

CITY COUNCIL AGENDA

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

REGULAR MEETING
May 5, 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 CITY MANAGER'S REPORT

- a. Promotion - Marcia Gerig, Sam Garcia Library Manager
- b. Promotion - Jesse Caufield, Civic Center Library Manager
- c. New Employee Introduction - Ryan Ryba, Recreation Coordinator

3 RECOGNITION ITEMS (MAYOR PRESENTATIONS)

- a. Resolution 3182-514 - Detective Steven Heatherington's Retirement
- b. Recognition of Avondale's Citizen Leadership Academy Class VIII participants.

4 UNSCHEDULED PUBLIC APPEARANCES

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

5 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. Special Meeting of April 14, 2014
 2. Work Session of April 21, 2014
 3. Regular Meeting of April 21, 2014
- b. LIQUOR LICENSE LOCATION TRANSFER - SERIES 9 (LIQUOR STORE) - FRY'S FOOD & DRUG #112

City Council will consider a request to approve a location transfer of a Series 9 (Liquor Store) license to sell all spirituous liquors submitted by Ms. Lauren Merrett to be assigned to Fry's Food and Drug Store #112 located at 1571 N Dysart Road in Avondale. The Council will take appropriate action.
- c. FIRST AMENDMENT - COOPERATIVE PURCHASE AGREEMENT - SANDERSON FORD

Council will consider a request to approve the first amendment to the cooperative purchasing agreement with Sanderson Ford for the provision of parts and labor for light, medium, and heavy duty vehicles by increasing the total compensation by \$54,000 for a new total aggregate

not to exceed \$84,000 and authorize the Mayor or City Manager and City Clerk to execute the necessary documents.. The Council will take the appropriate action.

- d. **FIRST AMENDMENT TO COOPERATIVE PURCHASING AGREEMENT - FACILITEC, INC.**
City Council will consider a request to approve the first amendment to the Cooperative Purchasing Agreement with Facilitec Inc. for furniture services and increase the annual agreement amount for each renewal term from \$10,000 to \$40,000 and authorize the Mayor or City Manager and City Clerk to execute the necessary documents. The Council will take appropriate action.
- e. **RESOLUTION 3180-514 - COOPERATIVE PURCHASING AGREEMENT WITH THE STATE OF MINNESOTA**
City Council will consider a resolution approving a cooperative purchasing agreement between with the State of Minnesota for access to discounted purchase of commodities and services through the State's procurements and authorize the Mayor or City Manager and City Clerk to execute the necessary documents. The Council will take the appropriate action.
- f. **RESOLUTION 3181-514 - INTERGOVERNMENTAL AGREEMENT WITH NATIONAL PURCHASING PARTNERS**
City Council will consider a resolution approving an Intergovernmental Agreement with National Purchasing Partners to enter into cooperative purchasing agreements with L.N. Curtis and Municipal Emergency Services for the purpose of purchasing of fire equipment and tools to outfit the new fire apparatus to be located at fire station 174 in the amount of \$25,000 each and authorize the Mayor or City Manager and City Clerk to execute the necessary documents. The Council will take appropriate action.
- g. **RESOLUTION 3183-514 - AUTHORIZING THE SUBMISSION OF APPLICATIONS FOR GRANT CONSIDERATION BY THE GILA RIVER INDIAN COMMUNITY**
City Council will consider a resolution authorizing the submission of applications for funding to the Gila River Indian Community, the acceptance of awards, should the project be selected for funding and authorize the Mayor or City Manager and City Clerk to execute the necessary documents. The Council will take appropriate action.

6 **PUBLIC HEARING AND ORDINANCE 1544-514 - MEDICAL MARIJUANA ZONING ORDINANCE TEXT AMENDMENT (PL-14-0057)**

City Council will hold a public hearing and consider and ordinance adopting the Text Amendment to Section 13 of the Avondale Zoning Ordinance for medical marijuana dispensary hours of operation. The Council will take appropriate action.

7 **PROPOSED AMENDMENTS TO PERSONNEL POLICIES AND PROCEDURES MANUAL**

City Council will review and consider proposed amendments to the Personnel Policies and Procedures Manual, Chapter 18 Grounds for Discipline/Termination and Chapter 19, Grievances. For information, discussion and direction.

8 **ADJOURNMENT**

Respectfully submitted,



Carmen Martinez
City Clerk

Individuals with special accessibility needs, including sight or hearing impaired, large print, or interpreter, should contact the City Clerk at 623-333-1200 or TDD 623-333-0010 at least two business days prior to the Council Meeting.

Personas con necesidades especiales de accesibilidad, incluyendo personas con impedimentos de vista u oído, o con necesidad

de impresión grande o interprete, deben comunicarse con la Secretaria de la Ciudad at 623-333-1200 o TDD 623-333-0010 cuando menos dos días hábiles antes de la junta del Concejo.

Notice is hereby given that pursuant to A.R.S. § 1-602.A.9, subject to certain specified statutory exceptions, parents have a right to consent before the State or any of its political subdivisions make a video or audio recording of a minor child. Meetings of the City Council may be audio and/or video recorded and, as a result, proceedings in which children are present may be subject to such recording. Parents, in order to exercise their rights may either file written consent with the City Clerk to such recording, or take personal action to ensure that their child or children are not present when a recording may be made. If a child is present at the time a recording is made, the City will assume that the rights afforded parents pursuant to A.R.S. § 1-602.A.9 have been waived.

De acuerdo con la ley A.R.S. § 1-602.A.9, y sujeto a ciertas excepciones legales, se da aviso que los padres tienen derecho a dar su consentimiento antes de que el Estado o cualquier otra entidad política haga grabaciones de video o audio de un menor de edad. Las juntas del Concejo de la Ciudad pueden ser grabadas y por consecuencia, existe la posibilidad de que si hay menores de edad presentes éstos aparezcan en estos videos o grabaciones de audio. Los padres pueden ejercitar su derecho si presentan su consentimiento por escrito a la Secretaria de la Ciudad, o pueden asegurarse que los niños no estén presentes durante la grabación de la junta. Si hay algún menor de edad presente durante la grabación, la Ciudad dará por entendido que los padres han renunciado sus derechos de acuerdo a la ley contenida A.R.S. § 1-602.A.9.

RESOLUTION NO. 3182-514

A RESOLUTION OF THE COUNCIL OF THE CITY OF AVONDALE, ARIZONA, HONORING DETECTIVE STEVEN HEATHERINGTON FOR TWENTY YEARS OF DEDICATED SERVICE TO THE CITY OF AVONDALE.

WHEREAS, on August 20, 1993, Detective Steven Heatherington began his career with the City of Avondale as a Police Officer; and

WHEREAS, Detective Heatherington served the City as a Police Officer, and most recently as a Detective; and

WHEREAS, fellow employees have embraced Detective Heatherington as a friend; and

WHEREAS, Detective Heatherington has demonstrated integrity and professionalism to all customers and has faithfully served the City during periods of transition and growth; and

WHEREAS, the Council of the City of Avondale wishes to express its appreciation for his hard work, dedication and years of service and to honor Detective Steven Heatherington on the occasion of his retirement after 20 years of exemplary service to the citizens of Avondale.

NOW, THEREFORE, BE IT RESOLVED BY THE COUNCIL OF THE CITY OF AVONDALE, ARIZONA, that the City of Avondale does hereby thank Detective Steven Heatherington for his 20 years of loyal, dedicated service to the City of Avondale and its citizens.

PASSED AND ADOPTED by the Council of the City of Avondale, May 5, 2014.

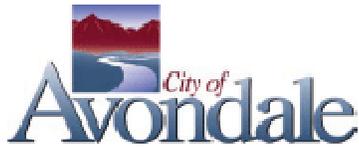
Marie Lopez Rogers, Mayor

ATTEST:

Carmen Martinez, City Clerk

APPROVED AS TO FORM:

Andrew J. McGuire, City Attorney



CITY COUNCIL REPORT

SUBJECT:

Recognition of Avondale Citizen Leadership
Academy Class VIII graduates

MEETING DATE:

May 5, 2014

TO: Mayor and Council

FROM: Pier Simeri, Community Relations Director (623) 333-1611

THROUGH: David Fitzhugh, Acting City Manager

PURPOSE:

The Avondale City Council will recognize the participants of Avondale's Citizen Leadership Academy, who took time out of their busy schedules to successfully complete 10 weeks of insightful workshops and informative tours to learn more about their community and how the City of Avondale functions as an organization dedicated to public service.

BACKGROUND:

In 2007, Avondale launched its first Citizen Leadership Academy as a means of accomplishing a goal of the City Council to encourage community involvement. Avondale's Citizen Leadership Academy is a ten-week program that offers a comprehensive, behind-the-scenes perspective on city government, with interactive and informative workshops on topics ranging from how the city runs to future development and building strong neighborhoods. Participants take part in a "quality of life" tour of city parks and facilities, serve as a "jury" in a mock court trial, and are offered a close up view of public safety vehicles and apparatus during the public safety workshops.

DISCUSSION:

Since its inception, the Citizen Leadership Academy has met the Council's goal of encouraging community involvement because many of the graduates from the program have "answered the call" to public service by becoming more involved in their community -- whether it's serving on an HOA board or joining a city Board, Commission or Committee. Some have even run for public office at the local or state level. Staff is aware that it takes a great commitment on the behalf of the academy's participants, and as a result, the city would like to recognize the following members of Class VIII for their active participation, insightful questions and anticipated continued involvement in their community.

Josephine Saldana
Brenda Hatch
Arlene Santos
Albert Santos
Dawn Dolezal
Josh Glider
Sally Amundsen
Gloria Solorio
Bradley Ruggles
Melissa Valenzuela
Josie Arredondo
Christine Fanchi
Dana Chamberlin

BUDGETARY IMPACT:

The Community Relations Department budgets approximately \$2,600 annually for the program, to cover costs for a tour bus, meals, and materials/handouts.

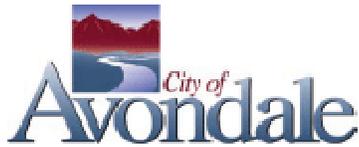
RECOMMENDATION:

The Mayor and Council are asked to congratulate and recognize the graduating members of Avondale's Citizen Leadership Academy Class VIII.

ATTACHMENTS:

[Click to download](#)

No Attachments Available



CITY COUNCIL REPORT

SUBJECT:

Liquor License Location Transfer - Series 9 (Liquor Store) - Fry's Food & Drug #112

MEETING DATE:

May 5, 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 for a location transfer of a Series 9 (Liquor Store) license to sell all spirituous liquors submitted by Ms. Lauren Merrett to be assigned to Fry's Food and Drug Store #112 located at 1571 N Dysart Road in Avondale.

DISCUSSION:

The City Clerk's Department has received an application from Ms. Lauren Merrett for a Series 9 Liquor Store license to sell all spirituous liquors. A Series 9 license is transferable location to location. The license was previously used at Fry's Food and Drug #49 location at 390 N Litchfield Road in Goodyear; that store is now closed.

It should be noted that being that Fry's Store #112 currently has a valid Series 9 license, this license will be placed on inactive status until such a time as is once again transferred to a new location.

The Arizona Department of Liquor License and Control has accepted the submitted application as complete. As required by state law and city ordinance, the application was posted at the location for the required period of time starting April 10, 2014 and a notice was published in the West Valley View on April 25 and April 29, 2014. No comments have been received.

The Development Services, Police, and Fire Departments have reviewed the application and are recommending approval. While not required by the ordinance, the application was also reviewed and approved by the Finance Department. Department comments are attached.

RECOMMENDATION:

Staff is recommending approval of a request for a location transfer of a Series 9 (Liquor Store) license to see all spirituous liquors submitted by Ms. Lauren Merrett to be assigned to Fry's Food and Drug Store #112 located at 1571 N Dysart Road in Avondale.

ATTACHMENTS:

Click to download

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

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.

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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): 09070576

1. Type of License(s): series 09

2. Total fees attached:

Department Use Only
 \$ 100.00

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

SECTION 4 Applicant

1. Owner/Agent's Name: Mr. Merrett Lauren Kay
(Insert one name ONLY to appear on license) Last First Middle

2. Corp./Partnership/L.L.C.: Smith's Food & Drug Centers, Inc. B100047
(Exactly as it appears on Articles of Inc. or Articles of Org.)

3. Business Name: Fry's Food & Drug #112 B1021563
(Exactly as it appears on the exterior of premises)

4. Principal Street Location 1571 N Dysart Rd Avondale Maricopa 85323
(Do not use PO Box Number) City County Zip

5. Business Phone: 623-925-0267 Daytime Phone: _____ Email: n/a

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 _____ \$ _____

**SEE
 AMENDMENT**

DEPARTMENT USE ONLY				
Fees: <u>100.00</u>	Application	Interim Permit	Site Inspection	Finger Prints \$ <u>100.00</u>
TOTAL OF ALL FEES				
Is Arizona Statement of Citizenship & Alien Status For State Benefits complete? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
Accepted by: <u>EW</u>	Date: <u>3.24.14</u>	Lic. # <u>09070576</u>		

AMENDMENT

Arizona Department of Liquor Licenses and Control

800 West Washington, 5th Floor

Phoenix, Arizona 85007

www.azliquor.gov

602-542-5141

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APPLICATION FOR LIQUOR LICENSE

TYPE OF 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 6 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):

1. Type of License(s): _____

2. Total fees attached: \$ _____

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

Mr. Ms.

1. Owner/Agent's Name: _____ Last _____ First _____ Middle _____
(Insert one name ONLY to appear on license)

2. Corp./Partnership/L.L.C.: _____
(Exactly as it appears on Articles of Inc. or Articles of Org.)

3. Business Name: Fry's Food & Drug #112
(Exactly as it appears on the exterior of premises)

4. Principal Street Location 1575 N. Dysart Road Avondale Maricopa 85392
(Do not use PO Box Number) City County Zip

5. Business Phone: _____ Daytime Phone: _____ Email: _____

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

7. Mailing Address: _____ City _____ State _____ Zip _____

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

DEPARTMENT USE ONLY

Fees: Application _____ Interim Permit _____ Site Inspection _____ Finger Prints _____ \$ _____

TOTAL OF ALL FEES

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

Accepted by: _____ Date: _____ Lic. # _____

*Disabled individuals requiring special accommodation, please call (602) 542-9027.

1/7/2013



SECTION 5 Interim Permit:

1. If you intend to operate business when your application is pending you will need an Interim Permit pursuant to A.R.S. 4-203.01.
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. _____
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, _____, 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.

(Print full name)

State of _____ County of _____

X _____
(Signature)

The foregoing instrument was acknowledged before me this

My commission expires on: _____

_____ day of _____, _____
Day Month Year

(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"/>						
<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#

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.*

1. Name of Corporation/L.L.C.: Smith's Food & Drug Centers, Inc.
(Exactly as it appears on Articles of Incorporation or Articles of Organization)

2. Date Incorporated/Organized: 4/89 State where Incorporated/Organized: Ohio

3. AZ Corporation Commission File No.: F-0042954-3 Date authorized to do business in AZ: 4/89

4. AZ L.L.C. File No: _____ Date authorized to do business in AZ: _____

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
McKinney	Stephen	Michael	Pres		
Garnes	Monica	Jean	V.P.		
Shoemaker	James	Keith	V.P.		

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

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

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

SECTION 8 Club Applicants:

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

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

2. Is club non-profit? YES NO

3. List officer and directors:

Last	First	Middle	Title	Mailing Address	City State Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

Smith's Food & Drug Centers, Inc.

Corporate Structure

Publicly Traded

The Kroger Co.
1014 Vine St.
Cincinnati, OH 45202-1100

100% owner of

Fred Meyer, Inc.
3800 SE 22nd Ave.
Portland, OR 97202

100% owner of

Smith's Food & Drug Centers, Inc.
DBA Fry's Food & Drug Stores
500 S. 99th Ave.
Tolleson, AZ 85353

Steve McKinney Pres

Monica Garnes VP

James Shoemaker VP

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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 transfered: 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 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 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)

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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 Fry's Food & Drug #49
 (Exactly as it appears on license) Address 390 N Litchfield Rd Goodyear AZ 85338
2. New Business: Name Fry's Food & Drug #112
 (Physical Street Location) Address 1571 N Dysart Rd Avondale AZ 85323
3. License Type: 09 License Number: 09070387
4. If more than one license to be transferred: License Type: _____ License Number: _____
5. What date do you plan to move? upon issuance What date do you plan to open? will be placed on inactive

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

14 NOV 24 11:01 AM 2015

1. Distance to nearest school: _____ ft. Name of school _____
 Address _____
 City, State, Zip _____
2. Distance to nearest church: _____ ft. Name of church _____
 Address _____
 City, State, Zip _____
3. I am the: Lessee Sublessee Owner Purchaser (of premises)
4. If the premises is leased give lessors: Name _____
 Address _____
 City, State, Zip _____

SEE AMENDMENT

- 4a. Monthly rental/lease rate \$ _____ What is the remaining length of the lease 5 yrs. _____ mos.
- 4b. What is the penalty if the lease is not fulfilled? \$ _____ or other balance
 (give details - attach additional sheet if necessary)
5. What is the total **business** indebtedness for this license/location excluding the lease? \$ 0
 Please list lenders you owe money to.

