

State of Arizona
Department of Liquor Licenses and Control

Created 08/14/2025 @ 09:55:23 AM

Local Governing Body Report

LICENSE

Number:		Type:	012 RESTAURANT
Name:	BISCUITS CAFE		
State:	Pending		
Issue Date:		Expiration Date:	
Original Issue Date:			
Location:	24812 N 67TH AVENUE PEORIA, AZ 85383 USA		
Mailing Address:			
Phone:	(623)215-4869		
Alt. Phone:			
Email:	DYLANLIGATICH@YAHOO.COM		

AGENT

Name:	DYLAN EDWIN LIGATICH
Gender:	Male
Correspondence Address:	320 N MAIN AVENUE SUITE 203 RESHMAN, OR 97080 USA
Phone:	(907)232-1024
Alt. Phone:	
Email:	DYLANLIGATICH@YAHOO.COM

OWNER

Name:	DDDL LLC	
Contact Name:	DYLAN EDWIN LIGATICH	
Type:	LIMITED LIABILITY COMPANY	
AZ CC File Number:		State of Incorporation:
Incorporation Date:		
Correspondence Address:	320 N MAIN AVENUE SUITE 203 RESHMAN, OR 97080 USA	
Phone:	(503)929-3983	
Alt. Phone:		
Email:	DAVIDLIGATICH@YAHOO.COM	

Officers / Stockholders

Name:
DAVID EDWIN LIGATICH
DANA LEE LIGATICH

Title:
CFO
President

% Interest:
50.00
50.00

DDDL LLC - CFO

Name: DAVID EDWIN LIGATICH
Gender: Male
Correspondence Address: 320 N MAIN AVENUE
SUITE 203
RESHMAN, OR 97080
USA
Phone: (503)929-3983
Alt. Phone:
Email: DAVIDLIGATICH@YAHOO.COM

DDDL LLC - President

Name: DANA LEE LIGATICH
Gender: Female
Correspondence Address: 320 N MAIN AVENUE
SUITE 203
RESHMAN, OR 97080
USA
Phone: (503)839-5620
Alt. Phone:
Email: DANALIGATICH@YAHOO.COM

APPLICATION INFORMATION

Application Number: 356786
Application Type: New Application
Created Date: 08/07/2025



QUESTIONS & ANSWERS

012 Restaurant

- 1) Are you applying for an Interim Permit (INP)?
Yes
What date are you taking ownership? Please upload the Interim Permit Notary page when you reach the upload page.
8/14/2025
- 2) Are you one of the following? Please indicate below.
Property Tenant
Subtenant
Property Owner
Property Purchaser
Property Management Company
OWNER
- 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.
0
- 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)?
NON-CONTIGUOUS
- 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?
BREAKFAST RESTAURANT

State of Arizona
Department of Liquor Licenses and Control

Created 08/14/2025 @ 09:46:15 AM

Local Governing Body Report

LICENSE

Number:	INP070034402	Type:	INP INTERIM PERMIT
Name:	BISCUITS CAFE		
State:	Active		
Issue Date:	08/14/2025	Expiration Date:	11/20/2025
Original Issue Date:	08/14/2025		
Location:	24812 N 67TH AVENUE PEORIA, AZ 85383 USA		
Mailing Address:			
Phone:	(623)215-4869		
Alt. Phone:			
Email:	DYLANLIGATICH@YAHOO.COM		

AGENT

Name:	DYLAN EDWIN LIGATICH
Gender:	Male
Correspondence Address:	320 N MAIN AVENUE SUITE 203 RESHMAN, OR 97080 USA
Phone:	(907)232-1024
Alt. Phone:	
Email:	DYLANLIGATICH@YAHOO.COM

OWNER

Name:	DDDL LLC	
Contact Name:	DYLAN EDWIN LIGATICH	
Type:	LIMITED LIABILITY COMPANY	
AZ CC File Number:		State of Incorporation:
Incorporation Date:		
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Name:
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DANA LEE LIGATICH

Title:
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% Interest:
50.00
50.00

DDDL LLC - CFO

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RESHMAN, OR 97080
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DDDL LLC - President

Name: DANA LEE LIGATICH
Gender: Female
Correspondence Address: 320 N MAIN AVENUE
SUITE 203
RESHMAN, OR 97080
USA
Phone: (503)839-5620
Alt. Phone:
Email: DANALIGATICH@YAHOO.COM

