



# Staff Report

**Agenda Item:**           **LIQUOR LICENSE FOR LAS PALAPAS BAR & GRILL –**  
Discussion and consideration of a recommendation to the Arizona Department of Liquor License and Control for approval of a new liquor license application from Las Palapas Bar & Grill, 1481 Paloma Way, Clarkdale, Arizona.

**Staff Contact:**           Walt Good, Deputy Town Clerk

**Meeting Date:**           November 17, 2008

**Background:** Rosa Elena Salinas-Felix is the applicant for a new liquor license for Las Palapas Bar & Grill, 1481 Paloma Way, Clarkdale, Arizona. She has applied to the Arizona Department of Liquor Licenses & Control (ADLLC) for a new liquor license to a new business in Clarkdale under the name of Las Palapas Bar & Grill. They intend to offer beer and wine along with their regular menu items.

Las Palapas Bar & Grill, 1481 Paloma Way, Clarkdale, Arizona has been posted with required notification to the public that the Town of Clarkdale Council will review this request in accordance with ADLLC requirements.

The License Restrictions allowed by the ADLLC are:

*a. A spirituous liquor retailer's license will not be issued for any premises which are, at the time the application is filed, within three hundred (300) feet of a church, a school building with any grades K-12 or a fenced recreational area adjacent to a school building. This restriction does not apply to premises granted a restaurant, hotel-motel, special event, club or government license. Nor does it apply to the transfer of premises which had been operating under a previously issued valid license.*

*b. An application for a spirituous liquor license will not be accepted for a location which has been previously rejected until twelve (12) months after the date of the prior rejection.*

*ARS 4-207, 4-208.*

Council's consideration of this new license is based upon the following portion of the Approval Process:

*The appropriate governing body will hold a meeting and must either approve, disapprove or offer a "no-recommendation" decision on the application. This action must take place within sixty (60) days of the filing of the application. During the time the governing body is processing the application, the Department will conduct a background check of the applicant.*

*If the application is approved at the appropriate government level and no written protests have been received by the Department, and if there is no objection by the Director, the application will be approved. This process normally takes sixty-five (65) to one hundred five (105) days after the filing of the application.*

*If the governing body disapproves the application or offers a "no-recommendation", or if protests have been filed with the Department, the application must be set for a hearing before the State Liquor Board.*

**Recommendations:** To recommend to the Arizona Department of Liquor License and Control, approval of a liquor license application from Las Palapas Bar & Grill, 1481 Paloma Way, Clarkdale, Arizona.

# ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor  
Phoenix AZ 85007-2934  
(602) 542-5141

400 W Congress #521  
Tucson AZ 85701-1352  
(520) 628-6595

## APPLICATION FOR LIQUOR LICENSE

TYPE OR PRINT WITH **BLACK INK**

**Notice:** Effective Nov. 1, 1997, All Owners, Agents, Partners, Stockholders, Officers, or Managers actively involved in the day to day operations of the business must attend a Department approved liquor law training course or provide proof of attendance within the last five years. See page 5 of the Liquor Licensing requirements.

**SECTION 1** This application is for a:

- INTERIM PERMIT *Complete Section 5*
- NEW LICENSE *Complete Sections 2, 3, 4, 13, 14, 15, 16, 17*
- PERSON TRANSFER (Bars & Liquor Stores ONLY)  
*Complete Sections 2, 3, 4, 11, 13, 15, 16, 17*
- LOCATION TRANSFER (Bars and Liquor Stores ONLY)  
*Complete Sections 2, 3, 4, 12, 13, 15, 16, 17*
- PROBATE/WILL ASSIGNMENT/DIVORCE DECREE  
*Complete Sections 2, 3, 4, 9, 13, 15, 17 (fee not required)*
- GOVERNMENT *Complete Sections 2, 3, 4, 10, 13, 15, 16, 17*

**SECTION 2** Type of ownership:

- J.T.W.R.O.S. *Complete Section 6*
- INDIVIDUAL *Complete Section 6*
- PARTNERSHIP *Complete Section 6*
- CORPORATION *Complete Section 7*
- LIMITED LIABILITY CO. *Complete Section 7*
- CLUB *Complete Section 8*
- GOVERNMENT *Complete Section 10*
- TRUST *Complete Section 6*
- OTHER Explain \_\_\_\_\_

**SECTION 3** Type of license and fees:

LICENSE #: 12133426

1. Type of License: 12 2. Total fees attached: \$ \_\_\_\_\_

Department Use Only
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**APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE.**

A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. 44.6852)

**SECTION 4** Applicant: (All applicants must complete this section)

1. Applicant/Agent's Name: Mr. Salinas-FELIX Rosa ELENA  
(Insert one name ONLY to appear on license) Last First Middle
2. Corp./Partnership/L.L.C.: \_\_\_\_\_  
(Exactly as it appears on Articles of Inc. or Articles of Org.)
3. Business Name: LAS PALAPAS BAR + GRILL  
(Exactly as it appears on the exterior of premises) YAVAPAI
4. Business Address: 1481 PALOMA WAY STATE ROUTE CLARKDALE 86324  
(Do not use PO Box Number) City COUNTY Zip
5. Business Phone: (928) 634-86-04 Residence Phone: \_\_\_\_\_
6. Is the business located within the incorporated limits of the above city or town?  YES  NO
7. Mailing Address: 1481 PALOMA WAY ST ROUTE CLARKDALE AZ 86324  
City State Zip
8. Enter the amount paid for a 06, 07, or 09 license: \$ \_\_\_\_\_ (Price of License ONLY)

DEPARTMENT USE ONLY					
Accepted by: <u>JW</u>	Date: <u>10-6-08</u>	Lic. #	<u>12133426</u>		
Fees: <u>100</u>	<u>-</u>	<u>-</u>	<u>24</u>	\$	<u>124</u>
Application	Interim Permit	Agent Change	Club	F. Prints	TOTAL

PROCESSING APPLICATIONS TAKES APPROXIMATELY 90 DAYS, AND CIRCUMSTANCES OFTEN RESULT IN A LONGER WAITING PERIOD.  
YOU ARE CAUTIONED REGARDING PLANS FOR A GRAND OPENING, ETC., BEFORE FINAL APPROVAL AND ISSUANCE OF THE LICENSE.

