

State of Arizona
Department of Liquor Licenses and Control


Created 05/02/2025 @ 09:27:21 AM

Local Governing Body Report

LICENSE

Number: _____ Type: 012 RESTAURANT
Name: JINYA RAMEN BAR
State: Pending
Issue Date: _____ Expiration Date: _____
Original Issue Date: _____
Location: 8156 W HAPPY VALLEY ROAD
 #10
 PEORIA, AZ 85383
 USA
Mailing Address: _____
Phone: (480)242-4430
Alt. Phone: _____
Email: LIQUORLICENSE@AZLIC.COM

AGENT

Name: DARADEE RAE OLSON
Gender: Female
Correspondence Address: 
 USA
Phone: (480)242-4430
Alt. Phone: _____
Email: DARADEEO26@GMAIL.COM

OWNER

Name: TWELVE30 TRAILHEAD LLC
Contact Name: DARADEE RAE OLSON
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: 23691830 State of Incorporation: AZ
Incorporation Date: 06/11/2024
Correspondence Address: 
 USA
Phone: (480)242-4430
Alt. Phone: _____
Email: LIQUORLICENSE@AZLIC.COM

Officers / Stockholders

Name: _____ Title: _____ % Interest: _____

DARADEE RAE OLSON	Member	50.00
STUART EVERETT OLSON	Member	25.00
CANDACE RAE OLSON	Member	25.00

TWELVE30 TRAILHEAD LLC - Member

Name: DARADEE RAE OLSON
Gender: Female
Correspondence Address: [REDACTED]
USA
Phone: (480)242-4430
Alt. Phone:
Email: DARADEEO26@GMAIL.COM

TWELVE30 TRAILHEAD LLC - Member

Name: CANDACE RAE OLSON
Gender: Female
Correspondence Address: [REDACTED]
USA
Phone: (650)483-7521
Alt. Phone:
Email: CANDYSHOPON@SBCGLOBAL.NET

TWELVE30 TRAILHEAD LLC - Member

Name: STUART EVERETT OLSON
Gender: Male
Correspondence Address: [REDACTED]
USA
Phone: (650)888-1647
Alt. Phone:
Email: SOLSON246@GMAIL.COM

APPLICATION INFORMATION

Application Number: 346343
Application Type: New Application
Created Date: 04/18/2025

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?
Yes
What is the penalty?
OWE UNTIL SUBLEASED
- 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.
\$1.5 MILLION
GOLF COAST BANK & TRUST
1505 LBJ FWY #350, FARMERS BRANCH, TX 75234
- 6) Are there walk-up or drive-through windows on the premises?
No
- 7) Does the establishment have a patio?
Yes
Is the patio contiguous or non-contiguous (within 30 feet)?
CONTIGUOUS
- 8) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
Yes
If yes, what is your estimated completion date?
07/15/2025
- 9) What type of business will this license be used for?
RESTAURANT



RESTAURANT/HOTEL/MOTEL OPERATION PLAN

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

Type or Print with **Black Ink**

1. Name of restaurant (Please print): Jinya Ramen Bar

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

LIST ONLY THE FOLLOWING - NO ATTACHMENTS	
Grill	Griddle Plate 36" Imperial/Heavy Duty Hot Plate 24" American Range
Oven	n/a
Freezer	Undercounter Turbo Air 48"/Undercounter Turbo Air 27"/Walk In custom
Refrigerator	Walk In Fridge Custom/Undercounter turbo Air 48" Undercounter Turbo Air 27"
Sink	3 comp sink GSW/1 Comp Sink GSW/Prep Sink GSW/2 comp dump sink Krowne Metal
Dish Washing Facilities	Undercounter dishewasher/Dishwasher
Food Preparation Counter (Dimensions)	Pizza Prep Table Turbo Air 44" & 67"/SS Work Table various sizes
Other	Gas Rice Cooker Rinnai/Gas Pasta Cooker Anets/

3. Attach a copy of your FULL menu with pricing **INCLUDING 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.) **50** %

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: [**71**]

(DO NOT INCLUDE PATIO SEATING)
b) Bar area [+ **51**]

TOTAL [= **122**]



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3. Attach a copy of your FULL menu with pricing **INCLUDING 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.) 50 %

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: [71]

(DO NOT INCLUDE PATIO SEATING)
b) Bar area [+ 51]

TOTAL [= 122]

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.)

4 TV'S


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

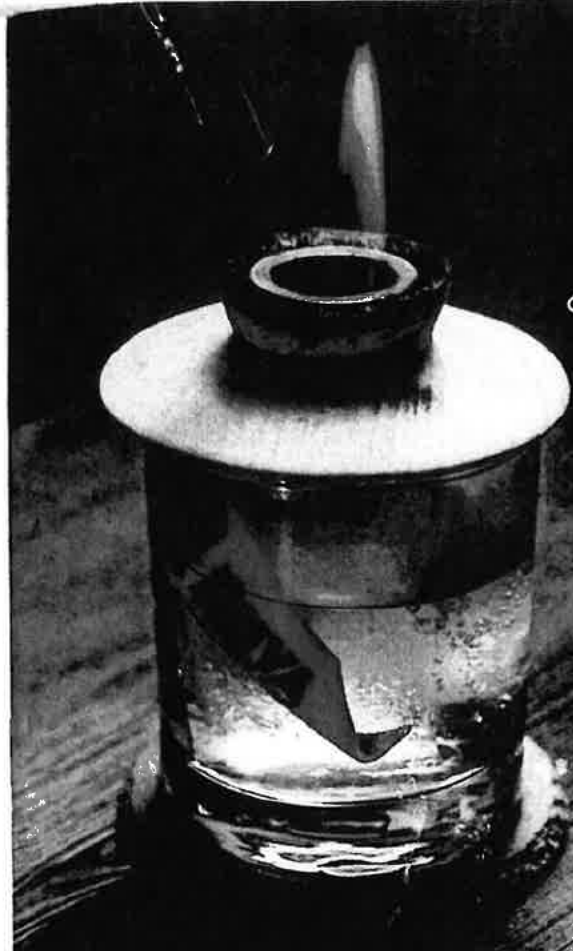
If yes, what type and how often (example: DJ-2 x a week, Karaoke-2 x a month, Live Band-1 x a month, etc.)

