

18 JAN 12 Liq. Dept PM 1 55

17 NOV 28 Liq. Dept AM 9 51



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

DLIC USE ONLY	
License #	06070346
Date Accepted:	1/23/18
CSR:	<i>[Signature]</i>

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Application for Liquor License
Type or Print with Black Ink

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE
A service fee of \$25 will be charged for all dishonored checks (A.R.S. § 44-6852)

SECTION 1 Type of License

- ☐ Interim Permit
☒ New License
☒ Person Transfer
☒ Location Transfer (series 6, 7 and 9)
☐ Probate/ Will Assignment/ Divorce Decree (No Fees)
☐ Seasonal

SECTION 2 Type of Ownership

- ☐ J.T.W.R.O.S.
☐ Individual
☐ Partnership
☐ Corporation
☒ Limited Liability Co
☐ Club
☐ Government
☐ Trust
☐ Tribe
☐ Other (Explain) _____

SECTION 3 Type of license

- ☐ Add Sampling Privilege for Series 9 and 10 only (Complete Sampling Privilege application)
A.R.S. §4-206.01(G), (H), (I) & (L)
☐ Add Growler privileges (restaurant, series 12, license only. 300-foot restriction applies)
A.R.S. §4-207(A) & (B)

1. Type of License (restaurant, bar etc.): Bar 2. LICENSE # (if issued): 06070346

SECTION 4 Applicants

1. Agent's Name: Elbogen Gary Scott P1073812
Last First Middle
2. Applicant/Licensee Name: Scorpion Bay F&B, LLC B1056147
(Ownership name for type of ownership checked on section 1)
3. Business Name (Doing Business As-DBA): Scorpion Bay Grill B1039982
4. Business Location Address: 10970 W. Peninsula Rd., Ste B Peoria AZ 85383 Maricopa
(Do not use PO Box) Street City State Zip Code County
5. Mailing Address: 10970 W. Peninsula Rd., Ste B Peoria AZ 85383
(All correspondence will be mailed to this address) Street City State Zip Code
6. Business Phone: 928-501-3441 Daytime Contact Phone: [Redacted]
7. Email Address: gelbogen@desert-troon.com
8. Is the Business located within the incorporated limits of the above city or town? ☒ Yes ☐ No
If you checked no, in what City, Town, County or Tribal/Indian Community is this business located? _____

Fees: <u>\$ 200.00</u>		Department Use Only		<u>\$ 66.00</u>		<u>\$ 266.00</u>	
Application	Interim Permit	Site Inspection	Finger Prints	Total of All Fees			
Is Arizona Statement of Citizenship & Alien Status for State Benefits complete?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

SECTION 5 Background Check

EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD ALONG WITH \$22. PROCESSING FEE PER CARD.

1. If the applicant is an entity, not an individual, answer questions 1a-b.

a) Date Incorporated/Organized: 12/23/2015 State where Incorporated/Organized: Arizona

b) AZ Corporation or AZ L.L.C. File No: L20563006 Date authorized to do business in AZ 12/31/15

2. List any individual or entity that own a beneficial interest of 10 % or more and/or controls the license. If the applicant is owned by another entity, attach an organizational chart showing the ownership structure. Attach additional sheets as needed to disclose any controlling person, member, shareholder or general partner who owns a beneficial interest of 10 % or more of the license.

Last	First	Middle	Title	%Owned	Mailing Address	City	State	Zip
Scorpion Bay Holdings, LLC			Member	100%	7669 E. Pinnacle Peak Road, Suite 250,	Scottsdale,	Arizona	85255
(see attached organization chart)								

(Attach additional sheet if necessary)

SECTION 6 Interim Permit

If you intend to operate business while your application is pending you will need an interim permit pursuant to A.R.S.§4-203.01 For approval of an interim permit:

- There **must** be a valid license of the same series issued to the current location you are applying for OR
- A Hotel/Motel license is being replaced with a restaurant license pursuant to A.R.S.§4-203.01 (A)

1. Enter license number currently at the location: _____

2. Is the license currently in use? ☐ Yes ☐ No If no, how long has it been out of use? _____

I, (Signature) _____ declare that I am the CURRENT OWNER, AGENT, OR CONTROLLING PERSON on the stated license and location.

Attach a copy of the license currently issued at this location to this application.

NOTARY

State of Arizona)
County of _____)

On this _____ Day of _____, 20____ before me personally appeared _____
Day Month Year (Print Name of Document Signer)

Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.

