

**NOTICE OF REGULAR MEETING
COMMON COUNCIL OF THE CITY OF COOLIDGE
MONDAY, MARCH 28, 2011 - 7:00 P.M.
COUNCIL CHAMBERS – 911 S. ARIZONA BOULEVARD
PINAL COUNTY, COOLIDGE, ARIZONA**

Members of the City of Coolidge City Council will attend either in person or by telephone conference call or video communication.

CALL TO ORDER:

1. Pledge of Allegiance
2. Roll Call

PRESENTATIONS:

3. An update by Superintendent Karl Cordova on the Casa Grande Ruins National Monument.
4. Monthly report by the Coolidge Youth Coalition.

CALL TO THE PUBLIC

THE PROCEDURES TO FOLLOW IF YOU ADDRESS THE COUNCIL ARE: COUNCIL REQUESTS THAT YOU EXPRESS YOUR IDEAS IN FIVE MINUTES OR LESS AND REFRAIN FROM ANY PERSONAL ATTACKS OR DEROGATORY STATEMENTS ABOUT ANY CITY EMPLOYEE, A FELLOW CITIZEN, OR ANYONE ELSE WHETHER IN THE AUDIENCE OR NOT. THE MAYOR WILL LIMIT DISCUSSION WHENEVER HE DEEMS SUCH AN ACTION APPROPRIATE TO THE PROPER CONDUCT OF THE MEETING. AT THE CONCLUSION OF AN OPEN CALL TO THE PUBLIC, INDIVIDUAL MEMBERS OF THE COUNCIL MAY RESPOND TO CRITICISM MADE BY THOSE WHO HAVE ADDRESSED THE COUNCIL, MAY ASK STAFF TO REVIEW A MATTER OR MAY ASK THAT A MATTER BE PUT ON A FUTURE AGENDA. HOWEVER, MEMBERS OF THE COUNCIL SHALL NOT DISCUSS OR TAKE LEGAL ACTION ON ANY MATTERS DURING AN OPEN CALL TO THE PUBLIC UNLESS THE MATTERS ARE PROPERLY NOTICED FOR DISCUSSION AND LEGAL ACTION.

BUSINESS:

CONSENT AGENDA - ALL CONSENT ITEMS WERE REVIEWED INDIVIDUALLY. ALL CONSENT AGENDA ITEMS MAY BE ENACTED BY ONE MOTION AND APPROVED. ANY ITEM MAY BE REMOVED FROM THE CONSENT AGENDA AND CONSIDERED SEPARATELY IF A MEMBER OF THE COUNCIL SO REQUESTS. CONSENT ITEMS ARE MARKED WITH AN ASTERISK (*).

5. *Consider approval of appointing Johnny Federico and Anthony Felix to serve a two-year term on the Parks and Recreation Advisory Board. **Discussion and action.**
6. *Consider approval of re-appointing Anna Lori Lundberg to serve another two-year term on the Library Advisory Board. **Discussion and action.**
7. *Consider approval of changing the route times on the Pinal Central Xpress service line to improve service times that meet the public and commuter request. **Discussion and action.**

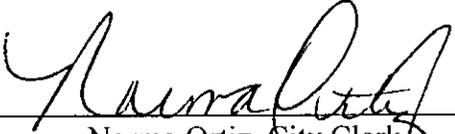
8. ***Resolution No. 11-07;** A Resolution of the Mayor and City Council of the City of Coolidge, Arizona, in support of the Community Action Human Resources Agency (CAHRA) as the Community Action Program for Pinal County in the State of Arizona, and certifying that CAHRA is addressing the wellbeing of the low-income and vulnerable populations in an effort to end poverty. **Discussion and action.**
9. Consider approval of Liquor License Application #10113208 submitted by Mr. Brandon Tat for the T&L Convenience Store located at 411 N. Arizona Boulevard, Coolidge, Arizona. **Discussion and action.**
10. **Resolution No. 11-08;** A Resolution of the Mayor and City Council of the City of Coolidge, Arizona, to create an Infill Incentive District and adopting an Infill Incentive Plan as described in the Arizona Revised Statutes §9-499-10. **Discussion and action.**
11. Consider approval of a request submitted by Mr. Beau Woodring representing Dollar General for additional Development Fee Relief. **Discussion and action.**
12. To receive public comments on the proposed amendments to the Coolidge Zoning Code regulating medical marijuana uses in the City of Coolidge. **Public Hearing.**
13. **Resolution No. 11-09;** A Resolution of the Mayor and City Council of the City of Coolidge, Arizona, declaring as a public record that certain document filed with the City Clerk and entitled “City of Coolidge Zoning Code Amendments for Medical Marijuana”, relating to the establishment of regulations and requirements for the dispensing, cultivating, infusing, and use of medical marijuana by amending the Coolidge City Zoning Code by amending Sections 302, 501, 502, 503, 504, 505, 506, 602, 603, 605, 701, 702, 801, 802 and 1008 of the previously adopted City Zoning Code. **Discussion and action.**
14. **Ordinance No. 11-01;** An Ordinance of the Mayor and City Council of the City of Coolidge, Arizona, adopting “City of Coolidge Zoning Code Amendments for Medical Marijuana” by reference which amends Sections 302, 501, 502, 503, 504, 505, 506, 602, 603, 605, 701, 702, 801, 802 and 1008 of the Coolidge City Zoning Code and providing for severability and declaring an emergency. **Discussion and action.**
15. An update on the new FY 11/12 projections in General Fund for State Shared Revenues based on the 2010 census figures. **Discussion only.**

REPORT FROM THE MAYOR-COUNCIL AND/OR CITY MANAGER

ADJOURNMENT

THIS NOTICE IS POSTED IN ACCORDANCE WITH THE CITY CODE 2-4-1 OF THE CITY OF COOLIDGE AND A.R.S. §38-431, ET SEQ. ALL MEMBERS OF THE PUBLIC ARE INVITED TO ATTEND THIS MEETING.

DATED this 23rd day of March, 2011


Norma Ortiz, City Clerk

PERSONS WITH DISABILITIES NEEDING REASONABLE ACCOMMODATIONS, INCLUDING LARGE PRINT MATERIALS OR INTERPRETERS, SHOULD CONTACT THE ADA COORDINATOR AT (520) 723-5361 OR TDD LINE (520) 723-4653 NO LATER THAN 10:00 A.M. MARCH 28, 2011.

The Agenda and all supporting documents and materials pertaining to this Agenda together with Staff and Department Reports are available for viewing in City Hall and the Library during normal business hours.

POST: 3-23-11

TIME: 5:00 p.m.