10. List number of employees for each position:

Position	How many
Cooks	15
Bartenders	3
Hostesses	7
Managers	6
Servers	12
Other (Dishwashers)	3
Other (Expo)	6
Other ()	

I, (Print Full Name) **Daradee Olson**, 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 



Smokey Wokashi Old Fashioned

Signature Cocktails

- E Tomo E Tomo E Tomorrow** 16.⁰⁰ 224 cal
Hale Vodka, Elderflower Liqueur, Koslov's, Fernet-Branca, Lemon
Candied, Sparkling Wine
- Mallbu Sunrise*** 17.⁰⁰ 264 cal
Espolon Blanco Tequila, Triple Sec, Lime Juice, Cointreau, Agave
Passion Fruit, Sorbato, Egg White*, Orange Juice, Strawberry Juice, Tan
- Flying Violette*** 15.⁰⁰ 167 cal
Roku Gin, Elder Flower Liqueur, Cremoso Vodka
Luxardo Maraschino Liqueur, Lemon, Strawberry Egg White*
- Smokey Wokashi Old Fashioned** 17.⁰⁰ 225 cal
Sage-Mat Whisky, Demerara, Angostura Bitters, Orange Bitters
- Lycheetini** 13.⁰⁰ 192 cal
Haki Vodka, Shochu, Elderflower Liqueur, Lemon, Lychee
- Yuzu Margarita** 17.⁰⁰ 198 cal
Espolon Blanco Tequila, Triple Sec, Yuzu, Grapefruit Juice, Honey
- Ringo Mule** 17.⁰⁰ 205 cal
Honey, Dicranol, Creamol, Demerara, Apple, Lemon
Ginger, Angostura Bitters
- Dragon Fruit Fizz*** 17.⁰⁰ 153 cal
London Dry Gin, Dragon Fruit, Lemon, Passion Fruit
Egg White*, Tonic



Kiwi Sparkler

J.Girl

Matcha Lychee
Lemonade

Signature Mocktails

- J.Girl** 8.⁰⁰ 129 cal
Blood Orange, Spawaters, Grapefruit, Mint, Sparkling Water
- Matcha Lychee Lemonade** 8.⁰⁰ 143 cal
Matcha, Lemon, Lychee
- Kiwi Sparkler*** 10.⁰⁰ 138 cal
Kiwi, Peachade, Lychee, Orange Juice, Sparkling Water

BEER

	price	cal
BEER FLIGHT		
Beer Flight	12	n/a
DRAFT BEER	price	cal
Church Music -IPA- The Shop Beer 6.7%	pin 7	230 cal
Tower Station -IPA- Mother Road 7.3%	pin 7	218 cal
Arizona Light -Lager- Huss 4.0%	pin 7	110 cal
Crispy -Lager- The Shop Beer 5.5%	pin 7	180 cal
JINYA Blonde -Lager- Barrio 4.7%	pin 7	155 cal
Papago Orange Blossom -Wheat- Huss 5.0%	pin 7	170 cal
Seasonal Local AZ Brewing 5.5%	pin 7	180 cal
Ask Your Server		
Sapporo -Lager- 4.9%	pin 6	140 cal
CAN / BOTTLE	price	cal
Kit Lifter -Amber Ale- Four Peaks 6.0%	(16oz) 7	240 cal
NEONIC: Fruited -Sour Ale- The Shop Beer 5.1%	(16oz) 8	240 cal
Big Blue Van -Fruit Wheat- College Street 5.4%	(16oz) 7	213 cal
JAPANESE BEER CAN / BOTTLE	price	cal
Asahi -Lager- 5.0%	(22oz) 8	192 cal
Kirin Light -Lager- 3.2%	(22oz) 8	95 cal
Shikkoku Coedo -Black Lager- 5.0%	(11.2oz) 8	101 cal
Kyoto Kizakura -Matcha IPA- 8.5%	(11.2oz) 8	109 cal
Lucky Chicken Kizakura -Red Ale- 5.5%	(11.2oz) 8	97 cal

WINE

	glass	bottle	cal (glass)
RED			
Pavette Cabernet Sauvignon 13.8%	9	45	168 cal
Curator Red Blend 14.0%	9	45	171 cal
Tembo Pinot Noir 12.2%	9	45	173 cal
WHITE	glass	bottle	cal (glass)
Curator White Blend 13.0%	8	40	148 cal
Barnard Griffen Sauvignon Blanc 12.8%	9	45	125 cal
Barnard Griffen Reisling 12.3%	9	45	125 cal
Giuseppe & Luigi Pinot Grigio 12.5%	9	45	139 cal
ROSE	glass	bottle	cal (glass)
The Diver Brut Rose -California- 12.8%	10	50	147 cal
CHAMPAGNE	glass	bottle	cal (glass)
Wycliff Brut Champagne -California- 10.5%	7	30	95 cal

