST attach a signed statement.  
Give complete details including dates, agencies involved, and dispositions.  
**SUBSTANTIVE CHANGES TO THIS APPLICATION WILL NOT BE ACCEPTED**

20. I, Kurt Theodore Riske, hereby declare that I am the APPLICANT/REPRESENTATIVE  
(print full name of Applicant)  
filing this questionnaire. I have read this questionnaire and all statements are true, correct and complete.

14 FEB 26 11a, Lic. #1540

x *Kurt Theodore Riske*  
(Signature of Applicant)

State of Arizona County of Maricopa

The foregoing instrument was acknowledged before me this  
17<sup>th</sup> day of February, 2014  
Month Year

My commission expires on:



*Jeannie Watts*  
(Signature of NOTARY PUBLIC)

**COMPLETE THIS SECTION ONLY IF YOU ARE A CONTROLLING PERSON OR AGENT APPROVING A MANAGER'S APPLICATION**

21. The applicant hereby authorizes the person named on this questionnaire to act as manager for the named liquor license.  
The manager named must be at least 21 years of age.

State of Colorado County of Denver

The foregoing instrument was acknowledged before me this

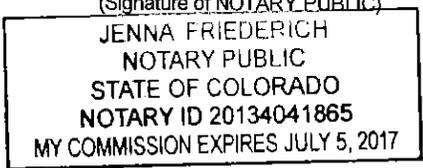
x *[Signature]*  
Signature of Controlling Person or Agent (circle one)

24 day of February, 2014  
Month Year

Scott Crane  
Print Name

*Jenna Friederich*  
(Signature of NOTARY PUBLIC)

My commission expires on: 5 July 2017  
Day Month Year



14 FEB 27 11:41 AM Lic. Lic. PM 5 140

State of Arizona )  
County of Maricopa )

AFFIDAVIT

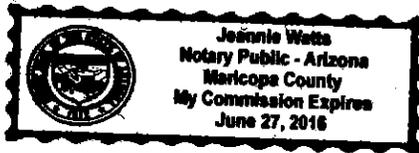
AFFIDAVIT WITH RESPECT TO Question #19 on the Liquor License Questionnaire form pending with the State of Arizona

Kurt Theodore Riske, General Manager  
Smashburger Acquisition Phoenix, LLC dba Smashburger

Hereby declares that I have been and am currently the general manager of Smashburger Acquisition Phoenix, LLC and my name has been or currently is associated with the following liquor licenses in the state of Arizona, for these locations:

"Doing Business As" Name	Physical Location Address	City	ST	ZipCode
Smashburger #1392	1949 E Camelback RD #164	Phoenix	AZ	85016
Smashburger #1391	777 S College Ave., Ste 105	Tempe	AZ	85281
Smashburger #1396	2000 E. Rio Salado Pkwy., Ste 1155	Tempe	AZ	85281
Smashburger #1397	21001 N. Tatum Blvd.	Phoenix	AZ	85050
Smashburger #1398	9918 W. Happy Valley Rd., Suite 225	Peoria	AZ	85383
Smashburger #1393	9915 W. McDowell Rd. Suite 101	Avondale	AZ	85392
Smashburger #1394	815 E Baseline Rd., Ste B-113	Tempe	AZ	85283
Smashburger #1395	5870 W Thunderbird Rd	Glendale	AZ	85306
Smashburger #1399	2440 W. Happy Valley Rd., F-101	Phoenix	AZ	85085
Smashburger #1401	2837 N. Power Road, Suite 102	Mesa	AZ	85215
Smashburger #1400	2415 E. Baseline Rd.	Phoenix	AZ	85042
Smashburger #1402	15801 N Frank Lloyd Wright Blvd, Ste. 100	Scottsdale	AZ	85260
Smashburger #1403	21202 S. Ellsworth Loop Rd.	Queen Creek	AZ	85142
Smashburger #1404	2805 N. Scottsdale Rd	Scottsdale	AZ	85257
Black Bear Diner	Liquor License #12076900	December 2006		

14 FEB 26 11:41 AM Lic. Lic. PM 3 49



By: Kurt Theodore Riske  
Kurt Theodore Riske  
Smashburger Acquisition Phoenix, LLC dba  
Smashburger

Subscribed and sworn to me this 20<sup>th</sup> day of February 2013

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

14 FEB 28 11:49 AM '16

**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.

KURT RLSKE  
 Full Name (please print)  
Kurt Rlske  
 Signature

JUNE 22, 2016  
 Training Completion Date

JUNE 22, 2016  
 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 checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	OFF SALE
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	BOTH	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	OTHER

If Trainee is Employed By A Licensee

SMASH BURGER  
 Name of Licensee Business Name Liquor License #

**Alcohol Training Program Provider Information**

ARIZONA BUSINESS COUNCIL FOR ALCOHOL EDUCATION

ARIZONA BUSINESS COUNCIL FOR ALCOHOL EDUCATION  
 Company or Individual Name (please print)  
77 EAST COLUMBUS AVENUE, SUITE 102  
 Address  
Phoenix AZ 85012 ( 602 ) 285-1396  
 City State Zip 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

FRED MALLAIRE  
 Name of Trainer (please print)  
Fred Mallaire  
 Trainer Signature 6-22-13  
 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.

13 JUL 9 11:49 AM '16

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



14 FEB 28 11:41 AM '09  
13 MAY 21 11:41 AM '09  
09 DEC 9 11:41 AM '09

**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.

KURT RISKE

Full Name (please print)

*Kurt Riske*  
Signature

12/07/2009

Training Completion Date

12/07/2014

Certificate Expiration Date

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

Type of Training Completed (check Yes or No)

- |   |  |            |   |  |          |
|---|--|------------|---|--|----------|
| <input type="checkbox"/> Yes            | <input checked="" 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 checked="" type="checkbox"/> No | BOTH       | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No | OTHER    |

If Trainee is Employed by a Licensee

SUN WEST BURGERS LLC  
Name of Licensee

SMASHBURGER  
Business Name

1578776  
Liquor License #

**Alcohol Training Program Provider Information**

THE BARTENDING ACADEMY

Company or Individual Name (please print)

1250 EAST APACHE BLVD, SUITE 111 TEMPE, ARIZONA 85281

Address

Tempe  
City

AZ 85281  
State Zip

(480) 9219925

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.

DWAYNE CRISSEY

Name of Trainer (please print)

*[Signature]*  
Trainer Signature

12/07/2009

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.

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**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

SERIES 12: RESTAURANT LICENSE

**ROUTING:**

- POLICE DEPARTMENT  
 FIRE DEPARTMENT  
 FINANCE DEPARTMENT  
 DEVELOPMENT SERVICES

---

**APPLICANT'S NAME: ANDREA DAHLMAN LEWKOWITZ**

**BUSINESS NAME: SMASHBURGER #1393**

**BUSINESS ADDRESS: 9915 W. McDOWELL RD., SUITE 101**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85392**

**DEPARTMENTAL COMMENTS:**

APPROVED  
 DENIED

  
\_\_\_\_\_  
SIGNATURE  
*Chief of Police*  
\_\_\_\_\_  
TITLE

3/17/14  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014**  
**PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 20TH, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

SERIES 12: RESTAURANT LICENSE

**ROUTING:**

POLICE DEPARTMENT

FIRE DEPARTMENT

FINANCE DEPARTMENT

DEVELOPMENT SERVICES

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**BUSINESS NAME: SMASHBURGER #1393**

**BUSINESS ADDRESS: 9915 W. MCDOWELL RD., SUITE 101**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85392**

**DEPARTMENTAL COMMENTS:**

APPROVED

DENIED

Valorie Russell  
SIGNATURE  
Fire Inspector  
TITLE

3/17/14  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014**  
**PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 20TH, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

**SERIES 12: RESTAURANT LICENSE**

**ROUTING:**

**POLICE DEPARTMENT**

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**FINANCE DEPARTMENT**

**DEVELOPMENT SERVICES**

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**BUSINESS NAME: SMASHBURGER #1393**