**Casa Grande Ruins
National Monument**

MONUMENT UPDATE

February 2011

Karl Cordova
Superintendent



First Reserved for Federal Protection: *June 22, 1892*
Established as a unit of the National Park System,
August 3, 1918

"to protect and preserve the Casa Grande, other ruins of
ancient buildings, and objects of prehistoric interest."



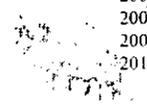
Hours of Operation:

- Open 7 Days a Week 9AM – 5PM
- \$5 Entrance Fee (Age 15 and under free)
- Interagency Pass & Senior Pass
- Only Closed on Thanksgiving & Christmas Day




Visitation:

	<u>Average Monthly Visitation (03-07)</u>	<u>Annual Visitation</u>
		2003 87,687
JAN	11,279	2004 93,933
FEB	15,125	2005 97,214
MAR	15,881	2006 88,295
APR	9,052	2007 76,854
MAY	4,765	2008 75,923
JUN	3,577	2009 78,506
JUL	3,520	2010 79,507
AUG	3,172	
SEP	3,356	
OCT	5,297	
NOV	6,726	
DEC	6,940	



Visitor Statistics

- Nearly 85% of all visitors to the Ruins are from outside of Arizona.
- Of the 20% of visitors from AZ, nearly half are from Pinal County.

? Which two states have the most visitors to CGRNM?



VISITORS FROM OUTSIDE OF THE UNITED STATES

- Nearly 15% of visitors are from outside of U.S.





EFFICIENCY
FOR
AMERICA

ECONOMIC BENEFIT OF THE NPS

- According to a recent study (University of Michigan) it found that National Park Service units are often economic generators in local economies.
- The study found that visitors to Casa Grande Ruins National Monument contribute about \$2.43 to the local economy for every \$1 appropriated to CGRNM.
- Benefits come from fuel, food, lodging, souvenirs and general supplies.



EFFICIENCY
FOR
AMERICA



2010 Accomplishments

- Critical Preservation Work Completed on Compound A.
- Underground Powerlines Completed in Cooperation with APS.
- Constructed Photovoltaic System in Cooperation with BIA.
- All Roadways Were Resurfaced.
- Music Fest had increase in attendance



EFFICIENCY
FOR
AMERICA

2011 Goals

- Complete Preservation Treatment of Compound B.
- Construct Visitor Center Expansion to Accommodate Bus Tours.
- Complete New Interpretive Film.
- Continue American Indian Music Fest
- Hire Three New Permanent Employees



EFFICIENCY
FOR
AMERICA

Challenges and Opportunities

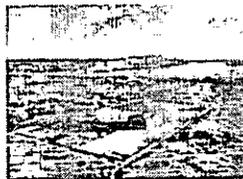
- Find New Ways to Engage Youth in Understanding More about the Ruins.
- Encourage Local Populations to Visit the Ruins and Learn about the Land Beneath Their Feet.
- Seek Better Ways to Preserve Ruins.
- Maintain Visitor and Employee Satisfaction with a Challenging Budget.



EFFICIENCY
FOR
AMERICA

Boundary Expansion Proposal Update:

- H.R. 5110 passed the subcommittee and committee levels, before it died on the House floor.
- New Congress (112th), no action yet.
- Process starts over again with new Rep. Paul Gosar.



EFFICIENCY
FOR
AMERICA

Volunteering:

- Independent/Group Opportunities
- Work with staff or public



Volunteer Coordinator – Diane Garcia (coming soon)
(520) 723-3172



DEPARTMENT
OF THE
INTERIOR

Interpretive Programming:

- American Indian Music Fest
- Fee-Free Days (17 in 2011)
- Special Events
- Public Lands Day (SEP 28)



DEPARTMENT
OF THE
INTERIOR

Friends Group:

- Independent Non-profit Group
- Project and Program Support, Fund Raising and Education



Friend's Group Director – Doug Craig

(520) 682-2232

DCraig@northlandresearch.com



DEPARTMENT
OF THE
INTERIOR

Questions?

Superintendent Karl Cordova

(520) 723-3172 x21

Karl_Cordova@nps.gov

**CITY OF COOLIDGE
CITY COUNCIL ACTION FORM**

SUBJECT: Parks and Recreation Advisory Board Appointments	STAFF PRESENTER: Ricky LaPaglia, Parks and Recreation Director
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RECOMMENDATION:

It is the recommendation of The Parks and Recreation Department that the council appoint Johnny Federico and Anthony Felix to fill two vacancies on The Parks and Recreation Advisory Board.

DISCUSSION:

Both candidates will be appointed for a two year term.

FISCAL IMPACT:

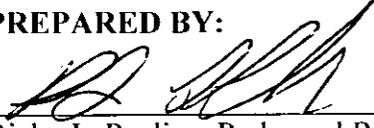
None

Attachments

Application for Parks and Recreation Advisory Board

REVIEWED BY:


 Robert Flatley – City Manager

PREPARED BY:


 Ricky LaPaglia – Parks and Recreation Director

N/A

 Lisa Pannella – Finance Director

N/A

 Denis Fitzgibbons – City Attorney

APPLICATION

NAME OF BOARD: Parks and Recreation Advisory Board

NAME: Johnny Federico

DATE: 12/25/09

STREET ADDRESS: 1035 S. Main Street Coolidge, AZ 85128

MAILING ADDRESS: Same as above

TELEPHONE: 520-241-6613

OCCUPATION: Electrical Engineer

In making an appointment, each applicant's knowledge, background, interest, experience and availability of time to perform the work and duties of the commission shall be taken into consideration.

List your experience and why you want to serve on this commission.

I am a long time resident of Coolidge and believe I can be an asset to The Parks and Recreation Advisory Board. I have experience working in a recreation setting. In addition to working in recreation I have also served on The Parks and Recreation Board. I believe my experience working in recreation and serving on the board will be an asset to The City of Coolidge and more specifically The Parks and Recreation Advisory Board. Thank you for your consideration.

Signature

This application will be kept on file for a two (2) year period.

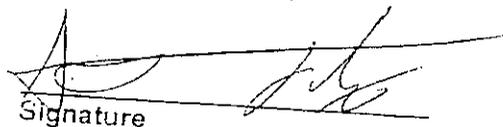
APPLICATION

NAME OF BOARD: Coolidge Parks + Recreation
NAME: Anthony F. Felix DATE 12/9/08
STREET ADDRESS 1113 W. Northern / Coolidge, AZ 85228
MAILING ADDRESS 1113 W. Northern / Coolidge, AZ 85228
TELEPHONE (520) 560-2078 OCCUPATION Fire Fighter

In making an appointment, each applicant's knowledge, background, interest, experience and availability of time to perform the work and duties of the commission shall be taken into consideration.

List your experience and why you want to serve on this commission.