Last	First	Middle	Amount Owed	Mailing Address	City State	Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

AMENDMENT

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 Fry's Food & Drug #49
 (Exactly as it appears on license) Address 390 N. Litchfield Rd., Goodyear, AZ. 85338
2. New Business: Name Fry's Food & Drug #112
 (Physical Street Location) Address 1575 N. Dysart Rd., Avondale, AZ. 85392
3. License Type: 09 License Number: 09070576
4. If more than one license to be transferred: License Type: _____ License Number: _____
5. What date do you plan to move? upon issuance What date do you plan to open? Will be inactive

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))

4 APR 21 11:43 AM '13

1. Distance to nearest school: 831 ft. Name of school La Petite Academy
 Address 13003 W. McDowell Road, Avondale, AZ. 85392
 City, State, Zip _____
2. Distance to nearest church: 615 ft. Name of church Kingdom in The Valley Christian Church
 Address 13048 W. Rancho Santa Fe Blvd., Avondale, AZ. 85392
 City, State, Zip _____
3. I am the: Lessee Sublessee Owner Purchaser (of premises)
4. If the premises is leased give lessors: Name _____
 Address _____
 City, State, Zip _____
- 4a. Monthly rental/lease rate \$ _____ What is the remaining length of the lease 0 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

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

AMENDMENT

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 _____

SECTION 14 Restaurant or hotel/motel license applicants:

1. Is there an existing restaurant or hotel/motel liquor license at the proposed location? YES NO
 If yes, give the name of licensee, Agent or a company name:
 _____ and license #: _____
Last First Middle
2. If the answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application is pending; consult A.R.S. § 4-203.01; and complete SECTION 5 of this application.
3. All restaurant and hotel/motel applicants must complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor Licenses and Control.
4. As stated in A.R.S. § 4-205.02.G.2, a restaurant is an establishment which derives at least 40 percent of its gross revenue from the sale of food. Gross revenue is the revenue derived from all sales of food and spirituous liquor on the licensed premises. By applying for this hotel/motel restaurant license, I certify that I understand that I must maintain a minimum of 40 percent food sales based on these definitions and have included the Restaurant Hotel/Motel Records Required for Audit (form LIC 1013) with this application.

applicant's signature

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

applicant's initials

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

1. Check ALL boxes that apply to your business:
 Entrances/Exits Liquor storage areas Patio: Contiguous
 Service windows Drive-in windows Non Contiguous
2. Is your licensed premises currently closed due to construction, renovation, or redesign? YES NO
 If yes, what is your estimated opening date? _____
month/day/year
3. Restaurants and hotel/motel applicants are required to draw a detailed floor plan of the kitchen and dining areas including the locations of all kitchen equipment and dining furniture. Diagram paper is provided on page 7.
4. The diagram (a detailed floor plan) you provide is required to disclose only the area(s) where spirituous liquor is to be sold, served, consumed, dispensed, possessed, or stored on the premises unless it is a restaurant (see #3 above).
5. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed premises, such as parking lots, living quarters, etc.

As stated in A.R.S. § 4-207.01(B), I understand it is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to boundaries, entrances, exits, added or deleted doors, windows or service windows, or increase or decrease to the square footage after submitting this initial drawing.

applicant's 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.

please see attached

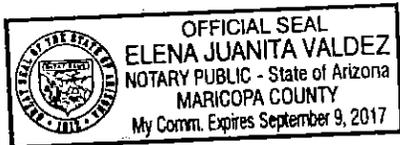
14 MAR 24 11:47 AM PM 2 45

SECTION 16 Signature Block

I, Lauren Kay Merrett, 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 Lauren Kay Merrett
(signature of applicant listed in Section 4, Question 1)

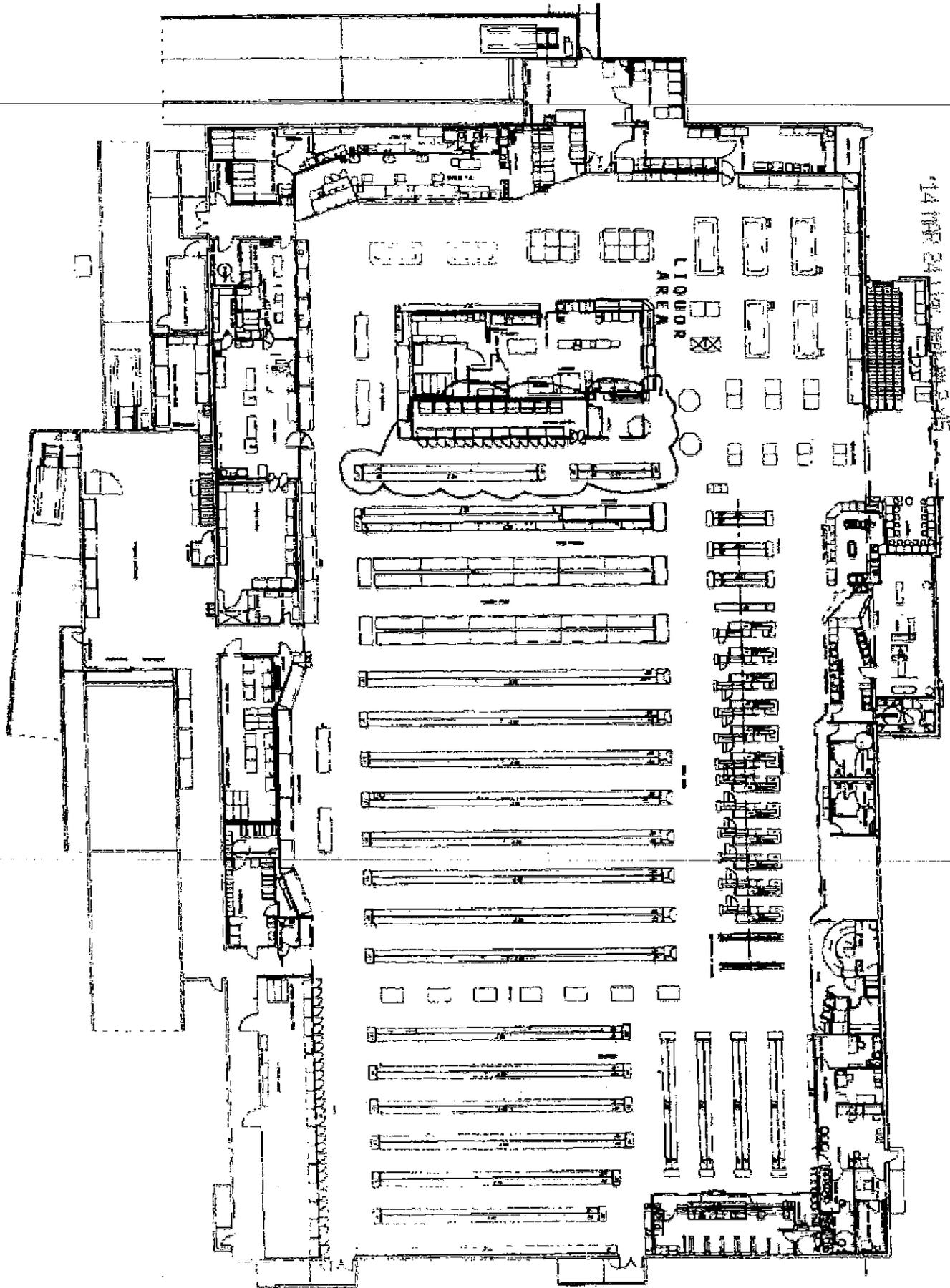
State of Arizona County of Maricopa



The foregoing instrument was acknowledged before me this 24 of March, 2014
Day Month Year

My commission expires on : _____
Day Month Year

Elena Valdez
signature of NOTARY PUBLIC



Entrance/Exit

14 MAR 24 1968

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934
(802) 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 DP5 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 #

09070504

(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: Merrett Lauren Kay Date of Birth: _____
Last First Middle (NOT a Public Record)

3. Social Security Number: _____ Drivers License #: _____ State: AZ
(NOT a public record) (NOT a public record)

4. Place of Birth: Phx AZ US Height: 5'8" Weight: 138 Eyes: Hx Hair: BR
City State Country (not country)

5. Marital Status Single Married Divorced Widowed

6. Name of Current or Most Recent Spouse: Morrow James Quincy 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? AZ 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: Fry's Food & Drug #112 Premises Phone: 602-925-0267

11. Physical Location of Licensed Premises Address: 1571 N Desert Rd Avondale Maricopa 85323
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)
1/1997	CURRENT	Pres/CEO Mereco Inc.	736 S Longmore St Chandler AZ 85224

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION 12

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
5/2000	CURRENT	O				

AMENDMENT

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 legal 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 THE 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. 5 44-8852 will be charged for all dishonored checks.

Liquor License # _____

(If the location is currently licensed)

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

2. Name: _____ Date of Birth: ____/____/____
Last First Middle (NOT a Public Record)

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

4. Place of Birth: _____ Height: _____ Weight: _____ Eyes: _____ Hair: _____
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? _____ 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: Fry's Food & Drug #112 Premises Phone: _____

11. Physical Location of Licensed Premises Address: 1575 N. Dysart Road 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)
	CURRENT		

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION 12

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
	CURRENT					

Disabled individuals requiring special accommodations, please call the Department. (602) 542-9927

April 16, 2012

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, Lauren Kay Merrett, 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 Lauren Kay Merrett
(Signature of Applicant)

State of Arizona County of Maricopa

The foregoing instrument was acknowledged before me this 23 day of March, 2014
Month Year



My commission expires on:

Day Month Year

Elena Valdez
(Signature of NOTARY PUBLIC)

14 MAR 24 11:49 AM 2015

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

#19

I am currently Licensee on several licenses in the state of Arizona. I am Licensee in an administrative capacity only, and do not have any interest in or authority for the day-to-day operations of this or any other liquor licensed business.

Lauren Merrett

Lauren Merrett M.Ed.

14 APR 24 11:49 AM '25

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor
Phoenix AZ 85007-2934

(602) 542-5141

QUESTIONNAIRE

SEE
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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 for 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. § 44-6862 will be charged for all dishonored checks.

Liquor License #

09070504

(If the location is currently licensed)

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

2. Name: McKINNEY STEPHEN MICHAEL Date of Birth: _____
Last First Middle (NOT a Public Record)

3. Social Security Number: _____ Drivers License #: _____ State: CALIFORNIA
(NOT a public record) (NOT a public record)

4. Place of Birth: NIAGRA FALLS NY USA Height: 6-1 Weight: 205 Eyes: BRN Hair: GRY
City State Country (not county)

5. Marital Status Single Married Divorced Widowed

6. Name of Current or Most Recent Spouse: McKINNEY, JULIA MAE (SZEWCZYK) 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: Fry's Food & Drug #112 Premises Phone: 623-925-0267

11. Physical Location of Licensed Premises Address: 1571 N. Dysart Rd. Avondale Maricopa 85323
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)
10/2013	CURRENT	PRESIDENT	FRYS FOOD & DRUG STORES 500 S. 99TH AVE TOLLESON, AZ 85353
10/2008	11/2008	V.P. OPERATIONS	RALPHS GROCERY CO. 1100 W. ARTESIA BLVD. COMPTON, CA 90220
10/2007	10/08	V.P. OPERATIONS	THE KROGER CO. 19245 DAVID MEMORIAL DR. SHENANDOAH, TX, 77385

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION 12

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
10/2013	CURRENT	RENT				
12/2008	09/2013	OWN				
12/2007	11/2008	OWN				

14 APR 24 11:49 AM Dept 192 245

AMENDMENT

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

QUESTIONNAIRE

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Read carefully. This instrument is a legal 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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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. 5-44-8852 will be charged for all dishonored checks.

Liquor License # _____

(If the location is currently licensed)

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

2. Name: _____ Date of Birth: ____/____/____
Last First Middle (NOT a Public Record)

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

4. Place of Birth: _____ Height: _____ Weight: _____ Eyes: _____ Hair: _____
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? _____ 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: Fry's Food & Drug #112 Premises Phone: _____

11. Physical Location of Licensed Premises Address: 1575 N. Dysart Road 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)
	CURRENT		

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION 12

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
	CURRENT					

Disabled individuals requiring special accommodations, please call the Department. (602) 542-9027

April 16, 2012

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

Arizona Liquor Law, Sept 2012

20. I, STEPHEN MICHAEL MCKINNEY, 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 Stephen Michael McKinney
(Signature of Applicant)

State of ARIZONA County of MARICOPA

The foregoing instrument was acknowledged before me this
_____ day of _____, _____
Month Year

My commission expires on: 10 Aug 2017
Day Month Year

Melissa S. Kurtz
(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 _____ 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

Smith's Food & Drug Centers, Inc.

D.B.A. Fry's Food & Drug Stores – Fry's Marketplace & Smith's Food & Drug Centers, Inc.

**SEE
AMENDMENT**

Compliance Violations

DATE	LOCATION	STATUTE	DESCRIPTION
09-26-1996	Fry's #36 - Ina & Thornydale Tucson, AZ	ARS 4-244.9	Sale to Underage Person
12-27-1996	Fry's #55 - Power & Baseline Rd. Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
11/08/1997	Fry's # 23 - McKellips & Recker Rd. Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
11-08-1997	Smith's # 308- 1135 N. Recker Rd. Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
11/08/1997	Fry's #29-University & Gilbert Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
03-25-1998	Smith's #303-1100 Hwy #279 Cottonwood, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
05/13/1998	Fry's #34-Speedway & Pantano Tucson, AZ	ARS 4-244.9	Sale to Underage Person
06-18-1998	Smith's #327-4202 W. Cactus Rd. Phoenix, AZ	ARS 4-244.9	Sale to Underage Person
02/24/1999	Fry's #62-Baseline & Country Club Mesa, AZ	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
03-16-1999	Smith's #191 1775 W. Lakeside – Bullhead City, AZ	ARS 4-244.9	Sale to Underage Person
07-01-1999	Fry's #112 - Dysart & McDowell Avondale, AZ	ARS 4-244.9	Sale to Underage Person
02-25-2000	Fry's #112 - Dysart & McDowell Avondale, AZ	ARS 4-244.9	Sale to Underage Person
04/20/2000	Fry's #46 - 7 th St. & Baseline Phoenix, AZ	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
05/17/2000	Fry's #11 - 67 th Ave. & Bethany Home Glendale, AZ	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
01/11/2001	Fry's #24 - Rural & Ray Chandler, AZ	ARS 4-244.9	Sale to Underage Person
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06/05-2003	Fry's #42 - 9401 E. 22 nd St. Tucson, AZ 85710	ARS 4-244.9	Sale to Underage Person
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12/01/2006	Fry's # 73 - 6625 W. Happy Valley Rd. Phx, AZ 85310	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
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09-13-2008	Fry's #63 -3100 N Glassford Hill Rd Prescott Valley-AZ-86314	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
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08/01/2009	Fry's #124 - 3255 S. Rural Rd. Tempe, AZ. 85282	ARS 4-241.A / ARS 4-244.9	Failure to Check ID / Sale to Underage Person
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Questions #17 & #19

AMENDMENT

Lauren Kay Merrill
090705716

Smith's Food & Drug Centers, Inc.

D.B.A. Fry's Food & Drug Stores - Fry's Marketplace & Smith's Food & Drug Centers, Inc.
Compliance Violations

DATE	LOCATION	STATUTE	DESCRIPTION
09-26-1996	Fry's #36 - Ina & Thornydale Tucson, AZ	ARS 4-244.9	Sale to Underage Person
12-27-1996	Fry's #55 - Power & Baseline Rd. Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
11/08/1997	Fry's # 23 - McKellips & Recker Rd. Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
11-08-1997	Smith's # 308- 1135 N. Recker Rd. Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
11/08/1997	Fry's #29-University & Gilbert Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
03-25-1998	Smith's #303-1100 Hwy #279 Cottonwood, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
05/13/1998	Fry's #34-Speedway & Pantano Tucson, AZ	ARS 4-244.9	Sale to Underage Person
06-18-1998	Smith's #327-4202 W. Cactus Rd. Phoenix, AZ	ARS 4-244.9	Sale to Underage Person
02/24/1999	Fry's #62-Baseline & Country Club Mesa, AZ	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
03-16-1999	Smith's #191 1775 W. Lakeside - Bullhead City, AZ	ARS 4-244.9	Sale to Underage Person
07-01-1999	Fry's #112 - Dysart & McDowell Avondale, AZ	ARS 4-244.9	Sale to Underage Person
02-25-2000	Fry's #112 - Dysart & McDowell Avondale, AZ	ARS 4-244.9	Sale to Underage Person
04/20/2000	Fry's #46 - 7 th St. & Baseline Phoenix, AZ	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
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06/05-2003	Fry's #42 - 9401 E. 22 nd St. Tucson, AZ 85710	ARS 4-244.9	Sale to Underage Person
05/20/2005	Fry's #58 - 2001 E. Irvington Rd. Tucson, AZ 85714	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
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09-13-2008	Fry's #63 -3100 N Glassford Hill Rd Prescott Valley-AZ-86314	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
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12/07/2012	Fry's #63 -3100 N Glassford Hill Rd Prescott Valley-AZ-86314	ARS 4-241.A / ARS 4-244.9	Failure to Check ID / Sale to Underage Person

Since 10/2013 I have been a Corporate Officer & President of Fry's Food & Drug Store of AZ and all associated liquor licenses.