08 OCT 5 Lic. Lic. PM 3 134

**SECTION 5 Interim Permit:**

1. 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.
2. There **MUST** be a valid license of the same type you are applying for currently issued to the location.
3. Enter the license number currently at the location. \_\_\_\_\_
4. Is the license currently in use?  YES  NO If no, how long has it been out of use? \_\_\_\_\_

**ATTACH THE LICENSE CURRENTLY ISSUED AT THE LOCATION TO THIS APPLICATION.**

I, \_\_\_\_\_, declare that I am the CURRENT OWNER, AGENT, CLUB MEMBER, PARTNER, STOCKHOLDER OR LICENSEE of the stated license and location.

X \_\_\_\_\_ State of \_\_\_\_\_ County of \_\_\_\_\_  
 (Signature) The foregoing instrument was acknowledged before me this  
 \_\_\_\_\_ day of \_\_\_\_\_  
 Day Month Year

My commission expires on: \_\_\_\_\_  
 \_\_\_\_\_  
 (Signature of NOTARY PUBLIC)

**SECTION 6 Individual or Partnership Owners:**

EACH PERSON LISTED MUST SUBMIT A COMPLETED FORM "LIC0101", AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$29 FEE FOR EACH CARD.

1. Individual:

Last	First	Middle	% Owned	Residence Address	City State Zip
SALINAS-FELIX	ROSIA	ELENA	100%	[REDACTED]	[REDACTED]

Partnership Name: (Only the first partner listed will appear on license) \_\_\_\_\_

General	Limited	Last	First	Middle	% Owned	Residence Address	City State Zip
		<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>						
<input type="checkbox"/>	<input type="checkbox"/>						

(ATTACH ADDITIONAL SHEET IF NECESSARY)

2. Is any person, other than the above, going to share in the profits/losses of the business?  YES  NO  
 If Yes, give name, current address and telephone number of the person(s). Use additional sheets if necessary.

Last	First	Middle	Residence Address	City, State, Zip	Telephone#

**SECTION 7 Corporation/Limited Liability Co.:**

NO OCT 6 Lic. Lic. # 3134

EACH PERSON LISTED MUST SUBMIT A COMPLETED FORM "LIC0101", AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$29 FEE FOR EACH CARD.

CORPORATION Complete questions 1, 2, 3, 5, 6, 7, 8.

L.L.C. Complete questions 1, 2, 4, 5, 6, 7 and attach copy of Articles of Org. and Operation Agreement.

1. Name of Corporation/L.L.C.: \_\_\_\_\_  
 (Exactly as it appears on Articles of Inc. or Articles of Org.)

2. Date Incorporated/Organized: \_\_\_\_\_ State where Incorporated/Organized: \_\_\_\_\_

3. AZ Corporation Commission File No.: \_\_\_\_\_ Date authorized to do business in AZ: \_\_\_\_\_

4. AZ L.L.C. File No: \_\_\_\_\_ Date authorized to do business in AZ: \_\_\_\_\_

5. Is Corp./L.L.C. non-profit?  YES  NO If yes, give IRS tax exempt number: \_\_\_\_\_

6. List all directors, / officers, controlling stockholders or members in Corporation/L.L.C.:

Last	First	Middle	Title	Residence Address	City State Zip

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

7. List stockholders or controlling members owning 10% or more:

Last	First	Middle	% Owned	Residence Address	City State Zip

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

8. If the corporation/L.L.C. is owned by another entity, attach an ownership, and director/officer/members disclosure for the parent entity. Attach additional sheets as necessary in order to disclose real people.

**SECTION 8 Club Applicants:**

EACH PERSON LISTED MUST SUBMIT A COMPLETED FORM "LIC0101", AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$29 FEE FOR EACH CARD.

1. Name of Club: \_\_\_\_\_ Date Chartered: \_\_\_\_\_  
 (Exactly as it appears on Club Charter or Bylaws) (Attach a copy of Club Charter or Bylaws)

2. Is club non-profit?  YES  NO If tax exempt, give IRS tax exempt number: \_\_\_\_\_

3. List officer and directors:

Last	First	Middle	Title	Residence Address	City State Zip

ATTACH ADDITIONAL SHEET(S) IF NECESSARY

08 OCT 5 11:49 AM '05

**SECTION 9 Probate, Will Assignment or Divorce Decree of an existing Bar or Liquor Store:**

- 1. Current Licensee's Name: \_\_\_\_\_  
(Exactly as it appears on license) Last First Middle
- 2. Assignee's Name: \_\_\_\_\_  
Last First Middle
- 3. License Type: \_\_\_\_\_ License Number: \_\_\_\_\_ Date of Last Renewal: \_\_\_\_\_
- 4. ATTACH TO THIS APPLICATION A CERTIFIED COPY OF THE WILL, PROBATE DISTRIBUTION INSTRUMENT, OR DIVORCE DECREE THAT SPECIFICALLY DISTRIBUTES THE LIQUOR LICENSE TO THE ASSIGNEE TO THIS APPLICATION.

**SECTION 10 Government: (for cities, towns, or counties only)**

- 1. Person to administer this license: \_\_\_\_\_  
Last First Middle
- 2. Assignee's Name: \_\_\_\_\_  
Last First Middle

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

**SECTION 11 Person to Person Transfer:**

Questions to be completed by CURRENT LICENSEE (Bars and Liquor Stores ONLY).

- 1. Current Licensee's Name: \_\_\_\_\_ Entity: \_\_\_\_\_  
(Exactly as it appears on license) Last First Middle (Indiv., Agent, etc.)
- 2. Corporation/LLC Name: \_\_\_\_\_  
(Exactly as it appears on license)
- 3. Current Business Name: \_\_\_\_\_  
(Exactly as it appears on license)
- 4. Current Business Address: Street \_\_\_\_\_  
City, State, Zip \_\_\_\_\_
- 5. License Type: \_\_\_\_\_ License Number: \_\_\_\_\_ Last Renewal Date: \_\_\_\_\_
- 6. Current Mailing Address: Street \_\_\_\_\_  
(Other than business) City, State, Zip \_\_\_\_\_
- 7. Have all creditors, lien holders, interest holders, etc. been notified of this transfer?  YES  NO
- 8. Does the applicant intend to operate the business while this application is pending?  YES  NO If yes, complete section 5, attach fee, and current license to this application.
- 9. I hereby relinquish my rights to the above described license to the applicant named in this application and hereby declare that the statements made in this section are true, correct and complete.

