

State of Arizona  
Department of Liquor Licenses and Control



Created 08/23/2024 @ 10:36:25 AM

Local Governing Body Report

**LICENSE**

Number: \_\_\_\_\_ Type: 012 RESTAURANT  
Name: ALTITUDE TRAMPOLINE PARK  
State: Pending  
Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Original Issue Date: \_\_\_\_\_  
Location: 5601 HIGHWAY 95N #404-D  
LAKE HAVASU CITY, AZ 86404  
USA  
Mailing Address: [REDACTED]  
Phone: [REDACTED]  
Alt. Phone: [REDACTED]  
Email: [REDACTED]

**AGENT**

Name: WILLIAM RAY RENFRO  
Gender: Male  
Correspondence Address: [REDACTED]  
Phone: [REDACTED]  
Alt. Phone: [REDACTED]  
Email: [REDACTED]

**OWNER**

Name: NORAM ENTERPRISES LLC  
Contact Name: WILLIAM RAY RENFRO  
Type: LIMITED LIABILITY COMPANY  
AZ CC File Number: 23434073 State of Incorporation: AZ  
Incorporation Date: 10/10/2022  
Correspondence Address: [REDACTED]  
Phone: [REDACTED]  
Alt. Phone: [REDACTED]  
Email: [REDACTED]

Officers / Stockholders

60<sup>th</sup> Day 10-22-24  
105<sup>th</sup> Day 12-6-24

Name:  
WILLIAM RAY RENFRO

Title:  
Member

% Interest:  
100.00

**NORAM ENTERPRISES LLC - Member**

Name: WILLIAM RAY RENFRO  
Gender: Male  
Correspondence Address:

Phone:  
Alt. Phone:  
Email:




**APPLICATION INFORMATION**

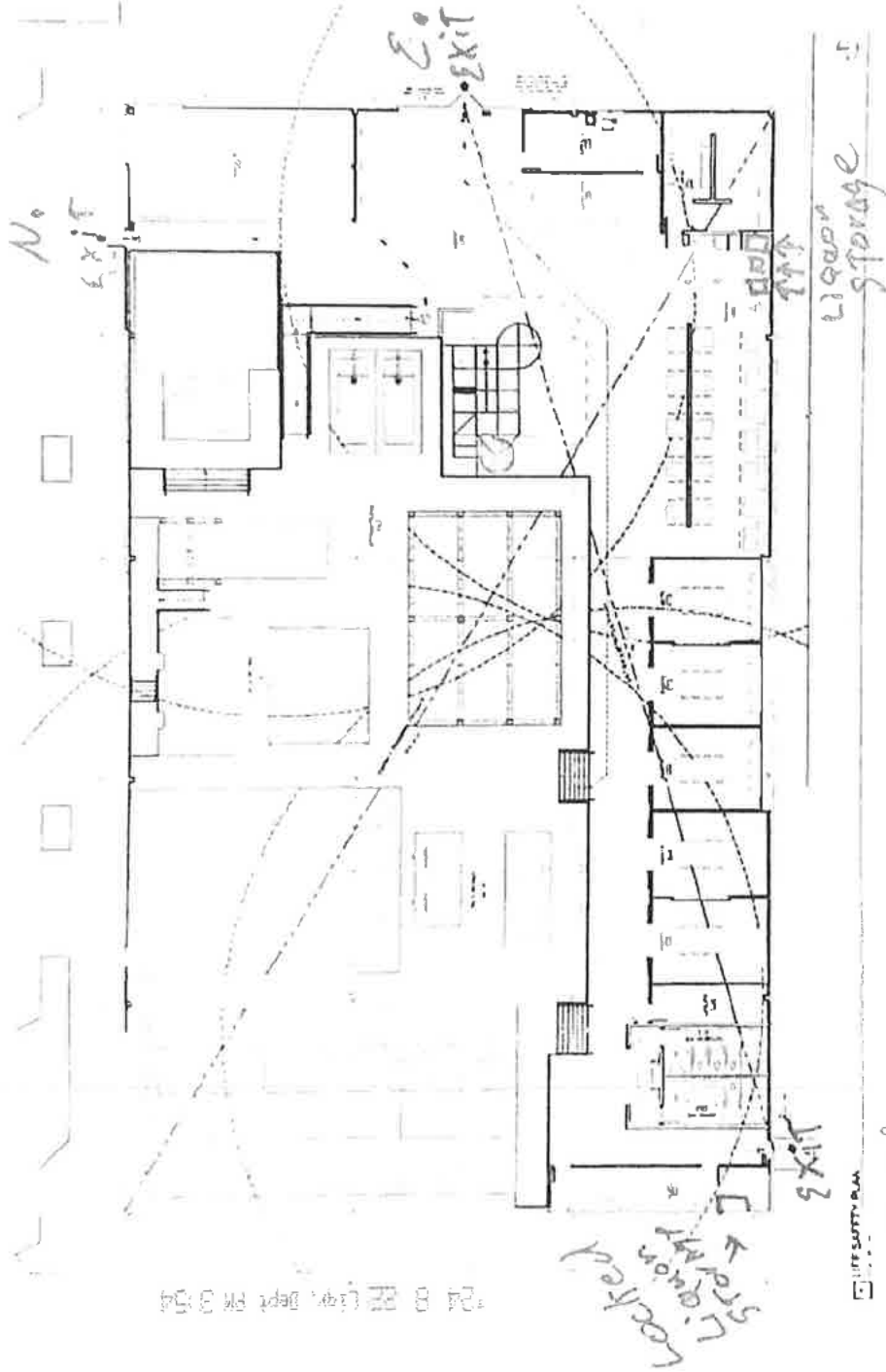
Application Number: 304107  
Application Type: New Application  
Created Date: 08/02/2024