LIQUOR

	price	cal
Jack Daniels	(1.5oz) 8	97 cal
Crown Royal	(1.5oz) 9	97 cal
Woodford Reserve	(1.5oz) 9	110 cal
Suntory Toki	(1.5oz) 10	130 cal
Deep Eddy Vodka	(1.5oz) 6	98 cal
Deep Eddy Lime	(1.5oz) 6	65 cal
Deep Eddy Lemon	(1.5oz) 6	65 cal
Deep Eddy Orange	(1.5oz) 6	65 cal
Deep Eddy Peach	(1.5oz) 6	65 cal
Deep Eddy Ruby Red	(1.5oz) 6	65 cal
Titos Vodka	(1.5oz) 7	98 cal
Haku Vodka	(1.5oz) 7	62 cal
Jameson	(1.5oz) 8	108 cal
Roku Gin	(1.5oz) 7	67 cal
Well -Tequila, Rum, Vodka, Gin-	(1.5oz) 5	97 cal
Grand Marnier	(1.5oz) 8	122 cal
Casamigos Blanco	(1.5oz) 10	68 cal
Midori	(1.5oz) 6	102 cal
Legend Bourbon	(1.5oz) 10	120 cal
Akashi Whisky	(1.5oz) 8	115 cal
Epsolon Blanco	(1.5oz) 8	90 cal
Disaronno	(1.5oz) 9	130 cal
Absolut Vanilla	(1.5oz) 8	84 cal
Frangelico	(1.5oz) 10	112 cal
Sipsmith Gin	(1.5oz) 10	108 cal
Hennessy	(1.5oz) 12	118 cal

SAKE

	price	cal
JUNMAI DAIGINJO		
Sho Chiku Bai 15.0%	(180ml) 7	320 cal
Green Mini Bottles		
Daiginjo S Kizakura 15.5%	(500ml) 28	242 cal
Dry with tropical fruit flavors		
JUNMAI GINJO	price	cal
Kikusui 15.0%	(375ml) 12	325 cal
Light and dry with persimmon notes		
Hakutsuru 14.0%	(300ml) 15	300 cal
Fully yet dry		
GINJO	price	cal
Bushido 18.0%	(180ml) 15	182 cal
Smooth & crisp & packs a punch		
JUNMAI	price	cal
Kyo No Tokuri Gold 14.0%	(180ml) 9	182 cal
Light, dry & crisp with gold flakes		
Little Sumo 18.0%	(200ml) 12	200 cal
Undiluted - Balanced between sweet & dry		
Kikusui Pulp Tangerine 7.5%	(180ml) 16	193 cal
Fresh taste & surprisingly pulpy		
Yuzu Aladin 10.0%	(300ml) 16	175 cal
Smooth blend of sake & zesty citrus		
NIGORI	price	cal
JINYA Nigori 8.0%	(300ml) 18	294 cal
Silky, Sweet, truly taste "Cloudy"		
HOT	price	cal
Sho Chiku Bai 15.0%	(10oz) 8	264 cal
Naturally smooth and well balanced		
SPARKLING	price	cal
Kizakura Yuzu Shuwah 7.0%	(330ml) 12	190 cal
Enhanced sweetness		
Kizakura Stars 6.5%	(300ml) 15	250 cal
Crisp, sweet & sour		
Mio Sparkling 5.0%	(300ml) 18	234 cal
Bright aromas & gentle effervescence		
Social Grapefruit Ginger Sparkling 4.0%	(12oz) 6	88 cal
Social Elderflower Apple Sparkling 4.0%	(12oz) 7	88 cal
OTHERS	price	cal
Lucky Dog Juicebox 13.2%	(180ml) 10	187 cal
Soft & Light, creamy & smooth		
Kikusui Funaguchi Kunko 19.0%	(200ml) 14	150 cal
Crisp, elegant, well balanced		
Arizona Sake -Seasonal- 15-17.0%	(370ml) 35	245 cal
Arizona Sake -Navajo Tea- 15-17.0%	(370ml) 35	245 cal
White Peach Sake 5.0%	(12oz) 8	140 cal
Lychee Sake 5.0%	(12oz) 8	140 cal

SOFT DRINKS

	price	cal
Coca-Cola	(20oz) 4.00	140 cal
Diet Coke	(20oz) 4.00	0 cal
Sprite	(20oz) 4.00	146 cal
Tonic	(20oz) 4.00	124 cal
Soda Water	(20oz) 4.00	0 cal
Lemonade	(20oz) 4.00	99 cal
Strawberry Lemonade	(20oz) 5.00	120 cal
Shirley Temple	(20oz) 5.00	166 cal
Mountain Blast Powerade	(20oz) 4.00	80 cal
San Pellegrino	(500ml) 5.00	0 cal
Ramune Original and Flavored	(240ml) 4.50	80 cal
Fiji	(330ml) 4.00	0 cal
Iced Green Tea	(20oz) 4.00	0 cal
Hot Green Tea	(8oz) 4.00	0 cal
Iced Black Tea	(20oz) 4.00	0 cal
Juice -Apple Orange Pineapple-	(16oz) 4.00	120 cal

25 APR 16 AM 9 55 AZOLLO



**RECORDS REQUIRED
FOR AUDIT
RESTAURANT/HOTEL/MOTEL**

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

Type or Print with **Black Ink**

In the event of an audit, you will be asked to provide to the Department any documents necessary to determine Compliance with A.R.S. §4-205.02(G). Such documents requested may include however, are not limited to:

Jinya Ramen Bar

1. Name of restaurant (Please print): _____
2. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises.
3. A list of **all** food and liquor vendors
4. The restaurant menu used during the audit period
5. A price list for alcoholic beverages during the audit period
6. Mark-up figures on food and alcoholic products during the audit period
7. A recent, **accurate** inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
8. Monthly Inventory Figures - beginning and ending figures for food and liquor
9. Chart of accounts (copy)
10. Financial Statements-Income Statements-Balance Sheets

11. General Ledger

A. Sales Journals/Monthly Sales Schedules

- 1) Daily sales Reports (to include the name of each waitress/waiter, bartender, etc. with sales for that day)
- 2) Daily Cash Register Tapes - Journal Tapes and Z-tapes
- 3) Dated Guest Checks
- 4) Coupons/Specials/Discounts
- 5) Any other evidence to support income from food and liquor sales