Steve Mackinney

991111 11 11 11 11 11

SEE
AMENDMENT

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 #

09070564

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

2. Name: GARNES MONICA J 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: COLUMBUS OH USA Height: 5-9 Weight: 165 Eyes: BRN Hair: BRN
City State Country (not county)

5. Marital Status Single Married Divorced Widowed

6. Name of Current or Most Recent Spouse: GORDON RODERICK 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: Fry's Food & Drug #112 Premises Phone: 623 925 0267

11. Physical Location of Licensed Premises Address: 1571 N Desert Rd Flagstaff Maricopa 85133
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)
03/13	CURRENT	VP - MERCHANDISING	FRYS FOOD & DRUG 500 S. 99TH AVE. TOLLESON, AZ 85853
01/95	3/13	GROCERY MERCHANDISER	THE KROGER CO. 4111 EXECUTIVE PKWY WESTVILLE, OH 43081

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION 12 OR 13

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
06/13	CURRENT	RENT				
03/01	05/13	OWN				

15 APR 24 10:00 AM

AMENDMENT

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

QUESTIONNAIRE

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Read carefully. This instrument is a legal 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 THE 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. 5 44-8852 will be charged for all dishonored checks.

Liquor License # _____

(If the location is currently licensed)

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

2. Name: _____ Date of Birth: ____/____/____
Last First Middle (NOT a Public Record)

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

4. Place of Birth: _____ Height: _____ Weight: _____ Eyes: _____ Hair: _____
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? _____ 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: Fry's Food & Drug #112 Premises Phone: _____

11. Physical Location of Licensed Premises Address: 1575 N. Dysart Road 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)
	CURRENT		

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION 12

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
	CURRENT					

Disabled individuals requiring special accommodations, please call the Department. (602) 542-9927

April 16, 2012

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 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> NO <input type="checkbox"/>

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 **(NB)**

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, MONICA GARNES, 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 *Monica Garnes*
(Signature of Applicant)

State of ARIZONA County of MARICOPA

The foregoing instrument was acknowledged before me this
4 day of March, 2014
Month Year

My commission expires on: 10 Aug 2017
Day Month Year

Melissa S. Kurtz
(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 _____ County of _____

The foregoing instrument was acknowledged before me this

X _____
Signature of Controlling Person or Agent (circle one)

_____ day of _____
Month Year

(Signature of NOTARY PUBLIC)

My commission expires on: _____
Day Month Year



14 MAR 24 11:47 AM '14

Questions #17 & #19

Smith's Food & Drug Centers, Inc.
D.B.A. Fry's Food & Drug Stores - Fry's Marketplace & Smith's Food & Drug Centers, Inc.
Compliance Violations

DATE	LOCATION	STATUTE	DESCRIPTION
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12/07/2012	Fry's #63 -3100 N Glassford Hill Rd Prescott Valley-AZ-86314	ARS 4-241.A / ARS 4-244.9	Failure to Check ID / Sale to Underage Person

I have been an Officer on all of the Arizona Fry's Food & Drug Store liquor licenses:

Monica Garnes
 Monica Garnes

5716 W 21st Apt 101 PHX AZ

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.

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.

Liquor License #

09010564
(if the location is currently licensed)

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

1. Check appropriate box → Controlling Person (Complete Questions 1-19) Agent (Complete Questions 1-19) 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: SHOEMAKER JAMES KEITH Date of Birth: _____
Last First Middle (NOT a Public Record)

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

4. Place of Birth: Monroe LA USA Height: 5'10" Weight: 190 Eyes: GRN Hair: BRN
City State Country (not county)

5. Marital Status Single Married Divorced Widowed

6. Name of Current or Most Recent Spouse: Shoemaker Jaclyn A Wempe 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: Fry's Food & Drug #112 Premises Phone: 623 925 0267

11. Physical Location of Licensed Premises Address: 1571 N. Dysart Rd. Avondale Maricopa 85323
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)
3/12	CURRENT	VP - OPERATIONS	FRYS FOOD & DRUG 500 S. 99TH AVE. TOLLESON, AZ 85353
02/08	3/12	Regional Director, Ops	Kroger Co. 19245 David Memorial Dr. Shenandoah, TX 77385

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
05/12	CURRENT	OWN				
05/99	04/12	OWN				

AMENDMENT

ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

QUESTIONNAIRE

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TO BE COMPLETED BY EACH CONTROLLING PERSON, AGENT OR MANAGER. EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD AVAILABLE AT THE 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. 5-44-8852 will be charged for all dishonored checks.

Liquor License # _____

(If the location is currently licensed)

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

2. Name: _____ Date of Birth: ____/____/____
Last First Middle (NOT a Public Record)

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

4. Place of Birth: _____ Height: _____ Weight: _____ Eyes: _____ Hair: _____
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? _____ 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: Fry's Food & Drug #112 Premises Phone: _____

11. Physical Location of Licensed Premises Address: 1575 N. Dysart Road 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)
	CURRENT		

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION 12

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
	CURRENT					

Disabled individuals requiring special accommodations, please call the Department. (602) 542-9927

April 16, 2012

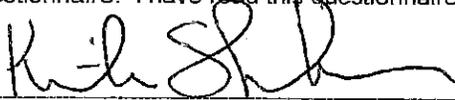
If you checked the Manager box on the front of this form skip to # 15

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

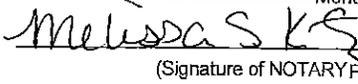
14 APR 24 11:49 AM '14

20. I, JAMES KEITH SHOEMAKER, 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
4 day of March, 2014
Month Year


(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 _____ 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
My commission expires on: _____
Day Month Year

(Signature of NOTARY PUBLIC)

Questions #17 & #19

Smith's Food & Drug Centers, Inc.

D.B.A. Fry's Food & Drug Stores - Fry's Marketplace & Smith's Food & Drug Centers, Inc.

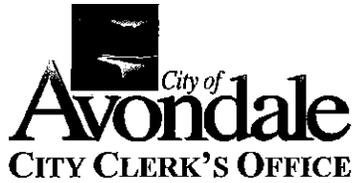
Compliance Violations

DATE	LOCATION	STATUTE	DESCRIPTION
09-26-1996	Fry's #36 - Ina & Thornydale Tucson, AZ	ARS 4-244.9	Sale to Underage Person
12-27-1996	Fry's #35 - Power & Baseline Rd. Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
11/08/1997	Fry's # 23 - McKellops & Recker Rd. Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
11-08-1997	Smith's # 308 - 1135 N. Recker Rd. Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
11/08/1997	Fry's #29-University & Gilbert Mesa, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
03-25-1998	Smith's #303-1100 Hwy #279 Cottonwood, AZ	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
05/13/1998	Fry's #34-Speedway & Pantano Tucson, AZ	ARS 4-244.9	Sale to Underage Person
06-18-1998	Smith's #327-4202 W. Cactus Rd. Phoenix, AZ	ARS 4-244.9	Sale to Underage Person
02/24/1999	Fry's #62-Baseline & Country Club Mesa, AZ	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
03-16-1999	Smith's #191 1775 W. Lakeside - Bullhead City, AZ	ARS 4-244.9	Sale to Underage Person
07-01-1999	Fry's #112 - Dysart & McDowell Avondale, AZ	ARS 4-244.9	Sale to Underage Person
02-25-2000	Fry's #112 - Dysart & McDowell Avondale, AZ	ARS 4-244.9	Sale to Underage Person
04/20/2000	Fry's #46 - 7 th St. & Baseline Phoenix, AZ	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
05/17/2000	Fry's #11 - 67 th Ave & Bethany Home Glendale, AZ	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
01/11/2001	Fry's #24 - Rural & Ray Chandler, AZ	ARS 4-244.9	Sale to Underage Person
04/24/2002	Fry's #57 - Cortaro Rd & Silverbell Rd. Marana, AZ	ARS 4-244.9	Sale to Underage Person
06/05-2003	Fry's #42 - 9401 E. 22 nd St. Tucson, AZ 85710	ARS 4-244.9	Sale to Underage Person
05/20/2005	Fry's #58 - 2001 E. Irvington Rd. Tucson, AZ 85714	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
12/01/2006	Fry's # 73 - 8625 W. Happy Valley Rd. Phx, AZ 85310	ARS 4-241.A - ARS 4-244.9	Failure to Check ID / Sale to Underage Person
05-25-2007	Fry's #37 - 981 W. Elliot Rd. Chandler, AZ 85224	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
03-07-2008	Fry's #24 - 4949 W. Ray Rd. Chandler, AZ 85226	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
09-13-2008	Fry's #63 -3100 N Glassford Hill Rd Prescott Valley-AZ-86314	ARS 4-241.A-ARS 4-244.9	Failure to Check ID / Sale to Underage Person
09/23/2008	Fry's #38 - 3770 W. Ina Rd. Marana, Az. 85741	R 19-1-232 (6 counts)	Broken packages prohibited
08/01/2009	Fry's #124 - 3255 S. Rural Rd. Tempe, Az. 85282	ARS 4-241.A / ARS 4-244.9	Failure to Check ID / Sale to Underage Person
09/18/2009	Fry's #60 - 20220 N 59 th Ave. Glendale, Az. 85308	ARS 4-241.A / ARS 4-244.9	Failure to Check ID / Sale to Underage Person
12/19/2009	Fry's #63 -3100 N Glassford Hill Rd Prescott Valley-AZ-86314	ARS 4-241.A / ARS 4-244.9	Failure to Check ID / Sale to Underage Person
04/16/2010	Fry's #128 - 4724 N. 20th St. Phoenix, Az. 85016	ARS 4-241.A / ARS 4-244.9	Failure to Check ID / Sale to Underage Person
10/09/2010	Fry's #63 -3100 N Glassford Hill Rd Prescott Valley-AZ-86314	ARS 4-241.A / ARS 4-244.9	Failure to Check ID / Sale to Underage Person
08/24/2012	Fry's #124 - 3255 S. Rural Rd. Tempe, Az. 85282	ARS 4-241.A / ARS 4-244.9	Accepting Unauthorized Forms of ID / Sale to Underage Person
12/07/2012	Fry's #63 -3100 N Glassford Hill Rd Prescott Valley-AZ-86314	ARS 4-241.A / ARS 4-244.9	Failure to Check ID / Sale to Underage Person

I have been an Officer on all of the Arizona Fry's Food & Drug Store liquor licenses.

Keith Shoemaker
James Keith Shoemaker

576 6 44 717 April 01 2011 11:11



DEPARTMENTAL REVIEW FORM

TYPE OF LICENSE: SERIES 09

ROUTING:

LIQUOR STORE – LOCATION TRANSFER

POLICE DEPARTMENT

FIRE DEPARTMENT

DEVELOPMENT SERVICES

FINANCE DEPARTMENT



APPLICANT'S NAME: LAUREN KAY MERRETT

BUSINESS NAME: FRY'S FOOD & DRUG #112

ADDRESS: 1575 N. DYSART ROAD

CITY: AVONDALE

STATE: AZ.

ZIP CODE: 85392

DEPARTMENTAL COMMENTS:

APPROVED

DENIED



041014

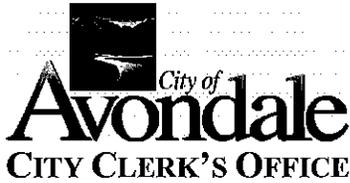
SIGNATURE

DATE

ASST CHIEF OF POLICE

TITLE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: MAY 5, 2014
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: APRIL 16, 2014**



DEPARTMENTAL REVIEW FORM

TYPE OF LICENSE: SERIES 09

LIQUOR STORE – LOCATION TRANSFER

ROUTING:

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

APPLICANT'S NAME: LAUREN KAY MERRETT

BUSINESS NAME: FRY'S FOOD & DRUG #112

ADDRESS: 1575 N. DYSART ROAD

CITY: AVONDALE STATE: AZ. ZIP CODE: 85392

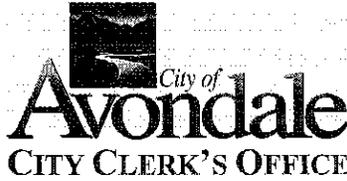
DEPARTMENTAL COMMENTS:

APPROVED
 DENIED

Valorie Russell
SIGNATURE
Fire Inspector
TITLE

4/9/14
DATE

THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: MAY 5, 2014
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: APRIL 16, 2014



DEPARTMENTAL REVIEW FORM

TYPE OF LICENSE: SERIES 09

LIQUOR STORE – LOCATION TRANSFER

ROUTING:

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

APPLICANT'S NAME: LAUREN KAY MERRETT

BUSINESS NAME: FRY'S FOOD & DRUG #112

ADDRESS: 1575 N. DYSART ROAD

CITY: AVONDALE STATE: AZ. ZIP CODE: 85392

DEPARTMENTAL COMMENTS:

APPROVED
 DENIED



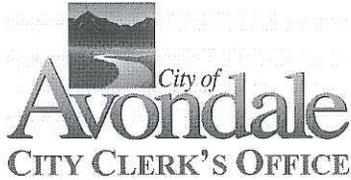
SIGNATURE
Chief Boundary Officer

TITLE

4/9/14

DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: MAY 5, 2014
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: APRIL 16, 2014**



DEPARTMENTAL REVIEW FORM

TYPE OF LICENSE: SERIES 09

LIQUOR STORE – LOCATION TRANSFER

ROUTING:

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

APPLICANT'S NAME: LAUREN KAY MERRETT

BUSINESS NAME: FRY'S FOOD & DRUG #112

ADDRESS: 1575 N. DYSART ROAD

CITY: AVONDALE STATE: AZ. ZIP CODE: 85392

DEPARTMENTAL COMMENTS:

- APPROVED
- DENIED



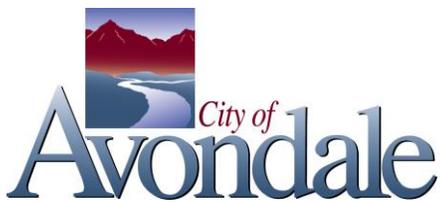
SIGNATURE
Zoning Specialist

TITLE

4/16/14

DATE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: MAY 5, 2014
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: APRIL 16, 2014**



DEVELOPMENT SERVICES

MEMORANDUM

DATE: April 16, 2014

TO: Carmen Martinez, City Clerk

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

SUBJECT: Series 9 Liquor License – Location Transfer
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 location transfer is exempt from the 300 foot separation requirement from a church, school, or fenced school recreational area.

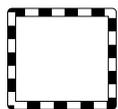
The General Plan designates the property as Freeway Commercial. The property is zoned Community Commercial (C-2). A grocery store is a permitted within the C-2 zoning district.

Staff recommends approval of this request.

Attachment: 2013 Aerial Photo
Zoning Vicinity Map

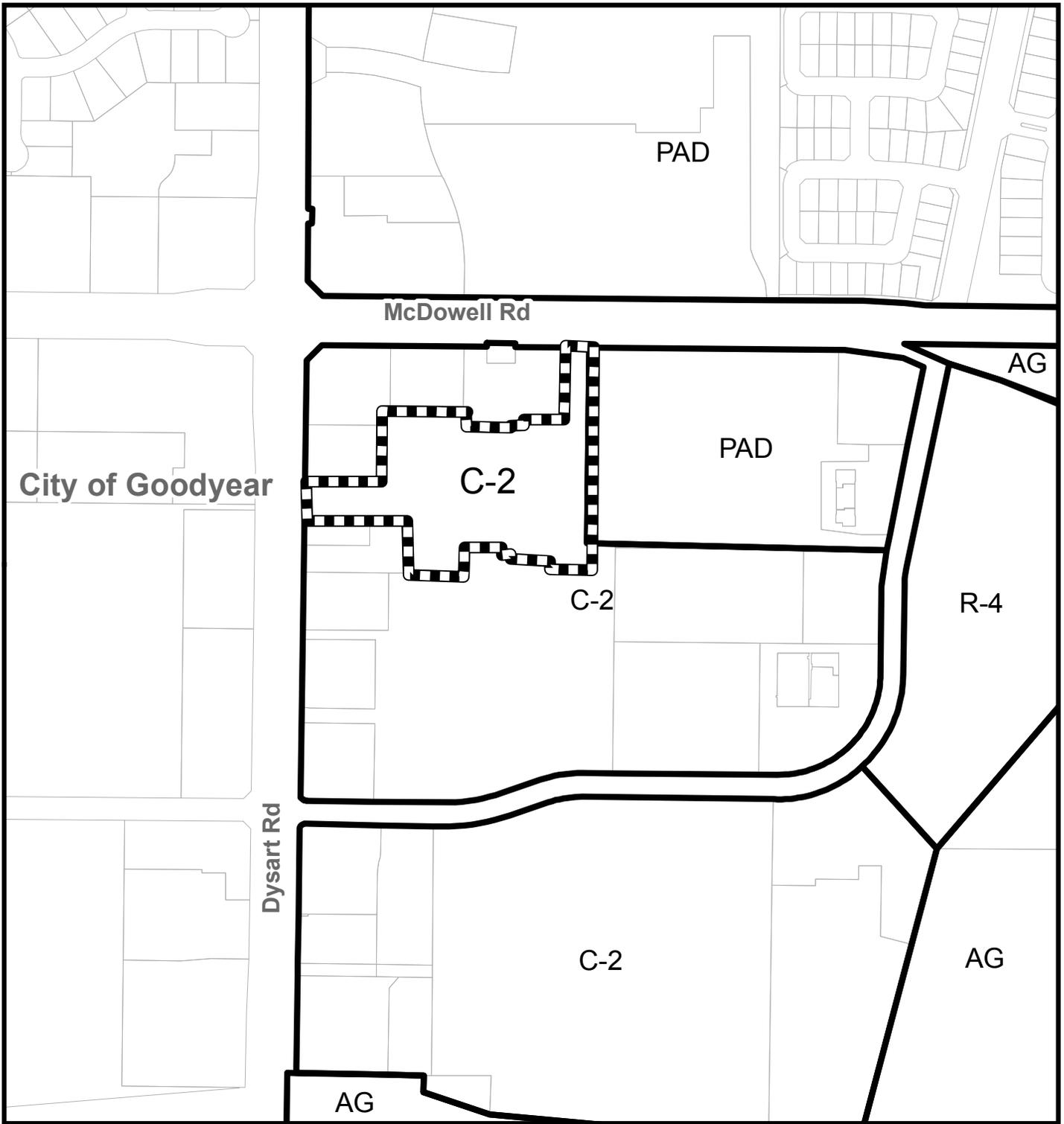


2013 Aerial Photograph



Fry's Food & Drug #112



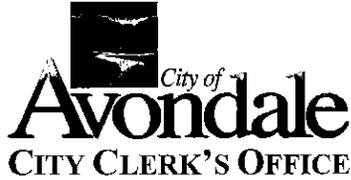


Zoning Vicinity Map



Fry's Food & Drug #112





DEPARTMENTAL REVIEW FORM

TYPE OF LICENSE: SERIES 09

LIQUOR STORE – LOCATION TRANSFER

ROUTING:

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

APPLICANT'S NAME: LAUREN KAY MERRETT

BUSINESS NAME: FRY'S FOOD & DRUG #112

ADDRESS: 1575 N. DYSART ROAD

CITY: AVONDALE STATE: AZ. ZIP CODE: 85392

DEPARTMENTAL COMMENTS:

- APPROVED**
- DENIED**



SIGNATURE

4-9-14
DATE

Tax Audit Supervisor
TITLE

**THIS LICENSE IS SCHEDULED FOR THE COUNCIL MEETING OF: MAY 5, 2014
PLEASE RETURN YOUR COMMENTS TO THE CITY CLERK'S OFFICE BY: APRIL 16, 2014**

2014.04.10 10:16

NOTICE

APPLICATION TO SELL ALCOHOLIC BEVERAGES
DATE POSTED: **APRIL 10, 2014**

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

LOCATION: **11465 WEST CIVIC CENTER DRIVE**
DATE: **MONDAY, MAY 5, 2014**
AT **7:00 PM.**

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

****SERIES 09: LIQUOR STORE 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:

Fry's Food & Drug #112
1575 N. Dysart Road
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.