To aid + guide the City of Coolidge Parks + Recreation into a successful + productive future. This is why I would want to be a member on the Coolidge Parks + Recreation Board. I, Anthony F. Felix, was born + raise here in Coolidge, AZ. I grew up attending + participating in a vast array of parks + rec activities ranging from summer programs to sports programs. I was + still are very grateful that these programs are around. I now feel it is time to give back to the community that has helped me. Being an eight year member of the Coolidge Volunteer Fire Dept. I have been able to give back to the community already. I hope that we can work together in the future + serve the City of Coolidge proudly.


Signature

**CITY OF COOLIDGE
CITY COUNCIL ACTION FORM**

SUBJECT: Reappointment of member to serve
on the Library Advisory Board.

STAFF PRESENTER: Jill Dusenberry,
Assistant City Manager

RECOMMENDATION:

Consider reappointing Anna Lori Lundberg to a second term on the Library Advisory Board for a period of two years.

DISCUSSION:

Anna Lori Lundberg submitted her application to renew her position and the Library Advisory Board voted unanimously to accept her renewal on March 17th, 2011.

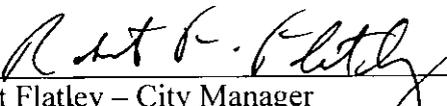
FISCAL IMPACT:

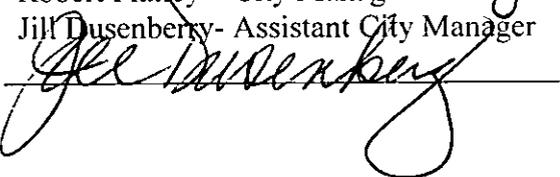
None

Attachments

Renewal Application

REVIEWED BY:



Robert Flatley – City Manager
Jill Dusenberry- Assistant City Manager


PREPARED BY:



Adri Saavedra – Library Manager

Application

Name of Board: Lori Lundberg

Name: _____ Date: _____

Street Address: _____

Mailing Address: _____

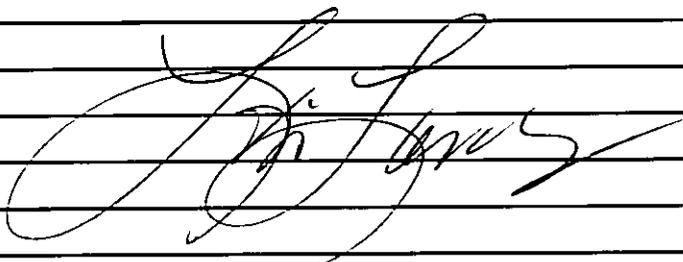
Telephone: _____ email address: _____

Occupation _____

In making an appointment, each applicant's knowledge, background, interest, experience, availability of time to perform the work and duties of the commission shall be taken into consideration.

Please list your experience and why you want to serve on this commission.

I WOULD LIKE TO RENEW.



**CITY OF COOLIDGE
CITY COUNCIL ACTION FORM**

SUBJECT: Pinal Central Express Route Schedule Update	STAFF PRESENTER: Marcus Hoffman
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RECOMMENDATION:

Change route times on the Pinal Central Xpress service line to improve service times that meets the public and commuter request.

DISCUSSION:

Over the past few months employees from Pinal County and various other places of employment in Florence have been requesting that we provide more bus service in the morning to help put people on the bus for employment. The morning bus that runs between Casa Grande and Florence from 6:30 am to 7:30 am is near full and there is a potential for more riders at an offset time 5:30 am to 6:30 am.

During our first 8 months of service we have made little changes to the route schedule to try to keep things consistent for the riders that use our services already. The evening route that makes two trips to Casa Grande from Coolidge and Central Arizona College (CAC) from 8:00 pm to 10:00 pm is not being used but maybe a few times a week. There are not enough trips being made to sustain that level of service. Those time frames were requested by students and others in the past but there seems too little to no participation over 6 months of time.

The current changes to the Pinal Central Xpress route will have no fiscal impact to the budget of the department and will meet the demands of citizens trying to get to school or places of employment. Pulling the last two hours (8:00-10:00 pm) out of the schedule and adding them to a vehicle in the morning will allow us to meet different request from commuters and school students.

There is also a need to add an additional stop on the route for the morning and evening commuter runs only at the County Complex in Casa Grande. (See map) This stop will not be serviced throughout the course of the day only during the commute hours of the day allowing county employees to park at the current location of where they used to van pool from.

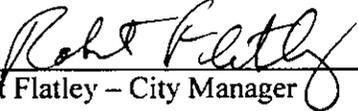
FISCAL IMPACT:

There will be no fiscal impact to the City for these changes. Services hours are being only adjusted not increased or decreased in any way.

Attachments

New Pinal Central Express Bus Schedule

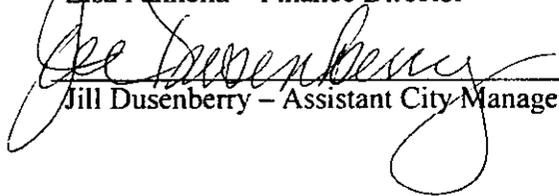
REVIEWED BY:



Robert Flatley – City Manager

N/A

Lisa Pannella – Finance Director



Jill Dusenberry – Assistant City Manager

PREPARED BY:



Marcus Hoffman – Transit Manager

Denis Fitzgibbons – City Attorney

**CITY OF COOLIDGE
CITY COUNCIL ACTION FORM**

SUBJECT: Resolution to support CAHRA in their efforts to preserve CSBG Funding.	STAFF PRESENTER: Norma Ortiz, City Clerk
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RECOMMENDATION:

Approval and adoption of Resolution No. 11-07; which supports the efforts of the Community Action Human Resources Agency (CAHRA) to preserve Community Service Block Grant (CSBG) funding.

DISCUSSION:

Ms. Mary Lou Rosales, Executive Director with CAHRA has requested the City's support to help convince our President and Congressional Representatives to preserve Community Service Block Grant (CSBG) funding to that they may continue to provide assistance to the low-income and vulnerable people in our County and to provide opportunities for improved self sufficiency.

Please review the attached letter and Resolution for your consideration.

FISCAL IMPACT:

None

Attachments

Resolution No. 11-07
Letter of Request by CAHRA

REVIEWED BY:

Robert Flatley
Robert Flatley, City Manager

N/A
Lisa Pannella, Finance Director

PREPARED BY:

Norma Ortiz
Norma Ortiz, City Clerk

RESOLUTION No. 11-07

A RESOLUTION OF THE MAYOR AND CITY COUNCIL OF THE CITY OF COOLIDGE, ARIZONA, IN SUPPORT OF THE COMMUNITY ACTION HUMAN RESOURCES AGENCY (CAHRA) AS THE COMMUNITY ACTION PROGRAM FOR PINAL COUNTY IN THE STATE OF ARIZONA, AND CERTIFYING THAT CAHRA IS ADDRESSING THE WELLBEING OF THE LOW-INCOME AND VULNERABLE POPULATIONS IN AN EFFORT TO END POVERTY.