**QUESTIONS & ANSWERS**

**012 Restaurant**

- 1) Are you applying for an Interim Permit (INP)?  
No
- 2) Are you one of the following? Please indicate below.  
Property Tenant  
Subtenant  
Property Owner  
Property Purchaser  
Property Management Company  
TENANT
- 3) Is there a penalty if lease is not fulfilled?  
No
- 4) Is the Business located within the incorporated limits of the city or town of which it is located?  
Yes
- 5) What is the total money borrowed for the business not including the lease?  
Please list each amount owed to lenders/individuals.  

- 6) Are there walk-up or drive-through windows on the premises?  
No
- 7) Does the establishment have a patio?  
No
- 8) ~~Is your licensed premises now closed due to construction, renovation or redesign or rebuild?~~  
No
- 9) What type of business will this license be used for?  
FAMILY FUN CENTER TRAMPOLINE PARK

73,540 SQ FT



24 8 2014, Dept PM 3:54

LIFE SAFETY PLAN

S.W.

PLAN REFERENCE DATA

1. ALL ROOMS SHALL BE PROVIDED WITH EXITS AS SHOWN ON THIS PLAN.

2. ALL EXITS SHALL BE UNLOCKED AT ALL TIMES.

3. ALL EXITS SHALL BE KEPT CLEAR OF OBSTRUCTIONS.

4. ALL EXITS SHALL BE MARKED WITH EXIT SIGNS AS SHOWN ON THIS PLAN.

5. ALL EXITS SHALL BE KEPT OPEN AT ALL TIMES.

6. ALL EXITS SHALL BE KEPT CLEAR OF OBSTRUCTIONS.

7. ALL EXITS SHALL BE MARKED WITH EXIT SIGNS AS SHOWN ON THIS PLAN.

8. ALL EXITS SHALL BE KEPT OPEN AT ALL TIMES.

9. ALL EXITS SHALL BE KEPT CLEAR OF OBSTRUCTIONS.

10. ALL EXITS SHALL BE MARKED WITH EXIT SIGNS AS SHOWN ON THIS PLAN.

WALL LEGEND

|    |                    |
|----|--------------------|
| 1  | WALL               |
| 2  | GLASS WALL         |
| 3  | GLASS PARTITION    |
| 4  | GLASS CURTAIN WALL |
| 5  | GLASS DOOR         |
| 6  | GLASS WINDOW       |
| 7  | GLASS PARTITION    |
| 8  | GLASS CURTAIN WALL |
| 9  | GLASS DOOR         |
| 10 | GLASS WINDOW       |

LIFE SAFETY LEGEND

|    |           |
|----|-----------|
| 1  | EXIT      |
| 2  | EXIT SIGN |
| 3  | EXIT SIGN |
| 4  | EXIT SIGN |
| 5  | EXIT SIGN |
| 6  | EXIT SIGN |
| 7  | EXIT SIGN |
| 8  | EXIT SIGN |
| 9  | EXIT SIGN |
| 10 | EXIT SIGN |

LIFE SAFETY NOTES

1. ALL EXITS SHALL BE UNLOCKED AT ALL TIMES.

2. ALL EXITS SHALL BE KEPT CLEAR OF OBSTRUCTIONS.

3. ALL EXITS SHALL BE MARKED WITH EXIT SIGNS AS SHOWN ON THIS PLAN.

4. ALL EXITS SHALL BE KEPT OPEN AT ALL TIMES.

5. ALL EXITS SHALL BE KEPT CLEAR OF OBSTRUCTIONS.

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7. ALL EXITS SHALL BE KEPT OPEN AT ALL TIMES.