B. Cash Receipts/Disbursement Journals

- 1) Daily Bank Deposit Slips
- 2) Bank Statements and canceled checks

12. Tax Records

- A. Transaction Privilege Sales, Use and Severance Tax Return (copies)
- B. Income Tax Return - city, state and federal (copies)
- C. Any supporting books, records, schedules or documents used in preparation of tax returns

13. **Payroll Records**

*25 APR 16 AM 9:54 AZILLC

- A. Copies of all reports required by the State and Federal Government
- B. Employee Log (A.R.S. §4-119)
- C. Employee time cards (actual document used to sign in and out each work day)
- D. Payroll records for all employees showing hours worked each week and hourly wages

14. **Off-site Catering Records** (must be complete and separate from restaurant records)

- A. All documents which support the income derived from the sale of food off the license premises.
- B. All documents which support purchases made for food to be sold off the licensed premises.
- C. All coupons/specials/discounts

The sophistication of record keeping varies from establishment to establishment. Regardless of each licensee's accounting methods, the amount of gross revenue derived from the sale of food and liquor must be substantially documented.

**REVOCAION OF YOUR LIQUOR LICENSE MAY OCCUR IF YOU FAIL TO COMPLY WITH
A.R.S. §4-210(A)7 AND A.R.S. §4-205.02(G).**

A.R.S. §4-210(A)7


The licensee fails to keep for two years and make available to the department upon reasonable request all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of spirituous liquors and, in the case of a restaurant or hotel-motel licensee, all invoices, records, bills or other papers and documents relating to the purchase, sale and delivery of food.

A.R.S. §4-205.02(G)

For the purpose of this section:

- 1. "Restaurant" means an establishment which derives **at least forty percent (40%)** of its gross revenue from the sale of food
- 2. "Gross revenue" means the revenue derived from all sales of food and spirituous liquor on the licensed premises regardless of whether the sales of spirituous liquor are made under a restaurant license issued pursuant to this section or under any other license that has been issued for the premises pursuant to this article.

I, (Print Full Name) Daradee Olson, 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 

MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH RECORDS REQUIRED BY THE STATE



Arizona Dept. of Liquor Licenses and Control
https://www.azliquor.gov
(602) 542-5141

25 APR 16 AM 9:55 HELLLO

DLCC USE ONLY

Fee:	
Job #:	346343
Date Accepted:	4-16-25
CSR:	[REDACTED]

Personal Information Questionnaire

Fp pending
805-676

ATTENTION APPLICANT: This is a legally binding document. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

THE COMPLETED QUESTIONNAIRE NEEDS TO BE SUBMITTED TO THE DEPARTMENT ALONG WITH A \$22. FEE, AND FD-258 FINGERPRINT CARD, THAT HAS BEEN SEALED IN AN ENVELOPE, AND SIGNED OR INITIALED BY THE FINGERPRINT TECHNICIAN, MUST INCLUDE THE FINGERPRINT VERIFICATION FORM. MUST BE COMPLETED BY A RECOGNIZED FINGERPRINT SERVICE OR LAW ENFORCEMENT AGENCY.

Agent: a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee. An agent is not a manager.
A.R.S. §4-202(A).

Controlling Person: person directly or indirectly possessing control of an applicant or licensee.
A.R.S. §4-101(10).

Manager: An individual (not an entity) approved by the Department of Liquor who has the authority to organize, direct, carry out, control or to otherwise operate the day-to-day operations of a liquor-licensed business.
A.R.S. §4-101(22) and A.R.S. §4-202(C)

SECTION - 1 INDIVIDUAL INFORMATION

AGENT CONTROLLING PERSON MANAGER

- Name: Olson Daradee Rae ^{AP}
Last First Middle
- Social Security #: [REDACTED] Birth Date: [REDACTED]
(NOT a public record) (NOT a public record)
- Driver's License #: [REDACTED] State Issued: [REDACTED]
(NOT a public record)
- Are you a resident of Arizona? Yes No Date of residency: 10 / 01 / 1999
- Email address: daradeeo26@gmail.com
- Home Address: [REDACTED]
- Daytime phone #: 480-242-4430 Alternative phone #: 480-651-0318

SECTION 2 – LICENSED BUSINESS INFORMATION

- Liquor License #: _____
- Business Name (doing business as): Jinga Ramen Bar
- Business Address: 8156 W Happy Valley Rd #10 Peoria AZ 85383

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

Must attach copies of Basic and Management Title 4 training certificates for person managing the day to day operation of the licensed business.

Who is managing the day to day operations? Agent Controlling Person Manager

Name of persons who will be handling the day to day operations: Jason Seremak

SECTION 4 – BACKGROUND

If you answer "YES" to any Question 1 through 5 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 1-5 MAY NOT BE ACCEPTED

- 1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes No
- 2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes No
- 3. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked, or suspended in or outside of Arizona within the last 5 years? A.R.S. §4-202(D) Yes No
- 4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets) A.R.S. §4-202, 4-210 Yes No
**Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.*
- 5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes No

I, (Print Full Name) Daradee R Olson 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.

Signature



Date: 4.9.25



FINGERPRINT VERIFICATION FORM

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

DLLC USE ONLY

Job #:	346343
Date Accepted:	4-16-25
CSR:	[REDACTED]

ATTENTION FINGERPRINT TECHNICIAN:

Please follow the instructions below for fingerprinting this applicant.

1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
3. Fill out the information in the boxes below. **Please print clearly.**
4. Once the prints have been taken, place the fingerprint card and this form into the envelope and seal it. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant.
Do not give the applicant the fingerprint card without first sealing it inside the envelope.
5. **Write applicants name on front of sealed envelope.**

PRINT the following information:

Date	4/16/25	Name of Applicant:	Daradee Olson
Name of Fingerprint Technician:		Kylie Miller	
Fingerprint technician's Signature:		[REDACTED]	
Fingerprint technician's Agency/company Name:		Phone Number:	
ALC		602 730 2075	
Type of Photo ID Provided (check one):			
<input checked="" type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please specify)			

I am the current owner and operator of the following locations.