WHEREAS, the City Council of Coolidge is desirous of addressing low-income and vulnerable population issues and conducting activities that ensure the wellbeing of low-income and vulnerable populations in an effort to address poverty; and

WHEREAS, CAHRA as the Community Action Agency relies on Community Services Block Grant funding to assist in administering Community Services Programs, Home Repair and Weatherization Programs, Housing Counseling Programs, the Emergency Alert Program, the Emergency Food Program and other services and programs to assist thousands of low-income individuals and families each year meet the challenge of immediate economic crisis and help them achieve self-sufficiency; and

WHEREAS, the City Council of Coolidge understands that Community Services Block Grant sustains Community Action Agencies and insures the existence of vital programs that are imperative to the security and wellbeing of residents of Coolidge and Pinal County; and

WHEREAS, the Community Services Block Grant supports programs for the neediest in our community, targeted to individuals and families with incomes at or below the poverty line, including the working poor; and

WHEREAS, the Community Services Block Grant funding made it possible to assist 2,462 Pinal County households with 8,855 men, women and children, senior citizens and displaced workers and low-income people benefitted from a range of services from emergency food to job training, affordable housing, foreclosure mitigation, financial education and assistance programs for housing support; and

WHEREAS, the tripartite boards of Community Action Agencies with equal representation from the local private sector, local public sector and low-income communities being served, define the roles of local Community Action Agencies, establishing their priorities for serving the local communities and designing solutions to meet the needs of the low-income individuals and communities being served; and

WHEREAS, the Community Services Block Grant provides resources to Community Action Agencies to serve as catalysts for engaging local partners, including government representatives, area citizens, local businesses, neighborhood civic groups and the faith community, in rebuilding and strengthening the low-income communities in which they reside; and

WHEREAS, the Community Services Block Grant leveraged over \$4.1 million in other federal, state, local and private resources in fiscal year 2010 for services administered by the Community Action Human Resources Agency and for each CSBG dollar spent, CAHRA and their partners matched \$16.50 from all other sources..

NOW THEREFORE, BE IT RESOLVED, that the Mayor and City Council of the City of Coolidge requests the President of the United States and the United States Congress to preserve the Community Services Block Grant as an independent program administered by the U.S. Department of Health and Human Services, and to provide an appropriation for fiscal year 2012 that preserves the CSBG funding at a level which sustains the programs and services to our most vulnerable citizens.

PASSED AND ADOPTED by the Mayor and City Council of the City of Coolidge, this 28th day of March, 2011.

By: _____
Mayor

ATTEST:

APPROVED AS TO FORM:

City Clerk

City Attorney

Bob Flatley

From: Mary Lou Rosales [MLRosales@CAHRAPinal.org]

Sent: Wednesday, March 09, 2011 4:21 PM

To: bobf@coolidgeaz.com

Subject: CSBG Funding

Good Afternoon Bob,

CAHRA is appealing for your support to help convince our President and our Congressional Representatives to preserve Community Service Block Grant Funding in the upcoming budget. A proposal has been made that would cut these funds by at least 50% in the next fiscal year.

I have attached a letter and resolution for your review. Please consider sharing this information with members of your Council and then passing the attached resolution.

We have faithfully served the interests of the low-income and vulnerable people in our County for thirty years and now we are asking for your support so that we may continue to provide assistance and opportunities for improved self sufficiency.

If you need additional information, please don't hesitate to contact me.

Mary Lou Rosales
Executive Director
Community Action Human Resources Agency
311 N. Main Street
Eloy, Az 85131
520-466-1112
520-466-0013 Fax

Look for CAHRA and other resources at www.pinalresources.org



**Community Action
Human Resources Agency**
311 North Main Street, Eloy, AZ 85131
(520) 466-1112 Fax (520) 466-0013



United Way
It brings out the
best in all of us

March 5, 2011

Mr. Robert Flatley, City Manager
City of Coolidge
911 S. Arizona Blvd.
Coolidge, Arizona 85128

Dear Bob:

I am writing to request the opposition by the City of Coolidge Council to proposed cuts to the Community Services Block Grant Funding proposed in the federal budget. The cuts would negatively impact the work of Community Action Human Resources Agency (CAHRA) that serves all of Pinal County.

The impact to CAHRA's programs would be significant: The impact on vulnerable households in Pinal County would be as follows:

- 2,462 households with 8,855 unduplicated men, women and children, senior citizens, displaced workers and low-income people benefitted a range of services from emergency food to job training, affordable housing, foreclosure mitigation, financial education and assistance programs for housing support.
- 1,055 seniors and disabled persons benefitted from programs that enhance their independence and allow them to continue to live on their own.
- 621 families with 848 children aged 0 to 5 years benefitted from monthly food boxes to insure these children had access to nutritionally balanced food.
- 5 jobs were created and maintained in the Agency's Housing Department to provide weatherization and other programs not only to homeowners, but community facilities including public housing and domestic violence shelters.
- \$474,649 was paid to local contractors working with Housing Department programs. These funds made it possible for these contractors to remain in business despite the Great Recession.

Our Agency has provided services for the past 30 years and in most cases, is the only substantial provider of services in our County which has been especially hard hit by high unemployment and one of the highest foreclosure rates in our country.

The CSBG funding received by our Community Action Program makes it possible to provide all these services and is irreplaceable with any other resources. We understand the need and support the efforts to balance the national budget, but we respectfully ask that consideration be given to this funding and what these funds mean to our rural communities, including Coolidge. We ask that you and the Council Members strongly consider adoption the attached resolution at your next City Council meeting.

Sincerely,

Mary Enriquez
CAHRA Board President

Mary Lou Rosales
Executive Director

People helping people since 1981



**CITY OF COOLIDGE
CITY COUNCIL ACTION FORM**

SUBJECT: Request to approve liquor license	STAFF PRESENTER: Joe Brugman, Chief of Police
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RECOMMENDATION:

Police staff submits for Council review the application for liquor license submitted by Brandon Dieu Tat. Mr. Tat intends to open T and L convenience at 411 North Arizona Blvd. Mr. Tat is requesting a new liquor license.

DISCUSSION:

The police department has conducted the required investigation and has found no reason for the denial of Mr. Tat's application at this time. However, I learned that "North School", located at the South-East corner of Northern and Arizona Blvd., which is owned by the school district and not being used by students at this time, may be utilized in the future as an educational facility. This facility is approximately 150 feet from the proposed license location.