**BUSINESS ADDRESS: 9915 W. MCDOWELL RD., SUITE 101**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85392**

**DEPARTMENTAL COMMENTS:**

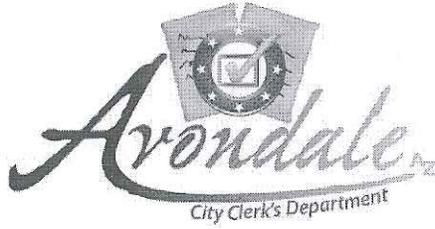
**APPROVED**

**DENIED**

  
SIGNATURE  
  
TITLE

  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014**  
**PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 20TH, 2014**



**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

SERIES 12: RESTAURANT LICENSE

**ROUTING:**

POLICE DEPARTMENT

FIRE DEPARTMENT

FINANCE DEPARTMENT

DEVELOPMENT SERVICES

---

**APPLICANT'S NAME: ANDREA DAHLMAN LEWKOWITZ**

**BUSINESS NAME: SMASHBURGER #1393**

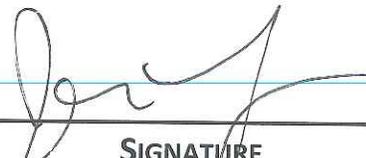
**BUSINESS ADDRESS: 9915 W. MCDOWELL RD., SUITE 101**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85392**

**DEPARTMENTAL COMMENTS:**

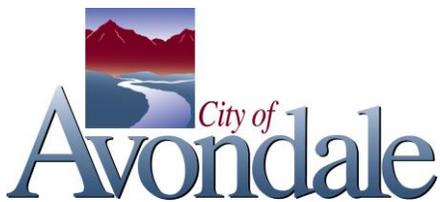
APPROVED

DENIED

  
\_\_\_\_\_  
SIGNATURE  
Zoning Specialist  
\_\_\_\_\_  
TITLE

3/17/14  
\_\_\_\_\_  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014**  
**PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 20TH, 2014**



## DEVELOPMENT SERVICES

### MEMORANDUM

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**DATE:** March 17, 2014

**TO:** Carmen Martinez, City Clerk

**PREPARED BY:** Jennifer Fostino, Zoning Specialist

**SUBJECT:** Series 12 Restaurant Liquor License for Smashburger  
Interim Permit and New License  
9915 W McDowell Rd, Ste 101

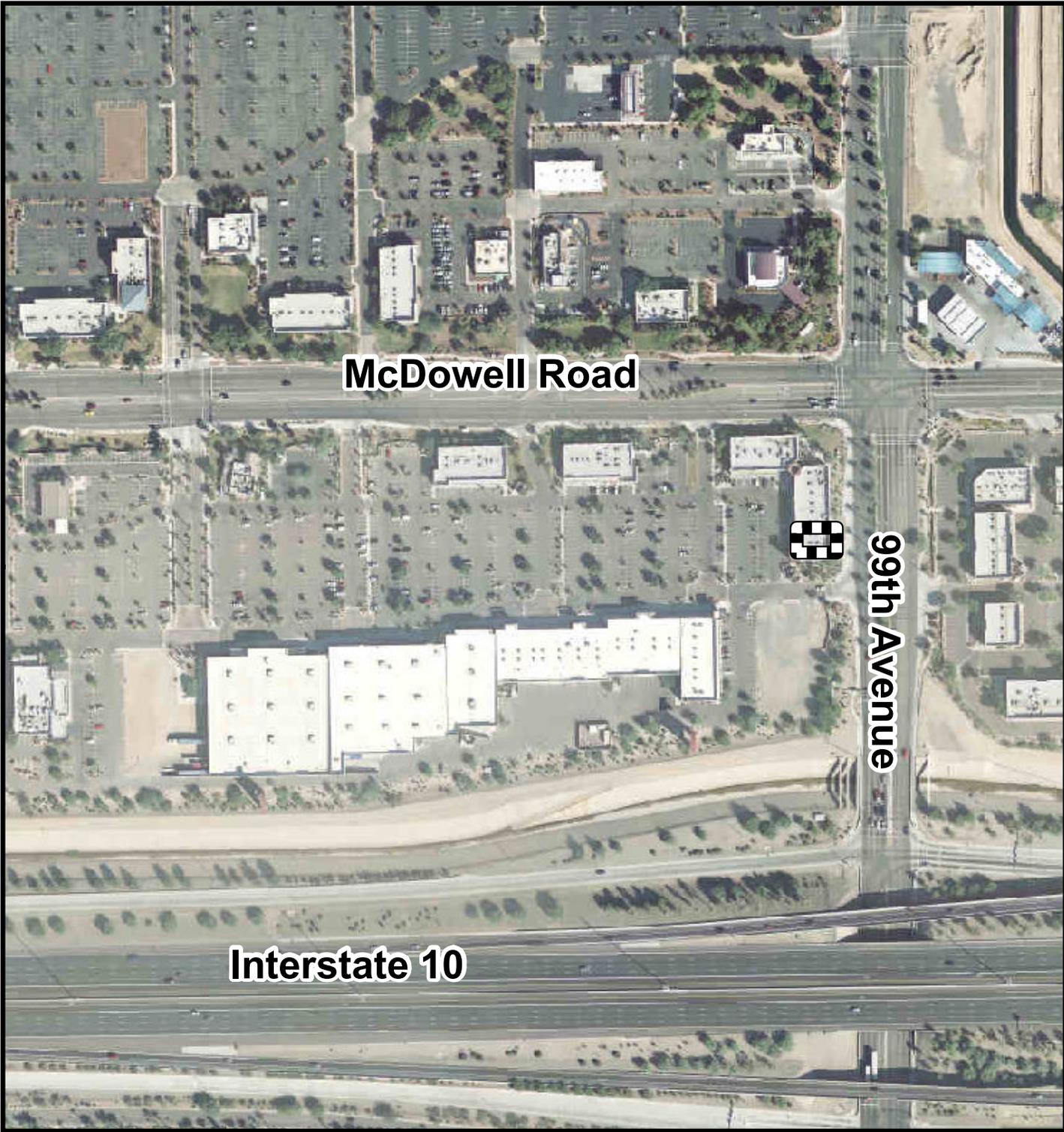
The site is located on the southwest corner of 99<sup>th</sup> Avenue and McDowell Road. The building is existing.

A Series 12 liquor license is exempt from the 300 foot separation requirement from a church, school, or fenced school recreational area.

The General Plan designates the property as Freeway Commercial and the current zoning is Planned Area Development (PAD). A dine-in restaurant is a permitted within the development plan.

Staff recommends approval of this request.