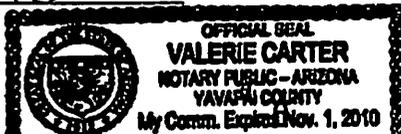
I, Rosa Elena Salinas Felix declare that I am the CURRENT OWNER, AGENT, CLUB MEMBER, PARTNER, STOCKHOLDER or LICENSEE of the stated license. I have read this section and the contents and all statements are true, correct and complete.

x Rosa S. de Felix  
(Signature of CURRENT LICENSEE)

State of AZ County of Yuma  
The foregoing instrument was acknowledged before me this 24 day of Sept 2008  
Day Month Year

My commission expires on: 11-01-10

Valerie B Carter  
(Signature of NOTARY PUBLIC)



**SECTION 12 Location to Location Transfer: (Bars and Liquor Stores ONLY)**

DOB OCT 5 1974 LIC. # 3035

APPLICANTS CANNOT OPERATE UNDER A LOCATION TRANSFER UNTIL IT IS APPROVED BY THE STATE.

1. Current Business: Name \_\_\_\_\_  
 (Exactly as it appears on license) Address \_\_\_\_\_

2. New Business: Name LAS PALAPAS BAR + GRILL  
 (Do not use PO Box Number) Address 1481 PALOMA WAY STATE ROUTE 89A CLARKDALE AZ 86326

3. License Type: \_\_\_\_\_ License Number: \_\_\_\_\_ Last Renewal Date: \_\_\_\_\_

4. What date do you plan to move? \_\_\_\_\_ What date do you plan to open? NOVEMBER 10

**SECTION 13 Questions for all in-state applicants:**

1. Distance to nearest school: 2 MILES ft. Name of school: CLARK DALE JEROME ELEMENTARY SCHOOL  
 (Regardless of distance) Address 1615 MAIN STREET CLARKDALE AZ 86324

2. Distance to nearest church: 700 ft. Name of church: CLARKDALE BAPTIST CHURCH  
 (Regardless of distance) Address 1051 STATE ROUTE 89A CLARKDALE AZ 86326

3. I am the:  LESSEE  SUB LESSEE  OWNER  PURCHASER (of premises)

4. If the premises is leased give lessors: Name GUSTAVO VARGAS  
 Address [REDACTED] CLARKDALE AZ 86324

4a. Monthly rental/lease rate \$ 7000<sup>00</sup> What is the remaining length of the lease? 3 yrs. 0 mos.

4b. What is the penalty if the lease is not fulfilled? \$ 150<sup>00</sup> or other \_\_\_\_\_  
 (give details - attach additional sheet if necessary)

5. What is the total business indebtedness of the applicant for this license/location excluding lease? \$ 12,000<sup>00</sup>

Does any one creditor represent more than 10% of that sum?  YES  NO If yes, list below. Total must equal 100%.

Last	First	Middle	% Owed	Residence Address	City State	Zip
BANK OF AMERICA			100	6115 MAIN ST COHONWOOD	COHONWOOD AZ	86326
				COHONWOOD	AZ	86326

(ATTACH ADDITIONAL SHEET IF NECESSARY)

6. What type of business will this license be used for? (BE SPECIFIC) RESTAURANT + BAR

7. Has a license, or a transfer license for the premises on this application been denied by the state within the past one (1) year?  
 YES  NO If yes, attach explanation.

8. Does any spirituous liquor manufacturer, wholesaler, or employee, have any interest in your business?  YES  NO

9. Is the premises currently licensed with a liquor license?  YES  NO If yes, give license number and licensee's name:  
 License # \_\_\_\_\_ (Exactly as it appears on license) Name \_\_\_\_\_

**SECTION 14 Restaurant, or Hotel-Motel Applicants:**

08 OCT 6 Lic. Lic. PM 3 05

1. Is there a valid restaurant or hotel-motel liquor license at the proposed location?  YES  NO If yes, give licensee's name:

\_\_\_\_\_ and license #: \_\_\_\_\_  
 Last First Middle

2. If the answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application is pending; consult A.R.S. Section 4-203.01; and complete Section 5 of this application.
3. All restaurant applicants must complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor.
4. Do you understand that 40% of your gross revenue must be from food sales?  YES  NO

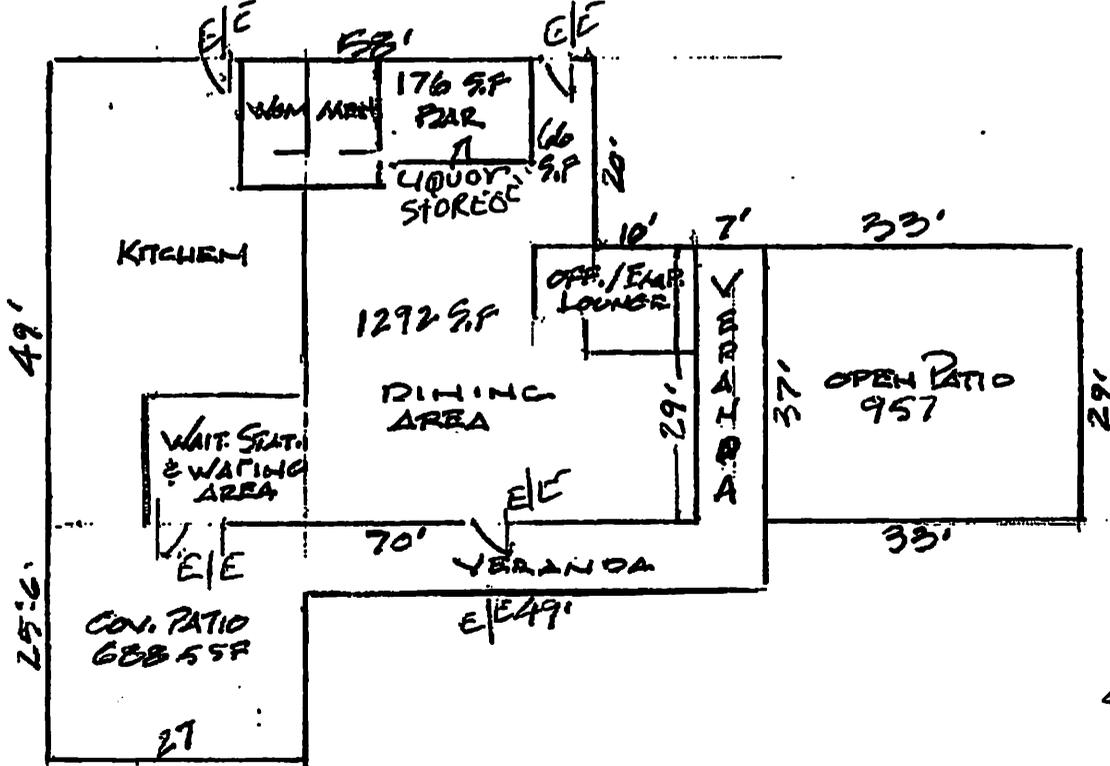
**SECTION 15 Diagram of Premises: (Blueprints not accepted, diagram must be on this form)**