Mr. Tat is a bona fide resident of the State of Arizona, with U.S. citizenship since 2005. Mr. Tat was found to have no criminal activity through NCIC/ACIC and he has no violations posted with the Arizona Department of Liquor License and Control.

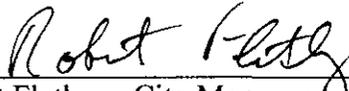
FISCAL IMPACT:

None

Attachments

Copy of the State Application for Liquor License

REVIEWED BY:


Robert Flatley – City Manager

N/A
Lisa Pannella – Finance Director

PREPARED BY:


Joe Brugman, Chief of Police

N/A
Denis Fitzgibbons, City Attorney

**Review of Liquor License Application
DR 2011-4503**

Application for Series 10 Liquor License #10113208

Corp. / Partnership/ L.L.C:

T&L Convenience
411 N. Arizona Boulevard
Coolidge, AZ 85128
Business Phone: 623-810-6573

Applicant(s):

Brandon Dieu Tat 12/23/1979
3209 N. Spyglass Ct.
Florence, AZ 85132

Investigative Sources:

NCIC/ ACIC; NLLQ
New World Query Coolidge Police Department
<http://www.azliquor.gov>
Accurant Criminal History query

Findings:

Mr. Tat is a bona fide resident of the State of Arizona since September 1994 and became a naturalized citizen in June 2005.

Mr. Tat was found to have no criminal activity through NCIC/ ACIC. Mr. Tat was found to have no violations posted with the Arizona Department of Liquor License and Control. Although the establishment is in close proximity of Coolidge High School buildings, it is outside of the (300) three hundred foot rule mentioned in A.R.S 4-207.

Recommendations:

I could not find any reason the City of Coolidge should refuse this application request and recommend it goes ahead with placing the request on the agenda for March 28, 2011.

Attachments:

Criminal History, NLLQ, Global Subject Activity Report, AZ Liquor License Query report

**Officer J. Collazo #72
Investigations Division**

*Jim C3
3/16/11* *B#30*

Search by Location Address

License Number:	10113208	Status:	Pending
Business Name:	T & L CONVENIENCE		
Location Address:	411 N ARIZONA BLVD		
	COOLIDGE	AZ	85228
County:	PINAL		
Licensee/Agent/Tel.:	TAT, BRANDON	(623)810-6573	
Owner/Exp. Date/Issue Date:	T & L CONVENIENCE LLC		
Status Date/IP Exp. Date:	2/24/11	Lic. Type:	BrWnStor

License Number:	10113160	Status:	Terminat
Business Name:	T & L CONVENIENCE		
Location Address:	411 N ARIZONA BLVD		
	COOLIDGE	AZ	85228
County:	PINAL		
Licensee/Agent/Tel.:	NATIONS, RANDY	(623)810-6573	
Owner/Exp. Date/Issue Date:	STAR 7 GAS & FOOD MART	8/31/09	4/3/08
Status Date/IP Exp. Date:	4/3/08	Lic. Type:	BrWnStor

11 FEB 24 Lic. Lic. # 2117
 Arizona Department of Liquor Licenses and Control
 800 West Washington, 5th Floor
 Phoenix, Arizona 85007
 www.azliquor.gov
 602-542-5141

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:

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

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 #(s): _____

1. Type of License(s): Beer and Wine Store License - Series 10, _____
 2. Total fees attached: \$ _____

Department Use Only

APPLICATION FEE AND INTERIM PERMIT FEES (IF APPLICABLE) ARE NOT REFUNDABLE.
 The fees allowed under A.R.S. 44-6852 will be charged for all dishonored checks.

SECTION 4 Applicant

1. Owner/Agent's Name: Mr. Tat Brandon Dieu
 (Insert one name ONLY to appear on license) Last First Middle

2. Corp./Partnership/L.L.C.: T & L Convenience, LLC P 1064510
 (Exactly as it appears on Articles of Inc. or Articles of Org.) B 1045668

3. Business Name: T & L Convenience, LLC B 1038387
 (Exactly as it appears on the exterior of premises)

4. Principal Street Location 411 N. Arizona Blvd Coolidge Pinal 85128
 (Do not use PO Box Number) City County Zip

5. Business Phone: 623-810-6573 Daytime Contact: 623-810-6573

6. Is the business located within the incorporated limits of the above city or town? YES NO

7. Mailing Address: 3209 N. Spyglass Ct, Florence AZ 85132

8. Price paid for license only bar, beer and wine, or liquor store: Type N/A \$ _____ Zip _____ Type N/A \$ _____

DEPARTMENT USE ONLY					
Fees:	<u>100⁰⁰</u>				
	Application	Interim Permit	Agent Change	Club	Finger Prints \$ <u>24⁰⁰</u>
					<u>124⁰⁰</u>
					TOTAL OF ALL FEES
Is Arizona Statement of Citizenship & Alien Status For State Benefits complete? <input type="checkbox"/> YES <input type="checkbox"/> NO					
Accepted by:	<u>DM</u>	Date:	<u>2/24/11</u>	Lic. #	<u>10113208</u>

SECTION 5 Interim Permit:

1. If you intend to operate business when 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,
 (Print full name)
 MEMBER, STOCKHOLDER, OR LICENSEE (circle the title which applies) of the stated license and location.

State of _____ County of _____

X _____
 (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 QUESTIONNAIRE (FORM LIC0101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 PROCESSING FEE FOR EACH CARD.

1. Individual:

Last	First	Middle	% Owned	Mailing Address	City State Zip

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

General-Limited	Last	First	Middle	% Owned	Mailing 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	Mailing Address	City, State, Zip	Telephone#

SECTION 7 Corporation/Limited Liability Co.:

EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNAIRE (FORM LIC0101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 PROCESSING FEE FOR EACH CARD.

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- CORPORATION Complete questions 1, 2, 3, 5, 6, 7, and 8.
- L.L.C. Complete 1, 2, 4, 5, 6, 7, and 8.