APPLICATION INFORMATION

Application Number: 356787
Application Type: New Application
Created Date: 08/07/2025

QUESTIONS & ANSWERS

INP Interim Permit

- 1) Enter License Number currently at location 02070014153
- 2) Is the license currently in use? Yes
- 3) Will you please submit section 5, page 6, of the license application when you reach the upload page? Yes



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

FOR DLIC USE ONLY

INP number:
Date Approved:
Expiration:
LC:

**INTERIM PERMIT (INP)
NOTARY PAGE**
\$100.00 INTERIM PERMIT APPLICATION FEE

SECTION 5, PAGE 2, of the license application

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)

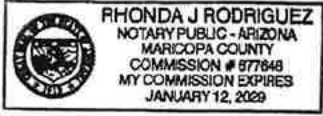
1. Enter license number currently at the location: 012070014153

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

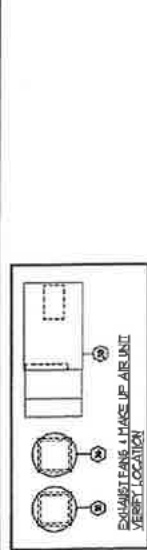
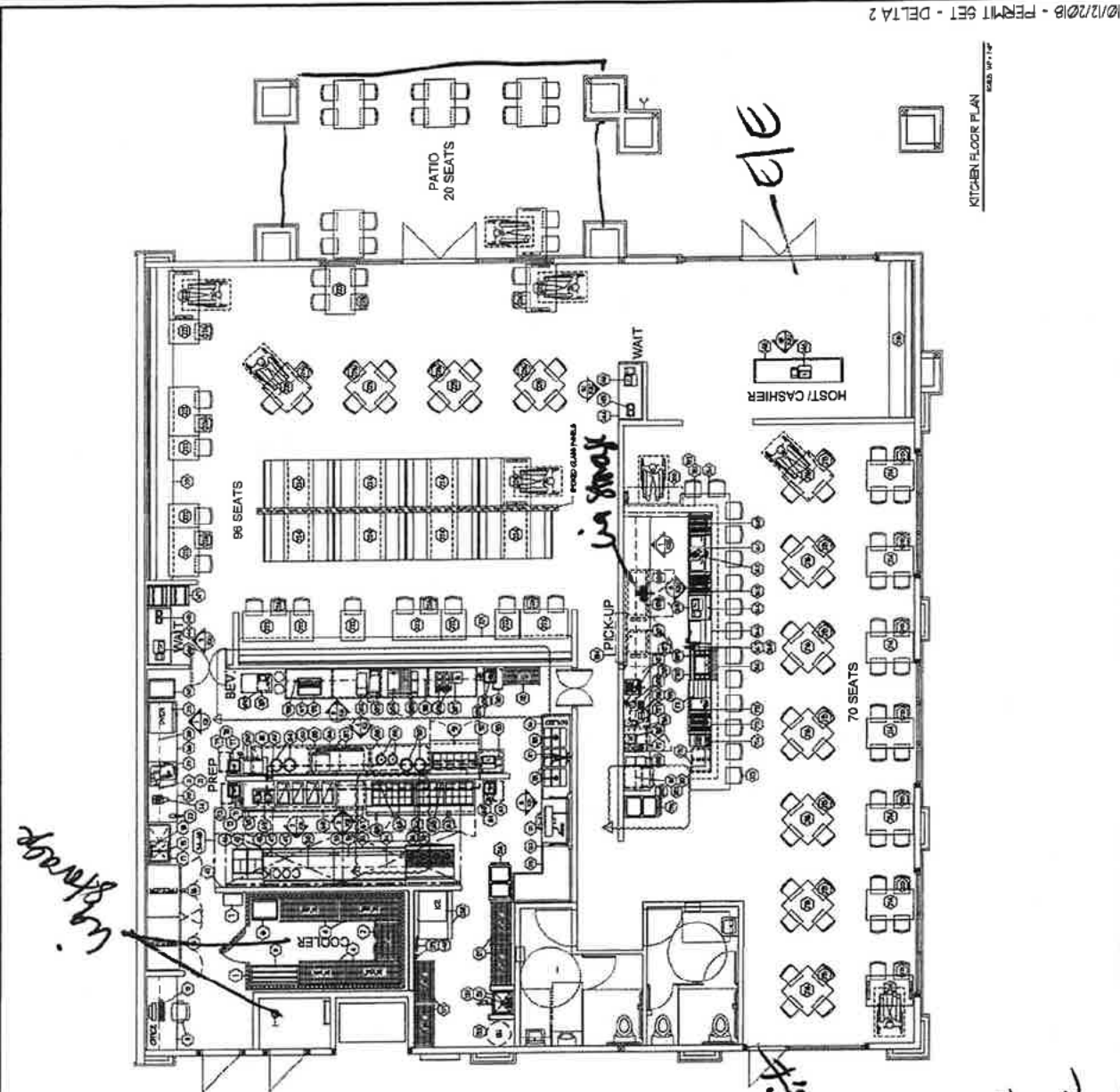
I, (Print Full Name) Jeffrey C Miller hereby declare that I am the Individual, Owner, Agent, or Controlling Person on the stated license and location.

