

Arizona Department of Liquor Licenses and Control
800 W Washington 5th Floor
Phoenix AZ 85007-2934
www.azliquor.gov
(602) 542-5141

FOR DLLC USE ONLY

Date payment received:

____/____/____

CSR initials: _____

APPLICATION FOR EXTENSION OF PREMISES/PATIO PERMIT

This application must be returned to the Department of Liquor
(Notice: Allow 30-45 days to process permanent change of premises)

Permanent change of area of service. **A NON-REFUNDABLE \$50 FEE WILL APPLY.** Specific purpose for change:

Temporary change for date(s) of: 01/17/15 through 01/18/15 List specific purpose for change:
Memorial celebration of recently deceased co-owner of the existing billiards hall / bar.

1. Licensee's Name: Soto, Cheryl Ann
Last First Middle

2. Mailing Address: 1471 Vyne Street, Prescott, AZ 86305
Street City State Zip

3. Business Name: Barefoot Bob's Billiards License # 06130055

4. Business Address: 8367 E Pecos Drive, Prescott Valley, AZ 86314
Street City State Zip

5. Contact phone: (928) 925-1192 Business phone: (928) 759-9590

6. Email: cherylsoto122@gmail.com

7. Is extension of premises/patio complete?
 N/A Yes No If no, what is your estimated completion date? ____/____/____

8. Do you understand Arizona Liquor Laws and Regulations?
 Yes No

9. Does this extension bring your premises within 300 feet of a church or school?
 Yes No

10. Have you received approved Liquor Law Training?
 Yes No If yes, when does your Certificate expire? Date: 09/18/18

11. What security precautions will be taken to prevent liquor violations in the extended area?
Controlled entry, barriers & fencing, & security staff on-shift for entire event.

12. **IMPORTANT:** ATTACH THE REVISED FLOOR PLAN CLEARLY DEPICTING YOUR LICENSED PREMISES AND WHAT YOU PROPOSE TO ADD.

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

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

➡ OBTAIN APPROVAL FROM LOCAL GOVERNING BODY BEFORE SUBMITTING TO THE DEPARTMENT ⬅

➡ After completing the application, please take this application to your local Board of Supervisors, City Council or Designate for their recommendation. This recommendation is not binding on the Department of Liquor.

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

(Authorized Signature) (Title) (Agency) Date

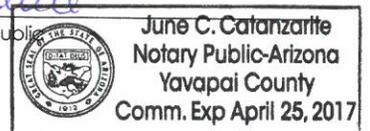
I, Cheryl A. Soto (Print full name), declare that I am the APPLICANT and, under penalty of perjury, making the foregoing application. I have read this application and the contents and all statements are true, correct and complete.

x Cheryl A. Soto (Signature) Owner (Title/ Position) 12-31-14 (Date) (928)925-1192 (Phone #)

The foregoing instrument was acknowledged before me this 31st (Day) December (Month) 2014 (Year)

State Arizona County of Yavapai

My Commission Expires on: 4-25-2017 (Date) June C. Catanzarite (Signature of Notary Public)



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

Director Signature required for Disapprovals _____ Date: ___/___/___

Barefoot Bob's Billiards

Temporary Extension of Premises Application Exhibit

December 2014



Temporary Extension of Premises Proposed Area
(shaded)

Suite No. 4 + fenced patio area
-approximately 2700 s.f.

Barefoot Bob's Billiards existing Type 6 Liquor License area

Suite No. 2 + enclosed smoking area
-approximately 4575 s.f.