1. Name of Corporation/L.L.C.: T & L Convenience, LLC
(Exactly as it appears on Articles of Incorporation or Articles of Organization)
2. Date Incorporated/Organized: 12/14/2010 State where Incorporated/Organized: Arizona
3. AZ Corporation Commission File No.: _____ Date authorized to do business in AZ: _____
4. AZ L.L.C. File No: L16461658 Date authorized to do business in AZ: 12/14/2010
5. Is Corp./L.L.C. Non-profit? YES NO
6. List all directors, officers and members in Corporation/L.L.C.:

Last	First	Middle	Title	Mailing Address	City State Zip
Tat	Brandon	Dieu	Manager MEMBER	3209 N. Spyglass Ct, Florence AZ 85132	

(ATTACH ADDITIONAL SHEET IF NECESSARY)

7. List stockholders who are controlling persons or who own 10% or more:

Last	First	Middle	% Owned	Mailing Address	City State Zip
Tat	Brandon	Dieu	100%	3209 N. Spyglass Ct, Florence AZ 85132	

(ATTACH ADDITIONAL SHEET IF NECESSARY)

8. If the corporation/L.L.C. is owned by another entity, attach a percentage of ownership chart, and a director/officer/member disclosure for the parent entity. Attach additional sheets as needed in order to disclose personal identities of all owners.

SECTION 8 Club Applicants:

EACH PERSON LISTED MUST SUBMIT A COMPLETED QUESTIONNAIRE (FORM LIC0101), AN "APPLICANT" TYPE FINGERPRINT CARD, AND \$24 PROCESSING 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
3. List officer and directors:

Last	First	Middle	Title	Mailing Address	City State Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

- 1. Current Licensee's Name: _____
(Exactly as it appears on license) Last 1 FEB 24 1971 First LIC 081 2 17 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. Governmental Entity: _____
- 2. Person/designee: _____
Last _____ First _____ Middle _____ Contact Phone Number _____

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-Series 06,07, and 09).

- 1. Current Licensee's Name: _____ Entity: _____
(Exactly as it appears on license) Last _____ First _____ Middle _____ (Indiv., Agent, etc.)
- 2. Corporation/L.L.C. Name: _____
(Exactly as it appears on license)
- 3. Current Business Name: _____
(Exactly as it appears on license)
- 4. Physical Street Location of Business: Street _____
City, State, Zip _____
- 5. License Type: _____ License Number: _____
- 6. If more than one license to be transfered: License Type: _____ License Number: _____
- 7. Current Mailing Address: Street _____
(Other than business) City, State, Zip _____
- 8. Have all creditors, lien holders, interest holders, etc. been notified of this transfer? YES NO
- 9. Does the applicant intend to operate the business while this application is pending? YES NO If yes, complete Section 5 of this application, attach fee, and current license to this application.

10. I, _____, hereby authorize the department to process this application to transfer the
(print full name)
privilege of the license to the applicant, provided that all terms and conditions of sale are met. Based on the fulfillment of these conditions, I certify that the applicant now owns or will own the property rights of the license by the date of issue.

I, _____, declare that I am the CURRENT OWNER, AGENT, MEMBER, PARTNER
(print full name)
STOCKHOLDER, or LICENSEE of the stated license. I have read the above Section 11 and confirm that all statements are true, correct, and complete.

(Signature of CURRENT LICENSEE)

State of _____ County of _____
The foregoing instrument was acknowledged before me this

My commission expires on: _____

Day Month Year

(Signature of NOTARY PUBLIC)

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

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 _____
 (Physical Street Location) Address _____
3. License Type: _____ License Number: _____
4. If more than one license to be transferred: License Type: _____ License Number: _____
5. What date do you plan to move? _____ What date do you plan to open? _____

SECTION 13 Questions for all in-state applicants excluding those applying for government, hotel/motel, and restaurant licenses (series 5, 11, and 12):

A.R.S. § 4-207 (A) and (B) state that no retailer's license shall be issued for any premises which are at the time the license application is received by the director, within three hundred (300) horizontal feet of a church, within three hundred (300) horizontal feet of a public or private school building with kindergarten programs or grades one (1) through (12) or within three hundred (300) horizontal feet of a fenced recreational area adjacent to such school building. The above paragraph DOES NOT apply to:

- a) Restaurant license (§ 4-205.02)
- b) Hotel/motel license (§ 4-205.01)
- c) Government license (§ 4-205.03)
- d) Fenced playing area of a golf course (§ 4-207 (B)(5))

1. Distance to nearest school: 307 ft. Name of school Coolidge Unified School District: Principals Office
 Address 450 N. Arizona Blvd, Coolidge AZ 85128
 City, State, Zip _____
2. Distance to nearest church: 413 ft. Name of church Jesus Died For U Ministries
 Address 462 W. Lindbergh, Coolidge AZ 85128
 City, State, Zip _____
3. I am the: Lessee Sublessee Owner Purchaser (of premises)
4. If the premises is leased give lessors: Name Thuan Phat, LLC
 Address 3209 N. Spyglass Ct, Florence AZ 85132
 City, State, Zip _____
- 4a. Monthly rental/lease rate \$ 1,500.00 What is the remaining length of the lease 2 yrs. 11 mos.
- 4b. What is the penalty if the lease is not fulfilled? \$ N/A or other _____
 (give details - attach additional sheet if necessary)
5. What is the total **business** indebtedness for this license/location excluding the lease? \$ 0
 Please list debtors below if applicable.