Signature: _____

State of Arizona
 County of Maricopa
 Signed before me on this 5th day of August, 2025
 Notary Signature _____
 My commission expires on January day of 12th, 2027


 RHONDA J RODRIGUEZ
 NOTARY PUBLIC - ARIZONA
 MARICOPA COUNTY
 COMMISSION # 877848
 MY COMMISSION EXPIRES
 JANUARY 12, 2029
 Notary Seal

1	OWNER	BARGREEN ELLINGSON
2	ARCHITECT	M. JOHNSON
3	DATE	10/12/2018
4	PROJECT NUMBER	10446
5	PROJECT NAME	BISCUITS CAFE
6	PROJECT ADDRESS	24612 N 87TH AVENUE, PEORIA, AZ 85383
7	PROJECT PHONE	
8	PROJECT FAX	
9	PROJECT EMAIL	
10	PROJECT WEBSITE	
11	PROJECT URL	
12	PROJECT CONTACT	
13	PROJECT CONTACT PHONE	
14	PROJECT CONTACT FAX	
15	PROJECT CONTACT EMAIL	
16	PROJECT CONTACT WEBSITE	
17	PROJECT CONTACT URL	
18	PROJECT CONTACT ADDRESS	
19	PROJECT CONTACT CITY	
20	PROJECT CONTACT STATE	
21	PROJECT CONTACT ZIP	
22	PROJECT CONTACT COUNTRY	
23	PROJECT CONTACT PROJECT NUMBER	
24	PROJECT CONTACT PROJECT NAME	
25	PROJECT CONTACT PROJECT ADDRESS	
26	PROJECT CONTACT PROJECT CITY	
27	PROJECT CONTACT PROJECT STATE	
28	PROJECT CONTACT PROJECT ZIP	
29	PROJECT CONTACT PROJECT COUNTRY	
30	PROJECT CONTACT PROJECT URL	