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10. ALL EXITS SHALL BE KEPT OPEN AT ALL TIMES.



ARCHITECT

CONSULTANT



BILL RENFRO

ARCHITECT

ALTITUDE - LAKE HAVASU CITY

DATE: 03/06/23

03/06/23

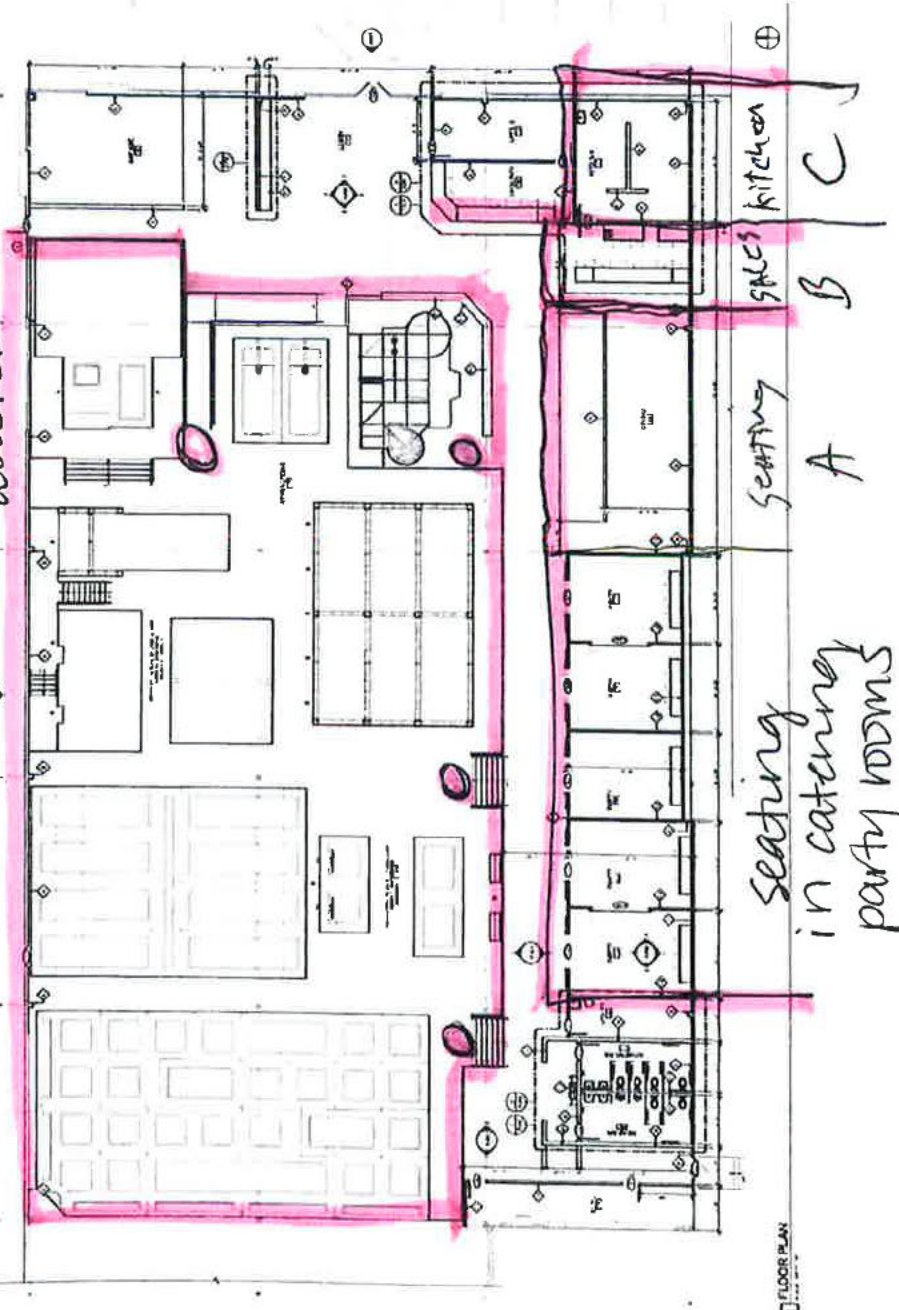
PROJECT

LIFE SAFETY PLAN

G003

**O** = court monitors checking wristbands upon entry

no alcohol participants allowed



1 FLOOR PLAN

3 WALL TYPES

|  |  |
|--|--|
|  | 1. 1/2" GYP BOARD ON 2" X 4" STUDS @ 16" O.C. (PARTIAL WALL) |
|  | 2. 1/2" GYP BOARD ON 2" X 4" STUDS @ 16" O.C. (FULL WALL)    |
|  | 3. 1/2" GYP BOARD ON 2" X 4" STUDS @ 16" O.C. (PARTIAL WALL) |

**GENERAL NOTES**

1. ALL WORK SHALL BE IN ACCORDANCE WITH THE LATEST EDITIONS OF THE BUILDING CODES AND SPECIFICATIONS.
2. THE CONTRACTOR SHALL BE RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND APPROVALS FROM THE LOCAL AUTHORITIES.
3. ALL MATERIALS AND WORKMANSHIP SHALL BE SUBJECT TO INSPECTION AND APPROVAL BY THE ARCHITECT.
4. THE CONTRACTOR SHALL MAINTAIN ACCESS TO ALL ADJACENT PROPERTIES AND UTILITIES AT ALL TIMES.
5. ALL UTILITIES SHALL BE PROTECTED AND MARKED PRIOR TO ANY CONSTRUCTION.
6. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL EXISTING UTILITIES AND STRUCTURES.
7. ALL WORK SHALL BE COMPLETED WITHIN THE SPECIFIED TIME FRAME.
8. THE CONTRACTOR SHALL MAINTAIN A NEAT AND ORDERLY WORK SITE AT ALL TIMES.
9. ALL MATERIALS SHALL BE STORED PROPERLY AND PROTECTED FROM THE ELEMENTS.
10. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DISPOSAL OF ALL WASTE MATERIALS.
11. ALL WORK SHALL BE COMPLETED IN ACCORDANCE WITH THE ARCHITECT'S INTENT.
12. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL ADJACENT PROPERTIES AND UTILITIES.
13. ALL WORK SHALL BE COMPLETED WITHIN THE SPECIFIED TIME FRAME.
14. THE CONTRACTOR SHALL MAINTAIN A NEAT AND ORDERLY WORK SITE AT ALL TIMES.
15. ALL MATERIALS SHALL BE STORED PROPERLY AND PROTECTED FROM THE ELEMENTS.
16. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE DISPOSAL OF ALL WASTE MATERIALS.
17. ALL WORK SHALL BE COMPLETED IN ACCORDANCE WITH THE ARCHITECT'S INTENT.
18. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE PROTECTION OF ALL ADJACENT PROPERTIES AND UTILITIES.
19. ALL WORK SHALL BE COMPLETED WITHIN THE SPECIFIED TIME FRAME.
20. THE CONTRACTOR SHALL MAINTAIN A NEAT AND ORDERLY WORK SITE AT ALL TIMES.

**EQUIPMENT NOTE**

**WALL LEGEND**

|  |   |
|--|---|
|  | 1/2" GYP BOARD ON 2" X 4" STUDS @ 16" O.C. (PARTIAL WALL) |
|  | 1/2" GYP BOARD ON 2" X 4" STUDS @ 16" O.C. (FULL WALL)    |
|  | 1/2" GYP BOARD ON 2" X 4" STUDS @ 16" O.C. (PARTIAL WALL) |





# RESTAURANT/HOTEL/MOTEL OPERATION PLAN

Arizona Dept. of Liquor Licenses and Control  
800 W. Washington St. 5<sup>th</sup> Floor Phoenix, AZ 85007  
(602) 542-5141

Type or Print with **Black Ink**

1. Name of restaurant (Please print): Altitude Trampoline Park

2. Must indicate the equipment below by Make, Model, and Capacity:

**LIST ONLY THE FOLLOWING - NO ATTACHMENTS**

|                                       |  |                     |
|---------------------------------------|--|---------------------|
| Grill <u>conveyor</u>                 | <u>Turbo Chef</u>                          | <u>See Attached</u> |
| Oven                                  | <u>Turbo Chef</u>                          | <u>See Attached</u> |
| Freezer                               | <u>2 DOOR TRUE FREEZER</u>                 |                     |
| Refrigerator                          |  | <u>See Attached</u> |
| Sink                                  |  |                     |
| Dish Washing Facilities               | <u>3 compartment sink</u>                  |                     |
| Food Preparation Counter (Dimensions) |  |                     |
| Other                                 | <u>map sink, hand washing sink, warmer</u> |                     |