Attachment: 2013 Aerial Photography  
Zoning Vicinity Map



**McDowell Road**

**99th Avenue**

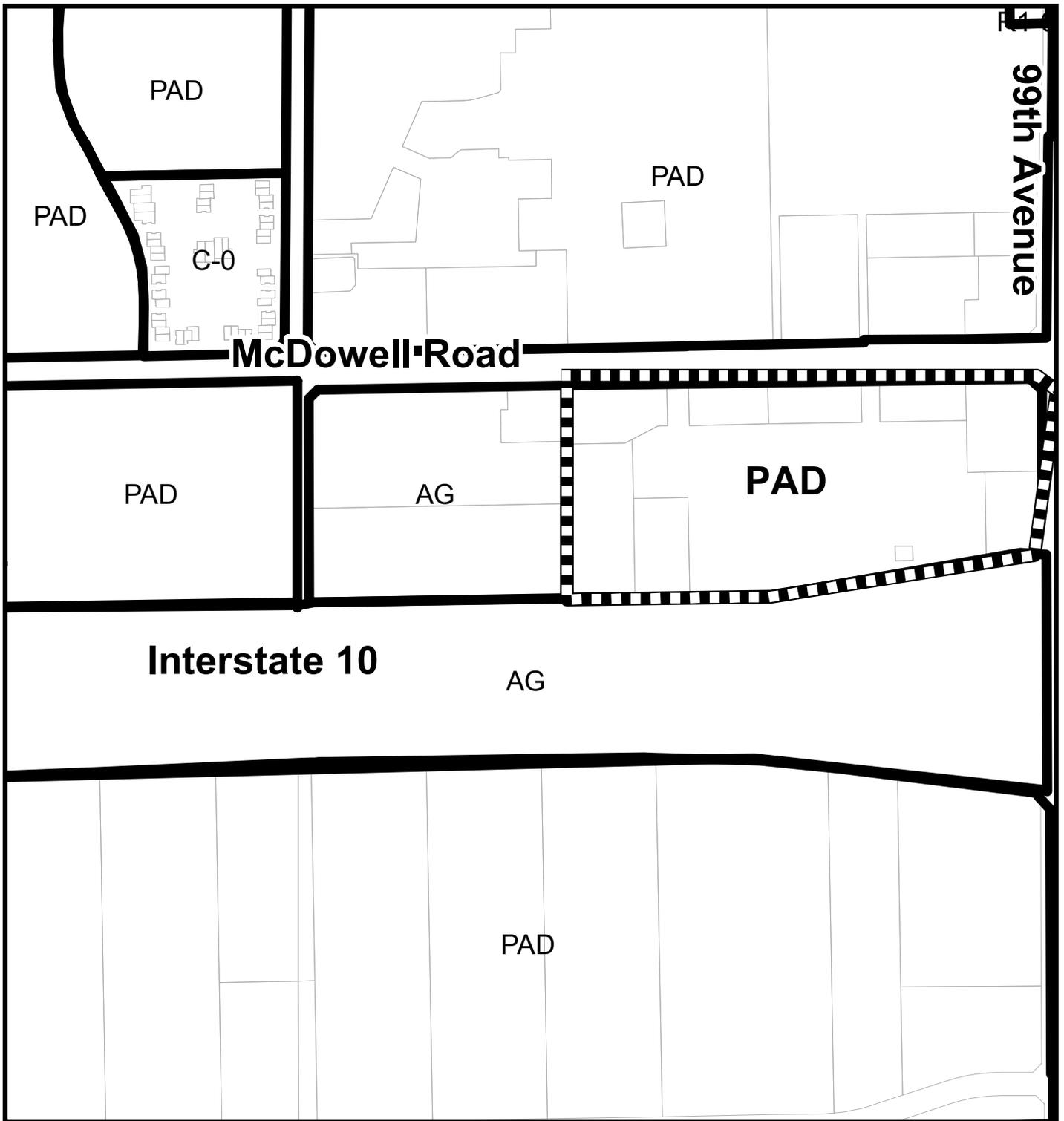
**Interstate 10**

**Aerial Photograph**



**Smashburger**





## Zoning Vicinity Map



**Smashburger**





**DEPARTMENTAL REVIEW FORM**

**TYPE OF LICENSE:**

SERIES 12: RESTAURANT LICENSE

**ROUTING:**

POLICE DEPARTMENT

FIRE DEPARTMENT

FINANCE DEPARTMENT

DEVELOPMENT SERVICES

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**APPLICANT'S NAME: ANDREA DAHLMAN LEWKOWITZ**

**BUSINESS NAME: SMASHBURGER #1393**

**BUSINESS ADDRESS: 9915 W. McDOWELL RD., SUITE 101**

**CITY: AVONDALE      STATE: AZ      ZIP CODE: 85392**

**DEPARTMENTAL COMMENTS:**

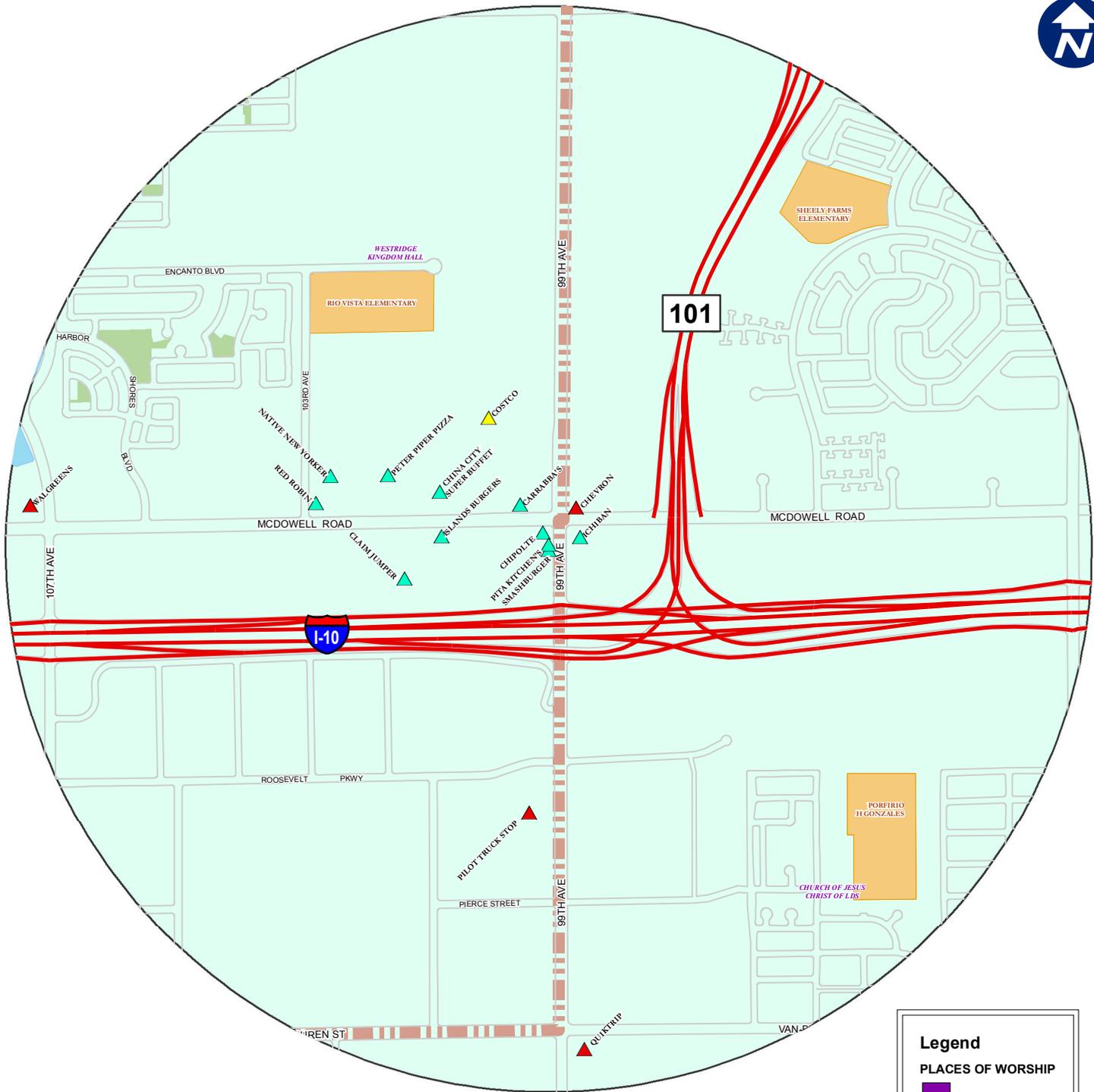
APPROVED

DENIED

  
SIGNATURE  
TAX Audit Supervisor  
TITLE

3/17/14  
DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: APRIL 7, 2014**  
**PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: MARCH 20TH, 2014**



**Legend**

**PLACES OF WORSHIP**

- CHURCH

**Liquor License**

- SERIES 5
- SERIES 11
- SERIES 6
- SERIES 7
- SERIES 9
- SERIES 10
- SERIES 12
- SERIES 15
- SERIES 16
- SCHOOLS

**SMASHBURGER**  
**9915 W MCDOWELL RD STE #101**  
**1 Mile Buffer**



# NOTICE

## APPLICATION TO SELL ALCOHOLIC BEVERAGES DATE POSTED: MARCH 17, 2014

A HEARING ON A LIQUOR LICENSE APPLICATION  
SHALL BE HELD BEFORE THE AVONDALE CITY COUNCIL

**LOCATION: 11465 WEST CIVIC CENTER DRIVE**  
**DATE: MONDAY, APRIL 7, 2014**  
**AT 7:00 PM.**

(HEARING DATES SUBJECT TO CHANGE,  
TO VERIFY CALL: 623-333-1200)

### \*\*SERIES 12: RESTAURANT LICENSE\*\*

THE LOCAL GOVERNING BODY WILL RECOMMEND TO THE STATE LIQUOR BOARD WHETHER THE BOARD SHOULD GRANT OR DENY THE LICENSE. THE STATE LIQUOR BOARD MAY HOLD A HEARING TO CONSIDER THE RECOMMENDATION OF THE LOCAL GOVERNING BODY. ANY PERSON RESIDING OR OWNING OR LEASING PROPERTY WITHIN A ONE-MILE RADIUS MAY CONTACT THE STATE LIQUOR BOARD IN WRITING TO REGISTER AS A PROTESTER. TO REQUEST INFORMATION REGARDING PROCEDURES BEFORE THE BOARD AND NOTICE OF ANY BOARD HEARINGS REGARDING:

**Smashburger #1393**  
**9915 W. McDowell Rd., Suite 101**  
**Avondale, AZ. 85392**

THIS APPLICATION, CONTACT: STATE LIQUOR BOARD - 800 W. WASHINGTON, 5TH FLOOR, PHOENIX, AZ 85007 STATE LIQUOR DEPT: (602) 542-9789  
INDIVIDUALS REQUIRING ADA ACCOMMODATIONS CALL THE CITY CLERK AT: 623-333-1200.