GENERAL NOTES

1. IT SHALL BE NOTED BY THE GENERAL CONTRACTOR AND ALL SUB-CONTRACTORS THAT THE SET OF PLANS AND THE INFORMATION CONTAINED HEREIN IS NOT TO BE USED FOR ANY OTHER PROJECTS WITHOUT THE WRITTEN PERMISSION OF BARGREEN ELLINGSON. ALL APPLICABLE CODES AND ORDINANCES AND TO REPORT ALL WORK TO THE JURISDICTIONAL AGENCIES.
2. IT SHALL BE THE RESPONSIBILITY OF THE GENERAL CONTRACTOR AND ALL SUB-CONTRACTORS TO VERIFY THE ACTUAL LOCATION AND DEPTH OF ALL UTILITIES BEFORE ANY WORK IS PERFORMED. IT IS THE RESPONSIBILITY OF THE GENERAL CONTRACTOR TO VERIFY THE ACTUAL LOCATION AND DEPTH OF ALL UTILITIES BEFORE ANY WORK IS PERFORMED. IT IS THE RESPONSIBILITY OF THE GENERAL CONTRACTOR TO VERIFY THE ACTUAL LOCATION AND DEPTH OF ALL UTILITIES BEFORE ANY WORK IS PERFORMED.
3. THE GENERAL CONTRACTOR SHALL PROVIDE FLOOR, CEILING AND ROOF PENETRATIONS INCLUDING, BUT NOT LIMITED TO, THOSE REQUIRED FOR: MAKE-UP AIR, GLASS SHOWCASES, REFRIGERATED DISPLAY CASES, STAIRS, ELEVATOR SHAFTS, MECHANICAL ROOMS, AND DATA RACKS. CONDUIT SHALL BE SMALLER THAN THE DUCTS INDICATED ON PLANS. ALL DUCTS SHALL HAVE A MINIMUM CLEARANCE OF 18" FROM THE FLOOR.
4. THE GENERAL CONTRACTOR SHALL PROVIDE FLOOR, CEILING AND ROOF PENETRATIONS INCLUDING, BUT NOT LIMITED TO, THOSE REQUIRED FOR: MAKE-UP AIR, GLASS SHOWCASES, REFRIGERATED DISPLAY CASES, STAIRS, ELEVATOR SHAFTS, MECHANICAL ROOMS, AND DATA RACKS. CONDUIT SHALL BE SMALLER THAN THE DUCTS INDICATED ON PLANS. ALL DUCTS SHALL HAVE A MINIMUM CLEARANCE OF 18" FROM THE FLOOR.
5. ALL UTILITY ROOMS SHALL BE FINISHED WITH A MINIMUM OF 1/2" GYP BOARD AND FINISHED WITH A MINIMUM OF 1/2" GYP BOARD.
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18. ALL UTILITY ROOMS SHALL BE FINISHED WITH A MINIMUM OF 1/2" GYP BOARD AND FINISHED WITH A MINIMUM OF 1/2" GYP BOARD.
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20. ALL UTILITY ROOMS SHALL BE FINISHED WITH A MINIMUM OF 1/2" GYP BOARD AND FINISHED WITH A MINIMUM OF 1/2" GYP BOARD.

4000 (Interior) sq. footage
 400 (Patio) sq. footage
4400 (Total) sq. footage



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): Biscuits Cafe

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

LIST ONLY THE FOLLOWING - NO ATTACHMENTS	
Grill	Vulcan MSA72 72" x 24"
Oven	Vulcan ECO2P single deck half size
Freezer	Traulsen G2 2010
Refrigerator	Imperial Brown BC thunder 8x10
Sink	Advance Tabco 7-PS-56-2X
Dish Washing Facilities	American Dish Service 5AG-SS/20
Food Preparation Counter (Dimensions)	Advance Tabco KMS-305
Other	

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.) 70 %

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?) 30 %

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

- a) Restaurant dining area of your premises: [90]
- (DO NOT INCLUDE PATIO SEATING)**
- b) Bar area [+ 70]
- TOTAL** [= 160]

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.)

2-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:

AMENDMENT

Position	How many
Cooks	5
Bartenders	0
Hostesses	1
Managers	1
Servers	8
Other ()	
Other ()	
Other ()	

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

Applicant Signature

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.)

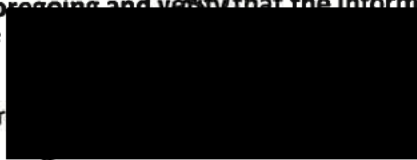
2 TV's

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	6
Bartenders	
Hostesses	1
Managers	1
Servers	8
Other ()	
Other ()	
Other ()	

I, (Print Full Name) David Ligatich 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

Applicant Signature 



Breakfast Sandwiches

Served with hash browns or red potatoes
Loaded hash browns 2; Gluten free bread 2;
Sub fruit 2; Add fruit 3

The Classic

Sausage, egg*, cheddar, chipotle
mayo, brioche bun 16.49

Chicken Apple & Avocado

Chicken apple sausage, egg*, cheddar,
avocado chipotle mayo, brioche 17.99



Off the Griddle

Eggs*, ham, bacon, or sausage
Gluten free bread 2; Sub fruit 2; Add fruit 3

Buttermilk Pancakes 15.49

Strawberries & whipped cream; blueberries 2

Chocolate Chip Pancakes 16.49

Cinnamon Roll French Toast 17.49

Almond French Toast 17.99

French Toast 16.49

Strawberries & whipped cream; blueberries 2

Stuffed French Toast

French toast, sweet cream
cheese & strawberry filling 18.99

French Toast Flights

4 slices of French
toast: classic, almond
crusted, blueberries,
strawberries &
whipped cream 18.49
Add eggs* & ham,
bacon or sausage 4