3. Attach a copy of your FULL menu with pricing **INCLUDING NON-ALCOHOLIC BEVERAGES**

4. What percentage of your public premises is used primarily for restaurant dining? "

(Do not include kitchen, bar, hi-top tables, or game area.) 8 %

5. Does your restaurant have a bar area that is distinct and separate from the dining area?  YES  NO

(If yes, what percentage of the public floor space does this area cover?) \_\_\_\_\_ %

6. List the **seating capacity** for:

a) Restaurant dining area of your premises: [ 150 ]

**(DO NOT INCLUDE PATIO SEATING)**

b) Bar area [ + 0 ]

TOTAL [ = 150 ]

7. What type of dinnerware is primarily used in your restaurant?  Reusable  Disposable  Both

8. Does your restaurant contain any **games, televisions, or any other entertainment**?  YES  No

**If yes, specify what types and how many** (examples: 4-TV's, 2-Pool Tables, 1-Video Game, etc.)

9 TVs  
 trampoline Park  
 Arcade

9. Do you have live entertainment or dancing?  YES  No

**If yes, what type and how often** (example: DJ-2 x a week, Karaoke-2 x a month, Live Band-1 x a month, etc.)

DJ 1x month

10. List number of employees for each position:

| Position   | How many |
|------------|----------|
| Cooks      | 4        |
| Bartenders | 4        |
| Hostesses  | 8        |
| Managers   | 3        |
| Servers    | 4        |
| Other ( )  |          |
| Other ( )  |          |
| Other ( )  |          |

I, (Print Full Name) William A Renfo, hereby swear under penalty of perjury and in compliance with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing and verify that the information and statements that I have made herein are true and correct to the best of my knowledge.

Applicant Signature: William A Renfo

AZ DLIC  
AUG 01 2024



# PIZZA

# HOT FOODS

LARGE 14" CHEESE ... \$14.99

PERSONAL-SIZE CHEESE ... \$7.99

10" CAULIFLOWER CRUST CHEESE ... \$13.99

SLICE ... \$3.50

**\$2.00 EACH ADDITIONAL TOPPING**

- PEPPERONI
- BLACK OLIVES
- SAUSAGE
- BACON
- PINEAPPLE

• NACHOS

• MOZZARELLA STICKS

• CHICKEN STRIPS

• PRETZEL WITH CHEESE

• CINNAMON/SUGAR PRETZEL

**\$5.50**

HOT DOG ... \$3.00

SIDE OF FRIES ... \$3.00

TAX NOT INCLUDED

AZ DLIC

AUG 01 2024



# REFRESHMENTS

## FOUNTAIN DRINKS

PEPSI - DIET PEPSI - PEPSI ZERO - STARRY  
DR. PEPPER - MTN DEW - LEMONADE - GATORADE LEMON-LIME  
GATORADE FRUIT PUNCH - RASPBERRY ICED TEA

20 OZ ... \$4.00

ONE REFILL ON FOUNTAIN DRINKS

## ICEE

COKE - CHERRY-BLUE RASPBERRY

SMALL ... \$4.00

LARGE ... \$5.00

BOTTLED DRINKS ... \$2.50-\$4.00

TAX NOT INCLUDED





AZ DILLC  
AUG 01 2024



# CANDY & SNACKS

CANDY ..... \$2.00

- REESE'S
- M&M'S
- SNICKERS
- MILKY WAY
- 3 MUSKATEERS
- HERSHEY'S
- TWIX

- MERD'S CLUSTERS
- STARBURST
- SKITTLES
- SOUR PUNCH
- SOUR PATCH

SNACKS ..... \$2.00

- GRANOLA BARS
- RICE KRISPIES
- CHIPS AHOY
- SLIM JIM JERKY
- BAG OF CHIPS

MINI MELT ICE CREAM ..... \$5.00

- COOKIE DOUGH
- COTTON CANDY
- COOKIES & CREAM
- BROWNIE BLAST

TAX NOT INCLUDED

01111

COKE  
SM  
LAT  
BO