1. 130 S. Arizona Avenue Ste#1
Chandler, AZ 85225

2. 5120 N. Central Ave Ste#100
Phoenix, AZ 85012



4.9.2025



ALIEN STATUS

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

Type or Print with **Black Ink**

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrant, and certain aliens paroled into the United States are eligible to receive state, or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 41-1080 requires, in general, that a person applying for a license must submit documentation to the license agency that satisfactorily demonstrates the applicant's presence in the United States is authorized under federal law.

Directions: All applicants must complete Sections I, II, and IV. Applicants who are not U.S. citizens or nationals must also complete Section III.

Submit this completed form and a copy of one or more document(s) from the attached "Evidence of U.S. Citizenship, U.S. National Status, or Alien Status" with your application for license or renewal. If the document you submit does not contain a photograph, you must also provide a government issued document that contains your photograph. You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

SECTION I - APPLICANT INFORMATION

APPLICANT NAME (Print or type) Daradee Olson

SECTION II - CITIZENSHIP OR NATIONAL STATUS DECLARATION

Are you a citizen or national of the United States? Yes No - If **yes**, indicate place of birth:

City [REDACTED] State [REDACTED] COUNTRY USA

If you answered **Yes, 1)** Attach a legible copy of a document from the list below.

2) Name of document: Drivers License

If you answered **No**, you must complete Sections III.

APR 16 AM 9 55 AZULLC

EVIDENCE OF U.S. CITIZENSHIP, U.S. NATIONAL STATUS, OR ALIEN STATUS

You must submit supporting legal documentation (i.e. marriage certificate) if the name on your evidence is not the same as your current legal name.

Evidence showing authorized presence in the United State includes the following:

1. An Arizona driver license issued after 1996 or an Arizona non-operating identification card.
2. A driver license issued by a state that verifies lawful presence in the United States.
3. A birth certificate or delayed birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after Jan. 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time)
4. A United States certificate of birth abroad.
5. A United States passport. ***Passport must be signed***
6. A foreign passport with a United States visa.
7. An I-94 form with a photograph.
8. A United States citizenship and immigration services employment authorization document or refugee travel document.
9. A United States certificate of naturalization.
10. A United States certificate of citizenship.
11. A tribal certificate of Indian blood.
12. A tribal or bureau of Indian affairs affidavit of birth.
13. Any other license that is issued by the federal government, any other state government, an agency of this state or a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.

SECTION III – QUALIFIED ALIEN DECLARATION

Applicants who are not citizens or nationals of the United States. Please indicate alien status by checking the appropriate box. Attach a legible copy of a document from the attached list or other document as evidence of your status.

Drivers License
Name of document provided

Qualified Alien Status (8 U.S.C. §§ 1621(a)(1), -1641(b) and (c))

- 1. An alien lawfully admitted for permanent residence under the Immigration and Nationality Act (INA)
- 2. An alien who is granted asylum under Section 208 of the INA.
- 3. A refugee admitted to the United States under Section 207 of the INA.
- 4. An alien paroled into the United States for at least one year under Section 212(d)(5) of the INA.
- 5. An alien whose deportation is being withheld under Section 243(h) of the INA.
- 6. An alien granted conditional entry under Section 203(a)(7) of the INA as in effect prior to April 1, 1980.
- 7. An alien who is a Cuban/Haitian entrant.
- 8. An alien who has, or whose child or child's parent is a "battered alien" or an alien subject to extreme cruelty in the United States

Nonimmigrant Status (8 U.S.C. § 1621(a)(2))

- 9. A nonimmigrant under the Immigration and Nationality Act [8 U.S.C § 1101 et seq.] Non-immigrants are persons who have temporary status for a specific purpose. See 8 U.S.C § 1101(a)(15).

Alien Paroled into the United States for Less Than One Year (8 U.S.C. § 1621(a)(3))

- 10. An alien paroled into the United States for less than one year under Section 212(d)(5) of the INA

Other Persons (8 U.S.C § 1621(c)(2)(A) and (C))

- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States include the Republic of the Marshall Islands, Republic of Palau and the Federate States of Micronesia. 48 U.S.C. § 1901 et seq.];
- 13. A foreign national not physically present in the United States.
- 14. **Otherwise Lawfully Present**
- 15. A person not described in categories 1-13 who is otherwise lawfully present in the United States.

PLEASE NOTE: The federal Personal Responsibility and Work Opportunity Reconciliation Act may make persons who fall into this category ineligible for licensure. See 8 U.S.C. §

Daradee Olson
Print Name



4/15/25
Date



Arizona Dept. of Liquor Licenses and Control
https://www.azliquor.gov
(602) 542-5141

DLIC USE ONLY

Fee:	
Job #:	346343
Date Accepted:	4-16-25
CSR:	[REDACTED]

fp pending
805-6716

Personal Information Questionnaire

ATTENTION APPLICANT: This is a legally binding document. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

THE COMPLETED QUESTIONNAIRE NEEDS TO BE SUBMITTED TO THE DEPARTMENT ALONG WITH A \$22. FEE, AND FD-258 FINGERPRINT CARD, THAT HAS BEEN SEALED IN AN ENVELOPE, AND SIGNED OR INITIALED BY THE FINGERPRINT TECHNICIAN, MUST INCLUDE THE FINGERPRINT VERIFICATION FORM. MUST BE COMPLETED BY A RECOGNIZED FINGERPRINT SERVICE OR LAW ENFORCEMENT AGENCY.

Agent: a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee. An agent is not a manager.

A.R.S. §4-202(A).

Controlling Person: person directly or indirectly possessing control of an applicant or licensee.

