



AZ DLLC
APR 05 2018

18 MAY 14 11:14 AM

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

DLLC USE ONLY

Issuance fee: \$100.00
Issuance Date: _____
<input type="checkbox"/> Liquor Store (series 9)
<input type="checkbox"/> Beer and Wine Store (series 10)
CSR: _____

**SAMPLING PRIVILEGES APPLICATION
SERIES 9 OR 10**

Job # 23373

Applicant's Name: ☐ Owner ☒ Agent Stephen Troy Pace License #: 09080028

Business Name: Smith's Food & Drug Store #188

Business Location: 80 Acorn Blvd. N Lake Havasu City, AZ 86403

Mailing Address: _____

Business Phone Number: 928-680-7277 Daytime Contact Number: 928-680-7277

Email Address: _____

Series #10 Beer and Wine Bar Only:

I declare that my business qualifies as a

☐ Premises is 5,000 square feet or larger

☐ At least 75% of shelf space is dedicated to beer and wine

A.R.S. §4-206.01(1) Bar, Beer and Wine Bar or Liquor Store licenses; number permitted; fee; sampling privileges

I (Signature), _____, hereby declare that I am the OWNER/AGENT filing this form, that I have read A.R.S. §4-206.01 and verify all statements made on this document to be true, correct, and complete to the best of my knowledge. I understand there is a \$100 issuance fee and the annual \$60 renewal fee for these sampling privileges. The sampling privilege renewal fees are due at the same time as the renewal for the current license number identified on the first line of this application.

LOCAL GOVERNING BOARD

I, _____ (Government Official Signature)	_____ recommend <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL (Title)
on behalf of _____ (City, Town, County)	_____ Phone _____ Date _____

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Investigation Recommendation: <input type="checkbox"/> Approval <input type="checkbox"/> Disapproval by: _____	Date: ____/____/____
Director Signature required for Disapprovals: _____	Date: ____/____/____