114 FEB 20 11 PM 04:18:10Z

Arizona Department of Liquor Licenses and Control  
800 West Washington, 5th Floor  
Phoenix, Arizona 85007  
www.azdqlc.gov  
602-542-9789

**APPLICATION FOR LIQUOR LICENSE**  
TYPE OR PRINT WITH BLUES INK

Notice: This license is valid only for the business, address, and location information provided in the application. It is subject to the terms and conditions of the license and the rules and regulations of the Arizona Department of Liquor Licenses and Control. For more information, please visit our website at www.azdqlc.gov.

**SECTION 1** This application is for:  
 NEW RESTAURANT LICENSE  
 TRANSFER OF LICENSE  
 LICENSE RENEWAL  
 LICENSE TRANSFER FROM ANOTHER STATE  
 LICENSE TRANSFER FROM ANOTHER COUNTRY  
 LICENSE TRANSFER FROM ANOTHER JURISDICTION  
 LICENSE TRANSFER FROM ANOTHER TYPE OF LICENSE  
 LICENSE TRANSFER FROM ANOTHER TYPE OF BUSINESS  
 LICENSE TRANSFER FROM ANOTHER TYPE OF ADDRESS  
 LICENSE TRANSFER FROM ANOTHER TYPE OF LOCATION

**SECTION 2** Type of membership:  
 INDIVIDUAL Complete Section 6  
 PARTNERSHIP Complete Section 7  
 LIMITED LIABILITY CO. Complete Section 7  
 CORPORATION Complete Section 8  
 TRUST Complete Section 9  
 OTHER (Specify):

**SECTION 3** Type of business and fees  
1. Type of License: Series 12  
2. Total fees attached: \$ 250.00

**APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE.**  
This form cannot be used for a license until it is stamped with a date and time.

**SECTION 4** Applicant:  
1. Owner/Agent's Name: [Signature] Linda Lewkowitz Address: 1234 5th St, Phoenix, AZ 85001  
2. C/O: Partnership, L.C. - Smashburger Acquisition Phoenix, N.C. (Specify an Appointee or Address of Inc. or Address of Org.)  
3. Business Name: Smashburger #1393 (Specify an Appointee or the address of premises)  
4. Principal Street Location: 9915 W. McDowell Rd, Suite 101, Avondale, AZ 85392  
5. Business Phone: 623-333-1200 (Do not use PO Box Number) City: Phoenix, State: AZ  
6. Is the business located within the incorporated limits of the above city or town? YES/NO CHX  
7. Mailing Address: City: State: Zip: Type: 1  
8. Price paid for license only for beer, wine, and/or other spirits: Type: Size: Fee: Type: 1

**DEPARTMENT USE ONLY**

Fees:	Application	100.00	Interim Permit	50.00	Site Inspection	0.00	Finger Prints	0.00	TOTAL OF ALL FEES	150.00
-------	-------------	--------	----------------	-------	-----------------	------	---------------	------	-------------------	--------

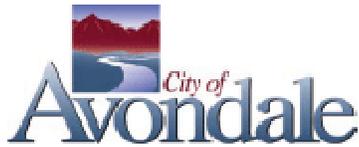
In Arizona Statement of Citizenship & Alien Status for State Benefits completed? YES/NO CHX  
Accepted by: [Signature] Date: 2-25-14 Lic #: 12079815

visitors: \*disabled individuals requiring special accommodation, please call (602) 542-9627.

**THIS RESTAURANT IS MANAGED BY:**  
**MIKE CASEY**

smashburger





# CITY COUNCIL REPORT

**SUBJECT:**

Purchase and Services Agreement - American Funding Innovators, Inc.

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Pier Simeri, Community Relations Director (623) 333-1611

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff requests that the Mayor and City Council approve a Purchase and Services Agreement with American Funding Innovators, Inc. to provide a grants management system software solution for a maximum aggregate amount of \$60,000.00 and authorize the Mayor or City Manager and City Clerk to execute the necessary documents.

**BACKGROUND:**

Since 2008, the Grants Administration Division has relied upon a grants management system that was developed in-house. There is a need for a more robust grants management system designed for the needs of municipal government. A new system will enhance the Division's ability to identify grant opportunities, pursue grants, monitor compliance, and manage grant-related activities for all City departments. The selected system will assist in improving grants management with a more centralized grant management and tracking capability.

**DISCUSSION:**

City staff issued a Request for Proposals for grants management and research solutions in December 2013. The RFP selection committee, which included outside grants experts, evaluated four proposals. American Funding Innovators' Grant Navigator system scored highest overall as a solution for Avondale.

The Grant Navigator system is designed with the needs of municipal government in mind and is used by grant departments in other Arizona cities and across the country with a high degree of satisfaction for system and customer service. The contract includes the Grant Navigator software, implementation services, data migration, testing, training, and project documentation. The proposal for American Funding Innovators' Grant Navigator system is responsive to Avondale's grants management needs at a lower cost than all other proposal submissions.

The system follows a common grant life cycle process making task management simple for system users in a user friendly environment. Additional features allow for automatic reminders for outstanding tasks assigned to the grant project team. The system will also provide storage of grant documents and reports as well as related correspondence. Ready access to grant information will assist all departments in utilizing grant funding to augment City resources.

**BUDGETARY IMPACT:**

The agreement with American Funding Innovators is written for five-year price certainty with a one-year term and four one-year renewals at the City's option. The proposed contract includes a 15-user license for \$10,275 per year adding \$1,500 for training in the first year. In subsequent years Grants Administration will utilize online training at no additional cost. The contract allows flexibility for adding

users at \$255 per user per year throughout the contract period. Additionally, add-on features are included in the contract at the City's option, such as a grants search module and a transparency module, with price certainty for the term of the contract.

Aggregate total for the five-year agreement is up to \$60,000 to allow for additional capacity if the City chooses any add-on options in subsequent years and is appropriated in the Grants Administration Division budget.

**RECOMMENDATION:**

Staff recommends that the Mayor and City Council approve a Purchase and Services Agreement with American Funding Innovators, Inc. to provide a grants management system software solution for a maximum aggregate amount of \$60,000.00 and authorize the Mayor or City Manager and City Clerk to execute the necessary documents.

**ATTACHMENTS:**

Click to download

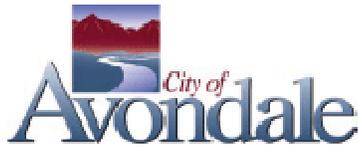
[Purchase and Services Agreement](#)

PURCHASE AND SERVICES AGREEMENT – AMERICAN FUNDING INNOVATORS, INC.

DUE TO ITS SIZE, THIS DOCUMENT  
HAS BEEN POSTED SEPARATELY

PLEASE CLICK ON THE LINK BELOW TO VIEW

<http://www.avondale.org/DocumentCenter/View/34144>



# CITY COUNCIL REPORT

**SUBJECT:**

First Amendment to Contract - The W.W. Williams Company

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Wayne Janis, P.E., Public Works Director

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff requests that the City Council approve the First Amendment to the contract with W.W. Williams, Inc. in the amount of \$52,231.85 for the purchase of a replacement portable generator and authorize the Mayor or City Manager and the City Clerk to execute the necessary documents.