A.R.S. §4-101(10).

Manager: An individual (not an entity) approved by the Department of Liquor who has the authority to organize, direct, carry out, control or to otherwise operate the day-to-day operations of a liquor-licensed business.

A.R.S. §4-101(22) and A.R.S. §4-202(C)

SECTION - 1 INDIVIDUAL INFORMATION

AGENT CONTROLLING PERSON MANAGER

1. Name: Olson Candace Rae ^(A9)
Last First Middle

2. Social Security #: [REDACTED] Birth Date: [REDACTED]
(NOT a public record) (NOT a public record)

3. Driver's License #: [REDACTED] State Issued: [REDACTED]
(NOT a public record)

5. Are you a resident of Arizona? Yes No Date of residency: 01 / 05 / 2009

6. Email address: candyshopon@sbcglobal.net

7. Home Address: [REDACTED]

8. Daytime phone #: 650-483-7521 Alternative phone #: 480-242-4430

SECTION 2 – LICENSED BUSINESS INFORMATION

1. Liquor License #: _____

2. Business Name (doing business as): Jinga Ramen Bar

3. Business Address: 8150 W Happy Valley Rd #10 Peoria AZ 85303

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

25 APR 16 AM 9:56 AZD LLC

Must attach copies of Basic and Management Title 4 training certificates for person managing the day to day operation of the licensed business.

Who is managing the day to day operations? Agent Controlling Person Manager

Name of persons who will be handling the day to day operations: Jason Seremak

SECTION 4 – BACKGROUND

If you answer "YES" to any Question 1 through 5 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 1-5 MAY NOT BE ACCEPTED

- 1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes No
- 2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes No
- 3. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked, or suspended in or outside of Arizona within the last 5 years? *A.R.S. §4-202(D)* Yes No
- 4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets) *A.R.S. §4-202, 4-210*
**Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.* Yes No
- 5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes No

I, (Print Full Name) Candace R Olson 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.

Signature:  Date: 4.9.25



FINGERPRINT VERIFICATION FORM

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

DLLC USE ONLY	
Job #:	346343
Date Accepted:	4-16-25
CSR:	[REDACTED]

ATTENTION FINGERPRINT TECHNICIAN:

Please follow the instructions below for fingerprinting this applicant.

1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
3. Fill out the information in the boxes below. **Please print clearly.**
4. Once the prints have been taken, place the fingerprint card and this form into the envelope and seal it. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant.
Do not give the applicant the fingerprint card without first sealing it inside the envelope.
5. **Write applicants name on front of sealed envelope.**

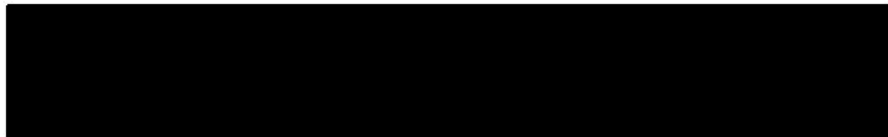
PRINT the following information:

Date 4/16/25	Name of Applicant: Candace Olson
Name of Fingerprint Technician: Kylie Miller	
Fingerprint technician's signature [REDACTED]	
Fingerprint technician's Agency/company Name: ALC	Phone Number: 4807300075
Type of Photo ID Provided (check one): <input checked="" type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please specify)	

I am the current owner and operator of the following locations.

1. 130 S. Arizona Avenue Ste#1
Chandler, AZ 85225

2. 5120 N. Central Ave Ste#100
Phoenix, AZ 85012



4.9.25



Arizona Dept. of Liquor Licenses and Control
https://www.azliquor.gov
(602) 542-5141

DLLC USE ONLY

Fee:	
Job #:	346343
Date Accepted:	4-16-25
CSR:	[REDACTED]

Personal Information Questionnaire

fp pending
805-614

ATTENTION APPLICANT: This is a legally binding document. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

THE COMPLETED QUESTIONNAIRE NEEDS TO BE SUBMITTED TO THE DEPARTMENT ALONG WITH A \$22. FEE, AND FD-258 FINGERPRINT CARD, THAT HAS BEEN SEALED IN AN ENVELOPE, AND SIGNED OR INITIALED BY THE FINGERPRINT TECHNICIAN, MUST INCLUDE THE FINGERPRINT VERIFICATION FORM. MUST BE COMPLETED BY A RECOGNIZED FINGERPRINT SERVICE OR LAW ENFORCEMENT AGENCY.

Agent: a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee. An agent is not a manager.
A.R.S. §4-202(A).

Controlling Person: person directly or indirectly possessing control of an applicant or licensee.
A.R.S. §4-101(10).

Manager: An individual (not an entity) approved by the Department of Liquor who has the authority to organize, direct, carry out, control or to otherwise operate the day-to-day operations of a liquor-licensed business.
A.R.S. §4-101(22) and A.R.S. §4-202(C)

SECTION - 1 INDIVIDUAL INFORMATION

AGENT CONTROLLING PERSON MANAGER

- Name: Olson Stuart Everett ^{AP}
Last First Middle
- Social Security #: [REDACTED] Birth Date: [REDACTED]
(NOT a public record) (NOT a public record)
- Driver's License #: [REDACTED] State Issued: [REDACTED]
(NOT a public record)
- Are you a resident of Arizona? Yes No Date of residency: 01 / 05 / 2009
- Email address: solson246@gmail.com
- Home Address: [REDACTED]
- Daytime phone #: 650-888-1647 Alternative phone #: 480-242-4430

SECTION 2 – LICENSED BUSINESS INFORMATION

- Liquor License #: _____
- Business Name (doing business as): Jinya Ramen Bar
- Business Address: 8156 W Happy Valley Rd #10 Peoria Az 85393

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

Must attach copies of Basic and Management Title 4 training certificates for person managing the day to day operation of the licensed business.