1. Check ALL boxes that apply to your licensed premises:

- Entrances/Exits  Liquor storage areas  
 Drive-in windows  Patio enclosures  
 Service windows  Under construction: estimated completion date Oct 2008

2. Restaurants and Hotel/Motel applicants must explicitly depict kitchen equipment and dining facilities.
3. The diagram below is the only area where spirituous liquor is to be sold, served, consumed, dispensed, possessed, or stored. Give the square footage or outside dimensions of the licensed premises.

DO NOT INCLUDE PARKING LOTS, LIVING QUARTERS, ETC.

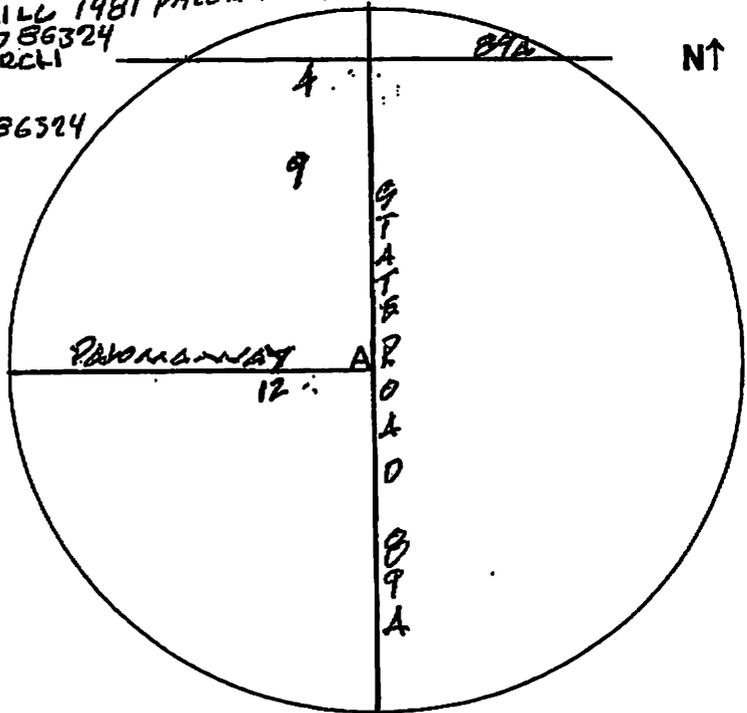


**YOU MUST NOTIFY THE DEPARTMENT OF LIQUOR OF ANY CHANGES OF BOUNDARIES, ENTRANCES, EXITS, OR SERVICE WINDOWS MADE AFTER SUBMISSION OF THIS DIAGRAM.**

**SECTION 16 Geographical Data: A SAMPLE FOR THIS SECTION IS PROVIDED ON THE NEXT PAGE.**

List below the exact names of all churches, schools, and spirituous liquor outlets within a one mile radius of your proposed location. Ref. A.R.S. 4-201 (B)

1. ~~A LAS PALMAS PAIS & GRILL 1481 PALOMA WAY ST. R + B9 A CLARKDALE AZ 86324~~  
1051 ST. RT. B9 A CLARKDALE AZ 86324
2. ~~9 - CLARKDALE BAPTIST CHURCH~~
3. ~~A - SPIRIT FOOD STORE~~  
755 A ST RT B9 A CLARKDALE AZ 86324
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_



A = Your business name and identify cross streets.

ATTACH ADDITIONAL SHEET(S) IF NECESSARY

**SECTION 17 Signature Block:**

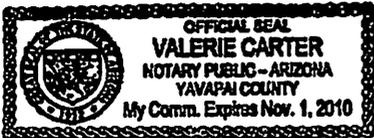
Rosa Elena Salina Felix declare that: 1) I am the APPLICANT (Owner, Agent, Partner, Stockholder (10% or more), Member, Officer (10% or more ownership), or Club Member making this application; 2) I have read the application and the contents and all statements are true, correct and complete; 3) that this application is not being made to defraud or injure any creditor, taxing authority, regulatory authority, or transferor; 4) that no other person, firm, or corporation, except as indicated, has an interest in the spirituous liquor license for which these statements are made; and 5) that to the best of my knowledge and belief, none of the owners, partners, members, officers, directors or stockholders listed have been convicted of a felony in the past five (5) years.

x Rosa S. de Felix  
(Signature)

State of AZ County of Yavapai  
The foregoing instrument was acknowledged before me this  
29 day of Sept 2008  
Day Month Year

My commission expires on: 11.01.10

(Signature of NOTARY PUBLIC)



ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

08 OCT 6 11:47 AM '05

800 W Washington 5th Floor  
Phoenix AZ 85007-2934  
(602) 542-5141

400 W Congress #521  
Tucson AZ 85701-1352  
(520) 628-6595

QUESTIONNAIRE

Attention all Local Governing Bodies: Social Security and Birthdate Information is Confidential. This information may be given to local law enforcement agencies for the purpose of background checks only but must be blocked to be unreadable prior to posting or any public view.

Read carefully. This instrument is a sworn document. Type or print with black ink. An extensive investigation of your background will be conducted. False or incomplete answers could result in criminal prosecution and the denial or subsequent revocation of a license or permit.