Waffles

Gluten free waffle 2; Sub fruit 2; Add fruit 3

Chicken & Waffle

Waffle, chicken tenders 15.99
Add eggs* 3

Belgian Waffle

Eggs*, ham, bacon or sausage 15.99
Strawberries & whipped cream 2

Churro Waffle

Our Belgian waffle, cinnamon sugar,
homemade frosting 14.49
Add eggs* & ham, bacon or sausage 4

Appetizers

Bacon Flight

Regular, candied, garlic Parmesan
& chipotle 9.99

French Toast Sticks 7.99

Fresh Baked

Cinnamon Roll 5.99



Biscuits & Gravy

Eggs*, ham, bacon or sausage
Side of hash browns or red potatoes 2.5;
Loaded hash browns 2; Sub fruit 2; Add fruit 3
One 14.49, Two 16.49 or
Three 18.49 Biscuits

Biscuit's Breakfasts

Eggs*, hash browns or red potatoes & biscuits, toast or pancakes
Loaded hash browns 2; Gluten free bread 2; Sub fruit 2; Add fruit 3



Biscuits Corned Beef Hash

19.49

Breakfast Steak* 21.99

Chicken Apple
Sausage 18.49

Chicken Fried Steak

Fried steak, sausage
gravy 18.99



Original Breakfast

Eggs*, bacon, ham, turkey bacon or sausage links;
hash browns or red potatoes & biscuits, toast or pancakes 16.49
Loaded hash browns 2; Add an egg 2; Sub fruit 2; Add fruit 3

Omelets & Scrambles

Egg* omelets & scrambles served with hash browns or red potatoes & biscuits, toast or pancakes
Loaded hash browns 2; Gluten free bread 2; Cheese 1; Sub fruit 2; Add fruit 3



Veggie Head Omelet

Avocado, mushrooms,
bell peppers, onions,
tomatoes, cream cheese,
jack cheese 17.49

Meat Lovers Omelet

Ham, bacon, sausage,
cheddar cheese 17.99

Zesty Chorizo Omelet

Spicy chorizo sausage,
avocado, bell peppers,
onions, jack cheese, sour
cream, salsa 18.49

Ham, Bacon or Sausage Omelet

Ham, bacon or sausage,
cheddar cheese 17.49

The Country Omelet

Bacon, sausage, mushrooms,
bell peppers, onions, potatoes,
sausage gravy 18.99

Meat Lovers Scramble

Ham, bacon, sausage 17.49

Ham Scramble 16.49

Benedicts

Served with hash browns or red potatoes
Loaded hash browns 2; Gluten free bread 2
Sub fruit 2; Add fruit 3

Avocado Benedict

English muffin, tomato, avocado, two
poached eggs*, hollandaise sauce 17.49

Ham Benedict

English muffin, ham, two poached
eggs*, hollandaise sauce 17.49

B.E.A.S.T. Benedict

English muffin, bacon, two poached
eggs*, avocado, spinach, tomato,
hollandaise sauce 18.49



Avocado Toast

with two eggs* 14.49
Add pico 2; Sub fruit 2; Add fruit 3;
Gluten free bread 2

Southwest Breakfasts

Served with hash browns or red potatoes
Loaded hash browns 2
Sub fruit 2; Add fruit 3

Breakfast Burrito

Eggs*, bell peppers, onions, tomatoes,
chorizo, refried beans, cheddar jack cheese,
flour tortilla, sour cream, salsa 16.99

Huevos Rancheros

Corn tortillas, refried beans, chorizo, two eggs*,
ranchero sauce, cotija cheese, avocado 17.99

Fruit & Nut Oatmeal

Toast or Biscuits; Oatmeal, dried fruit,
nuts, milk, brown sugar. 10.49



Lunch

Served with fries or potato salad
Gluten free bread 2; Add side salad 3
Sub fruit 2; Add fruit 3

Bacon Cheeseburger*

Cheddar cheese, bacon, lettuce, tomato, onion, mayo 18.99



California Club Sandwich

Turkey, bacon, lettuce, tomato, avocado, mayo, Swiss cheese, Ciabatta bread 18.49

Classic Club Sandwich

Turkey, ham, bacon, cheddar cheese, lettuce, tomato, mayo 18.49

Reuben Sandwich

Corned beef or turkey, sauerkraut, Swiss cheese, thousand island dressing, rye 16.49