Arizona Department of Liquor Licenses and Control
800 West Washington, 5th Floor
Phoenix, Arizona 85007
www.azliquor.gov
602-542-9141

APPLICATION FOR LIQUOR LICENSE
TYPE OR PRINT WITH **BLACK INK**

Section: Affiliation No. 1, 1987, All Owners, Agents, Partners, Shareholders, Officers, or Managers actively involved in the day to day operations of the business must be listed on this application. All owners, agents, partners, shareholders, officers, or managers must be approved upon each training course or provide proof of attendance within the last year. See page 1 of the Rules & Regulations.

SECTION 1 This application is for a: **1** **NEW LICENSE** Complete Sections 2, 3, 4, F2, F3, F4, F5, F6
 INTEREST TRANSFER Complete Sections 5
 MORE THAN ONE LICENSE
 PERSON TRANSFER (Wine & Liquor Stores ONLY) Complete Sections 2, 3, 4, F1, F3, F5, F6
 LOCATION TRANSFER (Wine and Liquor Stores ONLY) Complete Sections 2, 3, 4, F1, F3, F5, F6
 PROBATIONARY ASSIGNMENT/REVOCATION DECEASED Complete Sections 2, 3, 4, F2, F3, F5, F6
 GOVERNMENTAL Complete Sections 2, 3, 4, F1, F3, F5, F6
 OTHER (Specify)

SECTION 2 Type of ownership: **1** **SOLE PROPRIETORSHIP** Complete Section 6
 INDIVIDUAL Complete Section 6
 PARTNERSHIP Complete Section 6
 CORPORATION Complete Section 7
 LIMITED LIABILITY CO. Complete Section 7
 LLC (LL) Complete Section 8
 CO-OWNERSHIP Complete Section 8
 TRUST Complete Section 9
 OTHER (Specify)

SECTION 3 Type of license and form: **1** **LIQUOR STORE** License #0000000000

1. Type of License(s) Section 102 2. Total fees attached: **1** **100.00**

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE ARE NOT REFUNDABLE)
This fees attached unless A.S. MARKS will be charged for the subsequent checks.

SECTION 4 Applicant

No.	Name	Title	Address	Key	Notes
1.	Dorcas/Karen's Name	Merrett	Lairson		
2.	Corp./Partnership/L.C.	Fry's Food & Drug Centers, Inc.		Yes	LIQUOR STORE
3.	Business Name	Fry's Food & Drug #112			LIQUOR STORE
4.	Principal Street Location	1575 N Dysart Rd	Avondale	Maricopa	Section 104
5.	Business Phone	602-915-0162	Daytime Phone		Form: 3/14
6.	Is the business located within the incorporated limits of the above city or town?				YES/NO (Check)
7.	Mailing Address				Form: 3/14
8.	Price paid for license only, beer and wine, or liquor alone				Type: 1

DEPARTMENT USE ONLY

Fees: **100.00** Application **100.00** Section Permit **100.00** Site Inspection **100.00** Finger Prints **100.00** TOTAL OF ALL FEES

In Arizona Department of Chiropractic & Aesthetics For State Records completed: **04/10/2014** BY: **0000000000** C/NO: **0000000000**
Accepted by: **0000000000** Date: **04/10/2014** BY: **0000000000** C/NO: **0000000000**

Revised 1/2014. For more information regarding special accommodations, please call (602) 542-9141.

TRU'S FOOD & DRUG

1575



2014.04.10 10:25



Legend

PLACES OF WORSHIP

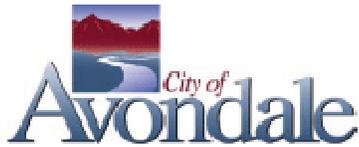
- CHURCH

Liquor License

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

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





CITY COUNCIL REPORT

SUBJECT:

First Amendment - Cooperative Purchase Agreement - Sanderson Ford

MEETING DATE:

May 5, 2014

TO: Mayor and Council

FROM: Wayne Janis, P.E., Public Works Director, 623-333-4411

THROUGH: David Fitzhugh, Acting City Manager

PURPOSE:

Staff requests that the City Council approve the First Amendment to the cooperative purchasing agreement with Sanderson Ford for the provision of parts and labor for light, medium, and heavy duty vehicles and authorize the Mayor or City Manager and the City Clerk to execute the necessary documents.

BACKGROUND:

The City has utilized the State of Arizona Department of Transportation competitively bid contract with Sanderson Ford for the purchase of parts and labor for the repair of City vehicles. The term of the State's contract extends through October 26, 2014. Staff is seeking authorization to amend the most recent cooperative purchase agreement originally approved by Council on May 16, 2011. The initial term of the contract from May through October of 2011, allowed for expenditures up to \$10,000 with the renewal one year term allowing maximum expenditures up to \$20,000.

DISCUSSION:

Staff is requesting Council approve this amendment which covers a two (2) year term from October 2012 through October 2014, allowing for maximum expenditures of \$54,000. This will result in total aggregate expenditures over the life of this contract to \$84,000. The annual estimated expenditures over the life of the contract have increased from approximately \$20,000 to \$27,000 per year. This can be attributed to inflationary costs of parts and labor. Additionally, the age of the City fleet increased during the economic down turn when vehicle replacements were postponed, which contributed to a slight increase in cost. As this state contract is expiring in October, staff will be pursuing a new contract for Ford parts and service for Council's approval.

BUDGETARY IMPACT:

Funding is available in the approved City budget. Purchases for this vendor are made from line items 606-5200-00-6330 (outside services) and 606-5200-00-7410 (parts).

RECOMMENDATION:

Staff recommends that the City Council approve the first amendment to the cooperative purchasing agreement with Sanderson Ford for the provision of O.E.M. parts and labor for light, medium, and heavy duty vehicles and authorize the Mayor or City Manager and the City Clerk to execute the necessary documents.

ATTACHMENTS:

Click to download

[CPA - Sanderson Ford](#)

**FIRST AMENDMENT
TO
COOPERATIVE PURCHASING AGREEMENT
BETWEEN
THE CITY OF AVONDALE
AND
DON SANDERSON FORD, INC.
d/b/a SANDERSON FORD**

THIS FIRST AMENDMENT TO COOPERATIVE PURCHASING AGREEMENT (this "First Amendment") is entered into as of May 5, 2014, between the City of Avondale, an Arizona municipal corporation (the "City"), and Don Sanderson Ford, Inc., an Arizona corporation, d/b/a Sanderson Ford (the "Contractor").

RECITALS

A. After a competitive procurement process, the State of Arizona, by and through its Department of Transportation ("ADOT"), entered into Contract No. T091700023 dated October 27, 2009, as amended and extended on July 22, 2010, August 15, 2011, October 3, 2012, and November 25, 2013, with the Contractor for the Contractor to provide O.E.M. replacement parts and labor for light, medium and heavy duty vehicles (Chrysler, Ford, GM, Honda, Isuzu, Nissan and Toyota), AC Delco and Motorcraft on an "as-required basis" (collectively, the "ADOT Contract").

B. The City and the Contractor entered into a Cooperative Purchasing Agreement dated May 16, 2011, based upon the ADOT Contract (the "Agreement"), for the Contractor to provide the City with O.E.M. replacement parts and labor for light, medium and heavy duty vehicles on an "as-required basis" (the "Materials and Services").

C. The City has determined that additional Materials and Services by the Contractor are necessary.

D. The City and the Contractor desire to enter into this First Amendment to (i) provide for the cost of and purchase additional Materials and Services 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 Contractor 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 October 26, 2014, unless terminated as otherwise provided pursuant to the terms and conditions of the Agreement.

2. Compensation. The City shall increase the compensation to Contractor by \$54,000.00 for the Materials and Services at the rates as set forth in the ADOT Contract, resulting in an increase of the total compensation, from \$30,000.00 to an aggregate amount not to exceed \$84,000.00.

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 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 Agreement and (ii) any and all claims, known and unknown, relating to the Agreement and existing on or before the date of this First Amendment are forever waived.

5. Conflict of Interest. This First 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.

Notary Public

(Affix notary seal here)

[SIGNATURES CONTINUE ON FOLLOWING PAGE]

“Contractor”

DON SANDERSON FORD, INC.,
an Arizona corporation,
d/b/a SANDERSON FORD

By: _____

Name: _____

Title: _____

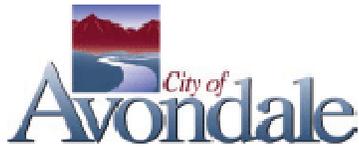
(ACKNOWLEDGMENT)

STATE OF ARIZONA)
) ss.
COUNTY OF MARICOPA)

On _____, 2014, before me personally appeared _____
_____, the _____ of DON SANDERSON FORD,
INC., an Arizona corporation, d/b/a SANDERSON FORD, whose identity was proven to me on
the basis of satisfactory evidence to be the person who he/she claims to be, and acknowledged
that he/she signed the above document on behalf of the corporation.

Notary Public

(Affix notary seal here)



CITY COUNCIL REPORT

SUBJECT:

First Amendment to Cooperative Purchasing Agreement - Facilitec, Inc.

MEETING DATE:

May 5, 2014

TO: Mayor and Council

FROM: Christopher Reams, Parks, Recreation and Libraries Director (623) 333-2412

THROUGH: David Fitzhugh, Acting City Manager

PURPOSE:

Staff is requesting that the City Council approve the first amendment to the Cooperative Purchasing Agreement between the City of Avondale (the City) and Facilitec Inc. (Facilitec) for furniture services and increase the annual agreement amount for each renewal term from \$10,000 to \$40,000.

DISCUSSION:

On October 3, 2013 the city and Facilitec entered into the initial Cooperative Purchasing Agreement through the Arizona State Contract No. ADSPO13-040687. Facilitec provides the City with systems furniture products and services that include installation of new cubicle and office furniture as well as performing systems furniture reconfigurations as necessary at City Facilities.

The Agreement provides for the purchase of an indefinite quantity and delivery for materials and services under the conditions of the State Contract. The City does not guarantee any minimum or maximum number of purchases pursuant to this Agreement. Purchases will only be made when the city identifies a need and proper authorization and documentation have been approved.

The current Cooperative Purchasing Agreement limits contract expenditures to \$10,000 annually and \$40,000 aggregate total over the entire term of the agreement. This initial term of agreement was from October 3, 2013 until February 1, 2014. After the expiration of the initial term, this Agreement may be renewed for up to three successive one-year terms if it is deemed in the best interest of the City and funds for the agreement are available. On February 2, 2014 the agreement was extended for one additional year.

Through planning discussions, it was revealed that several City Departments are considering adding new cubicles and hard wall office furniture that would exceed the original \$10,000 dollar limit of the current Cooperative Purchasing Agreement. In addition, the facilities division has programmed replacements of aged and worn out furniture throughout the City. Projected expenditures for furnishings have committed much of the \$10,000 allotment making it necessary to request that the annual agreement amount with Facilitec for furniture products and services be increased from \$10,000 to an annual aggregate amount not to exceed \$40,000 for each renewal term (if any).

BUDGETARY IMPACT:

Generally, funding for furnishing purchases that result from a new program or activity is provided by the City Department that identifies the particular need for the services. Furnishings that need to be replaced due to age and/or condition will be purchased utilizing the Parks, Recreation, and Libraries Department (PRLD) / Facilities Division Building Maintenance Fund (line item 101-5420-00-6730). Ordering of furniture products and services and project management are provided by the PRLD / Facilities Division.

RECOMMENDATION:

Staff recommends that the City Council approve the first amendment to the Cooperative Purchasing Agreement between the City of Avondale (the City) and Facilitec Inc. (Facilitec) for furniture services and increase the annual agreement amount for each renewal term from \$10,000 to \$40,000.

ATTACHMENTS:

Click to download

[CPA - Facilitec](#)

**FIRST AMENDMENT
TO
COOPERATIVE PURCHASING AGREEMENT
BETWEEN
THE CITY OF AVONDALE
AND
FACILITEC, INC.**

THIS FIRST AMENDMENT TO COOPERATIVE PURCHASING AGREEMENT (this "First Amendment") is entered into as of May 5, 2014, between the City of Avondale, an Arizona municipal corporation (the "City"), and Facilitec, Inc., an Arizona corporation (the "Vendor").

RECITALS

A. After a competitive procurement process, the State of Arizona (the "State") entered into Contract No. ADSPO13-040687 dated February 1, 2013, as amended by that certain Amendment Number One dated March 27, 2013, and Amendment Number Two dated December 19, 2013, with the Vendor for the Vendor to provide furniture products and services (collectively, the "State Contract").

B. The City and the Vendor entered into a Cooperative Purchasing Agreement dated October 3, 2013, based upon the State Contract (the "Agreement"), for the Vendor to provide the City with furniture products and services (the "Materials and Services").

C. The City has determined that additional Materials and Services by the Vendor are necessary.

D. The City and the Vendor desire to enter into this First Amendment to provide for the cost of and purchase additional Materials and Services.

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. Compensation. The City shall increase the compensation to Vendor by \$30,000.00, from \$10,000.00 to an aggregate amount not to exceed \$40,000.00, for each Renewal Term (if any), for the Materials and Services at the rates as set forth in the State Contract, resulting in an increase of the total compensation, from \$40,000.00 to an aggregate amount not to exceed \$130,000.00 for the entire Term of the Agreement.

2. 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.

3. Non-Default. By executing this First 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 First 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 First Amendment are forever waived.

4. Conflict of Interest. This First Amendment and the Agreement 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

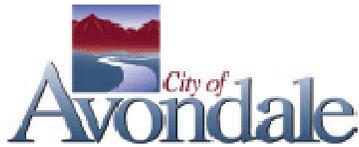
(ACKNOWLEDGMENT)

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)



CITY COUNCIL REPORT

SUBJECT:

Resolution 3180-514 - Cooperative Purchasing Agreement with the State of Minnesota

MEETING DATE:

May 5, 2014

TO: Mayor and Council

FROM: Rob Lloyd, CIO/IT Director (623) 333-5011

THROUGH: David Fitzhugh, Acting City Manager

PURPOSE:

Staff requests that the Mayor and City Council adopt a resolution approving a cooperative purchasing agreement between the City of Avondale and the State of Minnesota for access to discounted purchase of commodities and services and authorize the Mayor or City Manager and the City Clerk to execute the appropriate documents.

BACKGROUND:

The State of Minnesota maintains Cooperative Purchasing Venture ("CPV") contracts for discounted purchases of commodity hardware and services with awarded vendors. An agreement exists between the State of Minnesota and Microsoft for devices, such as Surface tablets and accessories, under the CPV. Eligible public sector entities include WSCA local governments such as the City of Avondale, under MS § 16C.03, subd. 10. Enrolling for access requires submittal of a CPV application at no charge.

DISCUSSION:

This cooperative purchasing agreement would allow the City of Avondale to use Microsoft Stores and to make use of the discounts negotiated by the State of Minnesota through its competitive procurement processes. City departments would make purchases through the Information Technology Department on an as-needed basis.

IT does not anticipate a large purchase quantity as the devices fit a narrow use profile. The Avondale Fire and Medical department would benefit from discounts in the near-term, as they look to replace fully-rugged mobile data computers with a lighter option in the field for electronic patient charting and processing. Other departments and divisions may benefit in the future.

BUDGETARY IMPACT:

The cooperative purchasing agreement allows the City of Avondale to access vendors and advantageous pricing. The value of purchases will total the amount City departments elect to purchase within their existing budgets, and as approved by City Council through the City's Annual Budget and Financial Plan.

