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FEES

Current PV Business License – Fee Not Required
Regular Special Event-\$15 per event (up to 30 days)
Special Event Liquor-\$75.00 per event
Non-Profit-No Fee (copy of IRS 501c 3 to be attached)
Carnivals/Circuses-\$120 per day
Facilities Deposit/Rental

**APPLICATION FOR SPECIAL EVENT LICENSE
TOWN OF PRESCOTT VALLEY
7501 E CIVIC CIRCLE
PRESCOTT VALLEY AZ 86314
928 759 3135 FAX 928 759 5536**

STAFF ONLY

NAME OF EVENT PV ROTARY SAVOUR THE FLAVOUR

PHYSICAL LOCATION OF EVENT STONE RIDGE GOLF & COUNTRY CLUB
Attach 8" X 11" site plan if applicable

DATE(S) OF EVENT FEBRUARY 26, 2011

NAME/SPONSOR PV ROTARY PHONE 928 713 5688

MAILING ADDRESS PO BOX 26456

CITY PRESCOTT VALLEY STATE AZ ZIP 86312

CONTACT PERSON JOHN RAVNIK AZ TPT SALES TAX # -

DESCRIPTION OF BUSINESS ROTARY CLUB NON-PROFIT YES NO

USE OF TENT – Permit may be required YES _____ NO

NOTIFY FIRE DEPARTMENT 928 759 9933 YES _____ NO _____

NOTIFY BUILDING DEPT 928 759 3050 YES _____ NO _____

FOOD VENDOR YES _____ NO

NOTIFY YAVAPAI COUNTY HEALTH 928 771 3377 YES _____ NO _____

For Food Handlers Permit

TOWN PROPERTY & FACILITIES

NOTIFY PARKS & RECREATION 928 759 3090 YES _____ NO

For Facilities Rental

CARNIVAL OR CIRCUS

CERTIFICATE OF INSURANCE \$1,000,000 Liability YES _____ NO

* LIQUOR (NEED 30 DAYS ADVANCE NOTICE) YES NO _____

REQUEST LETTER TO COUNCIL YES NO _____

Explaining all details of event

CERTIFICATE OF INSURANCE YES NO _____

\$1,000,000 liability

SECURITY YES NO _____

One security guard per 50 people

EXISTING LIQUOR LICENSE YES NO _____

Extension of Premises-need Arizona

Liquor License Board Special Event form

APPLICANT SIGNATURE [Signature]

DATE 11/23/10

CC: Police Dept; Zoning/Code Enforcement; Management Services (Sales Tax); Parks & Recreation; CYFD

10. Has the applicant been convicted of a felony in the past five years, or had a liquor license revoked?
 YES NO (attach explanation if yes)

11. This organization has been issued a special event license for 0 days this year, including this event
(not to exceed 10 days per year).

12. Is the organization using the services of a promoter or other person to manage the event? YES NO
If yes, attach a copy of the agreement.

13. List all people and organizations who will receive the proceeds. Account for 100% of the proceeds.
**THE ORGANIZATION APPLYING MUST RECEIVE 25% OF THE GROSS REVENUES OF THE SPECIAL
EVENT LIQUOR SALES.**

Name PRESCOTT VALLEY ROTARY 100%
Percentage
Address PO Box 26456 PRESCOTT VALLEY AZ 86312

Name _____
Percentage

Address _____
(Attach additional sheet if necessary)

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

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

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

____ # Police Fencing
4 # Security personnel Barriers

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

(ATTACH COPY OF AGREEMENT)