**BACKGROUND:**

The Wastewater Collection Division has found it necessary to replace its current 25kVA/25kW portable generator, which has been operational since 2000, as it no longer has the power necessary to start up the Vaughn chopper pumps now utilized in most of the City's lift stations. Over the years, the Wastewater Collection Division has been replacing lift station pumps to reduce the amount of back-ups throughout the system.

A portable generator is utilized in situations when electrical outages may be prolonged and to avoid overflowing the lift station. Lift stations without on-site generators have been placed in locations throughout the city where additional capacity has been needed, but where available land resources are limited and do not allow for "typical" build-out of a lift system.

**DISCUSSION:**

In January 2013, the City entered into a contract with W.W. Williams, Inc. for the provision of repair, replacement and preventative maintenance services on emergency generator equipment utilized by water and wastewater production and treatment and at City facilities. This contract was extended for an additional year in January 2014. The purchase of the replacement generator falls within the purview of the current contract with W.W. Williams, Inc. but exceeds the annual contract amount of \$26,279 which necessitates the amendment to the contract.

Time is of the essence for this purchase as the build time is approximately nine (9) weeks and staff would like to have it operational before the start of the summer monsoon season.

**BUDGETARY IMPACT:**

Funds are available in line item 503-9200-00-8620 in the amount of \$52,231.85 for the replacement of the portable generator utilized for the emergency operation of lift stations within the wastewater collection system.

**RECOMMENDATION:**

Staff recommends that the City Council approve the First Amendment to the contract with W.W. Williams, Inc. in the amount of \$52,231.85 for the purchase of a replacement portable generator and authorize the Mayor or City Manager and the City Clerk to execute the necessary documents.

## ATTACHMENTS:

Click to download

[First Amendment](#)

**FIRST AMENDMENT  
TO  
CONTRACT NO. 13662C  
BETWEEN  
THE CITY OF AVONDALE  
AND  
THE W.W. WILLIAMS COMPANY**

THIS FIRST AMENDMENT TO CONTRACT NO. 13662C (this "First Amendment") is entered into as of April 7, 2014, between the City of Avondale, an Arizona municipal corporation (the "City"), and The W.W. Williams Company, an Ohio corporation (the "Contractor").

RECITALS

A. The City issued Invitation for Bids PW 13-013 (the "IFB") seeking bids from contractors to provide emergency generator repairs, replacement and preventative maintenance to the City's generators (the "Services"). The Contractor responded to the IFB and the City and Contractor entered into Contract No. 13662C, dated January 22, 2013, for the provision of the Services (the "Contract"), a true and correct copy of which is on file with the City Clerk. All of the capitalized terms not otherwise defined in this First Amendment have the same respective meanings as contained in the Contract.

B. The City has determined that it is in need of a 70 KVA/56 KW portable generator on a trailer for use at the Central, Lawrence, Whyman, Riley and Littleton lift stations that do not have a generator on-site (the "Equipment").

C. The City and Contractor desire to enter into this First Amendment to (i) modify the scope of work to include the Equipment and (ii) increase the compensation to the Contractor for the Equipment.

AGREEMENT

NOW, THEREFORE, in consideration of the foregoing recitals, which are incorporated herein by reference, the following mutual covenants and conditions, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the City and the Contractor hereby agree as follows:

1. Scope of Work. Contractor shall provide the Equipment as set forth in the Proposal, attached hereto as Exhibit A and incorporated herein by reference.

2. Compensation. The City shall increase the compensation to Contractor by \$52,231.85 for the Equipment at the rates as set forth in the Proposal, attached hereto as Exhibit A, resulting in an increase of the total compensation, from \$131,395.00 to an amount not to exceed \$183,626.85.

3. Effect of Amendment. In all other respects, the Contract is affirmed and ratified and, except as expressly modified herein, all terms and conditions of the Contract shall remain in full force and effect.

4. Non-Default. By executing this First Amendment, the Contractor affirmatively asserts that (i) the City is not currently in default, nor has been in default at any time prior to this First Amendment, under any of the terms or conditions of the Contract and (ii) any and all claims, known and unknown, relating to the Contract and existing on or before the date of this First Amendment are forever waived.

5. Conflict of Interest. This First Amendment and the Contract may be canceled by the City pursuant to ARIZ. REV. STAT. § 38-511.

IN WITNESS WHEREOF, the parties hereto have executed this instrument as of the date and year first set forth above.

“City”

CITY OF AVONDALE,  
an Arizona municipal corporation

\_\_\_\_\_  
David W. Fitzhugh, Acting City Manager

ATTEST:

\_\_\_\_\_  
Carmen Martinez, City Clerk

(ACKNOWLEDGMENT)

STATE OF ARIZONA        )  
  ) ss.  
COUNTY OF MARICOPA    )

On \_\_\_\_\_, 2014, before me personally appeared David W. Fitzhugh, the Acting City Manager of the CITY OF AVONDALE, an Arizona municipal corporation, whose identity was proven to me on the basis of satisfactory evidence to be the person who he claims to be, and acknowledged that he signed the above document, on behalf of the City of Avondale.

\_\_\_\_\_  
Notary Public

(Affix notary seal here)



EXHIBIT A  
TO  
FIRST AMENDMENT  
TO  
CONTRACT NO. 13662C  
BETWEEN  
THE CITY OF AVONDALE  
AND  
THE W.W. WILLIAMS COMPANY

[Proposal]

See following pages.

# W.W.Williams

2602 S. 19th Ave  
Phoenix, AZ 85009  
lburkey@wwwilliams.com  
(Phone) 602-257-0561  
(Fax) 602-257-8641  
[www.wwwilliams.com](http://www.wwwilliams.com)

## Proposal For City of Avondale

70kVA Diesel Generator

March 20, 2014

Reference No: Q1004A

**WW Williams submits the following proposal for the project:**

### **One (1) MTU ONSITE ENERGY MODEL:**

- (1) QAS70-HBT -- 70 kVA / 56 kW portable generators on trailer w/ electric brakes \$40,462.00
- (1) Freight to ship the unit \$852.00
- (1) 400A Appleton connector 4W4P - \$2,662.00
- (1) 400A Plug - \$2,207.00
- 50' of 4/0 cable - \$1,261.00

\*\*\*\*\*

### **Proposal Summary:**

**TOTAL PROPOSAL PRICE: \$ 47,444.00**  
**Tax 8.3%: \$ 3,937.85**  
**Total: \$ 51,381.85**

Labor - \$850.00 (non taxable)

**Total: \$52,231.85**

\*\*\*\*\*

**NOTES:**

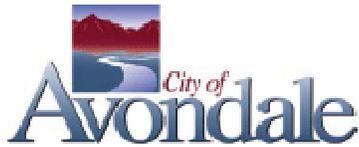
1. Units are shipped wet to include lube oil and a 50/50 water and anti-freeze mix unless otherwise noted in this quotation.
2. FOB Job Site, off-loading and rigging assumed by W.W.Williams
3. Standard NFPA110 testing included, all other third part/NETA test is assumed by others.
4. Quote is for bill of material as listed – stated requirements.

Quoted prices include normal testing, packaging and instructional literature. Special testing, packaging, additional instructional literature, parts, provisioning lists or prints are not included, and prices will be quoted separately.

Quotation Firm for 30 Day(s)

Delivery Notes: Current lead time is 8-10 weeks.

BY:           Lela Burkey            
          W.W.Williams



# CITY COUNCIL REPORT

**SUBJECT:**

Second Amendment to Purchase Agreement - 3M  
Company - Traffic Sign Materials

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Charles Andrews, P.E., City Engineer, 623-333-4216

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff is requesting that the City Council approve the Second Amendment to the Purchase Agreement with 3M Company for the purchase of traffic sign materials, and authorize the Mayor, or City Manager and City Clerk to execute the necessary documents.

**BACKGROUND:**

Maricopa County has a contract with 3M Company (3M) for the purchase of traffic sign materials. The contract contains cooperative use language which extends the use of the contract to other municipalities.

On October 12, 2010, the County contract was incorporated into a Purchase Agreement between the City and 3M in an amount not to exceed \$10,000. On May 15, 2013, Amendment 1 to the Purchase Agreement with 3M was executed which increased the compensation amount to an aggregate not to exceed amount of \$40,000. On August 22, 2013, Maricopa County extended the term of their contract with 3M through August 31, 2016.