RECOMMENDATION:

Staff recommends that the Mayor and City Council adopt a resolution approving the cooperative purchasing agreement with the State of Minnesota to allow for discounted purchase of commodities and services and authorize the Mayor or City Manager and City Clerk to execute the necessary documents.

ATTACHMENTS:

Click to download

[Resolution 3180-514](#)

RESOLUTION NO. 3180-514

A RESOLUTION OF THE COUNCIL OF THE CITY OF AVONDALE, ARIZONA, APPROVING A COOPERATIVE PURCHASING AGREEMENT WITH THE STATE OF MINNESOTA TO PURCHASE COMMODITIES OR SERVICES.

BE IT RESOLVED BY THE COUNCIL OF THE CITY OF AVONDALE as follows:

SECTION 1. The Cooperative Purchasing Agreement (the “Agreement”) with the State of Minnesota, through its Materials Management Division (the “Division”), authorizing the City to purchase commodities or services through the Division’s contracts, is hereby adopted substantially in the form attached hereto as Exhibit A and incorporated herein by reference.

SECTION 2. The Mayor, the City Manager, the City Clerk and the City Attorney are hereby authorized and directed to take all steps necessary to cause the execution of the Agreement and to take all steps necessary to carry out the purpose and intent of this Resolution.

PASSED AND ADOPTED by the Council of the City of Avondale, May 5, 2014.

Marie Lopez Rogers, Mayor

ATTEST:

Carmen Martinez, City Clerk

APPROVED AS TO FORM:

Andrew J. McGuire, City Attorney

EXHIBIT A
TO
RESOLUTION NO. 3180-514

[Agreement]

See following pages.



COOPERATIVE PURCHASING AGREEMENT

Under the Authority of Minnesota Statutes § 16C.03, Subdivision 10
and

Minnesota Statutes § 471.59, Subdivision 1

This Joint Powers Agreement is between the State of Minnesota, through its commissioner of Administration, Materials Management Division ("Division") and

CITY OF AVONDALE ("Authorized Entity").

Pursuant to Minn. Stat. § 16C.03, subd. 10, the Division acquires various supplies, commodities, equipment, and services for state agencies and governmental units (as defined in Minn. Stat. § 471.59, subd. 1) through competitive bidding or requests for proposals. The Division, through Minn. Stat. § 16C.11, and the Authorized Entity wish to combine their purchasing functions, as specifically provided below, so that the Authorized Entity may avail itself of the prices which have been agreed upon by the Division and its vendors.

The parties agree as follows:

- 1. Term.** This joint powers agreement will be effective on the date State obtains all required signatures under Minn. Stat. § 16C.05, subd. 2, and remains in effect until canceled by either party upon 30 days' written notice to the other party.
- 2. Services.** The Division will make its contracts for commodities and services, as listed on the State of Minnesota's Contract Index, available to the Authorized Entity.
- 3. Use of Division Contracts.** To purchase commodities or services from the Division's contracts, the Authorized Entity must issue a purchase order in accordance with the terms and conditions of the Division's contracts and any requirements applicable to the Authorized Entity's governing body. The Authorized Entity must send purchase orders directly to the applicable vendor and will make payments directly to the vendor in accordance with its established procedures and terms of the Division's contract. The Authorized Entity will not use the goods available under the Division's contracts for the purposes of resale. The Authorized Entity must be the end user of the goods purchased.
- 4. Liability.** The Authorized Entity agrees that neither the Division nor its employees personally assume responsibility or liability for any amounts due or claimed to be due pursuant to any purchase order entered issued by the Authorized Entity. The Authorized Entity will indemnify, save and hold harmless the Division and its employees from any loss, damage or



COOPERATIVE PURCHASING AGREEMENT

Under the Authority of Minnesota Statutes § 16C.03, Subdivision 10
and
Minnesota Statutes § 471.59, Subdivision 1

expense, including payment of attorney fees allowable by law, which arise or may arise from the Authorized Entity's use of this joint powers agreement and from any dispute or claim arising from any transaction between the Authorized Entity and the Division's vendors, whether or not the loss, damage, dispute or claim arises during or after the period of this cooperative agreement. The Division's liability will be governed by the provisions of Minn. Stat. § 3.736.

CITY OF AVONDALE

"Authorized Entity certifies that the appropriate person(s) have executed this cooperative agreement on behalf of the Authorized Entity as required by applicable articles, bylaws, resolutions or ordinances."

By:

(Authorized Signature)

(Title)

(Address)

(Date)

STATE OF MINNESOTA

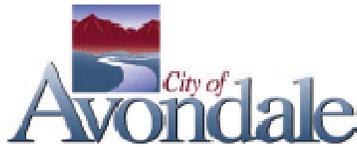
"By Delegation"

By:

Materials Management Division

(Date)

Permit Number/Access Code:



CITY COUNCIL REPORT

SUBJECT:

Resolution 3181-514 - Intergovernmental Agreement with National Purchasing Partners

MEETING DATE:

May 5, 2014

TO: Mayor and Council

FROM: Paul Adams, Fire Chief (623) 333-6100

THROUGH: David Fitzhugh, Acting City Manager

PURPOSE:

Staff is requesting that City Council approve a Resolution approving an IGA with National Purchasing Partners into cooperative purchasing agreements with L.N. Curtis and Municipal Emergency Services for the purpose of purchasing of fire equipment and tools to outfit the new fire apparatus to be located at fire station 174. Each contact award will be for \$25,000, for a total purchase is \$50,000.

BACKGROUND:

Council approved the purchase of a new fire apparatus. This apparatus is required to be properly outfitted, prior to placing in-service, with proper tools and equipment. In anticipation of the delivery of a new fire apparatus mid- summer, staff is recommending the advanced purchasing of necessary fire equipment and tools to provide for a timely placement of this apparatus in-service.

DISCUSSION:

The City Council approved the final construction of fire station 174 and the purchase of a new fire apparatus. The residents within fire station 174 response district are currently being served by a medical unit as the initial response unit. Timely placement of the new fire apparatus into service will serve this area by providing full coverage for all potential emergencies quickly and efficiently. The purchase of necessary fire equipment and tools, in anticipation of the new apparatus delivery, will expedite the process of placing this apparatus in-service.

BUDGETARY IMPACT:

The funds to purchase the equipment have been appropriated in the current 2013-2014 budget. Funding in the amount of \$50,000.00 is available in Line Item 101-6330-00-7165.

RECOMMENDATION:

Staff is recommends the City Council adopt a resolution approving an IGA with National Purchasing Partners into cooperative purchasing agreements with L.N. Curtis and Municipal Emergency Services for the purpose of purchasing of fire equipment and tools for a total purchase is \$50,000.

ATTACHMENTS:

Click to download

[Resolution 3181-514](#)

RESOLUTION NO. 3181-514

A RESOLUTION OF THE COUNCIL OF THE CITY OF AVONDALE, ARIZONA, APPROVING AN INTERGOVERNMENTAL AGREEMENT WITH NATIONAL PURCHASING PARTNERS RELATING TO COOPERATIVE PURCHASING.

BE IT RESOLVED BY THE COUNCIL OF THE CITY OF AVONDALE as follows:

SECTION 1. The National Purchasing Partners Member Intergovernmental Cooperative Purchasing Agreement (the “Agreement”) is hereby approved substantially in the form attached hereto as Exhibit A.

SECTION 2. The Mayor, the City Manager, the City Clerk and the City Attorney are hereby authorized and directed to take all steps necessary to cause the execution of the Agreement and to take all steps necessary to carry out the purpose and intent of this Resolution.

PASSED AND ADOPTED by the Council of the City of Avondale, May 5, 2014.

Marie Lopez Rogers, Mayor

ATTEST:

Carmen Martinez, City Clerk

APPROVED AS TO FORM:

Andrew J. McGuire, City Attorney

EXHIBIT A
TO
RESOLUTION NO. 3181-514

(Agreement)

See following pages.

National Purchasing Partners

Member Intergovernmental Cooperative Purchasing Agreement

This Intergovernmental Agreement (Agreement) by and between government entities that execute a Lead Contracting Agency Authorization (“Lead Contracting Agency(ies)”) to be supplemented and made a part hereof and participating National Purchasing Partners (“NPP”) government entity members (“Participating Agencies”) including members of FireRescue GPO and Public Safety GPO, that agree to the terms and conditions of this Agreement. All NPP Lead Contracting Agencies and Participating Agencies shall be considered as “parties” to this agreement.

WHEREAS, upon completion of a formal competitive solicitation and selection process, the Lead Contracting Agencies have entered into Master Price Agreements with one or more Vendors to provide goods and services, often based on national sales volume projections;

WHEREAS, NPP, created by a nonprofit medical center, provides group purchasing marketing and administrative support for governmental entities within the membership. NPP’s marketing and administrative services are free to its membership, which includes participating public entities and non-profit institutions throughout the United States and Canada.

WHEREAS, NPP has instituted a cooperative purchasing program under which member Participating Agencies may reciprocally utilize competitively solicited Vendor Contracts through the inclusion of the membership in Lead Contracting Agency bid Solicitation and Master Price Agreements;

WHEREAS, the Master Price Agreements provide that all members of NPP may purchase goods and services on the same terms, conditions and pricing as the Lead Contracting Agency, subject to applicable local and state laws of the Participating Agencies;

WHEREAS, the parties agree to comply with the requirements of the Intergovernmental Cooperation Act as may be applicable to the local and state laws of the Participating Agencies;

WHEREAS, the parties desire to conserve and leverage resources, and to improve the efficiency and economy of the procurement process while reducing solicitation and procurement costs;

WHEREAS, the parties are authorized and eligible to contract with governmental bodies and Vendors to perform governmental functions and services, including the purchase of goods and services; and

WHEREAS, the parties desire to contract with Vendors under the terms of the Master Price Agreements open to all Participating Agencies;

NOW, THEREFORE, the parties agree as follows:

ARTICLE 1: LEGAL AUTHORITY

Each Party represents and warrants that it is eligible to participate in this Agreement because it is a local government or non-profit corporation created and operated to provide one or more governmental functions and possesses adequate legal authority to enter into this Agreement.

ARTICLE 2: APPLICABLE LAWS

The procurement of goods and services subject to this Agreement shall be conducted in accordance with and subject to the relevant statutes, ordinances, rules, and regulations that govern each party's procurement policies. It is the responsibility of each party to ensure it has met all applicable solicitation and procurement requirements, both in state law and local policy.

ARTICLE 3: USE OF BID, PROPOSAL OR PRICE AGREEMENT

- a. Each party will facilitate the cooperative procurement of goods and services.
- b. The procuring party shall be responsible for the ordering of goods and services under this Agreement. A non-procuring party shall not be liable in any fashion for any violation by a procuring party, and the procuring party shall hold non-procuring parties harmless from any liability that may arise from action or inaction of the procuring party.
- c. The procuring party shall not use this agreement as a method for obtaining additional concessions or reduced prices for similar goods and services outside the scope of the Master Price Agreements and NPP.
- d. The exercise of any rights or remedies by the procuring party shall be the exclusive obligation of such procuring party.
- e. The cooperative use of bids, proposals or price agreements obtained by a party to this Agreement shall be in accordance with the terms and conditions of the bid, proposal or price agreement, except as modified where otherwise allowed or required by applicable law, and does not relieve the party of its other bid requirements under state law or local policies.

ARTICLE 4: PAYMENT OBLIGATIONS

The procuring party will make timely payments to Vendors for goods and services received in accordance with the terms and conditions of the procurement. Payment for goods and services, inspections and acceptance of goods and services ordered by the procuring party shall be the exclusive obligation of such procuring party. Disputes between procuring party and Vendor shall be resolved in accordance with the law and venue rules of the state of the procuring party.

ARTICLE 5: COMMENCEMENT DATE

This Agreement shall take effect after execution of the "Lead Contracting Agency Endorsement and Authorization" or "Participating Agency Endorsement and Authorization," as applicable.

ARTICLE 6: TERMINATION OF AGREEMENT

This Agreement shall remain in effect until terminated by a party giving 30 days written notice to the Lead Contract Agency.

ARTICLE 7: ENTIRE AGREEMENT

This Agreement and any attachments, as provided herein, constitute the complete Agreement between the parties hereto, and supersede any and all oral and written agreements between the parties relating to matters herein.

ARTICLE 8: CHANGES AND AMENDMENTS

This Agreement may be amended only by a written amendment executed by all parties, except that any alterations, additions, or deletions of this Agreement which are required by changes in Federal and State law or regulations are automatically incorporated into this Agreement without written amendment hereto and shall become effective on the date designated by such law or regulation.

ARTICLE 9: SEVERABILITY

All parties agree that should any provision of this Agreement be determined to be invalid or unenforceable, such determination shall not affect any other term of this Agreement, which shall continue in full force and effect.

THIS INSTRUMENT HAS BEEN EXECUTED IN TWO OR MORE ORIGINALS BY EXECUTION AND ATTACHMENT OF EACH "LEAD CONTRACTING AGENCY ENDORSEMENT AND AUTHORIZATION" OR "PARTICIPATING AGENCY ENDORSEMENT AND AUTHORIZATION," AS APPLICABLE. ONCE EXECUTED, IT IS THE RESPONSIBILITY OF EACH

**PARTY TO FILE THIS AGREEMENT WITH THE PROPER AGENCY IF
REQUIRED BY LOCAL OR STATE LAW.**

**LEAD CONTRACTING AGENCY
ENDORSEMENT AND AUTHORIZATION**

The undersigned acknowledges, on behalf of South Davis Metro Fire Agency (Lead Contracting Agency) that he/she has read and agrees to the general terms and conditions set forth in the enclosed Member Intergovernmental Cooperative Purchasing Agreement regulating use of the Master Price Agreements and purchase of goods and services that from time to time are made available by Lead Contracting Agencies to Participating Agencies locally, regionally, and nationally through NPP. Copies of Master Price Agreements and any amendments thereto made available by Lead Contracting Agencies will be provided to Participating Agencies and NPP to facilitate use by Participating Agencies.

The undersigned understands that the purchase of goods and services under the provisions of the Member Intergovernmental Cooperative Purchasing Agreement is at the absolute discretion of the Participating Agencies.

The undersigned affirms that he/she is an agent of the South Davis Metro Fire Agency and is duly authorized to sign this Lead Contracting Agency Endorsement and Authorization.

BY: Jeff Bassett
ITS: Fire Chief

Date: 10-3-13

Lead Contracting Agency Contact Information:

Contact Person: Jeff Bassett
Address: 255 S. 100 W
Bountiful, UT 84016

Telephone No.: 801-677-2408
Email: JBassett@sdmetrofire.org

**PARTICIPATING AGENCY
ENDORSEMENT AND AUTHORIZATION**

The undersigned acknowledges, on behalf of _____ (Participating Agency) that he/she has read and agrees to the general terms and conditions set forth in the enclosed Member Intergovernmental Cooperative Purchasing Agreement regulating use of the Master Price Agreements and purchase of goods and services that from time to time are made available by Lead Contracting Agencies to Participating Agencies locally, regionally, and nationally through NPP.

The undersigned further acknowledges that the purchase of goods and services under the provisions of the Member Intergovernmental Cooperative Purchasing Agreement is at the absolute discretion of the Participating Agency and that neither the Lead Contracting Agency nor NPP shall be held liable for any costs or damages incurred by or as a result of the actions of the Vendor or any other Participating Agency. Upon award of contract, the Vendor shall deal directly with the Participating Agency concerning the placement of orders, disputes, invoicing and payment.

The undersigned affirms that he/she is an agent of _____ and is duly authorized to sign this Participating Agency Endorsement and Authorization.*

BY: _____
ITS: _____

Date: _____

Participating Agency Contact Information:

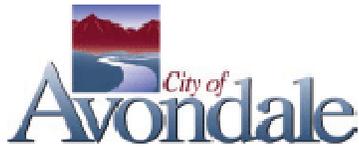
Contact Person: _____

Address: _____

Telephone No.: _____

Email: _____

* In addition to execution of this Member Intergovernmental Cooperative Purchasing Agreement, all Participating Agencies must be registered members of NPP and/or FireRescue GPO in order to access NPP competitively bid contracts. Registration is fast and free. Go to www.mynpp.com or contact a customer service representative at 1-800-810-3909 or customerservice@mynpp.com.



CITY COUNCIL REPORT

SUBJECT:

Resolution 3183-514 - Authorizing the Submission of Applications for Grant Consideration by the Gila River Indian Community

MEETING DATE:

May 5, 2014

TO: Mayor and Council

FROM: Janice Simpson

THROUGH: David Fitzhugh, Acting City Manager

PURPOSE:

Staff is requesting that the City Council adopt a Resolution to authorize the submission of application (s) for funding to the Gila River Indian Community (GRIC) and the acceptance of awards, should the project(s) be selected for funding.

BACKGROUND:

Funding from GRIC comes through a provision of the shared state revenue and Indian gaming compact approved as a result of 2002 Proposition 202 approved by Arizona voters. The compact allows a compacting tribe to distribute twelve percent (12%) of its total annual contribution to cities, towns, or counties for the benefit of the general public, under its program priorities of Economic Development, Education, Healthcare, Public Safety, Transportation and Other.

DISCUSSION:

The GRIC Office of Special Funding has made funding available for the upcoming year. Avondale will submit applications requesting funding under the GRIC program priorities of Economic Development, Education, Healthcare, Public Safety, Transportation and Other. We often receive requests from outside entities to submit funding requests on their behalf.