Chicken Tenders 15.99

Salads

Biscuit or garlic bread

Chef Salad

Mixed greens, turkey breast, ham, shredded cheddar cheese, red onion, tomato 18.99

Strawberry Almond Grilled Chicken Salad *SEASONAL*

Mixed greens, spinach, red onion, roasted almonds, strawberries, feta, grilled chicken, raspberry vinaigrette 18.99

Fiesta Chicken Salad

Make it a wrap; Served with fries (no biscuit or garlic bread)
Grilled chicken, black beans, corn, bell peppers, onions, tortilla strips, cheddar jack cheese, avocado ranch 17.49

Vegan Menu

Our vegan products are specially sourced & we can't guarantee all items are in stock.

French Toast

French toast, vegan "egg" batter, two "eggs", vegan sausage patties 20.99

Breakfast Burrito

Hash browns; flour tortilla, "eggs", peppers, onion, tomato, vegan chorizo sausage, refried beans, vegan cheese 21.49

*Notice: Consuming raw or under cooked meats, poultry, seafood, shellfish or eggs may increase your risk of food borne illness, especially if you have certain medical conditions. Our eggs, steaks and hamburgers are cooked to order. Split orders 2.79 per plate. NW0924

B.Y.O.B

BUILD YOUR OWN BREAKFAST

Pick three 13.99;
Pick four 15.99

PLEASE, NO SUBSTITUTIONS



Two buttermilk pancakes
One blueberry pancake
One chocolate chip pancake
One French toast
One almond French toast .49
One biscuit & gravy
One egg* & one slice toast
One egg* w/cheese
Two biscuits
Two eggs*
Two egg* whites
Two Egg Beaters™
Two slices of toast

English muffin
Bacon
Two link sausages
Turkey bacon
Ham
Hash browns
Loaded hash browns 2
Red potatoes
Hollandaise sauce
Savory sausage gravy
Fruit
Strawberries
Regular juice

Kids Menu

For Kids 12 & Under; Sub fruit 2; Add fruit 3 - 7.49 Each

Pancake Breakfast

One egg*, one pancake, two bacon strips or one sausage link

One Egg Breakfast

One egg*, hash browns or red potatoes, two bacon strips or one sausage link

French Toast Breakfast

French Toast, one egg*, two bacon strips or one sausage link

Chicken Tenders

Chicken strips, fries & your choice of dipping sauce: BBQ sauce, ranch dressing or honey mustard

Kids Beverages - 2.29 Each

Milk • Juice • Soda • Strawberry Lemonade • Hot Chocolate

Beverages

Chocolate Coffee

One Free Refill 3.49

Hot Tea 3.49

Hot Chocolate

One Free Refill 3.49

Coffee 3.49

Iced Tea 3.49

Milk - No Refills

Regular 4.49 Large 5.49

Chocolate Milk

No Refills 4.49

Pepsi Fountain

Beverages 3.49

Arnold Palmer

One Free Refill 3.49

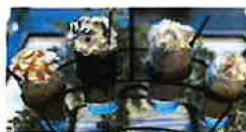
Fresh Lemonade

One Free Refill 4.49

Juice - No Refills

Regular 4.49 Large 5.49

Orange, Grapefruit, Apple, Cranberry, V8™ (regular only)



Flavored Coffee Flight
Four rotating flavors 15.49
add alcohol 5

Cocktails



Biscuits Bacon Bloody Mary

Pepperoncini, celery, pickle, tajin, green olive, homemade candied bacon 13



Mimosa Prosecco served with choice of juice 7

Mimosa Bucket Five mini bottles of Prosecco served with carafe of juice 32



Mimosa Flight
Orange, grapefruit, cranberry & pineapple 18



Margarita Flight
Four rotating flavors 18

Flavored Lemonades

No Refills 6.49

Strawberry Raspberry
Strawberry Mango



Pineapple Blue Raspberry
Mango Pomegranate



Join our Team



Visit us on TikTok



Visit us on Instagram



We Cater



**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:

1. Name of restaurant (Please print): Biscuits Cafe

- 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 AUG 7 AM 10:26 AZDLLC

- 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) Dana Ligatich hereby swear under [REDACTED] with A.R.S. § 4-210(A)(2) and (3) that I have read and understand the foregoing statements that I have made herein are true and correct to the best of my knowledge.