**DISCUSSION:**

Traffic Engineering staff manufactures regulatory, warning, and ground-mounted guide signs. Staff maintains approximately 9,411 roadway signs within Avondale City right-of-way (ROW). Materials needed to manufacture signs include, but are not limited to: different types/grades of sheeting in a variety of colors, different types and colors of film, miscellaneous sheeting items (reflective and non-reflective), transfer tape and overlays. 3M is a supplier of these materials.

By extending the County contract with 3M, materials for traffic sign manufacturing can be purchased in an effective and timely manner. Staff has purchased materials from 3M in the past, and has been satisfied with the quality of their products and level of service.

The Second Amendment to the Purchase Agreement with 3M will extend the term of the contract through August 31, 2016 and increase the total contract compensation to an amount not to exceed \$200,000.

**BUDGETARY IMPACT:**

Funding for the purchase of traffic sign materials is available in Traffic Engineering's Operating Budget line item 201-5925-00-7690. Approving this Amendment will extend the contract over 4 additional fiscal years. The estimated usage of this contract on a fiscal year basis is \$40,000. The estimated aggregate usage of this contract through August 31, 2016 is \$200,000.

**RECOMMENDATION:**

Staff recommends that the City Council approve the Second Amendment to the Purchase Agreement with 3M Company for the purchase of traffic sign materials in a maximum aggregate amount of \$200,000, and authorize the Mayor, or City Manager and City Clerk to execute the necessary documents.

**ATTACHMENTS:**

Click to download

[Second Amendment](#)

**SECOND AMENDMENT  
TO  
PURCHASE AGREEMENT  
BETWEEN  
THE CITY OF AVONDALE  
AND  
3M COMPANY**

THIS SECOND AMENDMENT TO COOPERATIVE PURCHASING AGREEMENT (this "Second Amendment") is entered into as of April 7, 2014, between the City of Avondale, an Arizona municipal corporation (the "City"), and 3M Company, a Delaware corporation (the "Vendor").

RECITALS

A. After a competitive procurement process, Maricopa County, Arizona entered into Contract Serial 10026-C, dated August 4, 2010, and extended by memo through August 31, 2016 (collectively, the "County Contract"), with the Vendor for the Vendor to provide traffic signing materials.

B. The City and the Vendor entered into a Purchase Agreement dated October 12, 2010, based upon the County Contract (the "Initial Agreement"), for the Vendor to provide the City with traffic signing materials (the "Materials").

C. The Initial Agreement was amended once on May 15, 2013, to purchase additional Materials and increase Vendor's compensation. The Initial Agreement and the First Amendment are collectively referred to herein as the "Agreement."

D. The City has determined that additional Materials from the Vendor are necessary.

E. The City and the Vendor desire to enter into this Second Amendment to (i) provide for the cost of and purchase additional Materials and (ii) extend the term of the Agreement.

AGREEMENT

NOW, THEREFORE, in consideration of the foregoing recitals, which are incorporated herein by reference, the following mutual covenants and conditions, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the City and the Vendor hereby agree as follows:

1. Term of the Agreement. The term of the Agreement is hereby extended and shall remain in full force and effect until August 31, 2016, unless terminated as otherwise provided pursuant to the terms and conditions of the Agreement.

2. Compensation. The City shall increase the compensation to Vendor by \$160,000.00, for the Materials at the rates as set forth in the County Contract, resulting in an

increase of the total compensation, from \$40,000.00 to an aggregate amount not to exceed \$200,000.00.

3. Effect of Amendment. In all other respects, the Agreement is affirmed and ratified and, except as expressly modified herein, all terms and conditions of the Agreement shall remain in full force and effect.

4. Non-Default. By executing this Second Amendment, the Vendor affirmatively asserts that (i) the City is not currently in default, nor has been in default at any time prior to this Second Amendment, under any of the terms or conditions of the Agreement and (ii) any and all claims, known and unknown, relating to the Agreement and existing on or before the date of this Second Amendment are forever waived.

5. Conflict of Interest. This Second Amendment and the Agreement may be canceled by the City pursuant to ARIZ. REV. STAT. § 38-511.

[SIGNATURES ON FOLLOWING PAGES]

IN WITNESS WHEREOF, the parties hereto have executed this instrument as of the date and year first set forth above.

“City”

CITY OF AVONDALE,  
an Arizona municipal corporation

\_\_\_\_\_  
David W. Fitzhugh, Acting City Manager

ATTEST:

\_\_\_\_\_  
Carmen Martinez, City Clerk

(ACKNOWLEDGMENT)

STATE OF ARIZONA        )  
  ) ss.  
COUNTY OF MARICOPA    )

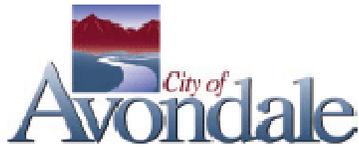
On \_\_\_\_\_, 2014, before me personally appeared David W. Fitzhugh, the Acting City Manager of the CITY OF AVONDALE, an Arizona municipal corporation, whose identity was proven to me on the basis of satisfactory evidence to be the person who he claims to be, and acknowledged that he signed the above document, on behalf of the City of Avondale.

\_\_\_\_\_  
Notary Public

(Affix notary seal here)

[SIGNATURES CONTINUE ON FOLLOWING PAGE]





# CITY COUNCIL REPORT

**SUBJECT:**

Ordinance 1542-414 - Authorizing the Sale of Property

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Daniel Davis, Economic Development Director (623) 333-1411

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff requests that the City Council adopt an ordinance authorizing the sale of approximately 1.24 acres of real property generally located at the northeast corner of Western Avenue and Dysart Road in Historic Avondale.

**BACKGROUND:**

The City of Avondale acquired the property in March 2007 from the State of Arizona. The property has been vacant since 2008 when all of the structures on the parcel were demolished. The city has sought out opportunities to advance the economic goals of bringing new businesses and economic vitality to the Historic Avondale area.

**DISCUSSION:**

An opportunity has arisen to sell 1.24 acres of City-owned property located at Western Avenue and Dysart Road for the development and construction of a locally-owned Valley restaurant. The development of a restaurant at this location in Historic Avondale will certainly generate excitement and will provide a destination for residents and visitors alike. The new restaurant will infill a vacant commercial property, provides employment opportunities, and generates on-going sales tax revenue.

**BUDGETARY IMPACT:**

The revenue from the sale of the city-owned property will be directed to the City's General Fund.

**RECOMMENDATION:**

Staff recommends that City Council adopt an ordinance authorizing the sale of approximately 1.24 acres of real property generally located at the northeast corner of Western Avenue and Dysart Road in Historic Avondale and authorize the Mayor or City Manager and City Clerk to execute all the necessary documents.

**ATTACHMENTS:**

Click to download

[Ordinance 1542-414](#)

**ORDINANCE NO. 1542-414**

AN ORDINANCE OF THE COUNCIL OF THE CITY OF AVONDALE, ARIZONA, AUTHORIZING THE SALE OF CERTAIN REAL PROPERTY, GENERALLY LOCATED AT THE NORTHEAST CORNER OF WESTERN AVENUE AND DYSART ROAD.

**WHEREAS**, the City of Avondale (the “City”) is the owner of two parcels of real property totaling ± 1.16 acres, being a portion of Maricopa County Assessor’s Parcel Numbers 500-21-011A and 500-21-017, generally located at the northeast corner of Western Avenue and Dysart Road in Avondale, (the “Property”) as more particularly described and depicted on Exhibit A, attached hereto and incorporated herein by reference; and

**WHEREAS**, pursuant to Article I, Section 3 of the Avondale City Charter, the City may sell property as the City’s interests may require; and

**WHEREAS**, the Council of the City of Avondale desires to sell whatever right, title or interest it has in the Property.

**NOW THEREFORE, BE IT ORDAINED** BY THE COUNCIL OF THE CITY OF AVONDALE as follows:

SECTION 1. The recitals above are hereby incorporated as if fully set forth herein.

SECTION 2. The sale of the Property is hereby authorized.

SECTION 3. If any provision of this Ordinance is for any reason held by any court of competent jurisdiction to be unenforceable, such provision of portion hereof shall be deemed separate, distinct, and independent of all other provisions and such holding shall not affect the validity of the remaining portions of this Ordinance.