BUDGETARY IMPACT:

The City of Avondale will be requesting funding for multiple projects. There is not a match requirement for these funds.

RECOMMENDATION:

Staff recommends that City Council adopt a Resolution to authorize the submission of grant applications as well as authorize acceptance of grant awards, should they be offered, and authorize the Mayor, City Manager or City Clerk to execute the necessary documents.

ATTACHMENTS:

Click to download

[Resolution 3183-514](#)

RESOLUTION NO. 3183-514

A RESOLUTION OF THE COUNCIL OF THE CITY OF AVONDALE, ARIZONA, AUTHORIZING THE SUBMISSION OF APPLICATIONS FOR GRANT CONSIDERATION BY THE GILA RIVER INDIAN COMMUNITY.

WHEREAS, the Gila River Indian Community (the “Community”) is accepting applications for Proposition 202 funding from state and local agencies for projects relating to public safety (police, fire, EMS), transportation, health care services, economic development and education (the “Community Priority Areas”); and

WHEREAS, the Council of the City of Avondale (the “City Council”) desires to submit grant applications for funds related to various Community Priority Areas (the “Applications”).

NOW, THEREFORE, BE IT RESOLVED 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 City Council hereby approves the submission of the Applications for consideration by the Community.

SECTION 3. The Mayor, the City Manager, the City Clerk and the City Attorney are hereby authorized and directed to execute and submit all documents and any other necessary or desirable instruments in connection with the Applications, to execute any resulting grant agreements and to take all steps necessary to carry out the purpose and intent of this Resolution.

[SIGNATURES ON FOLLOWING PAGE]

PASSED AND ADOPTED by the Council of the City of Avondale, May 5, 2014.

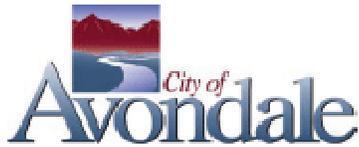
Marie Lopez Rogers, Mayor

ATTEST:

Carmen Martinez, City Clerk

APPROVED AS TO FORM:

Andrew J. McGuire, City Attorney



DEVELOPMENT SERVICES

SUBJECT:

Public Hearing and Ordinance 1544-514 - Medical Marijuana Zoning Ordinance Text Amendment (PL-14-0057)

MEETING DATE:

May 5, 2014

TO: Mayor and Council

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

THROUGH: David Fitzhugh, Acting City Manager

REQUEST: Text Amendment to Section 13 of the Avondale Zoning Ordinance, Medical Marijuana Uses, pertaining to the hours of operation for medical marijuana dispensaries.

LOCATION: Citywide

APPLICANT: City of Avondale

BACKGROUND:

In November 2010, the Arizona Medical Marijuana Act (Proposition 203) was approved by Arizona voters. The act legalized the use, sale and cultivation of medical marijuana within the State of Arizona.

In response, on February 22, 2011, the City of Avondale approved Resolution 2957-211 and Ordinance 1449-211, adopting the "City of Avondale Medical Marijuana Regulations", Section 13 of the Avondale Zoning Ordinance. This section established regulations related to medical marijuana land uses in accordance with what was allowed by the approved ballot initiative. As part of these regulations, the hours of operation of medical marijuana dispensaries were limited to 9:00 a.m. to 6:00 p.m., Monday through Friday. Per these current City regulations, dispensaries are not permitted to operate on Saturday and Sunday.

In January of this year, it was requested that staff research the hours of operation limitations of dispensaries to see if Avondale's regulations aligned with other cities throughout the valley. It was found that a majority of local municipalities do allow for dispensaries to operate on weekends; therefore City Council directed staff to proceed with changing the Zoning Ordinance to allow the same.

SUMMARY OF REQUEST:

Section 1303.B currently states:

A medical marijuana dispensary shall have operating hours not earlier than 9:00 a.m. and not later than 6:00 p.m., Monday through Friday.

The proposed change is as follows:

A medical marijuana dispensary shall have operating hours not earlier than 9:00 a.m. and not later than 6:00 p.m.

PARTICIPATION:

A neighborhood meeting was held on April 9, 2014, in the Mesquite conference room at City Hall at 6:00 pm. The meeting was advertised in the March 25, 2014, edition of the West Valley View. There were no attendees.

A notice of the Planning Commission hearing was published in the April 1, 2014, edition of the West Valley View. No comments were received and no interested parties spoke on the item at the Planning Commission meeting.

A notice for the City Council hearing was published in the April 15, 2014, edition of the West Valley View. No additional comments have been received prior to the publication of this report.

PLANNING COMMISSION ACTION:

The Planning Commission conducted a public hearing on April 17, 2014, and voted 3-1 to recommend approval of the request as recommended by staff (Exhibit B).

ANALYSIS:

Avondale's current regulations allow medical marijuana dispensaries to operate Monday through Friday; between the hours of 9:00 a.m. and 6:00 p.m. Operations on weekends (Sat/Sun) is not permitted. The hours of operation allowed by other valley City/County are as follows:

City/County	Permitted Dispensary Hours Monday-Friday	Permitted Dispensary Hours Saturday-Sunday
Avondale	9:00 A.M. to 6:00 P.M.	Not Permitted
Goodyear	8:00 A.M. to 7:00 P.M.	8:00 A.M. to 7:00 P.M.
Buckeye	9:00 A.M. to 5:00 P.M.	Not Permitted
Glendale	8:00 A.M. to 8:00 P.M.	8:00 A.M. to 8:00 P.M.
Tolleson	9:00 A.M. to 5:00 P.M.	Not Permitted
Peoria	8:00 A.M. to 9:00 P.M.	8:00 A.M. to 9:00 P.M.
Surprise	Unrestricted	Unrestricted
Phoenix	8:00 A.M. to 7:00 P.M.	8:00 A.M. to 7:00 P.M.
Maricopa County	Unrestricted	Unrestricted
Scottsdale	6:00 A.M. to 7:00 P.M.	6:00 A.M. to 7:00 P.M.
Mesa	8:00 A.M. to 8:00 P.M.	8:00 A.M. to 9:00 P.M.
Gilbert	8:00 A.M. to 6:00 P.M.	8:00 A.M. to 6:00 P.M.
Chandler	9:00 A.M. to 7:00 P.M.	9:00 A.M. to 7:00 P.M.
Tempe	8:00 A.M. to 6:00 P.M.	8:00 A.M. to 6:00 P.M.

Weekday (M-F) Hours of Operation

Research into weekday hours of operation shows that Avondale's existing allowances are in line with the majority of municipalities studied:

- Twelve of fourteen jurisdictions studied limit weekday hours of operation for medical marijuana dispensaries.
- In eleven of the twelve jurisdictions that limit hours of operation, opening hour is established as either 8:00 a.m. or 9:00 a.m.; Scottsdale is the lone exception, allowing dispensaries to open at 6:00 a.m.
- In nine of the twelve jurisdictions that limit hours of operation, closing hour is established as

either 5:00 p.m., 6:00 p.m., or 7:00 p.m.; Three of the twelve cities – Glendale, Peoria, and Mesa – allow for dispensaries to remain open until 8:00 p.m., or later.

- Avondale's limitations allow a dispensary to be open a maximum of 9 hours per day. Excluding Avondale, of the eleven cities studied that limit hours of operation, the average number of hours dispensaries are allowed to be open on a weekday is approximately 10.7. Buckeye and Tolleson are most restrictive (8 hours per day maximum) while Peoria and Scottsdale (13 hours per day maximum) are the least restrictive.

Weekend (Sat-Sun) Hours of Operation

Research into weekend hours of operation shows that Avondale's existing prohibition on weekend operation is not in line with the majority of municipalities studied:

- Eleven of fourteen jurisdictions studied allowed for dispensaries to operate on weekends. Of these eleven, nine regulated the hours of operation of dispensaries on weekends. Only Avondale, Tolleson, and Buckeye prohibited operation entirely. The City of Surprise and Maricopa County allowed unrestricted hours of operation.
- In all instances where cities permitted weekend operation but limited hours, each city maintained the same hours of operation that they allowed during weekdays (e.g. 8-6 M-F, 8-6 Sat-Sun).

FINDINGS:

1. The proposed amendment meets the intent of the General Plan.
2. The proposed amendment constitutes an overall improvement to the Zoning Ordinance.

RECOMMENDATION:

The City Council should **APPROVE** application PL-14-0057, a City initiative to amend Section 1303.B of the Avondale Zoning Ordinance.

PROPOSED MOTION:

I move that the City Council adopt Ordinance 1544-514 adopting by reference the document entitled "City of Avondale Zoning Ordinance, Amended and Restated May 5, 2014."

ATTACHMENTS:

Click to download

- [Exhibit A - Section 13 Medical Marijuana Uses, Avondale Zoning Ordinance](#)
- [Exhibit B - Draft April 17 regular minutes](#)
- [Exhibit C - Ordinance No. 1544-514](#)

PROJECT MANAGER:

Jennifer Fostino, Zoning Specialist

SECTION 13 MEDICAL MARIJUANA USES

1301 Purpose and Applicability

The purpose of this Section 13 is to provide for regulations necessary to protect the public health, safety and welfare for the general public by limiting the possible negative secondary effects of Medical Marijuana facilities. The provisions of this Section 13 shall apply to all Medical Marijuana Dispensaries and Medical Marijuana Cultivation Locations located within the corporate limits of the City of Avondale.

1302 Location Restrictions

- A. Medical marijuana dispensaries or medical marijuana cultivation locations are prohibited from being established, operated or licensed in any City of Avondale zoning district other than A-1.
- B. Medical marijuana dispensaries and medical marijuana cultivation locations shall meet the following minimum separation requirements, measured in a straight line from the closest property boundary line of the parcel containing the medical marijuana dispensary or medical marijuana cultivation location to the closest property boundary line of the parcel containing any existing uses listed below:
 - 1. Two thousand (2,000) feet from any other medical marijuana dispensary or medical marijuana cultivation location.
 - 2. Two thousand (2,000) feet from a substance abuse diagnostic and treatment facility or other drug or alcohol rehabilitation facility.
 - 3. Two thousand (2,000) feet from a public, private, parochial, charter, dramatic, dancing or music school, a learning center, or other similar school or educational or entertainment facility that caters to children.
 - 4. Two thousand (2,000) feet from a childcare center or registered residential child care facility.
 - 5. Two thousand (2,000) feet from a public library.
 - 6. Two thousand (2,000) feet from a park.
 - 7. Two thousand (2,000) feet from a church or place of worship.
- C. A medical marijuana cultivation location not associated with an Arizona medical marijuana dispensary is prohibited, and only one (1) medical marijuana cultivation location shall be permitted for the single Arizona medical marijuana dispensary with which it is associated. The provisions of this subsection 1302 (C) shall not apply to locations identified pursuant to ARIZ. REV. STAT. § 36-2804-02(A) (3) (f) for cultivation of medical marijuana by a designated caregiver or qualifying patient for a qualifying patients medical use.

- D. The following size limitations shall apply to any medical marijuana dispensary:
1. The total maximum floor area of a medical marijuana dispensary shall not exceed two thousand five hundred (2,500) square feet.
 2. The secure storage area for the medical marijuana stored at the medical marijuana dispensary shall not exceed five hundred (500) square feet of the total two thousand five hundred (2,500) square foot maximum floor area of a medical marijuana dispensary.
- E. The following size limitations shall apply to any medical marijuana cultivation location associated with a medical marijuana dispensary:
1. The total maximum floor area of a medical marijuana cultivation location shall not exceed three thousand (3,000) square feet.
 2. The secure storage area for the medical marijuana stored at the medical marijuana cultivation location shall not exceed one thousand (1,000) square feet of the three thousand (3,000) square feet total maximum floor area of a medical marijuana cultivation location.
 3. For a medical marijuana dispensary that also is a medical marijuana cultivation location, the total maximum floor area that may also be used for cultivation and incorporation or processing of the medical marijuana into consumable or edible products inclusive of any secure storage area, shall not exceed three thousand (3,000) square feet. The secure storage area for the medical marijuana stored at a medical marijuana dispensary that also is a cultivation location shall not exceed one thousand five hundred (1,500) square feet.
- F. The following size limitations shall apply to any medical marijuana cultivation location associated with a qualified patient or designated caregiver:
1. All conditions and restrictions for medical marijuana cultivation locations apply except that the designated caregiver cultivation area is limited to a total two hundred fifty (250) square feet maximum, including any storage areas.
 2. More than one (1) designated caregiver may not co-locate cultivation locations.

1303 Requirements

The following minimum requirements shall apply to all “medical marijuana dispensary” and “medical marijuana cultivation location” uses located in the zoning district where such uses are permitted:

- A. In conjunction with the application requirements set forth in Section 1 above, an applicant for any medical marijuana dispensary or medical marijuana cultivation location shall provide the following:

1. A notarized authorization, executed by the property owner, acknowledging and consenting to the proposed use of the property as a medical marijuana dispensary or a medical marijuana cultivation location.
2. The legal name of the medical marijuana dispensary or medical marijuana cultivation location.
3. If the application is for a medical marijuana cultivation location, the name and location of the medical marijuana dispensary with which it is associated or, in the case of designated caregivers or qualifying patients, the names of the qualifying patients for which the medical marijuana is being cultivated.
4. The name, address and birth date of each officer and board member of the nonprofit medical marijuana dispensary agent.
5. The name, address, birth date and valid registry identification card number of (a) each medical marijuana dispensary agent if the application is related to a medical marijuana dispensary or a related medical marijuana cultivation location and (b) each designated caregiver and qualifying patient if the application is related to a medical marijuana cultivation location associated with such qualifying patient and designated caregiver.
6. A copy of the operating procedures adopted in compliance with ARIZ. REV. STAT. § 36-2804(B) (1) (c).
7. A notarized certification that none of the medical marijuana dispensary officers or board members has been convicted of any of the following offenses:
 - a. A violent crime, as defined in ARIZ. REV. STAT. § 13-901.03(B), that was classified as a felony in the jurisdiction where the person was convicted.
 - b. A violation of state or federal controlled substance law that was classified as a felony in the jurisdiction where the person was convicted except an offense for which the sentence, including any term of probation, incarceration or supervised release, was completed ten (10) or more years earlier or an offense involving conduct that would be immune from arrest, prosecution or penalty under ARIZ. REV. STAT. § 36-2811 except that the conduct occurred before the effective date of that statute or was prosecuted by an authority other than the state of Arizona.
8. A notarized certification that none of the medical marijuana dispensary officers or board members has served as an officer or board member for a medical marijuana dispensary that has had its registration certificate revoked.
9. A floor plan showing the location, dimensions and type of security measures demonstrating that the medical marijuana dispensary or medical marijuana cultivation location will be secured, enclosed and locked as required by law.
10. A scale drawing depicting the property lines and the separations from the nearest property boundary of the parcel containing the medical marijuana dispensary or medical marijuana cultivation location to the property boundary of the parcel

containing any existing uses listed in Section 1302 above. If any of the uses are located within fifty (50) feet of the minimum separation, the drawing, showing actual surveyed separations, shall be prepared by a registered land surveyor.

- B. A medical marijuana dispensary shall have operating hours not earlier than 9:00 a.m. and not later than 6:00 p.m., ~~Monday through Friday~~.
- C. A medical marijuana dispensary or medical marijuana cultivation location shall:
1. Be located in a permanent building and may not be located in a trailer, cargo container, mobile or modular unit, mobile home, recreational vehicle or other mobile vehicle.
 2. Not have drive-through service.
 3. Not emit dust, fumes, vapors or odors into the environment.
 4. Not provide offsite delivery of medical marijuana.
 5. Prohibit consumption of marijuana on the premises.
 6. Not have outdoor seating areas, but shall have adequate indoor seating to prevent outside loitering.
 7. Display a current City of Avondale business license and a State of Arizona tax identification number.
 8. Install lighting to illuminate the exterior and interior of the building and all entrances and exits to the facility. Exterior lighting shall be at least five (5) foot candles, measured at ground level, and shall remain on during all hours between sunset and sunrise each day. Twenty four (24) hours each day, the medical marijuana dispensary or medical marijuana cultivation location shall illuminate the entire interior of the building, with particular emphasis on the locations of any counter, safe, storage area and any location where people are prone to congregate. The lighting must be of sufficient brightness to ensure that the interior is readily visible from the exterior of the building from a distance of one hundred (100) feet.
 9. Provide security guards at the main entrances and exits during all hours of operation. For the purposes of this Section, “security guard” shall mean licensed and duly bonded security personnel registered pursuant to ARIZ. REV. STAT. § 32-2601 *et seq.* Prior to opening for business, the medical marijuana dispensary or medical marijuana cultivation location shall provide all property owners within a five hundred (500) foot radius of the medical marijuana dispensary or medical marijuana cultivation location with written notification via first class U.S. Mail of the security company responsible for providing its security services.
 10. Have an exterior appearance compatible with commercial structures already constructed or under construction within the immediate neighborhood to insure against blight, deterioration, or substantial diminishment or impairment of property values in the vicinity.