Signature of NOTARY PUBLIC

(Affix Seal Above)

SECTION 7 Probate, Receiver, Bankruptcy Trustee, Assignment, or Divorce Decree of an existing liquor license ARS § 4-204

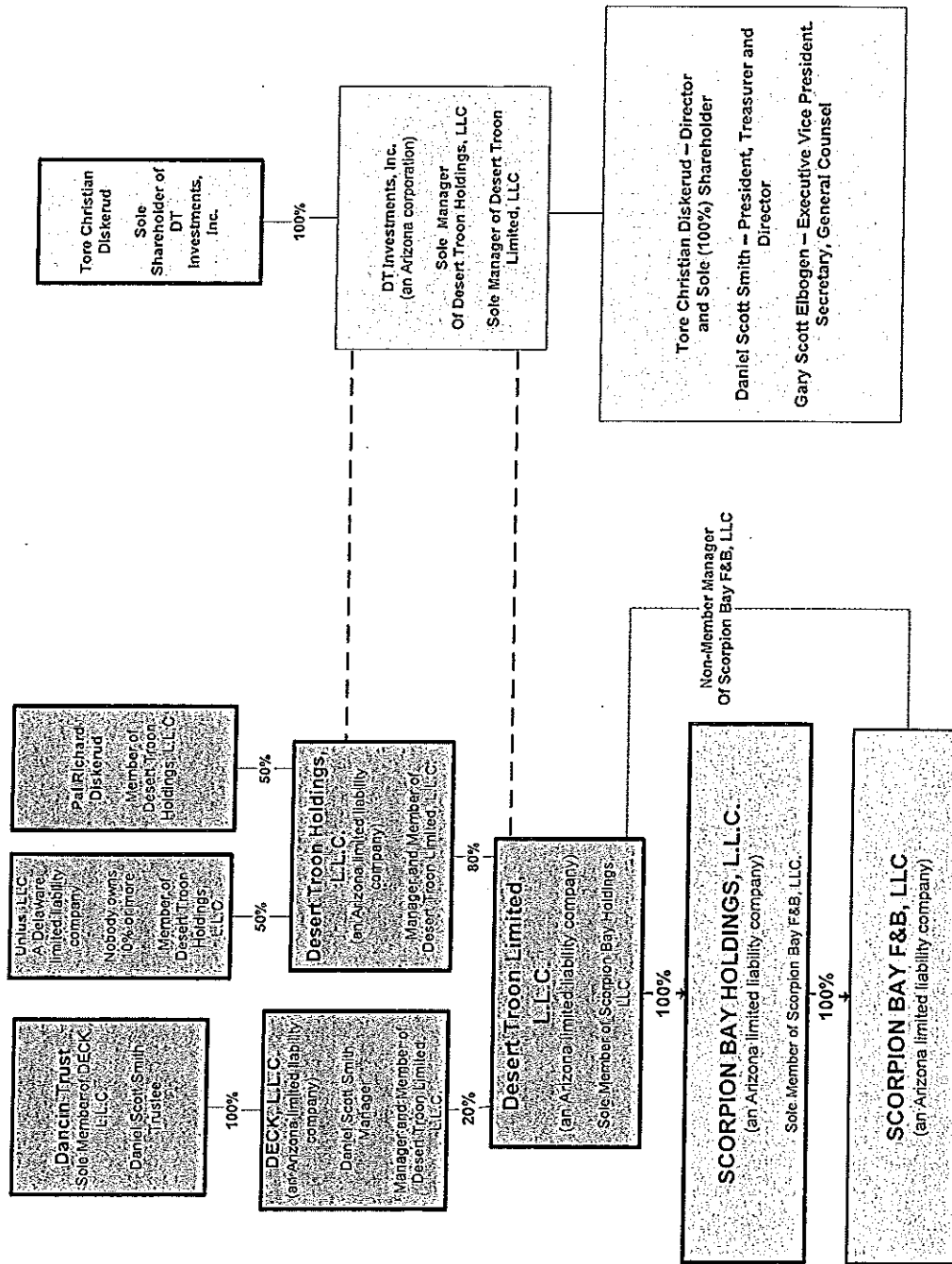
EACH PERSON LISTED MUST SUBMIT A QUESTIONNAIRE, FINGERPRINT CARD ALONG WITH \$22. PROCESSING FEE PER CARD.