Who is managing the day to day operations? Agent Controlling Person Manager


Name of persons who will be handling the day to day operations: Jason Seremak

SECTION 4 – BACKGROUND

If you answer "YES" to any Question 1 through 5 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 1-5 MAY NOT BE ACCEPTED

- 1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes No
- 2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes No
- 3. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked, or suspended in or outside of Arizona within the last 5 years? *A.R.S. §4-202(D)* Yes No
- 4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets) *A.R.S. §4-202, 4-210*
**Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.* Yes No
- 5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes No

I, (Print Full Name) Stuart E Olson 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.

Signature:  Date: 04-09-25



FINGERPRINT VERIFICATION FORM

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

DLLC USE ONLY	
Job #:	346343
Date Accepted:	4-16-25
CSR:	[REDACTED]

ATTENTION FINGERPRINT TECHNICIAN:

Please follow the instructions below for fingerprinting this applicant.

1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
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4. Once the prints have been taken, place the fingerprint card and this form into the envelope and seal it. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant.
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5. **Write applicants name on front of sealed envelope.**

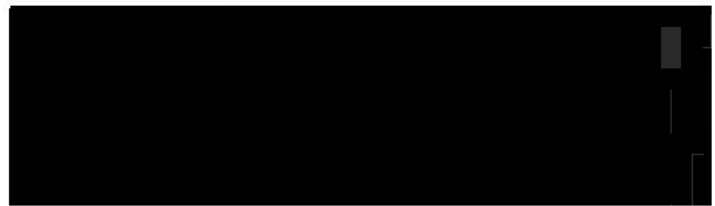
PRINT the following information:

Date 4/9/25	Name of Applicant: Stuart Olson		
Name of Fingerprint Technician: Kylie Miller			
Fingerprint technician's Signature: [REDACTED]			
Fingerprint technician's Agency/company Name: Alic		Phone Number: 480 730 2015	
Type of Photo ID Provided (check one):			
<input checked="" type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please specify)			

I am the current owner and operator of the following locations.

1. 130 S. Arizona Avenue Ste#1
Chandler, AZ 85225

2. 5120 N. Central Ave Ste#100
Phoenix, AZ 85012



04-09-25



Arizona Dept. of Liquor Licenses and Control
https://www.azliquor.gov
(602) 542-5141

DLLC USE ONLY

Fee:	
Job #:	346343
Date Accepted:	4-16-25
CSR:	[REDACTED]

Personal Information Questionnaire

fp pending
805-1076

ATTENTION APPLICANT: This is a legally binding document. An investigation of your background will be conducted. Incomplete applications will not be accepted. False or misleading answers may result in the denial or revocation of a license or permit and could result in criminal prosecution.

THE COMPLETED QUESTIONNAIRE NEEDS TO BE SUBMITTED TO THE DEPARTMENT ALONG WITH A \$22. FEE, AND FD-258 FINGERPRINT CARD, THAT HAS BEEN SEALED IN AN ENVELOPE, AND SIGNED OR INITIALED BY THE FINGERPRINT TECHNICIAN, MUST INCLUDE THE FINGERPRINT VERIFICATION FORM. MUST BE COMPLETED BY A RECOGNIZED FINGERPRINT SERVICE OR LAW ENFORCEMENT AGENCY.

Agent: a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee. An agent is not a manager.
A.R.S. §4-202(A).

Controlling Person: person directly or indirectly possessing control of an applicant or licensee.
A.R.S. §4-101(10).

Manager: An individual (not an entity) approved by the Department of Liquor who has the authority to organize, direct, carry out, control or to otherwise operate the day-to-day operations of a liquor-licensed business.
A.R.S. §4-101(22) and A.R.S. §4-202(C)

SECTION - 1 INDIVIDUAL INFORMATION

AGENT CONTROLLING PERSON MANAGER

1. Name: Seremak Jason William (AP)
Last First Middle

2. Social Security #: [REDACTED] Birth Date: [REDACTED]
(NOT a public record) (NOT a public record)

3. Driver's License #: [REDACTED] State Issued [REDACTED]
(NOT a public record)

5. Are you a resident of Arizona? Yes No Date of residency: 05 / 01 / 2005

6. Email address: jason22.jinya@gmail.com

7. Home Address: [REDACTED]

8. Daytime phone #: 480-651-0412 Alternative phone #: 480-242-4430

SECTION 2 - LICENSED BUSINESS INFORMATION

1. Liquor License #: _____

2. Business Name (doing business as): Jinya Ramen Bar

3. Business Address: 8156 W Happy Valley Rd # 10 Peoria AZ 85383

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS

Must attach copies of Basic and Management Title 4 training certificates for person managing the day to day operation of the licensed business.

Who is managing the day to day operations? Agent Controlling Person Manager


Name of persons who will be handling the day to day operations: Jason Seremak

SECTION 4 – BACKGROUND

If you answer "YES" to any Question 1 through 5 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 1-5 MAY NOT BE ACCEPTED

- 1. Have you owned, or been a controlling person of any entities that held a liquor license in Arizona, or any jurisdiction, in the past 5 years? Yes No
- 2. Have you been cited, arrested, indicted, convicted, or required to appear in court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past 5 years? Yes No
- 3. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked, or suspended in or outside of Arizona within the last 5 years? *A.R.S. §4-202(D)* Yes No
- 4. Have you had ANY administrative law citations, compliance actions, or consents, in any jurisdiction in the past 5 years? (Do not include civil traffic tickets) *A.R.S. §4-202, 4-210*
**Administrative Law Violations are any civil penalties, fines, suspension, or revocations of your liquor license.* Yes No
- 5. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes No

I, (Print Full Name) Jason Seremak 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.

