CSR:	
Amount:	



## SPECIAL EVENT LICENSE **APPLICATION FEE \$25.00 PER DAY**

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

	DLLC USE ONLY
Job #:	
Date Acc	epted:
CSR:	
License #	<del></del>

<u>SECTION 1</u> Applicant must be a member of a qualifying nonprofit organization, political party, or Government entity and authorized by an Officer, Director, or Chairperson of the Organization.

1	Applicant: Johnson, Chris		5
	(Must be an Officer/Member of the Non Profit Entity) Last	First	Middle
2	Applicant's mailing address:		
	Street	СНу	State Zip
3	. Applicants home/cell phone:	Applicant's business pho	one:
4	Applicant's email address:		
5.	Special Event Name: Sinister Night Rides		
6.	Name of Non-Profit Organization, Candidate or Polit	tical Party/Gov.: Tonto Gravi	ty Riders
	Non-Profit/IRS Tax Exempt Number:		
8.	. Arizona Corporation Commission File #:	If out of State plea	se specify:
	Event Location Name: San Tan Regional Park		(Attach letter of good standing)
1(	D. Event Address: 6533 W Phillips Rd. Que	en Creek, AZ 85142	

Dates and Hours of Event - Days must be consecutive and may not exceed 10 consecutive days.

## \*\*SEPARATE APPLICATION FOR EACH "NON-CONSECUTIVE" DAY\*\*

Days	Date	Day of Week	Event Start Time AM/PM	License End Time AM/PM
DAY 1:	4/25/2025	Friday	7:00pm	11:59pm
DAY 2:	***			
DAY 3:				
DAY 4:				
DAY 5:				
DAY 6:				
DAY 7:				
DAY 8:		-		
DAY 9:		***************************************		
DAY10:		-		

SECTION 2 What type of se (List type and num	curity and control the control of police/security	measures will you ta personnel and type of fo	ke to prevent viola encing or control barrie	tions of liquor law ers, If applicable.)	s at this event?
		Number of Se			Barriers
Must explain security measure	es: Our beer garden is fu	ully enclosed by fencing wi	th one entrance/exit which	ch is manned by our lic	ensed bartender.
He/She ensures all patrons are	over 21 and issues v	wristbands. He/She als	o ensures no alcohol	leaves the designation	ated beer area.
SECTION 3 What is the purp					
On-site consumption	☐Off-site	(auction/wine/distille	ed spirits pull)	□Bot	h
How is this special event goin Check one of the following b	g to conduct all disponents. (R-19-318)	pensing, serving, and	selling of spirituous	liquors?	
A) Special Event being he Body on page 3. (If che	ld on an <u>unlicensed</u> acked move to sect	premises will require tion 4)	approval and signo	ature by the Loca	l Governing
B) Will this event be held of (Must attach a letter fro	on a currently license om the licensed prer	ed premises and with mises with an explan	in the already appration of the option of	roved and license checked below)	d area?
90000000	e of Business		License Number		ude Area Code)
Place license in non-use - S  Must attach letter from the I	pecial Event License location suspending	e selling all alcohol wit license for duration	hout retailer involver of special event		,
Dispense and serve all spirit revenue from alcohol sales is	uous liquors under re donated to licenses	etailer's license – Busi e	ness operates normo	ally, minimum of 25	% of gross
Dispense and serve all spirit purchased or donated by the used during the special even	e special event licens	see. The retailers existing	a alcohol inventory	must be congrete	d frama auni ala ala
Split premise between spec sales of alcohol. (These sales it must be in a separate area	cial event and retail will be done in separ	location - Both the sp	ecial event licensee	and the retailer w	ill conduct
Off Sale only - Wine/Distilled service of alcohol.				ted to conduct all	normal sale and
SECTION 4					
1. Has the applicant been co	onvicted of a felony	y, or had a liquor lice	ense revoked withir	n the last five (5) y	/ears?
Yes No If yes, attach le					
2. How many special event o	lays have been issu	ued to this organizati	on during the cale	ndar year? 1	
<ol> <li>Is the Organization using the contractor who may purchase responsible for the sales and s</li> </ol>	se ana sell alconol o	ecial Event Contrac In behalf of the licens	tor? (A licensee can ee. If no special eve	utilize the services nt contractor is list	of a special event ed, the licensee is
Yes No If yes, please p	provide the Name o	of the Special Event	Contractor: Arava	aipa Running LL	С
4. Is the organization using the (Licensees who hold a serie	e services of a serie es 6, 7, 11, or 12 lice	es 6, 7, 11, or 12 licen nse are automatica	see to manage the lly qualified to be t	e sale or service o he special event	of alcohol? contractor)
Yes No if yes, please p	provide the Name o	of Licensee:	Li	icense #:	
5. List the name of the Individ	lual or Organization	that will receive re	venues, MUST EQUA	L 100 PERCENT.	

Attach additional sheet if necessary.

Name: Tonto Gravity Riders		Percentage: 100%	
Address:		reicenlage	
Street Name:	City	State Percentage:	Zip
Address:		rercemage:	
Street	City	State	Zip
Please read A.R.S. § 4-203.02 Special ever	nt license; rules and R1	9-1-205 Requirements for a	Special Event License
ALL ALCOHOLIC BEVERAGE S	ALES MUST BE FOR CO	NSUMPTION AT THE EVENT	SITE ONLY.
NO ALCOHOLIC BEVERAGES SHALL LEAVE A S SEALED CONTAINERS OR THE SPECIAL EVE	SPECIAL EVENT LINIESS	THEY ARE IN AUCTION WINE	OR DISTUISE SPIRITS
<b>SECTION 5</b> License premises diagram. The authorized to sell, dispense or serve alcoholic of your special event licensed premises. Plea measures and security position.	Developes under the	provisions of vour linears	1
ATTA	CH DIA	GRAM	
If the special event will be held at a location with that is not covered by the existing liquor license, to the Department of Liquor Licenses and Control APPLICANT SIGNATURE  Declaration:  I. (Print Name) Chris application. I have believe all statements made on this application.	ol. Please contact the loc	declare under penalty of	ning body before submitting and information.
		Signature	
LOCAL GOVERNING BODY			Maria Caracteria Carac
Date Received: <u>03-03-2025</u>	lerk of the Boa (Title)	recommend DAPPRC	VAL □ DISAPPROVAL 520) 866-6068 Phone
Date Received: 03-03-2025  I. Natasha Kennedy (Government Official)  On behalf of Pinal County	Signature  Signature  nicipality where the fa	Date  place  pla	7520) 866-G068 Phone may require additional