SECTION 4. The Mayor, the City Manager, the City Attorney and the City Clerk are hereby authorized and directed to take all steps and execute all documents necessary to carry out the purpose and intent of this Ordinance.

**PASSED AND ADOPTED** by the Council of the City of Avondale, April 7, 2014.

---

Marie Lopez Rogers, Mayor

ATTEST:

---

Carmen Martinez, City Clerk

APPROVED AS TO FORM:

---

Andrew J. McGuire, City Attorney

EXHIBIT A  
TO  
ORDINANCE NO. 1542-414

[Legal Description and Map of Property]

**LEGAL DESCRIPTION**  
**PARCEL AT NORTHEAST CORNER OF**  
**DYSART ROAD AND WESTERN AVENUE**  
**(PART OF APN 500-21-011A and 500-21-017)**

That portion of Parcel no. 1 and Parcel no. 2 described in Maricopa County Recorders Office (MCR) instrument no. 2008-1085607, located in the southwest quarter (SW1/4) of Section 11, Township 1 North, Range 1 West of the Gila and Salt River Meridian, City of Avondale, Maricopa County, Arizona, more particularly described as follows:

Commencing at the southwest corner of said Section 11, being marked by a City of Avondale brass cap in handhole per description on the Record of Survey recorded in Maricopa County Recorders Office Book 1170, page 19, from which for a bearing reference the west quarter corner of said Section 11, being marked by a City of Avondale brass cap in hand hole per said MCR Book 1170, page 19, bears North 00° 01' 11" East, 2644.67 feet.

Thence along the west line of said Section 11, North 00° 01' 11" East, 371.42 feet per said MCR 2008-1085607;

Thence leaving said west line, along the north line of Parcel no. 2 of said MCR 2008-1085607, South 89° 58' 49" East, 55.00 feet to the east line of the west 55.00 feet of said Section 11, being marked with a ½ inch rebar with an attached ¾ inch brass tag stamped "CRS 28742", said rebar being a typical survey monument hereafter described, also being the POINT OF BEGINNING;

Thence leaving said north line, along said east line, South 00° 01' 11" West, 235.88 feet to a said typical survey monument;

Thence leaving said east line South 45° 07' 49" East, 35.26 feet to a said typical survey monument;

Thence North 89° 43' 11" East, 87.21 feet to the southeast line of Lot 1, being Parcel no. 1 of said MCR 2008-1085607, being marked with a said typical survey monument;

Thence along said southeast line, North 74° 49' 17" East, 69.84 feet to the southeast corner of said Lot 1, being said Parcel no. 1 of MCR 2008-1085607, being marked with a found ½ inch rebar, not having any found identification, thus a ¾ inch brass tag stamped "CRS 28742" was attached;

Thence along the east line of said Lot 1, being said Parcel no. 1 of MCR 2008-1085607, North 00° 14' 12" West, 121.98 feet to the south line of said Parcel no. 2, being marked with a said typical survey monument;

(continued next page)

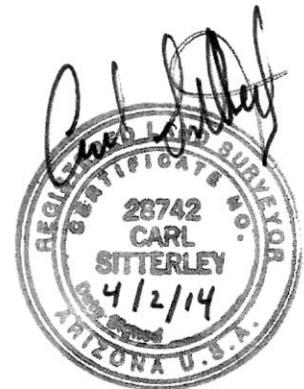
Thence along said south line, South 89° 58' 49" East, 38.93 feet to the southeast corner of said Parcel no. 2 of MCR 2008-1085607, being marked with a said typical survey monument;

Thence along the east line of said Parcel no. 2 of MCR 2008-1085607, North 00° 01' 11" East, 120.00 feet to the northeast corner of said Parcel no. 2 of MCR 2008-1085607, being marked with a said typical survey monument;

Thence along the said north line of Parcel no. 2, North 89° 58' 49" West, 218.00 feet back to the POINT OF BEGINNING.

Parcel contains 50,428 square feet or 1.1577 acres more or less.

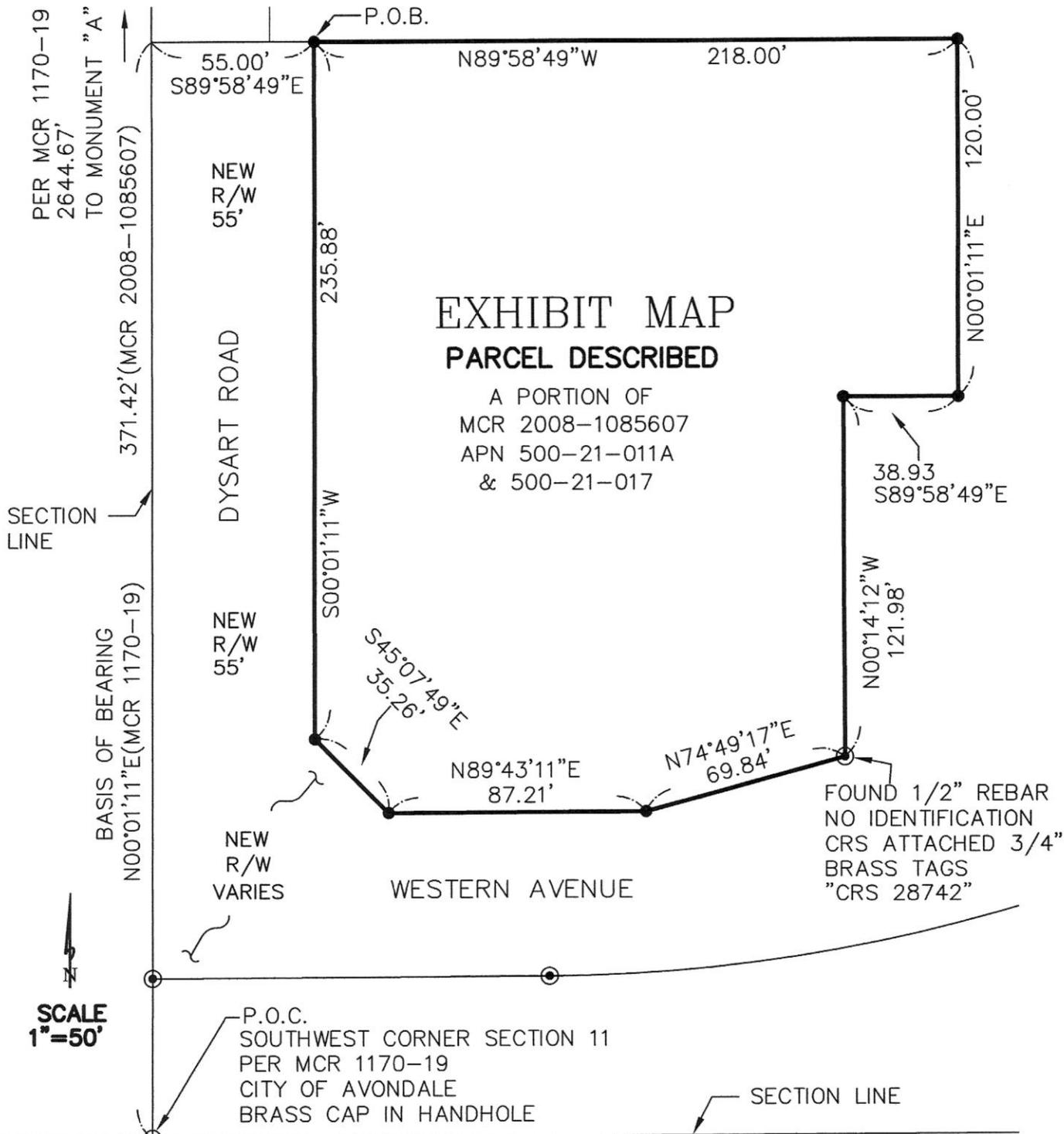
Exhibit Map Attached and made a part hereon.