TO BE COMPLETED BY EACH OWNER, AGENT, PARTNER, STOCKHOLDER (10% OR MORE), MEMBER, OFFICER OR MANAGER. ALSO EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD WHICH MAY BE OBTAINED AT THE DEPT. FINGERPRINTING MUST BE DONE BY A BONA FIDE LAW ENFORCEMENT AGENCY OR A FINGERPRINTING SERVICE APPROVED BY THE DEPARTMENT OF LIQUOR. THE DEPARTMENT DOES NOT PROVIDE THIS SERVICE.

Eff. 10/01/07 there is a \$24.00 processing fee for each fingerprint card submitted.

A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. 44.6852)

Liquor License #

10012133426  
(If the location is currently licensed)

1. Check appropriate box →  Owner  Partner  Stockholder  Member  Officer  Agent  Manager(Only)  Other  
(Complete Questions 1-20 & 24) (Complete All Questions except # 14, 14a & 25)  
Licensee or Agent must complete # 25 for a Manager Licensee or Agent must complete # 25

2. Name: SALINAS-FELIX ROSA ERIENA Date of Birth: [REDACTED]  
Last First Middle (This Will Not Become a Part of Public Records)

3. Social Security Number: [REDACTED] Drivers License #: [REDACTED] State: AZ  
(This Will Not Become a Part of Public Records)

4. Place of Birth: Ciudad Juarez Chihuahua Mexico Height: 5-02 Weight: 180 Eyes: BVO Hair: BR  
City State Country (not county)

5. Marital Status  Single  Married  Divorced  Widowed Residence (Home) Phone: [REDACTED]

6. Name of Current or Most Recent Spouse: FELIX FELIPE Date of Birth: [REDACTED]  
(List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden

7. You are a bona fide resident of what state? ARIZONA If Arizona, date of residency: 2000

8. Telephone number to contact you during business hours for any questions regarding this document. (928) 646-0397

9. If you have been a resident less than three (3) months, submit a copy of driver's license or voter registration card.

10. Name of Licensed Premises: LAS PALAPAS BAR & GRILL Premises Phone: (928) 634-8604

11. Licensed Premises Address: 1401 PALOMA WAY ST ROUTE CLARK DALE YAVAPAI 86324  
Street Address (Do not use PO Box #) City County Zip

12. List your employment or type of business during the past five (5) years, if unemployed part of the time, list those dates. List most recent 1st.

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYER'S NAME OR NAME OF BUSINESS (Give street address, city, state & zip)
2/2008	CURRENT	LAUNDRY DEPT	1065 LEE MOUNTAIN RD MATHER HORR INN SEDONA AZ 86331
6/1998	2/2008	HOUSE KEEPING SUPERVISOR	THE RIDGE ON SEDONA 55 SUN RIDGE CIRCL SEDONA AZ 86331

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION ↑

13. Indicate your residence address for the last five (5) years:

FROM Month/Year	TO Month/Year	Rent or Own	RESIDENCE Street Address (If rented, attach additional sheet giving name, address and phone number of landlord)	City	State	Zip
2/2008	CURRENT	OWN	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
2/2008	2/2008	OWN	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

If you checked the Manager box on the front of this form skip to # 15

14. As an Owner, Agent, Partner, Stockholder, Member or Officer will you be physically present and operating the licensed premises? If you answered YES, how many hrs/day? 8, answer #14a below. If NO, skip to #15.  YES  NO  
 14a. Have you attended a Department approved Liquor Law Training Course within the last 5 years? (Must provide proof)  YES  NO  
 If the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license.

15. Have you **EVER** been detained, cited, arrested, indicted or summoned into court for violation of **ANY** law or ordinance (regardless of the disposition even if dismissed or expunged)? For traffic violations, include only those that were alcohol and/or drug related.  YES  NO

16. Have you **EVER** been convicted, fined, posted bond, been ordered to deposit bail, imprisoned, had sentence suspended, placed on probation or parole for violation of **ANY** law or ordinance (regardless of the disposition even if dismissed or expunged)? For traffic violations, include only those that were alcohol and/or drug related.  YES  NO

17. Are there **ANY** administrative law citations, compliance actions or consents, criminal arrests, indictments or summonses **PENDING** against you or **ANY** entity in which you are now involved?  YES  NO

18. Have you or any entity in which you have held ownership, been an officer, member, director or manager **EVER** had a business, professional or liquor **APPLICATION OR LICENSE** rejected, denied, revoked, suspended or fined in this or any other state?  YES  NO

19. Has anyone **EVER** filed suit or obtained a judgment against you in a civil action, the subject of which involved fraud or misrepresentation of a business, professional or liquor license?  YES  NO

20. Are you **NOW** or have you **EVER** held ownership, been a controlling person, been an officer, member, director, or manager on any other liquor license in this or any other state?  YES  NO

**If any answer to Questions 15 through 20 is "YES" YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions.**

If you checked the Manager box on the front of this form, fill in #21-23 and 24, all others skip the following box (21-23) and go to # 24

**Manager Section**

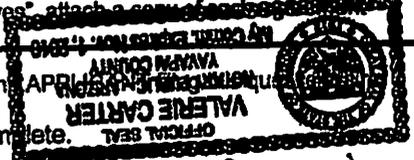
21. Have you attended a Department approved Liquor Law Training Course within the last 5 years? (Must provide proof)  YES  NO  
 If the answer to #21 is "NO" course must be completed **BEFORE ISSUANCE** of a new license **OR APPROVAL** on an existing license.  
 22. Do you make payments to the licensee?  YES  NO If "yes", how much? \$ \_\_\_\_\_ per month. Total debt to licensee \$ \_\_\_\_\_  
 23. Is there a formal written contract or agreement between you and the licensee relating to the operation or management of this business?  YES  NO If "yes", attach a copy of such agreement.

24. I, Rosa Elena Salinas Felix hereby declare that I am the **APPLICANT** for the named liquor license.  YES  NO  
 (Print full name of Applicant)

I have read this questionnaire and the contents and all statements are true, correct and complete.