1. Current Licensee's Name: _____
(Exactly as it appears on the license) Last First Middle

2. Assignee's Name: _____
Last First Middle

License Number: _____

ATTACH A COPY OF THE DOCUMENT THAT SPECIFICALLY ASSIGNS THE LIQUOR LICENSE TO THE ASSIGNEE.



SECTION 8 Government (for Cities, Towns or Counties only)

1. Government Entity: _____
2. Person/Designee: _____
Last First Middle Daytime Contact Phone #

A SEPARATE LICENSE MUST BE OBTAINED FOR EACH PREMISES FROM WHICH SPIRITUOUS LIQUOR IS SERVED.

SECTION 9 ☒ Person to Person - Current Licensee Information ARS§4-203(C), (D), (G)
(Bar and Liquor Stores only - Series 06, 07 and 09)

1. License #: 06070346
2. Current Agent Name: _____
Last First Middle
3. Current Licensee Name: George Thomas Troilo
(Exactly as it appears on the license)
4. Current Business Name: TNT VENTURES LLC dba BRITISH OPEN PUB & GRILL
(Exactly as it appears on the license)
5. Current Daytime Phone: 480.264.7657 Primary Email Address: [REDACTED]@gmail.com
6. Does current licensee intend to operate the business while this application is pending? ☐ Yes ☒ No
7. I authorize the transfer of this license to the applicant: [REDACTED]
Signature of Agent or individual controlling person

NOTARY

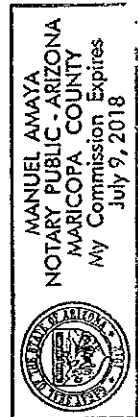
State of Arizona
County of Maricopa

On this 2nd Day of October, 2017, before me personally appeared George Thomas Troilo
(Print Name of Document Signer)

Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.

[REDACTED]
Signature of NOTARY PUBLIC

(Affix Seal Above)



SECTION 10 Proximity to Church or School - Questions to be completed by 6, 7, 9, 10 and 12G applicants.

A.R.S. §4-207. (A) and (B) state that no retailer's license shall be issued for any premises which are at the time the license application is received by the director, within three hundred (300) horizontal feet of a church, within three hundred (300) horizontal feet of a public or private school building with kindergarten programs or grades one (1) through (12) or within three hundred (300) horizontal feet of a fenced recreational area adjacent to such school building.

The above paragraph DOES NOT apply to:

- a) Restaurants that do not sell growlers (A.R.S. §4-205.02) Series 12
- b) Hotel/motel license (A.R.S. §4-205.01) Series 11
- c) Microbrewery (A.R.S. §4-205.03) Series 3
- d) Craft Distillery (A.R.S. §4-205.10) Series 18

- e) Government license (A.R.S. §4-205.03) Series 5
- f) Playing area of a golf course (A.R.S. §4-207 (B)(5))
- g) Wholesaler/Distributor Series 4
- h) Farm Winery Series 13
- i) Producer Series 1

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Escrow #16779-KA

BILL OF SALE

IN CONSIDERATION OF THE SUM OF:

NINETY THOUSAND AND 00/100*****DOLLARS

lawful currency of the United States of America, and other valuable consideration, receipt of which is hereby acknowledged, the SELLER:

TNT VENTURES LLC

hereby grants, bargains, sells and transfer unto the BUYER:

SCORPION BAY F&B, LLC

as his, her or their heirs, personal representatives, or assigns, to have and to hold forever, the following described personal property, goods or chattels:

State of Arizona Series #06 Liquor License #06070346

FURTHERMORE, Seller warrants that he, she or they are the lawful owner of said goods and hereby certifies, under oath that he, she, or they have the right to sell the same as aforesaid and that the above described property is free and clear of all claims, liens and other encumbrances whatsoever, EXCEPT, as specified herein. Seller further agrees to warrant and defend same against the lawful claims and demands of all persons whomsoever.

Effective date of this Bill of Sale is:

TNT VENTURES LLC

By: [REDACTED]

State of Arizona)
County Maricopa)

Acknowledge, under oath, before me on this 9th day of November 2017

[REDACTED]
NOTARY PUBLIC

My commission expires on:

July 1, 2018



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1. Distance to nearest School: 16 Miles
(If less than one (1) mile note footage)

Name of School: West Wing School - Elementary and Middle (K-8)
Address: 26716 High Desert Drive, Peoria, AZ 85383

2. Distance to nearest Church: 18.9 Miles
(If less than one (1) mile note footage)

Name of Church: Spirit Song Methodist Church
Address: 3009 N. Sunrise Point, Peoria, AZ 85383