STONERIDGE GRILL 928) 772 6500
Name of Business Phone Number

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

December 3, 2010

To Whom It May Concern,

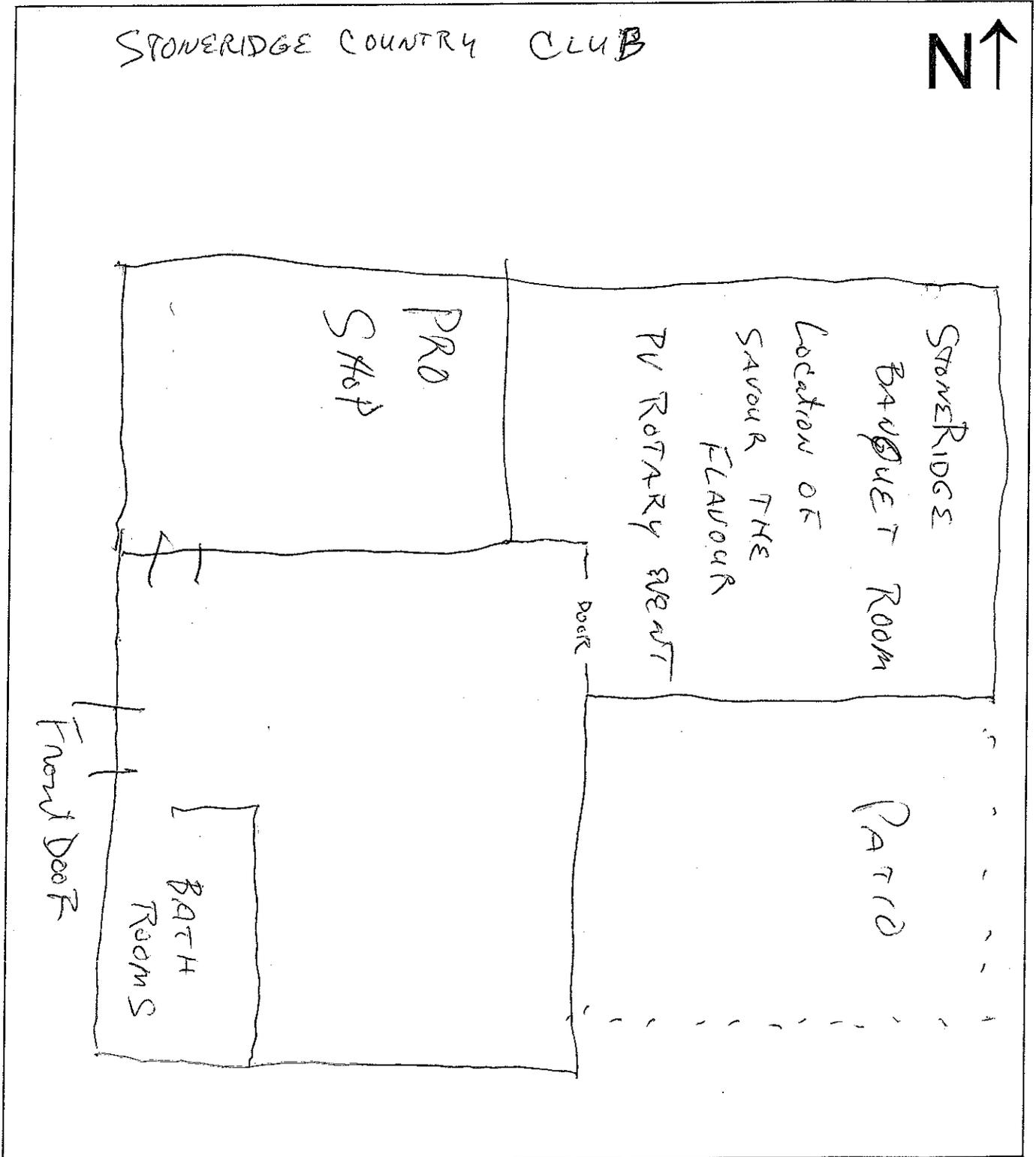
I agree to suspend the StoneRidge Grill liquor license, in the StoneRidge Banquet Room only, for the evening of February 26, 2011, so that the Rotary Club of Prescott Valley may have their annual Wine Tasting there.

A handwritten signature in cursive script, appearing to read "Cindy L. Reynolds".

Cindy L. Reynolds
Food & Beverage Manager

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

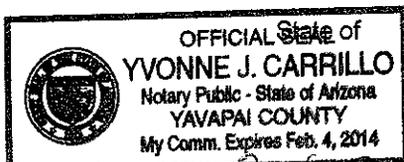
Special Event Diagram: (Show dimensions, serving areas, and label type of enclosure and security positions)
NOTE: Show nearest cross streets, highway, or road if location doesn't have an address.



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

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

X Dora Carter, Chair Sweetie Flavour 12/7/10 (928) 759-8062
(Signature) (Title/Position) (Date) (Phone #)



Arizona County of Yavapai
The foregoing instrument was acknowledged before me this
3 Dec 2010
Day Month Year

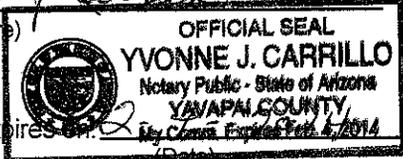
My Commission expires on: 2-4-2014
(Date)

Yvonne J. Carrillo
(Signature of NOTARY PUBLIC)

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

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

X John S. Ravuk State of Arizona County of Yavapai
(Signature) (Date) (Title/Position) (Date) (Phone #)
The foregoing instrument was acknowledged before me this



3 Dec 2010
Day Month Year
Yvonne J. Carrillo
(Signature of NOTARY PUBLIC)

You must obtain local government approval. City or County MUST recommend event and complete item #20. The local governing body may require additional applications to be completed and submitted 60 days in advance of the event. Additional licensing fees may also be required before approval may be granted.

LOCAL GOVERNING BODY APPROVAL SECTION

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

FOR DLLC DEPARTMENT USE ONLY

Department Comment Section:

(Employee) (Date)

APPROVED

DISAPPROVED

BY:

(Title) (Date)