Expires 03/31/2016

# EXHIBIT MAP PARCEL DESCRIBED

A PORTION OF  
MCR 2008-1085607  
APN 500-21-011A  
& 500-21-017



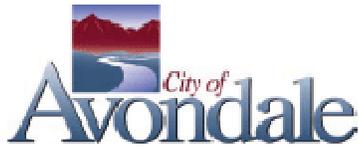
EXPIRES 03/31/2016

- = 1/2" REBAR WITH "CRS 28742"  
ATTACHED 3/4" BRASS TAG
- "A" = CITY OF AVONDALE  
BRASS CAP IN HANDHOLE  
WEST 1/4 CORNER
- MCR=MARICOPA COUNTY  
RECORDERS
- P.O.B.= POINT OF BEGINNING
- P.O.C.= POINT OF COMMENCING

## CRS

**CONSULTANT REGISTERED  
SURVEYING**

8732 E. PICCADILLY ROAD  
SCOTTSDALE, ARIZONA  
480-620-1382



# CITY COUNCIL REPORT

**SUBJECT:**

Contributions Assistance Program and Sub  
Committee Appointment

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Stephanie J. Small, Neighborhood and Family Services Director

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff is requesting that City Council approve eligibility criteria for the Contributions Assistance Program, appoint a Council Subcommittee to review and recommend funding and approve the recommended eligibility criteria.

**BACKGROUND:**

The Contributions Assistance Program was established by City Council to provide a supplemental funding source to those organizations providing services to the residents of the City of Avondale. The program has changed over the past few years to reflect the priorities of the Council and the financial constraints of the budget. In 2003 the City Council limited funding to those organizations providing health and human services. In fiscal year 2009, funding for the Program was allocated at \$80,000. It was reduced to \$50,000 over the next four fiscal years and restored to \$80,000 in fiscal year 2014.

Twenty applications were received for Fiscal Year 2013-2014. The total funding request from all applications totaled \$146,818. Council approved the funding of seventeen non-profit agencies totaling \$80,000. The City Council awarded funds to the following agencies. An asterisk denotes an agency that did not receive funding through this program in the previous year.

- A New Leaf - \$6,667
- Alzheimer's Association - \$2,667
- Boys and Girls Club of Metropolitan Phoenix - \$6,667
- Central Arizona Shelter Services, Inc. (CASS) - \$5,333\*
- Community Bridges (CBI) - \$8,000
- Jobs for Arizona's Graduates - \$5,333
- Kids at Hope - \$4,000
- Mission of Mercy - \$6,667\*
- Mosaic Arts Center - \$1,733\*
- Homeless Youth Connection - \$2,667\*
- Neighborhood Housing Services of Phoenix - \$4,000\*
- New Life Center - \$8,000
- The Southwest Community Network, SCN - \$2,667\*
- Southwest Lending Closet - \$2,933
- Southwest Valley Literacy Association - \$4,000\*
- St. Mary's Food Bank Alliance - \$3,333
- Teen Lifeline, Inc. - \$5,333

Staff was notified by A New Leaf that they would not be able to implement their program in September 2013. Their award of \$6,667 was returned to the City. This amount was recommended for carryover for next budget year

**DISCUSSION:**

The staff committee will forward the eligible applications to the Council Subcommittee for evaluation of applications, selection, and determination of funding levels. Council is requested to appoint members to the Council Subcommittee for this process. The Council Subcommittee for FY 2013-2014 was:

- Vice Mayor Frank Scott
- Councilmember Ken Weise
- Councilmember Jim McDonald

Staff is requesting that City Council approve the criteria for evaluating and prioritizing applicants. The following criteria are recommended:

1. Provision of direct services which improve the health and welfare of Avondale residents.
2. Current, timely and accurate reports from current recipients.
3. Ability to generate revenue from other sources.
4. Priority will be given to special projects. However, requests for operating support toward direct and measurable services will be considered. Administrative costs will not be eligible.
5. Priority will be given to services and initiatives that support and address City Council goals.
6. Services provided at the Care1st Avondale Resource and Housing Center will be given priority.

The abovementioned criteria are the same from the previous year. Staff recommends maintaining these criteria when weighing applications.

**BUDGETARY IMPACT:**

The budget will include \$80,000 out of the General Fund for the Contributions Assistance Program for FY 2014-2015 .

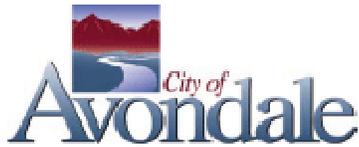
**RECOMMENDATION:**

Staff recommends that the City Council appoint a Council Subcommittee to review and recommend organizations to receive assistance and approve the funding criteria and priorities.

**ATTACHMENTS:**

[Click to download](#)

No Attachments Available



# CITY COUNCIL REPORT

**SUBJECT:**

Professional Services Agreement - Carollo Engineers, Inc. - Water Reclamation Facility Master Plan

**MEETING DATE:**

April 7, 2014

**TO:** Mayor and Council

**FROM:** Wayne Janis, P.E., Public Works Director 623-333-4444

**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

Staff is requesting that the City Council approve a Professional Services Agreement with Carollo Engineers, Inc. for a Water Reclamation Facility Master Plan in the amount of \$428,341 and authorize the Mayor or City Manager, City Clerk and City Attorney to execute the necessary documents.

**BACKGROUND:**

The original City Water Reclamation Facility was constructed in its present location in 1993. A Master Plan was completed in 2005, and was the basis of the Phase 1 improvements completed at the plant in 2010. Since that time, population has fluctuated, and composition of the sewage processed at the plant has changed. The City also recently adopted the Avondale General Plan 2030, which adjusted the City expected population growth. Given all these items, it is critical for the City to update the plant Master Plan to ensure the proper processes are updated when needed, and taking into consideration any expected regulations that may be considered by the governing agencies.

**DISCUSSION:**

The recently completed plant improvements have been operational since 2010. The plant currently experiences an average flow of approximately 5 MGD. Staff has found that the characteristics of the sewage received at the plant has changed over time, requiring changes to plant settings and other operational issues, that may be aggravated with increased flows. A Master Plan is needed that will evaluate potential plant process shortcomings in light of expected sewage characteristics and timing of flow increases, and to optimize its efforts and funding to be able to better treat the City waste water flows. The study will consider the following major items:

- Evaluations and Technical Memoranda. The Consultant will provide an evaluation of the existing plant facilities and operating processes, including air supply, solids handling, SCADA, and emergency backup systems. The plant processes and hydraulics will be modeled and evaluated considering the plants current processes, future regulations, and potential alternate processes such as alternate treatment and chlorination methods. Cost estimates will be developed to be used for future budgeting.
- Facility Master Plan. This document will include the City's approved alternatives for treatment and will document a phased plan for improvements for the next 20 years.
- Regional Evaluation. The City has been requested to look at the potential of joining a joint jurisdiction treatment facility. The Consultant will evaluate the benefits and costs of such an effort, including how the water reuse from a joint plant might affect the City's 100-yr water supply plan.

**BUDGETARY IMPACT:**

Funding is available for the first half of the project in the current year's Wastewater Administration budget with the remaining funding available on July 1 from capital improvement funds for budget year 2014/2015.

**RECOMMENDATION:**

Staff recommends that the City Council enter into a Professional Services Agreement with Carollo Engineers, Inc. for a Water Reclamation Facility Master Plan in the amount of \$428,341 and authorize the Mayor or City Manager, City Clerk and City Attorney to execute the contract documents.

**ATTACHMENTS:**

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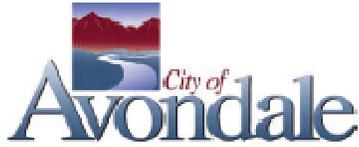
[PSA - Carollo Engineers, Inc.](#)

PSA – CAROLLO ENGINEERS, INC. – WATER RECLAMATION FACILITY MASTER PLAN

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# CITY COUNCIL REPORT

**SUBJECT:**  
EXECUTIVE SESSION

**MEETING DATE:**  
April 7, 2014

**TO:** Mayor and Council  
**FROM:** Andrew McGuire, City Attorney (602) 257-7664  
**THROUGH:** David Fitzhugh, Acting City Manager

**PURPOSE:**

The Council may hold an executive session pursuant to Ariz. Rev. Stat. § 38-431.03 (A)(4) for discussion or consultation with the City Attorney in order to consider its position and instruct the City Attorney regarding negotiations for (i) modifications to the Development Agreement with Gunbo, LLC and (ii) a potential Economic Development Agreement and (iii) pursuant to Ariz. Rev. Stat. § 38-431.03 (A)(1) for discussion regarding process for the appointment of the City Manager.

**ATTACHMENTS:**

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No Attachments Available