SECTION 11 Business Financials A.R.S. §4-202(F)

1. I am the:

- ☐ Tenant: a person who holds the lease of a property; a lessee.
☒ Sub-tenant: a person who holds a lease which was given to another person (tenant) for all or part of a property.
☐ Owner
☐ Purchaser
☐ Management Company

2. If the premises is leased give lessors: Name: Scorpion Bay Holdings, LLC
Address: 7669 E. Pinnacle Peak Road, Suite 250, Scottsdale, Arizona 85255
Street City State Zip

3. What is the penalty if the lease is not fulfilled? \$ 0 or Other: _____

4. Total money borrowed for the Business not including lease? \$ 0

Please List Lenders/People you owe money to for business.

Last	First	Middle	Amount Owed	Mailing Address	City	State	Zip

(Attach additional sheet if necessary)

5. Has a license or a transfer license for the premises on this application been denied by the state within the past year?

☐ Yes ☒ No

If yes, attach explanation.

6. Does any spirituous liquor manufacture, wholesaler, or employee have an interest in your business?

☐ Yes ☒ No

If yes, attach explanation.

SECTION 12 Diagram of Premises

Check ALL boxes that apply to your business:

☐ Walk-up or drive-through windows

Pallo: ☐ Contiguous

☐ Non-Contiguous within 30 feet

1. Is your licensed premises now closed due to construction, renovation or redesign or rebuild?

☐ Yes ☒ No If yes, what is your estimated completion date? ____/____/____

Please attach a diagram of the premises which clearly show only the areas where spirituous liquor will be sold, served, consumed, dispensed, possessed or stored. Include all entrances, exits, interior walls, bar areas, dining areas, dance floor, stage, game room and the kitchen. **DO NOT INCLUDE** parking lots, living quarters or areas where business is not conducted under this liquor license. When completing your premises diagram, please identify which orientation is North.

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DOOR WITH PANIC
HARDWARE EMERG.
EXIT ONLY