Signature:  Date: 4.9.25

Certificate # AZB-OR-01243632

Certificate of Completion For Title 4 BASIC Liquor Law Training

<input checked="" type="checkbox"/> On-site
<input type="checkbox"/> Off-site
<input type="checkbox"/> On and off-site

A Certificate of Completion will be issued to the individual by the Arizona Department of Liquor Control. Certificates are prepared by a state-approved training provider and, when issued, the Training Provider signs the certificate. The State requires BASIC Title 4 training only for individuals who are not currently licensed as a liquor licensee. Persons required to have BASIC Title 4 training are listed in the Division of Liquor Control's website. The training is provided in accordance with the requirements of the Arizona Department of Liquor Control. Through the training, individuals are prepared for the testing component of the

Student Information

Jason Soremak



04/19/2025
Training Completion Date

04/09/2026
Certificate Expiration Date
(This date is not applicable)

Training Provider Information

360training.com Inc.

Company Name

6801 Bridge Point Parkway, Suite 100, Avizo, TX 75730
Mailing Address

(877) 801-2235

Telephone Number (Area Number)

I, Samantha Montalano, certify that the above named individual did successfully complete

the 4 BASIC training in accordance with A.R.S. 54-11253(D) and Arizona Administrative Code (A.A.C.) 54-11253-100 using training course content and materials approved by the Arizona Department of Liquor Control. I understand that failure of the Certificate of Completion will result in the revocation of liquor licenses for the Title 4 Training Provider named in the section provided by A.A.C. 54-11253-100(B) and (F).

Samantha Montalano
Signature

04/10/2025

Day Month Year

Training Provider: 360training.com Inc. (AZB-OR-01243632) is currently listed as the only training provider for the State of Arizona. If you are a provider and wish to be listed, please contact the Department of Liquor Control at (602) 974-2235.

Arizona Administrative Code 54-11253-100	Department (Article 5)	Fee (Article 4)	Class & When Fee (Article 1)
Department (Article 5)	State (When Fee) (Article 4)	Private (When Fee) (Article 4)	Professional (When Fee) (Article 1)
Department (Article 5)	State (When Fee) (Article 4)	Private (When Fee) (Article 4)	Professional (When Fee) (Article 1)

Each license holder is required to complete the 4 BASIC training in accordance with the requirements of the Department of Liquor Control. The 4 BASIC training is provided in accordance with the requirements of the Department of Liquor Control. The 4 BASIC training is provided in accordance with the requirements of the Department of Liquor Control.

Certificate # _____

25 APR 16 AM 9:55 AZDILLC

Certificate of Completion For Title 4 **MANAGEMENT** Liquor Law Training

A Certificate of Completion must be on a form provided by the Arizona Department of Liquor. Certificates are completed by a state-approved training provider and, when issued, the Certificate is signed by the course participant.

Basic Title 4 training is a prerequisite for MANAGEMENT Title 4 training. A valid Certificate of Completion for BASIC Title 4 training must be on file at the Department of Liquor and satisfactory completion of a State-approved BASIC Title 4 course must be verified by the training provider prior to issuing a Certificate of Completion for MANAGEMENT Title 4 training.

A replacement Certificate of Completion for Title 4 training must be available through the training provider for two years after the training completion date.

Student Information

Jason Seremak

03/12/2025

Training Completion Date

03/11/2028

Certificate Expiration Date
(three years from completion date)

Training Provider Information

360training.com Inc.

Company Name

6504 Bridge Point Parkway, Suite 100, Austin, TX 78730

Mailing Address

(877) 881-2235

Daytime Contact Phone Number

I, Samantha Montalbano, certify that the above named individual did successfully complete
Instructor Name (please print)

Title 4 MANAGEMENT Training in accordance with A.R.S. §4-112(G)(2) and Arizona Administrative Code (A.A.C.)R19-1-103 using training course content and materials approved by the Arizona Department of Liquor Licenses and Control. I understand that misuse of this Certificate of Completion can result in the revocation of State-approval for the Title 4 Training Provider named in this section as provided by A.A.C. R19-1-103(E) and (F).

[Signature]
Instructor Signature

03/12/2025

Day Mo Year

Persons required to complete BASIC & MANAGEMENT Title 4 training: 1) owner(s) actively involved in the daily business operations of a liquor-licensed business of a series listed below
2) licensees, agents and managers actively involved in the daily business operations of a liquor-licensed business of a series listed below

In-state Microbrewery (series 3)
Conveyance (series 8)
Restaurant (series 12)

Government (series 5)
Liquor Store (series 9)
In-state Farm Winery (series 13)

Bar (series 6)
Private Club (series 14)

Beer & Wine Bar (series 7)
Hotel/Motel w/restaurant (series 11)
Beer & Wine Store (series 10)

Liquor license applications (initial and renewal) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.

The questionnaire (which designates a manager to a location) and the agent change form (which assigns a new agent to active liquor licenses) are not complete until valid Certificates of Completion for all required persons have been submitted to the Department of Liquor.



FINGERPRINT VERIFICATION FORM

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

DLLC USE ONLY	
Job #:	346343
Date Accepted:	4-16-25
CSR:	[REDACTED]

ATTENTION FINGERPRINT TECHNICIAN:

Please follow the instructions below for fingerprinting this applicant.

1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
3. Fill out the information in the boxes below. **Please print clearly.**
4. Once the prints have been taken, place the fingerprint card and this form into the envelope and seal it. Please write your name or identification across the edge of the seal. Return the sealed envelope to the applicant.
Do not give the applicant the fingerprint card without first sealing it inside the envelope.
5. **Write applicants name on front of sealed envelope.**

PRINT the following information:

Date 4/9/25	Name of Applicant: Jason Sevensat
Name of Fingerprint Technician: Kylie Miller	
Fingerprint technician's Signature: [REDACTED]	
Fingerprint technician's Agency/company Name: DLIC	Phone Number: 6023022675
Type of Photo ID Provided (check one):	
<input checked="" type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please specify)	