Last	First	Middle	Amount Owed	Mailing Address	City State	Zip

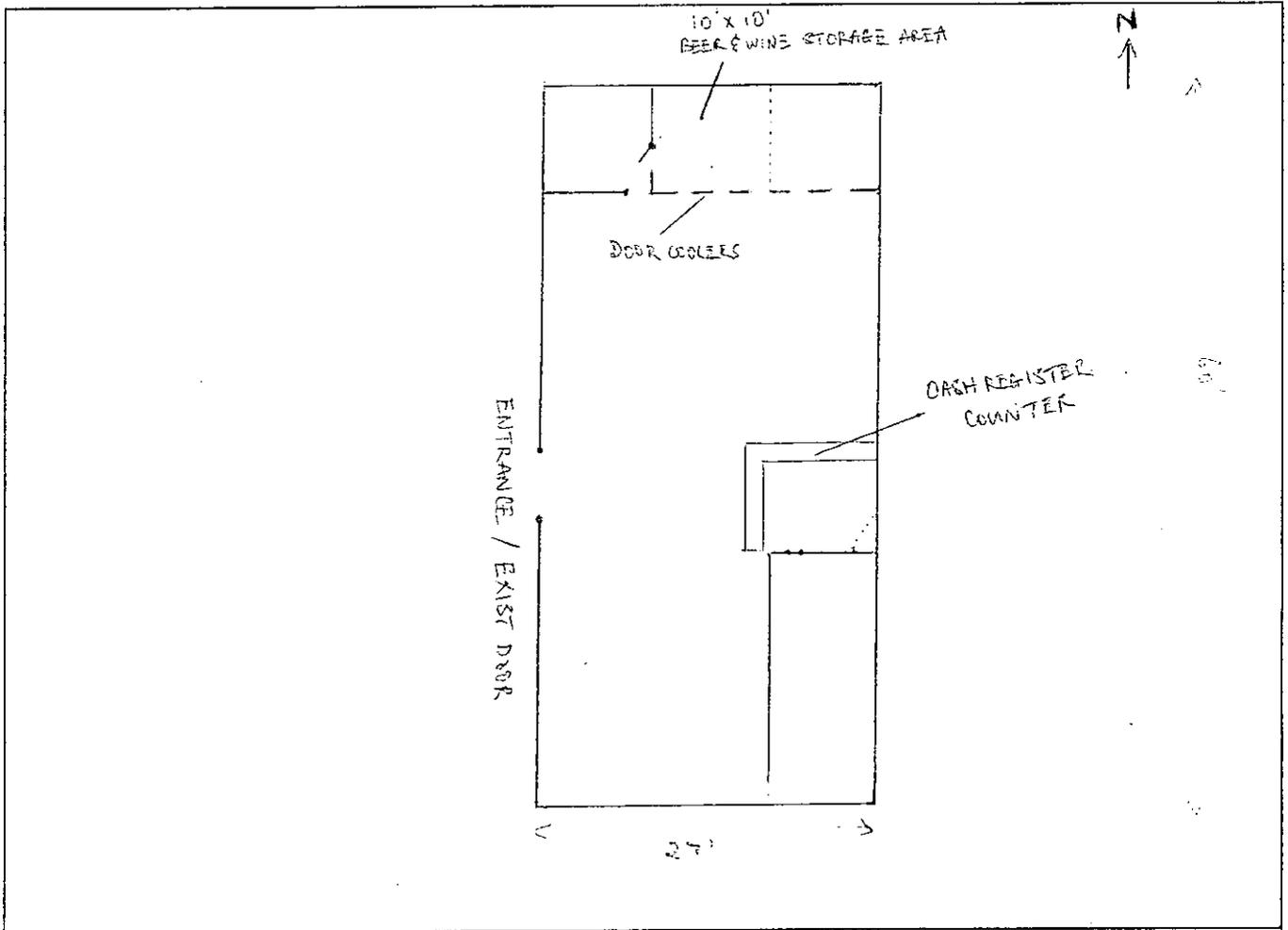
(ATTACH ADDITIONAL SHEET IF NECESSARY)

6. What type of business will this license be used for (be specific)? Retail sale of fuel and consumer goods

SECTION 15 Diagram of Premises

4. In this diagram please show only the area where spirituous liquor is to be sold, served, consumed, dispensed, possessed or stored. It must show all entrances, exits, interior walls, bars, bar stools, hi-top tables, dining tables, dining chairs, the kitchen, dance floor, stage, and game room. Do not include parking lots, living quarters, etc. When completing diagram, North is up ↑.

If a legible copy of a rendering or drawing of your diagram of premises is attached to this application, please write the words "diagram attached" in box provided below.



SECTION 16 Signature Block

I, Brandon Dieu Tat, hereby declare that I am the OWNER/AGENT filing this application as stated in Section 4, Question 1. I have read this application and verify all statements to be true, correct and complete.

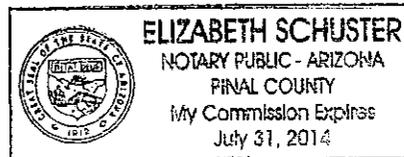
[Signature]
(signature of applicant listed in Section 4, Question 1)

State of Arizona County of Pinal

The foregoing instrument was acknowledged before me this 21st of January, 2011
Day Month Year

Elizabeth Schuster
signature of NOTARY PUBLIC

My commission expires on : 31-7-2014
Day Month Year



ARIZONA DEPARTMENT OF LIQUOR LICENSES & CONTROL

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

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 CONTROLLING PERSON, AGENT, OR MANAGER. EACH PERSON COMPLETING THIS FORM MUST SUBMIT AN "APPLICANT" TYPE FINGERPRINT CARD WHICH MAY BE OBTAINED AT DLLC. FINGERPRINTING MUST BE DONE BY A BONA FIDE LAW ENFORCEMENT AGENCY OR A FINGERPRINTING SERVICE APPROVED BY DLLC. THE DEPARTMENT DOES NOT PROVIDE THIS SERVICE.

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

Liquor License #

The fees allowed by A.R.S. § 44-6852 will be charged for all dishonored checks.

1. Check appropriate box -> [] Controlling Person [] Agent [X] Manager (Only)
(Complete Questions 1-19) (Complete All Questions except # 14, 14a & 21)
Controlling Person or Agent must complete #21 for a Manager Controlling Person or Agent must complete # 21

2. Name: Last Tat Brandon First Dieu Middle Date of Birth: [REDACTED] (NOT a Public Record)

3. Social Security Number: [REDACTED] Drivers License #: [REDACTED] State: Arizona (NOT a public record)

4. Place of Birth: Saigon City Vietnam State Country (not county) Height: 5-07 Weight: 150 Eyes: Black Hair: Black

5. Marital Status [X] Single [] Married [] Divorced [] Widowed Daytime Contact Phone: 623-810-6573

6. Name of Current or Most Recent Spouse: (List all for last 5 years - Use additional sheet if necessary) Last First Middle Maiden Date of Birth: / / (NOT a public record)

7. You are a bona fide resident of what state? Arizona If Arizona, date of residency: September 1994

8. Telephone number to contact you during business hours for any questions regarding this document. 623-810-6573

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

10. Name of Licensed Premises: T & L Convenience, LLC Premises Phone: 623-810-6573

11. Physical Location of Licensed Premises Address: 411 N. Arizona Blvd Coolidge Pinal 85128
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.
Table with columns: FROM Month/Year, TO Month/Year, DESCRIBE POSITION OR BUSINESS, EMPLOYER'S NAME OR NAME OF BUSINESS (street address, city, state & zip)
Row 1: 11/2004, CURRENT, Cashier, Lee's Foodland Market, LLC 308 S. Main St, Coolidge AZ 85128

ATTACH ADDITIONAL SHEET IF NECESSARY FOR EITHER SECTION

13. Indicate your residence address for the last five (5) years:
Table with columns: FROM Month/Year, TO Month/Year, Rent or Own, RESIDENCE Street Address, City, State, Zip
Row 1: 1/2007, CURRENT, Own, 3209 N. Spyglass Ct, Florence, AZ, 85132
Row 2: 9/1994, 1/2007, Own, 5614 W. Bluefield Ave, Glendale, AZ, 85308