Applicant Signature [REDACTED]

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

DLLC USE ONLY

Fee:
Job #: 356786
Date Accepted:
CSR:

Personal Information Questionnaire

FP pending
805728

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: Ligatich David Edwin
Last First Middle

2. Social Security #: [REDACTED] Birth Date: [REDACTED]
(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: ___/___/___

6. Email address: davidligatich@yahoo.com

7. Home Address: [REDACTED]

8. Daytime phone #: [REDACTED] Alternative phone #: [REDACTED]

SECTION 2 – LICENSED BUSINESS INFORMATION

1. Liquor License #: _____

2. Business Name (doing business as): Biscuits Cafe (24)

3. Business Address: 24812 N 67th AVE, 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

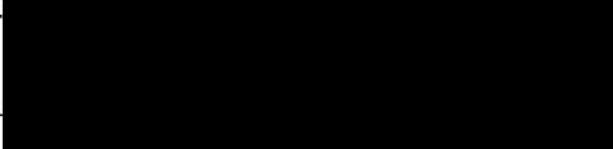
Name of persons who will be handling the day to day operations: Dylan Ligatich

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) David Ligatich 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 are true and correct to the best of my knowledge.

Signature:  Date: 8/6/2025



LIGATICH INC. DBA BISCUITS CAFE

503-512-7407
danaligatich@yahoo.com

1905 NE Division St
Gresham OR 97030

To whom it may concern,

I David Ligatich owner of both Ligatich Inc. and DDDL LLC own 6 Biscuits Cafe location in Oregon all of which have current liquor licenses through the Oregon Liquor Control Commission. I also own one Biscuits Cafe in Federal Way Washington which has a current liquor license through the Washington Liquor Control Commission.

This is why I checked box "Yes" on page 2 section 4 "Background". This document acts as my signed sworn statement.



David Ligatich

Ligatich Inc.

Biscuits Cafe



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 #:	356786
Date Accepted:	
CSR:	

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	Name of Applicant:		
8-6-2025	David Ligatich		
Name of Fingerprint Technician:			
Melody Delatorre			
Fingerprint technician's signature:			
Fingerprint technician's Agency/company Name:		Phone Number:	
Ameriascan LLC		602-299-7111	
Type of Photo ID Provided (check one):			
<input checked="" type="checkbox"/> Driver's License <input type="checkbox"/> Passport <input type="checkbox"/> Other (Please specify)			



Arizona Dept. of Liquor Licenses and Control
https://www.azliquor.gov
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DLLC USE ONLY

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Personal Information Questionnaire

FP pending
805-728

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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: Ligatich Dana Lee
Last First Middle
- Social Security #: [REDACTED] Birth Date: [REDACTED]
(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: ___/___/___
- Email address: danaligatich@yahoo.com
- Home Address: [REDACTED]
- Daytime phone #: 503-839-5620 Alternative phone #: 012070014153

SECTION 2 - LICENSED BUSINESS INFORMATION

- Liquor License #: _____
- Business Name (doing business as): Biscuits Cafe
- Business Address: 24812 N 67 Ave Peoria Arizona
85383

SECTION 3 – DAY TO DAY OPERATION OF BUSINESS 25 AUG 7 AM 10:27 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: Dylan Ligatics

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) Dana Ligatics 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 herein are true and correct to the best of my knowledge.
Signature:  Date: 7/23/2025



LIGATICH INC. DBA BISCUITS CAFE

503-512-7407
danaligatich@yahoo.com

1905 NE Division St
Gresham OR 97030

To whom it may concern,

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This is why I checked box "Yes" on page 2 section 4 "Background". This document acts as my signed sworn statement.

Thank You,



Dana Ligatich

Ligatich Inc.

Biscuits Cafe



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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 7/23/25	Name of Applicant: Dana Lee Ligatich	
Name of Fingerprint Technician: Melody Delatorre		
Fingerprint technician's Signature: [Redacted]		
Fingerprint technician's Agency/company Name: Ameriascan LLC		Phone Number: 623-299-7111
Type of Photo ID Provided (check one):		
<input checked="" type="checkbox"/> Driver's License	<input type="checkbox"/> Passport	<input type="checkbox"/> Other (Please specify)