11. Allow unrestricted access by City code enforcement officers, police officers or other agents or employees of the City requesting admission for the purpose of determining compliance with these standards.
 12. Not display signs, or any other advertising matter used in connection with the medical marijuana dispensary or medical marijuana cultivation of any offensive nature and such signs shall in no way be contrary to the City code, or obstruct the view of the interior of the premises viewed from the outside.
 13. Comply with all other applicable property development and design standards of the City of Avondale.
- D. To ensure that the operations of medical marijuana dispensaries are in compliance with Arizona law and to mitigate the adverse secondary effects from operations of dispensaries, medical marijuana dispensaries shall operate in compliance with the following standards:
1. No doctor shall issue a written certification on-site for medical marijuana.
 2. There shall be no on-site sales of alcohol, tobacco or food, other than food products containing infused medical marijuana. There shall be no on-site consumption of food, alcohol, tobacco or medical marijuana; provided that employees may consume food on-site so long as it does not contain infused medical marijuana.
 3. Medical marijuana dispensaries shall only dispense medical marijuana to qualified patients and their designated caregivers as defined in ARIZ. REV. STAT. § 36-2801 *et seq.*
 4. Medical marijuana dispensaries shall notify patrons of the following verbally and through posting of a sign in a conspicuous location at the medical marijuana dispensary:
 - a. Use of medical marijuana shall be limited to the patient identified on the doctor's written certification. Secondary sale, barter or distribution of medical marijuana is a crime and can lead to arrest.
 - b. Patrons must immediately leave the site and not consume medical marijuana until at home or in an equivalent private location. Medical marijuana dispensary staff shall monitor the site and vicinity to ensure compliance.
 5. Medical marijuana dispensaries shall not provide marijuana to any individual in an amount not consistent with personal medical use or in violation of state law and regulations related to medical marijuana use.
 6. Medical marijuana dispensaries shall not store more than two hundred dollars (\$200) in cash overnight on the premises.
 7. Any qualified patient under eighteen (18) years of age shall be accompanied by a parent or legal guardian. Except for such parent or legal guardian, no persons other than qualified patients and designated caregivers shall be permitted within a medical marijuana dispensary premises.

8. Medical marijuana dispensaries shall provide law enforcement and all interested neighbors with the name and phone number of an on-site community relations staff person to notify if there are operational problems with the establishment.



**AGENDA
PLANNING COMMISSION
REGULAR MEETING**

**CITY COUNCIL CHAMBERS
11465 W CIVIC CENTER DRIVE
AVONDALE, AZ 85323**

**Thursday, April 17, 2014
6:30 P.M.**

I. CALL TO ORDER

Vice Chair Amos called the Regular Meeting to order at approximately 6:30 p.m.

II. ROLL CALL

The following members and representatives were present:

COMMISSIONERS PRESENT

Lisa Amos, Vice Chair
Michael Long, Commissioner
Grace Carrillo, Commissioner
Sean Scibienski, Commissioner

COMMISSIONERS ABSENT

Kevin Kugler, Chair - Excused
Michael Demlong, Commissioner - Unexcused
Gary Smith, Commissioner - Unexcused

CITY STAFF PRESENT

Tracy Stevens, Development & Engineering Services Director
Jennifer Fostino, Zoning Specialist
Linda Herring, Development Services Representative

III. OPENING STATEMENT

Vice Chair Amos read the Opening Statement.

IV. APPROVAL OF MINUTES

• February 20, 2014 Regular Meeting

Vice Chair Amos invited a motion to approve the minutes. Commissioner Scibienski moved to accept the minutes from the February 20th Regular Meeting. Commissioner Long seconded the motion. The motion passed unanimously.

V. SCHEDULED PUBLIC APPEARANCES

There were no scheduled public appearances.

VI. WITHDRAWALS AND CONTINUANCES

There were no withdrawals or continuances.

VII. PUBLIC HEARING ITEMS

PL-14-0057

This is a public hearing before the Planning Commission to review and solicit public input on application PL-14-0057, an amendment to Section 13 of the Avondale Zoning Ordinance, Medical Marijuana Uses, pertaining to the hours of operation for medical marijuana dispensaries. Staff Contact: Jennifer Fostino

Jennifer Fostino, Zoning Specialist, stated that the text amendment is to change the hours of operation for medical marijuana dispensaries. In November '10, voters approved the Arizona Medical Marijuana Act (Prop 203). In February '11, Avondale City Council adopted Medical Marijuana Regulations (Zoning Ordinance Section 13) which does not allow dispensaries to have weekend hours of operation. In January '14, Council requested for staff to research hours of operation allowed in other valley cities. In March '14, Council received the research at a Work Session and directed staff to amend hours of operation accordingly.

Ms. Fostino presented a table comparing the hours of operation of other cities within the valley. Buckeye and Tolleson are the only two other cities that restrict weekend operations. To summarize, we found that eleven out of fourteen jurisdictions do allow for dispensaries to operate on weekends with the exception of Avondale, Buckeye, and Tolleson. Nine out of eleven jurisdictions do allow weekend operations, but regulate the hours of operation with the exception of Maricopa County and Surprise that do not regulate the hours of operation at all. The 9 cities that regulate hours of operation allow for the same hours on weekends as they do for the weekdays. We are proposing to do the same.

Ms. Fostino affirmed that we currently allow medical marijuana dispensaries to operate from 9 am to 6 pm Monday thru Friday and we are proposing to remove the words Monday thru Friday from Section 1303.B, which will allow for 9 am to 6 pm hours of operation every day of the week.

Ms. Fostino said staff held a neighborhood meeting on April 9th at 6 pm in the Mesquite conference room at City Hall, but there were no attendees.

Ms. Fostino stated that the proposed amendment does meet the intent of the General Plan and the proposed amendment does constitute an overall improvement to the zoning ordinance. Staff recommends approval of Application PL-14-0057.

Vice Chair Amos opened the public hearing. Upon hearing no request to speak, she closed the public hearing.

Commissioner Long stated that he is of the opinion that the City and the State do not have the authority to violate federal law with the dispensaries operating with any type of illegal substance. His motion is to deny the change to the ordinance. The motion was not seconded.

Commissioner Scibienski moved that the Planning Commission recommend approval of application PL-14-0057, an amendment to Section 13 of the Avondale Zoning Ordinance, Medical Marijuana Uses, pertaining to the hours of operation for medical marijuana dispensaries. Commissioner Carrillo seconded.

ROLL CALL VOTE

Kevin Kugler, Chair	Excused
Lisa Amos, Vice Chair	Aye
Michael Demlong, Commissioner	Unexcused
Michael Long, Commissioner	Nay
Gary Smith, Commissioner	Unexcused
Sean Scibienski, Commissioner	Aye
Grace Carrillo, Commissioner	Aye

Approved 3-1.

VI. OTHER BUSINESS

VII. PLANNING STAFF REPORT

Tracy Stevens, Development & Engineering Services Director, stated that the Open Meeting Law training will be held during the May 15th meeting.

X. COMMISSION COMMENTS AND SUGGESTIONS

Commissioner Carrillo inquired about the Historic Avondale Design and Development Guidelines Work Session that was scheduled for tonight. Ms. Stevens replied that the guidelines are still under review by our legal counsel and staff hopes to present it at the May meeting as a regular agenda item.

XI. ADJOURNMENT

Vice Chair Amos entertained a motion to adjourn the regular meeting. Commissioner Scibienski moved to adjourn. Commissioner Long seconded the motion. The motion passed unanimously.

With no further business, the meeting concluded at approximately 6:41 P.M.

NEXT MEETING: May 15, 2014

FOR SPECIAL ACCOMMODATIONS

Individuals with special accessibility needs, including sight or hearing impaired, large print, or interpreter, should contact the City Clerk at 623-333-1200 or TDD 623-333-0010 at least two business days prior to the meeting.

Personas con necesidades especiales de accesibilidad, incluyendo personas con impedimentos de vista u oído, impresión grande o intérprete, deben comunicarse con la Secretaria de la Ciudad at 623-333-1200 o TDD 623-333-0010 cuando menos dos días hábiles antes de la junta.

Staff Signature

Date

ORDINANCE NO. 1544-514

AN ORDINANCE OF THE COUNCIL OF THE CITY OF AVONDALE, ARIZONA, AMENDING THE CITY OF AVONDALE ZONING ORDINANCE, SECTION 13 MEDICAL MARIJUANA USES RELATED TO MEDICAL MARIJUANA DISPENSARY DAYS OF OPERATION.

WHEREAS, all due and proper notices of public hearings on this Ordinance held before the City of Avondale Planning and Zoning Commission (the "Commission") and the Council of the City of Avondale (the "City Council") were given in the time, form, substance and manner provided by ARIZ. REV. STAT. § 9-462.04; and

WHEREAS, the Commission held a public hearing regarding the subject matter of this Ordinance on April 17, 2014, after which the Commission recommended to the City Council that the amendment to the City of Avondale Zoning Ordinance (the "Zoning Ordinance") contemplated by this Ordinance be approved; and

WHEREAS, the City Council held an additional public hearing on this Ordinance on May 5, 2014.

NOW, THEREFORE, BE IT ORDAINED BY THE CITY 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 Zoning Ordinance, Section 1303 (Requirements), Subsection (B), is hereby amended as follows:

B. A medical marijuana dispensary shall have operating hours not earlier than 9:00 a.m. and not later than 6:00 p.m., ~~Monday through Friday.~~

SECTION 3. If any section, subsection, sentence, clause, phrase or portion of this Ordinance or any part of the Amended Zoning Ordinance adopted herein by reference is for any reason to be held invalid or unconstitutional by the decision of any court of competent jurisdiction, such decision shall not affect the validity of the remaining portions thereof.

SECTION 4. The Mayor, the City Manager, the City Clerk and the City Attorney are hereby authorized and directed to execute all documents and take all steps necessary to carry out the purpose and intent of this Ordinance.

PASSED AND ADOPTED by the Council of the City of Avondale, May 5, 2014.

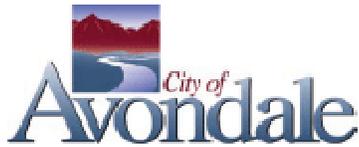
Marie Lopez Rogers, Mayor

ATTEST:

Carmen Martinez, City Clerk

APPROVED AS TO FORM:

Andrew J. McGuire, City Attorney



CITY COUNCIL REPORT

SUBJECT:

Proposed Amendments to Personnel Policies and Procedures Manual

MEETING DATE:

May 5, 2014

TO: Mayor and Council

FROM: Cherlene Penilla

THROUGH: David Fitzhugh, Acting City Manager

PURPOSE:

Council will review and consider proposed amendments to the Personnel Policies and Procedures Manual, Chapter 18 Grounds for Discipline/Termination; and Chapter 19, Grievances.

BACKGROUND:

On May 16, 2011 the City Council approved a Memorandum of Understanding (MOU) between the City of Avondale and Avondale Professional Firefighter Association, International Association of Fire Fighters, Local 3924. On February 21, 2012 the City Council approved an inaugural MOU between the City of Avondale and Avondale Police Association. Since that time additional MOU's have been approved for both the Police and Fire Associations. Due to the implementation of these MOU's, the Personnel Policies and Procedures now require amendment. Furthermore, changes in the City's practices require consideration of amendments to the policies.

The City has managed major personnel issues requiring an appeals process through a Personnel Board comprised of five (5) citizens. Since August of 2000 a total of ten appeals were heard at the Personnel Board level. The last Personnel Board hearing occurred in February of 2007, over seven years ago. The majority of personnel appeal cases that reach the Personnel Board have typically been complex cases requiring review of multiple witnesses, documents, policies, and laws. These hearings require the five Personnel Board members, Human Resource staff, the Department Director of the employee appealing an action, various City employee witnesses, public member witnesses, and legal counsel to be present for the entire hearing. Many of the hearings last for an entire evening and some have lasted beyond 2:00 A.M.

In an effort to improve the appeals process staff is proposing a change from an appeal to a Personnel Board to the appeal to an Independent Hearing Officer. The primary difference between the Personnel Board and the Independent Hearing Officer is that a Personnel Board consists of a five member citizen panel and the hearings have a more formal atmosphere. In contrast, the new Independent Hearing Officer process is less formal, and the Independent Hearing Officer is an attorney specializing in employment matters.

An appeal before the Independent Hearing Officer is considered an expedient and more convenient alternative to the more formal Personnel Board proceedings, and will likely provide a faster resolution to an employee appeal.

The Independent Hearing Officer process would abide by the same guidelines as the Personnel Board and decisions would be based upon the evidence presented at the hearing. The Independent Hearing Officer would provide findings and recommendations that will be advisory to the City Manager, just as the Personnel Board provided findings and advisory recommendations.

DISCUSSION:

The following are major highlights of the changes to Chapter 18, Grounds for Discipline/Termination:

- Changes the title of Chapter 18 from Grounds for Discipline/Termination to Discipline
- Adds language to specifically exclude appeal rights to part-time employees hired after the approval and implementation of these amendments.
- Requires Department Directors to meet with a member of the Human Resources Department prior to the implementation of any employee discipline outlined in these policies.
- Adds language to reflect the change from appealing disciplinary actions to Personnel Board to an Independent Hearing Officer.
- Clarifies that a "formal" reprimand is required to be in writing and clarifies that Department Directors have the flexibility to have informal discussions with employees regarding issues that do not rise to the level of a formal written reprimand.
- Adds language to reflect the change in state law which requires the ability for a law enforcement officer and a detention officer to appeal a suspension of more than eight (8) hours.
- Changes calendar days to working days consistently throughout Chapter 18, Discipline.
- Adds language to define "working days", "law enforcement officer" and "detention officer".

The following are major highlights of the changes to Chapter 19 Grievances:

- Changes Language to reflect provisions in both MOU's for grievances covering the content of the MOU's.
- Clarifies that part-time employees are not entitled to the due process procedures in these policies.
- Changes language to reflect a 15 *working day* time frame to file a grievance instead of 60 days.
- Changes language to reflect *working days* instead of calendar days.
- Defines *working days* as Monday through Thursday, exclusive of City designated holidays.
- Changes language to reflect that appeals on disciplinary matters (suspensions, reductions in pay in lieu of suspension without pay, demotions, and terminations) are made to an Independent Hearing Officer instead of a Personnel Board.

BUDGETARY IMPACT:

There are no direct costs associated with the amendments to the City of Aovndale Policies and Procedures, Chapter 18 and Chapter 19.

RECOMMENDATION:

Staff requests feedback regarding the proposed amendments to the Personnel Policies and Procedures. For Information, discussion and direction.

ATTACHMENTS:

Click to download

[Chapter 18](#)

[Chapter 19](#)



City of Avondale

**CITY OF AVONDALE
DISCIPLINE POLICY**

**AMENDED AND RESTATED
May 19, 2014**



CHAPTER 18

Discipline

A. Statement

This Chapter applies to all employees including represented and certified employee units. Any action that reflects negatively upon the City of Avondale will be considered good cause for disciplinary action against any officer or employee. For all disciplinary actions that are implemented in hours, a 1.4 times conversion rate will be applied to sworn fire personnel on a 56 hour schedule.

As way of example only, the following are the types of behavior that constitute grounds for termination. These examples are simply that, and do not constitute an all-inclusive list:

1. Incompetency, inefficiency or in attendance to, or dereliction of duty.
2. Dishonesty, intemperate conduct, insubordination, discourteous treatment of the public or of fellow employees, any act or commission or omission tending to injure the public service, any failure on the part of the employee to properly conduct himself or herself, or violations of the Arizona Revised Statutes, City ordinances, or other rules and regulations applicable to the employee.
3. Any violation of the City's substance abuse policy.
4. Conviction of any felony or misdemeanor that involves dishonesty, scandal, or in any other way may bring disrepute to the employee or the City.
5. Arrest for any matter that makes it impossible and/or impractical to properly complete his/her duties.
6. Any violation of the policies contained in this manual, departmental rules, supervisory instructions, any other City rules/policies (e.g. those contained in the Ethics Handbook), or any other conduct that may bring discredit to the City.

B. Unlawful Acts Prohibited

1. No person will willfully make any false statement, certificate, mark, rating, or report in regard to any application for employment, test, rating, certification, or appointment held or made under these policies and procedures or ordinances of the City of Avondale. Such conduct may be grounds for disciplinary action, up to and including termination.
2. No person seeking appointment to or promotion in any position in the City service will either directly or indirectly give, promise, render, or pay any money, service, or anything else of value to any person for, on account of, or in connection with his/her test, appointment, proposed appointment, promotion, or proposed promotion.



C. Procedures

The City does not have a progressive discipline policy. It may take varying forms of discipline against its employees, as best serve the City's and the citizens' interests in each particular circumstance. The City reserves the right to take any appropriate disciplinary action that circumstances require. Temporary and probationary employees have no appeal rights for actions outlined in these policies. Part-time employees hired before June 18, 2014 have appeal rights for actions outlined in these policies, but part-time employees hired after June 18, 2014 have no appeal rights for actions outlined in these policies. When a department director identifies the need for employee discipline he/she shall meet with the Human Resources Director or designee prior to any discussion with the employee. Before any employee is given a letter of reprimand, notice of intent to suspend without pay, notice of intent to reduce pay, notice of intent to demote, or notice of intent to terminate, the Department Director shall consult with the Human Resources Director or designee. Below are examples of forms of discipline that the City may take. However, this is not an exclusive list.

1. Formal Reprimand

- a. The immediate supervisor, department director, one of the Assistant City Managers, or the City Manager may formally reprimand any employee under his/her supervision for cause.
- b. Such a formal reprimand will be in writing and addressed to the employee.
- c. A signed copy will be forwarded to the employee and the Human Resources Director for inclusion in the employee's personnel file. The City Manager will also be notified of the reprimand.
- d. Formal reprimands cannot be appealed to the Independent Hearing Officer.
- e. However, within ten (10) working days of receipt, the employee may file a letter of response to the reprimand, which will be attached to the reprimand in his/her file. In its sole discretion, City management may choose to modify or revoke the reprimand after reviewing the employee's letter and circumstances surrounding the discipline.