SERVICE DOOR
TO KITCHEN

SERVICE DOOR
TO KITCHEN

SERVICE DOOR
FROM KITCHEN

LIQUOR
STORAGE

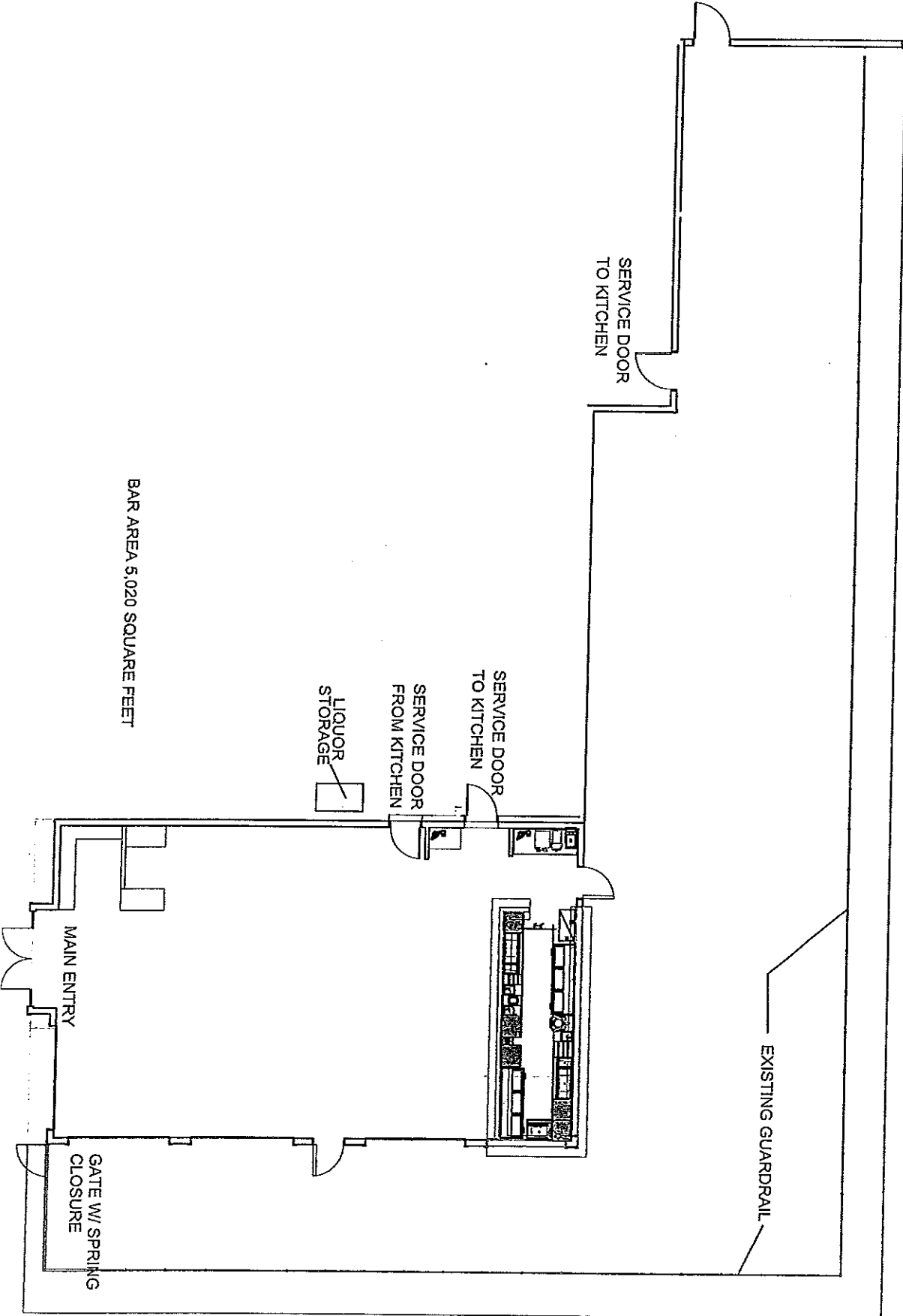
EXISTING GUARDRAIL



BAR AREA 5,020 SQUARE FEET


MAIN ENTRY

GATE W/ SPRING
CLOSURE



2. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed areas such as parking lots, living quarters, etc.

3. As stated in A.R.S. §4-207.01 (B), I understand it is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to the service areas or the square footage of the licensed premises, either by increase or decrease.


Applicants Initials


RESTAURANTS AND HOTELS/MOTELS ONLY

(IMPORTANT NOTE: A site inspection must be conducted prior to activation of the license. The fee of \$50.00 will be due and payable upon submitting this application.)

4a. Provide a detailed drawing of the kitchen and dining areas, including the locations of all kitchen equipment and dining furniture, these are required as part of the diagram. A.R.S. §4-205.02(C)

4b. Provide a restaurant operation plan.

SECTION 13 SIGNATURE BLOCK

I, (Signature) , hereby declare that I am the Owner/Agent filing this application, I have read this document and verify the content and all statements are true, correct and complete, to the best of my knowledge.

NOTARY

State of Arizona

County of Maricopa

On this 15th Day of November, 2017 before me personally appeared Gary Scott Elbogen
Day Month Year (Print Name of Document Signer)

Whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and acknowledged that he or she signed the above/attached document.



DEANNE C. HAGEY
Notary Public - Arizona
Maricopa County
Expires 01/31/2021


Signature of NOTARY PUBLIC

(Affix Seal Above)

A.R.S. §41-1030. Invalidity of rules not made according to this chapter; prohibited agency action; prohibited acts by state employees; enforcement; notice

B. An agency shall not base a licensing decision in whole or in part on a licensing requirement or condition that is not specifically authorized by statute, rule or state tribal gaming compact. A general grant of authority in statute does not constitute a basis for imposing a licensing requirement or condition unless a rule is made pursuant to that general grant of authority that specifically authorizes the requirement or condition.

D. THIS SECTION MAY BE ENFORCED IN A PRIVATE CIVIL ACTION AND RELIEF MAY BE AWARDED AGAINST THE STATE. THE COURT MAY AWARD REASONABLE ATTORNEY FEES, DAMAGES AND ALL FEES ASSOCIATED WITH THE LICENSE APPLICATION TO A PARTY THAT PREVAILS IN AN ACTION AGAINST THE STATE FOR A VIOLATION OF THIS SECTION.

E. A STATE EMPLOYEE MAY NOT INTENTIONALLY OR KNOWINGLY VIOLATE THIS SECTION. A VIOLATION OF THIS SECTION IS CAUSE FOR DISCIPLINARY ACTION OR DISMISSAL PURSUANT TO THE AGENCY'S ADOPTED PERSONNEL POLICY.

F. THIS SECTION DOES NOT ABROGATE THE IMMUNITY PROVIDED BY SECTION 12-820.01 OR 12-820.02.