X Rosa S. de Felix State of OR County of Yamhill  
 (Signature of Applicant) The foregoing instrument was acknowledged before me this

My commission expires on: 11 01 10 Day Month Year 29 day of Sept Month 2008 Year  
 (Signature of NOTARY PUBLIC)



**FILL IN THIS SECTION ONLY IF YOU ARE A LICENSEE OR AGENT APPROVING A MANAGER APPLICATION Licensee or Agent Approval of Manager**

25. I, (Print Licensee/Agent's Name): \_\_\_\_\_  
 Hereby authorize the applicant to act as manager for the named liquor license. State of \_\_\_\_\_ County of \_\_\_\_\_  
 The foregoing instrument was acknowledged before me this

X \_\_\_\_\_ day of \_\_\_\_\_  
 (Signature of LICENSEE/AGENT) Day Month Year

My commission expires on: \_\_\_\_\_ Day Month Year (Signature of NOTARY PUBLIC)

DEPARTMENT OF HOMELAND SECURITY

Division of U.S. Citizenship and Immigration Services

IT IS PUNISHABLE BY U. S. LAW TO COPY, PRINT OR PHOTOGRAPH THIS CERTIFICATE, WITHOUT LAWFUL AUTHORITY.

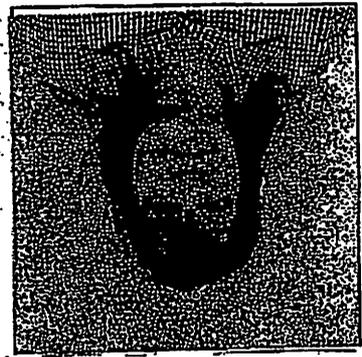
Rosalva

that such person is admitted as a citizen of the United States of America.

at: PHOENIX, ARIZONA on: MAY 22, 2008

U.S. CITIZENSHIP AND IMMIGRATION SERVICES

they residing in the United States, intends to reside in the United States when so required by the Naturalization laws of the United States, and had in all other respects complied with the applicable provisions of such naturalization laws and was entitled to be admitted to citizenship, such person having taken the oath of allegiance in a ceremony conducted by the



ROSA ELENA SALINAS FELIX

The Secretary, having found that:

at: PHOENIX, ARIZONA

She is known to, pursuant to an application filed with the Secretary of Homeland Security

MEXICO Country of former nationality

MARRIED Marital status

5 feet 2 inches Height

FEMALE Sex

Date of birth

Personal description of holder as of date of naturalization

I certify that the description given is true, and that the photograph affixed hereto is a likeness of me

Rosa Elena Salinas Felix (Complete and true signature of holder)

CGS Registration No:

RECORDED



INDEXED

No. 30885227

UNITED STATES OF AMERICA

09 OCT 6 11 41 AM '08

# ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

2008 OCT 5 11:47 AM 3133

800 W Washington 5th Floor  
Phoenix AZ 85007-2934  
(602) 542-5141

400 W Congress #521  
Tucson AZ 85701-1352  
(520) 628-6595

## HOTEL-MOTEL AND RESTAURANT LICENSES RECORDS REQUIRED FOR AUDIT OF SERIES #11 & #12 LICENSES

### **MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DLLC RECORDS**

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. All invoices and receipts for the purchase of food and spirituous liquor for the licensed premises. If you do not have all food or liquor invoices, please contact your vendors immediately and request copies of missing invoices. These must be available for pick-up at the time of the Audit Interview Appointment. If all food invoices are not available at that time, you may not be given credit for *all* food sales.
2. A list of *all* food and liquor vendors
3. The restaurant menu used during the audit period
4. A price list for alcoholic beverages during the audit period
5. Mark-up figures on food and alcoholic products during the audit period
6. A recent, *accurate* inventory of food and liquor (taken within two weeks of the Audit Interview Appointment)
7. Monthly Inventory Figures - beginning and ending figures for food and liquor
8. Chart of accounts (copy)
9. Financial Statements-Income Statements-Balance Sheets
10. 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) Guest Checks
    - 4) Coupons/Specials
    - 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
11. 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

12. Payroll Records

- 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

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 licensee name):

Felix      Rosa      Elena  
Last                      First                      Middle

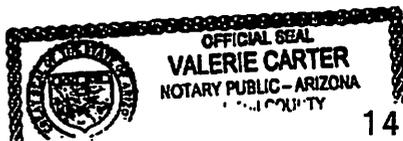
have read and fully understand all aspects of this statement.

State of 03 County of Yavapai  
The foregoing instrument was acknowledged before me this

Rosa S. de Felix      29 day of Sept, 2008  
(Signature of Licensee)      Day      Month      Year

My commission Expires on: 01 11 2010      Valerie B Carter  
Day      Month      Year      (Signature of NOTARY PUBLIC)

**MAKE A COPY OF THIS DOCUMENT AND KEEP IT WITH YOUR DLLC RECORDS**



# ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

800 W Washington 5th Floor  
Phoenix AZ 85007-2934  
(602) 542-5141



400 W Congress #521  
Tucson AZ 85701-1352  
(520) 628-6595

## RESTAURANT OPERATION PLAN

LICENSE # 12133426

1. List by Make, Model and Capacity of your :

Grill	US RANGE (WOLF RANGE) 6 BURNERS 25,000 BTU
Oven	DOUBLE WOLF MOD. 2700 HEC USE (CONVECTION OVEN) 80,000 BTU each 120V VOLTS
Freezer	ELITE KENMORE MOD 953 16087107 AMPS 5.0A VOLTS 115 HERTZ 60
Refrigerator	REFRIGERATOR 60 45 IPH 115 VOLTS ANDER CENTER 2 DOORS 4 FT SLONG X 230 FT W MOD SW 181
Sink	USE ① 3 COMP SINK 2 X 7.5 FT (① 2 COMP SINK 2.5 X 6 FT)
Dish Washing Facilities	120 VOLTS - 15 AMP CLANTABLO 60 INC LONG MOD 20903 BWS DUTY TABLE 77 INC LONG
Food Preparation Counter (Dimensions)	1 PREP TABLE 2.30 FT X 6 FT 1 PREP TABLE 6 X 2 FT
Other	FAN 110 WT AND LIGHT SINGLE FACE 208.32 (WALK IN) MOD BHA 1 10 X 10 FT BOOTC MAGN BUILDERS HPW COMP

2. Print the name of your restaurant: LAS PALAPAS BAR + GRILL (USE) 40,000 BTU

3. Attach a copy of your menu (Breakfast, Lunch and Dinner including prices).

4. List the seating capacity for:

- a. Restaurant area of your premises [ 106 ]
- b. Bar area of your premises [ + 20 ]
- c. Total area of your premises [ 126 ]

5. What type of dinnerware and utensils are utilized within your restaurant?  
 Reusable  Disposable

6. Does your restaurant have a bar area that is distinct and separate from the restaurant seating? (If yes, what percentage of the public floor space does this area cover).  
 Yes  6% No

7. What percentage of your public premises is used primarily for restaurant dining?  
 (Does not include kitchen, bar, cocktail tables or game area.) 2.4 %

\*Disabled individuals requiring special accommodations, please call the Department.