2. Suspension

- a. The City Manager or an Assistant City Manager, at his/her own discretion or upon the recommendation of a department director, may suspend an employee for cause without pay for a period or periods not exceeding thirty (30) calendar days in any twelve (12) month period — except as provided in subsection (2)(d) below.
- b. Suspensions of 40 hours or less cannot be appealed to the Independent Hearing Officer, except as specified for law enforcement officers and detention officers in ARIZ. REV. STAT. § 38-1101; however, the employee may request review of the decision within ten (10) working days of the notice. Upon receipt of the employee's request for review, the Human Resources Department shall coordinate and appoint another department director or supervisor to review the matter. The designated department director or supervisor will issue a written memorandum either upholding the non-appealable suspension or suggesting that the City Manager reverse or modify the discipline. If the designated



department director or supervisor suggests a reversal or modification, the City Manager will review the matter and make a final decision.

- c. If an employee appeals his/her suspension of more than 40 hours, he/she must first receive a hearing before the Assistant City Manager or designee prior to suspension. After the hearing, the Assistant City Manager or designee will determine whether this action is appropriate. The City Manager will be notified of the decision. If the suspension is upheld, the employee may request an appeal to the City's Independent Hearing Officer within ten (10) working days of receipt of the hearing decision. The appeal must be in writing and submitted to the Human Resources Director as outlined in Chapter 19. After the Independent Hearing Officer conducts a hearing as outlined in Chapter 19, he/she will make a written recommendation within (10) working days to the City Manager or designee for final determination. The Independent Hearing Officer serves an advisory role to the City Manager or designee.
- d. Any regular employee who is arrested for a serious public offense, other than minor traffic violations, whether imprisoned, pending probation or released on bail, may be suspended without pay until such time that judgment is rendered by the court; provided, however, if the employee is found not guilty, he/she will receive compensation for the period of suspension. The employee may not appeal a suspension under this provision.

3. Reduction in Pay in Lieu of Suspension

- a. A department director may choose to impose a reduction in pay of an employee instead of a suspension without pay. Any reduction in pay in lieu of suspension that is equal to forty (40) hours or less cannot be appealed to the Independent Hearing Officer, except as specified for law enforcement officers and detention officers in ARIZ. REV. STAT. § 38-1101; however, the employee may request review of the decision within ten (10) working days of the effective date. Upon receipt of the employee's request for review, the Human Resources Department shall coordinate and appoint another department director or supervisor to review the matter. The designated department director or supervisor will issue a written memorandum either upholding the non-appealable reduction in pay or suggesting that the City Manager reverse or modify the discipline. If the designated department director or supervisor suggests a reversal or modification, the City Manager will review the matter and make a final decision.
- b. The total dollar amount of the reduction in pay shall not exceed the dollar amount of the suspension for which the reduction is substituted.
- c. The reduction in pay shall not reduce the employee's salary below the Federal minimum wage.
- d. If an employee appeals his/her reduction in pay in lieu of suspension (for amounts equivalent to or more than forty (40) hours' suspension), he/she must first receive a hearing before an Assistant City Manager or designee prior to implementing a reduction in pay in lieu of suspension. After the hearing, the Assistant City Manager or designee will determine whether this action is appropriate. The City Manager will be notified of the decision. If the reduction in pay in lieu of suspension is upheld, the employee may appeal the decision within ten (10) working days of receipt of the hearing decision. The appeal must be in writing and submitted to the Human Resources Director as outlined in



Chapter 19. After the Independent Hearing Officer conducts a hearing as outlined in Chapter 19, he/she will make a written recommendation within (10) working days to the City Manager or designee for final determination. The Independent Hearing Officer serves an advisory role to the City Manager or designee.

4. Demotion

- a. The City Manager or an Assistant City Manager, at his/her own discretion or upon the recommendation of a department director, may demote an employee for cause. If appealed pursuant to subsection 4(b) below, the City Manager or designee will make the final determination after receiving a recommendation from the Independent Hearing Officer.
- b. If an employee appeals his/her demotion, he/she must first receive a hearing before the Assistant City Manager or designee prior to implementing the demotion. After the hearing, the Assistant City Manager or designee will determine whether the demotion is appropriate. The City Manager will be notified of the decision. If the demotion is upheld, the employee may request an appeal to the Independent Hearing Officer within ten (10) working days of receipt of the hearing decision. The appeal must be in writing and submitted to the Human Resources Director as outlined in Chapter 19. After the Independent Hearing Officer conducts a hearing as outlined in Chapter 19, he/she will make a written recommendation within (10) working days to the City Manager or designee for final determination. The Independent Hearing Officer serves an advisory role to the City Manager or designee.
- c. All regular employees demoted for disciplinary reasons will not be eligible for promotion or an increase in compensation for a period of one (1) year from the time of the demotion.

5. Termination

- a. The City Manager or an Assistant City Manager may terminate for cause any employee of the City by delivery of a Notice of Intent to Terminate, which outlines a statement of reasons for potential termination. In most cases, the Assistant City Manager or designee will make the initial termination decision. If appealed, the City Manager or designee will make the final determination after receiving a recommendation from the Independent Hearing Officer.
- b. Part-time employees or employees serving in the probationary period need not receive a Notice of Intent to Terminate prior to termination.
- c. Pre-Termination Hearing

If an employee appeals his/her termination, he/she must receive a pre-termination hearing before the Assistant City Manager or designee prior to termination.

- d. Final Decision

After the pre-termination hearing, the Assistant City Manager or designee will determine whether termination is appropriate. The City Manager will be notified of the termination decision. If terminated, the employee may request an appeal Independent



Hearing Officer within ten (10) working days of receipt of the hearing decision. The appeal must be in writing and submitted to the Human Resources Director as outlined in Chapter 19. After the Independent Hearing Officer conducts a hearing as outlined in Chapter 19, he/she will make a written recommendation within (10) working days to the City Manager or designee for final determination. The Independent Hearing Officer serves an advisory role to the City Manager or designee.

e. Process

Managers requesting termination of an employee as a disciplinary measure will first consult with the Human Resources Director or designee.

6. Exit Interviews

Any employee leaving the City's services is given the option to provide Human Resources with an exit interview.

D. For the purposes of this Chapter:

1. "Working Days" means Monday through Thursday, exclusive of City designated Holidays.
2. "Law Enforcement Officer" means an individual, other than a probationary employee, who is certified by the Arizona Peace Officer Standards and Training Board and employed by the City of Avondale.
3. "Detention Officer" means a detention officer, other than a probationary employee, who is employed by the City of Avondale.



**CITY OF AVONDALE
GRIEVANCES AND APPEALS POLICY**

**AMENDED AND RESTATED
May 19, 2014**



CHAPTER 19

Grievances and Appeals

A. Statement

This Chapter applies to all employees including represented and certified employee units. The City of Avondale, in keeping with its policy of maintaining satisfactory working conditions, will provide a means to ensure fair handling of employee complaints and grievances. Any employee whose state of mind is so affected by a grievance that he/she will not endeavor to, or cannot do the proper thing in course of performing his/her regular duties should immediately pursue the prescribed procedures for grievances.

B. Matters Subject to Grievances

1. For the purpose of this Chapter, a grievance means any dispute regarding the meaning, interpretation, or alleged violation of these policies and procedures.
2. Any employee in the classified service will have the right to appeal, under this rule, a decision affecting his/her employment, over which his/her appointing power has partial or complete jurisdiction, with the exception of suspensions, demotions, reductions in grade, reductions in pay in lieu of suspension, or terminations which will be appealed directly to the Independent Hearing Officer, through the Assistant City Manager or designee as provided by these policies.

C. Matters Not Subject to Grievance

As discussed above, suspensions, demotions, reductions in grade, reductions in pay in lieu of suspension, and terminations are not grievable. In addition, an employee cannot grieve the contents of a performance evaluation, the lack or amount of a pay increase (merit or otherwise), or any form of reprimand. In addition, an employee that is a member of a certified Employee Group pursuant to Chapter 2, Article II, Division 4, Section 2-56 of the Avondale City Code, may not grieve any issue covered under a Memorandum of Understanding. In addition, part-time employees are not entitled to any rights pursuant to this Chapter. Finally, an employee may not file a grievance for any concern more than fifteen (15) working days after the employee first becomes aware of it.

D. Procedures

1. Informal Grievance Procedure

- a. An employee who has a problem or complaint should first try to settle it through discussion with his/her immediate supervisor without undue delay.
- b. If, after this discussion, he/she does not believe the problem has been satisfactorily resolved, he/she will have the right to discuss it with his/her supervisor's immediate



department director. If the employee's supervisor does not have a department director, he/she shall discuss the matter with Human Resources. In some circumstances, Human Resources will determine that matter should be referred to the City Manager, or his/her designee, at this stage.

- c. Every effort should be made to find an acceptable solution by informal means at the lowest level of supervision. If an employee fails to follow this informal procedure, the grievance will be denied and he/she will not be permitted to proceed to the formal grievance procedure outlined below.

2. Formal Grievance Procedure

Levels of review through the chain of command are listed below:

a. First Level of Review

- (1) If the employee has properly followed the informal grievance procedure and the matter is not resolved, the employee is eligible to elevate the grievance to the first level. Initially, the employee must reduce the grievance to writing, citing the article and section of the personnel policies and procedures alleged to be violated, the date of the violation that is the basis for the grievance, the nature of the grievance, and the relief requested.
- (2) This grievance should be presented to the employee's immediate supervisor, within fifteen (15) working days of the occurrence, and no later than ten (10) working days after the informal grievance procedure has been fully exhausted. The supervisor will render his/her decision and comments in writing and return them to the employee within fifteen (15) working days after receiving the grievance.
- (3) If the employee does not agree with his/her supervisor's decision, or if no answer has been received within fifteen (15) working days, and the employee wishes to continue in the grievance process, the employee may present the grievance in writing to his/her supervisor's immediate department director (the "second level supervisor").
- (4) Failure of the employee to take further action within ten (10) working days after receipt of the written decision of his/her supervisor or within a total of twenty-five (25) working days after presentation of the grievance to the employee's immediate supervisor if no decision is rendered, will constitute a withdrawal of the grievance.



b. Further Level(s) of Review as Appropriate

- (1) The second level supervisor receiving the grievance will review it, render his/her decision and comments in writing, and return them to the employee within fifteen (15) working days after receiving the grievance.
- (2) If the employee does not agree with the second level supervisor's decision, or if no answer has been received within fifteen (15) working days after the second level supervisor received the grievance, and the employee wishes to continue in the grievance process, he/she may present the grievance in writing to the City Manager – through the Human Resources Director.
- (3) Failure of the employee to take further action within ten (10) working days after receipt of the decision, or within a total of twenty-five (25) working days of referral to his/her second level supervisor if no decision is rendered, will constitute a withdrawal of the grievance.

c. City Manager

- (1) Upon receiving the grievance, the City Manager or designee should discuss the grievance with the employee and with other appropriate persons.
- (2) The City Manager or designee may designate a fact-finding committee or supervisor to advise him/her concerning the grievance.
- (3) The City Manager or designee will render a final decision. Grievances may not be appealed to the Independent Hearing Officer.

3. Appeal to the Independent Hearing Officer

a. Right to Appeal

Any regular employee in the classified service will have the right to appeal to the Independent Hearing Officer any disciplinary action by the City which involves termination, reduction in grade, demotion, suspension without pay, or reduction in pay in lieu of suspension without pay, except in instances where the right of appeal is specifically prohibited by these policies.

b. Methods of Appeal

- (1) Appeals will be in writing, signed by the appellant, and delivered in person, email or by first-class mail to the Human Resources Director. Appeals must be delivered to the Human Resources Director within ten (10) working days of the date of the disciplinary action to be appealed. The formality of a legal pleading



is not required. However, failure to file the appeal on time will constitute a waiver, and the decision will become final.

- (2) Within ten (10) working days after receipt of the appeal, the Human Resources Director will notify the Assistant City Manager, the Independent Hearing Officer, and such other persons named or affected by the appeal.
 - (3) Upon filing of an appeal, the Independent Hearing Officer will set a date for a hearing on the appeal not less than ten (10) working days or no more than thirty (30) working days from the date of filing.
 - (4) The Human Resources Director will notify all interested parties of the date, time, and place of the hearing. The Human Resources Department will provide administrative assistance to the Independent Hearing Officer.
 - (5) The appeal will be a written statement, addressed to the Independent Hearing Officer, explaining the matter appealed, the specific grounds for the appeal (explaining why he/she believes the decision appealed is incorrect), and setting forth therein a statement of the action desired by the appellant. The written appeal will constitute the entire matter before the Independent Hearing Officer. The appellant may not add new matters, grounds, facts, or theories to those already stated in the original appeal. The Independent Hearing Officer will not have jurisdiction to consider any such additional matters, grounds, facts, or theories outside of the written appeal.
- c. Independent Hearing Officer

- (1) The City shall retain an attorney, who is licensed and in good standing with the State Bar of Arizona and who has at least five years of experience and knowledge of municipal law and/or employment law, to serve as the Independent Hearing Officer.
- (2) The City shall pay the reasonable fees and costs of the Independent Hearing Officer; however, the Independent Hearing Officer will not represent either the City or the appellant. The duties of the Independent Hearing Officer are to make rulings and determinations pursuant to these rules.
- (3) Independent Hearing Officer

The Independent Hearing Officer shall have the following duties and authority.

(a) Pre-Hearing

- i. Consider and rule on any pre-hearing motions, including those that could result in the dismissal of the appeal for failure to follow these rules;



- ii. Set reasonable restrictions and deadlines for the timing and conduct of the hearing;
 - iii. Prepare the hearing notice and agenda.
 - (b) Presiding over the Hearing
 - i. Rule on objections and motions by a party, unless they are dispositive of the appeal;
 - ii. At the hearing, the Independent Hearing Officer shall make the final decision on the merits of the appeal;
 - iii. Prepare a written report and recommendation for the City Manager.
- d. Pre-hearing Procedures.

As outlined above, the Independent Hearing Officer shall set the time and place for the hearing. Prior to the hearing, the Independent Hearing Officer shall do the following:

- (1) Within five working (5) days of filing the written appeal with the Human Resources Director, the appellant may request his/her personnel record from the City. Neither party shall be entitled to any additional discovery in this process, except as outlined below.
- (2) At least seven (7) working days prior to the hearing, the City and the appellant shall disclose to one another the witnesses that each anticipates calling, a synopsis of their testimony, and any documents each anticipates presenting to the Independent Hearing Officer. The proposed testimony and exhibits must relate to the written appeal filed by the appellant. Any proposed testimony or exhibits that do not relate to the written appeal shall not be considered or presented. The Independent Hearing Officer will make this determination, as necessary.
- (3) Not less than three (3) working days after the exchange of proposed testimony and exhibits, the parties shall work together to determine if either side objects to any exhibits, and work through those objections. If after consulting with one another, there is still a disagreement, the parties shall file a brief letter (no more than one page) outlining the disputed items to the Independent Hearing Officer. The letter must be filed at least two (2) working days prior to the hearing. If there is no dispute, no letter need be filed. The Independent Hearing Officer shall rule on any disagreement prior to the hearing. All exchanged exhibits will be deemed admissible and presented to the Independent Hearing Officer at the hearing.



e. Hearings

- (1) The appellant shall appear personally and testify before the Independent Hearing Officer at the time and place of the hearing.
- (2) The proposed testimony and exhibits used by the appellant shall only be those permitted pursuant to subsection (d) above. No other witnesses or documents will be considered by the Independent Hearing Officer unless (i) the party can show that it was newly discovered, there was prompt disclosure, and the evidence is crucial or (ii) the Independent Hearing Officer rules otherwise for good cause shown. In addition, the Independent Hearing Officer may, at his/her discretion, exclude certain witnesses or documents even if timely disclosed if such evidence would be irrelevant, cumulative, redundant, or overly prejudicial.
- (3) The appellant may be represented by any person (other than the Independent Hearing Officer) or attorney as he/she may select, and at the hearing may produce on his/her behalf relevant oral or documentary evidence.
- (4) The City will present its case first, establishing the reasons for the employment action. At the conclusion of the City's case, the appellant will then present his/her case in opposition. Each side may call disclosed its witnesses. The parties are responsible for securing the attendance of their own witnesses, but the City will make current City employees available for the hearing if timely disclosed. The parties do not have any subpoena power to compel a witness's attendance.
- (5) Cross-examination of witnesses will be permitted.
- (6) The conduct and decorum of the hearing will be under the control of the Independent Hearing Officer, with due regard to the rights and privileges of the parties.
- (7) Hearings need not be conducted according to technical rules relating to evidence and witnesses.
- (8) Hearings will be closed and held in executive session unless the appellant, in writing to the Independent Hearing Officer, requests an open, public hearing.

f. Findings and Recommendations

- (1) The Independent Hearing Officer will, within fifteen (15) working days after the conclusion of the hearing, certify his/her findings and recommendations that will be advisory to the City Manager. The Independent Hearing Officer may recommend that the City Manager affirm, revoke, or modify the employment action taken.



- (2) The City Manager or designee will review the findings and recommendations of the Independent Hearing Officer. He/she may then affirm, revoke, or modify the action taken as in his/her judgment seems warranted.
- (3) The City Manager or designee will inform the appellant within twenty (20) working days of his/her decision. The action of the City Manager or designee will be final.

4. Conduct of Appeal Procedure

The time limits specified above may be extended to a definite date by mutual agreement of the employee and the reviewer concerned.

E. For the purposes of this Chapter:

1. "Working Days" means Monday through Thursday, exclusive of City designated Holidays.