08 OCT 6 Day, Lic. PM 3 05

- ① CHAR BROILER MOD SCB 24 35,000 BTU
- ② FLAT GRILL MOD SMG 30,000 BTU
- ③ OVEN ~~PANINI~~ STAK MFG INTLINC (9 IN 47 MOD) (USE
- ④ PANINI GRILL 14 1/2 X FTS LONG 120 VOLTS
- ⑤ ICE MACHINE MOD ICE OLYATIC 10 MICE 030 UH A
- ⑥ SQ BAR BACK 2 door 115 VOLTS
- ⑦ BAR 24" Jockey Box with wall sink 17"
- ⑧ BAR 6" fts 3 comp sink 4 ts work station w/sink
- ⑨ Fryer MOD T SF 40 50 38000 BTU

8. Does your restaurant contain any games or television? Yes  No   
If yes, specify what types and how many of each type (Televisions, Pool tables, Video Games, Darts, etc).

7 T.V. PLASMA FLAT SCREEN (SONY)  
40" INC.

9. Do you have live entertainment or dancing? Yes  No   
(If yes, what type and how often?)

OCATIONALLY - (MARIACHI MUSIC)  
TRIO (GUITAR)  
SOFT CLASSICAL MUSIC

10. Use space below or attach a list of employee positions and their duties to fully staff your business.

WILL HIRE  
COOKS  
DISHWASHERS  
HOSTESS  
CASHIERS  
WAITERS / WAITRESSES  
SUPERVISORS  
MANAGERS  
BUSSEERS

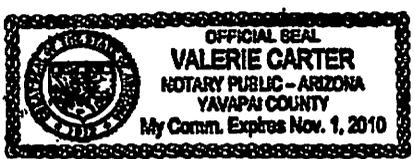
Rosa Elena Salinas Felix hereby declare that I am the APPLICANT filing this application. I have read this application and the contents and all statements true, correct and complete.  
(Print full name)

Rosa S. de Felix  
(Signature of APPLICANT)

State of ARIZONA County of YAVAPAI  
The foregoing instrument was acknowledged before me this  
29 day of Sept, 2008  
Day of Month Month Year

My commission expires on: 11.01.10

Valerie B Carter  
(Signature of NOTARY PUBLIC)



# Las Palapas Bar & Grill

## Breakfast

**Fresh Fruit Plate \$8.50**  
Choice Plain Or Strawberry Yogurt

**Bowl Of Fresh Seasonal Berries \$6.00**

**\*Morning Starters \***

**Selección Of Cold Cereals \$4.00**  
(Choice Bananas Or Berries)

**Hot Oat Meal With Bananas Or Berries \$8.00**

**Homemade Granola With Bananas Or Berries \$8.00**

## Entrees

**Las Palapas Breakfast \$8.00**  
Two Eggs Any Style Ham Or Sausage Breakfast potatoes Or Toast

**Butter Milk Pancakes \$8.00**  
With Caramelized Bananas

**Malt Waffle \$8.00**  
Slice Bananas Or Strawberries With Warm Maple Syrup

**Cinnamon French Toast \$8.00**  
Caramelized Bananas Or Strawberries

**Build Your own Omelet \$8.00**  
Three Eggs Omelet Choice Mushroom, Green Chili, Ham, Bacon, Onion, Tomatoes, Bell Pepper.

**Steak & Eggs \$12.00**  
New York Sirloin, Two eggs Any Style, Breakfast Blend, Homemade Potatoes.

**Smoke Scottish Salmon Bagel \$10.00**  
Cream cheese, Onion, Capers, Tomatoes, Lemons.

**Classic Egg Benedict \$8.00**  
Poach Eggs, Canadian Bacon, English Muffin, Hollandaise Sauce, Choice Home Potatoes Or Fruit.

**Huevos Rancheros \$8.50**  
Corn tortilla, Avocado, Beans, Chorizo, Cheese, Salsa.

**Chef Favorite \$8.50**  
Scrambled Eggs And Smoke Bacon, Fresh croissant, Cheddar Cheese, Potatoes.

## Beverages

**Juices \$4.00**  
Cranberry, Pine Apple, Orange, Apple, V8 Tomatoes, Grape Fruit.

**Coffee**  
Regular And Decaf

**Traditional Herb Teas & Milk**

Owner & Executive Chef: *Felipe Felix*

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# Las Palapas Bar & Grill

## Lunch

### Starter

**Roasted Corn And Chili Chowder Cup \$3.00 Bowl \$4.00**

**Soup Of The Day Cup \$3.00 Bowl \$4.00**

### **\*\* Specialties \*\***

**Hummus Dip \$8**  
Flour Tortilla Chips

**Homemade Guacamole \$6**  
Corn Tortilla Chips

**Buffalo Wings \$8**  
Red Hot Sauce, Ranch Dressing, Celery End Carrot Sticks.

**Chicken Tenders \$8**  
With French Fries End Ranch Chipotle Ranch

**Mole Carne Asada Quesadilla \$9.50**  
Salsa, Guacamole, Sour Cream, Double 10 Inch Flour Tortilla, Oaxaca Or Cheddar Cheese

## Sandwiches

### **Paninos \$10.50**

**Chicken** - On Red Chili, Cheese, Jalapeños, Fries.

**Turkey** - Cheese, Lettuce, Tomatoes, Avocado, Fries.

**Ham** - Cheese, Lettuce, Tomatoes, Avocado, Fries Or Fruit.

**Roasted Beef** - Cheese, Lettuce, Mushroom, Tomatoes, Onion, Fries.

**Grilled Veggies** - Choice Of Cheese , Fries Or Fruit

Owner & Executive Chef: *Felipe Felix*

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## Las Palapas Bar & Grill

### Las Palapas Burger

8Oz. Buffalo Patty , Swiss, Onion, Tomatoes, Avocado, Fries.

### Palapas Club Sand

Ham, Turkey, Onion, Cheese, Avocado, Bacon.

### Open Face Tuna Sand

Sourdough Bread, Tuna Grilled a la Grilled, Cheese, Avocado.

### Veggie Wrap

Spanish, Tortilla, Santé Vegetables, Roasted Red Chili's, Avocado, Cheese.

### Las Palapas Seafood Estofado \$12.00

Shrimp, Salmon, Mussels, Scallops, Tuna, Cilantro, Broth.

### Ruben Sand \$9.50

Corn Beef, Sauerkraut, Jack Cheese, House Dressing, Rye Bread, Choice Fruit Or French Fries.

### Pork Barbeque Sand \$10.00

Smoke BBQ Pork, With Melted Jack Pepper Cheese, With Fruit Or French Fries.

## Entrees

### Calamari \$9.00

Deep Fried Squid Rings, Roasted Garlic Mayo, On Chipotle Chili

### Crab Cakes \$11

Served Field Greens With Aioli Sausage

### Coob Salad \$10.00

Romaine lettuce, Dice Bacon, Tomatoes, Turkey, Hard Balled Egg, Blues Cheese, Avocado

### Caesar Salad \$8.00

Lettuce, Tomatoes, Crutons, Parmesan Add Grilled chic \$10.00 Add shrimp \$12.00

### Mandarin Chicken Salad \$9.50

Field Greens, Roasted Slice almond, Grilled Chicken Breast, Tossed With Honey, citrus Vin

### Grilled Salmon Salad \$12.00

Dommer Green Lettuce, Tossed With Jalapeno, Lime Vinaigrette

### New York Sirloin Steak \$12.00

8Oz Steak , Sauté Summer Veggies, Garlic Potatoes, Wild Demi Glaze, Mushrooms

### Crusted Rainbow Froot \$12.00

Black Beans, Roasted Pepper, Cilantro Ragu

### Grilled Portobello Napoleon \$12.00

Marinated Mushrooms, Yellow Squash, Egg Plant, Green Zucchini, Onions, Tomatoes, With Roasted Red Chili Sauce.

### Las Palapas Linguine Pasta \$12.00

Choice, Santé Veggies, Aioli, Grilled Salmon, Chicken, Shrimp

### Las Palapas Seafood Estofado \$12.00

Shrimp, Salmon, Mussels, Scallops, Tuna, Cilantro Broth.

### Ruben Sand \$9.50

Corn beef, Sauerkraut, Jack Cheese, House Dressing, Rye Bread

### Pork Barbeque Sand \$10.00

Smoke BBQ Pork, With Melted Jack Pepper Cheese

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## Las Palapas Bar & Grill

### Lunch

#### Entrees

##### **Cobb Salad \$8.50**

Dice Bacon, Romaine Lettuce, Dice Tomatoes, Turkey, Hard Boiled Egg, Blue Cheese, End Avocado.

##### **Haystack Chicken Salad \$8.50**

Romaine Lettuce, Grilled Chicken, Jicama, Red Bell Peppers, End Cucumber Vinaigrette.

##### **Dungeness Crab Cakes \$12.00**

Served With Field Green End Chipotle Sausage.

##### **Grilled Salmon Salad \$12.00**

Summer Green Lettuce, Tossed With Jalapeño Lime Vinaigrette.

##### **Grilled Portobello Napoleon \$10.00**

Marinated Mushrooms Yellow And Green Zucchini With Roasted Red Bell Pepper Sauce.

##### **New York Sirloin Steak \$12.50**

Garlic, Potatoes, Wild Mushrooms, Demi Glaze.

##### **Crusted Rainbow Trout \$10.50**

Black Beans Roasted Pepper Ragu Cilantro, Lime, Burred Blanc Sauce.

Owner & Executive Chef: *Felipe Felix*

# Las Palapas Bar & Grill

## Dinner

### Starters

Gratinne Onions Soup Cup \$3.00 Bowl \$4.00

### Soup Of The Day

### Starters

**Las Palapas Salad \$12.00**

Spring Mix, Grilled Turkey Breast And Salmon, Tomatoes, Buffalo, Mozzarella Cheese, Red Onions, Roasted Chili's, Tossed, Roasted Garlic, Balsamic Vinaigrette.

**Classic Or Sw Caesar Salad \$10.50**

Romaine Lettuce, Tomatoes, Parmesan Cheese, Crostons, Chipotle Caesar Dressing Or Classic Caesar Dressing. Add. Chicken Grilled \$2.00 Add. Shrimp \$4.00

**Shrimp Spinach Salad \$12.00**

Baby Spinach, Red Onions, Tomatoes, Fennel, Grilled Shrimp, Tossed On Jalapeno, Mint Vinaigrette.

### Entrees

**Pepper Crusted Tenderloin Of Beef ~~\$24.00~~ \$24.00**

Roquefort cream, Cabernet Sauvignon, Garlic, Baked Potatoes, Sauté Summer Veggies.

**New York Sirloin Steak ~~\$22.00~~ \$22.00**

Wild Mushroom Demi Glaze, shallots Fricassee, Jalapeno Cornita.

**Grilled Atlantic Salmon ~~\$18.50~~ \$18.50**

Artichoke Ragu, Garlic, Mash Potatoes, Sauté Summer Veggies.

**Las Palapas Chicken Roulade ~~\$16.50~~ \$16.50**

Boursin Cheese, Artichokes, spinach, Sun Dry Tomatoes, Creamy Sauce, Cilantro.

**Chimichurri Halibut \$22.00**

Wild Rice, Sauté Veggies, Red Peppers Fondue, Oil Basil.

**Grilled Pork Loin \$22.00**

Braised Swiss Chard, Oven Roasted Potatoes, Whole Grain Mustard, Chipotle, Demi Glaze.

**Las Palapas Coast Duet \$24.00**

4Oz Beef Tender Loin, 4Oz Grilled Salmon Fillet, Chicken Choice Breast, Bake Potatoes, Summer Veggies Or Wild Raise.

**Shrimp Scampi \$18.50**

Over Angel Pasta, And Veggies.

**Chicken Florentine \$18.00**

Choice Of Potatoes, Sauté Summer, Veggies, Shrimp Or Chicken Linguini.