If you checked the Manager box on the front of this form, skip to #15M 2 17

14. As a Controlling Person or Agent, will you be physically present and operating the licensed premises? YES NO
If you answered YES, how many hrs/day? 10, and answer #14a below. If NO, skip to #15.
- 14a. Have you attended a DLLC-approved Liquor Law Training Course within the past 5 years? (Must provide proof if the answer to # 14a is "NO", course must be completed before issuance of a new license or approval on an existing license.) YES NO
15. Have you 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, within the past ten (10) years (include only traffic violations that were alcohol and/or drug related)? YES NO
16. Are there ANY administrative law citations, compliance actions or consents, criminal arrest, indictments or summonses PENDING against you or ANY entity in which you are now involved? YES NO
17. 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
18. Has anyone EVER filed suit or obtained a judgment against you, the subject of which involved fraud or misrepresentation? YES NO
19. 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

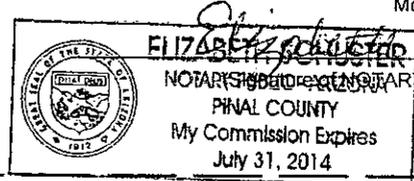
If any answer to Questions 15 through 19 is "YES" YOU MUST attach a signed statement. Give complete details including dates, agencies involved, and dispositions.
SUBSTANTIVE CHANGES TO THIS APPLICATION WILL NOT BE ACCEPTED

20. I, Brandon Dieu Tat, hereby declare that I am the APPLICANT/REPRESENTATIVE
 (print full name of Applicant)
 filing this questionnaire. I have read this questionnaire and all statements are true, correct and complete.

X 
 (Signature of Applicant)

State of Arizona County of Pinal
 The foregoing instrument was acknowledged before me this 21st day of January, 2011
 Month Year

My commission expires on: 7-31-7-2014
 Day Month Year



COMPLETE THIS SECTION ONLY IF YOU ARE A CONTROLLING PERSON OR AGENT APPROVING A MANAGER'S APPLICATION

21. The applicant hereby authorizes the person named on this questionnaire to act as manager for the named liquor license. The manager named must be at least 21 years of age.

State of _____ County of _____
 The foregoing instrument was acknowledged before me this _____ day of _____, _____
 Month Year

X _____
 Signature of Controlling Person or Agent (circle one)

 Print Name

 (Signature of NOTARY PUBLIC)

My commission expires on: _____
 Day Month Year

'11 FEB 24 Lig. Lic. PM 2:17

PASSPORT



United States
of America

11 FEB 24 Lic. Lic. PM 2:17



ARIZONA STATEMENT OF CITIZENSHIP AND ALIEN STATUS FOR STATE PUBLIC BENEFITS Professional License and Commercial License Department of Liquor Licenses and Control

Liquor License #: _____

Ownership Name: _____ (as listed on the current liquor license application or renewal application)

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), nonimmigrants, 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 § 1-501 requires, in general, that a person applying for a license must submit documentation to the licensing agency that satisfactorily demonstrates that the applicant is lawfully present in the United States.

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 copy of one or more documents that evidence your citizenship or alien status with your application for license or renewal.

SECTION I - APPLICANT INFORMATION

APPLICANT'S NAME (Print or type) BRANDON DIEU TAI DATE 2/24/2011

TYPE OF APPLICATION (check one) [X] INITIAL APPLICATION [] RENEWAL

TYPE OF LICENSE BEER & WINE STORE

SECTION II - CITIZENSHIP OR NATIONAL STATUS DECLARATION

Directions: Attach a legible copy of the front, and the back (if any), of a document from the attached List A or other document that demonstrates U.S. citizenship or nationality. Name of document provided: PASS PORT

A. Are you a citizen or national of the United States? (check one) [X] Yes [] No

B. If the answer is "Yes," where were you born? List city, state (or equivalent), and country. City SAIGON State (or equivalent) Country or Territory VIETNAM

If you are a citizen or national of the United States, go to Section IV. If you are not a citizen or national of the United States, please complete Sections III and IV.

11 FEB 24 Lic. Lic. PM 2 17

SECTION III — ALIEN STATUS DECLARATION

Directions: To be completed by 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 the front, and the back (if any), of a document from the attached List B or other document that evidences your status. A.R.S. § 1-501. 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 and Haitian entrant (as defined in section 501(e) of the Refugee Education Assistance Act of 1980).
- 8. An alien who is, or whose child or child’s parent is a “battered alien” or an alien subjected 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.] Nonimmigrants 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))

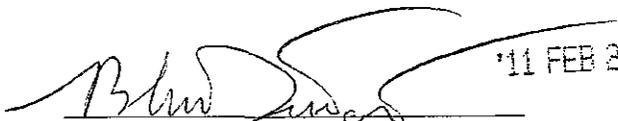
- 11. A nonimmigrant whose visa for entry is related to employment in the United States, or
- 12. A citizen of a freely associated state, if section 141 of the applicable compact of free association approved in Public Law 99-239 or 99-658 (or a successor provision) is in effect [Freely Associated States 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.

Otherwise Lawfully Present (A.R.S. § 1-501)

- 14. 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. § 1621(a).

SECTION IV — DECLARATION

All applicants must complete this section. I declare under penalty of perjury under the laws of the state of Arizona that the answers I have given are true and correct to the best of my knowledge.


APPLICANT'S SIGNATURE

11 FEB 24 11:49 AM '11

2/24/2011
TODAY'S DATE

Attachment: Lists A and B Evidence of U.S. Citizenship, U.S National Status, or Alien Status,

DLLC 1/15/09

AG 11/08/07 - 81662

Attachment to Form 1 Applicant Statement

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

LIST A: U.S. CITIZEN OR U.S. NATIONAL

Note: In this List, the term "Service" refers to the U.S. Citizenship and Immigration Service, formerly, the U.S. Immigration and Naturalization Service (INS).

[Source: Proposed Rules, Verification of Eligibility for Public Benefits, 8 CFR § 104.23; 63 FR 41662-01 August 4, 1998); and Interim Guidance of Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 ("Interim Guidance"), 62 FR 61344 (Nov. 17, 1997), Attachment 4]

Evidence showing U.S. citizen or U.S. national status includes the following:

a. Primary Evidence:

- (1) A birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 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) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);
- (2) United States passport;
- (3) Report of birth abroad of a U.S. citizen (FS-240) (issued by the Department of State to U.S. citizens);
- (4) Certificate of Birth (FS-545) (issued by a foreign service post) or Certification of Report of Birth (DS-1350), copies of which are available from the Department of State;
- (5) Form N-561, Certificate of Citizenship;
- (6) Form I-197, United States Citizen Identification Card (issued by the Service until April 7, 1983 to U.S. citizens living near the Canadian or Mexican border who needed it for frequent border crossings) (formerly Form I-179, last issued in February 1974);
- (7) Form I-873 (or prior versions), Northern Marianas Card (issued by the Service to a collectively *naturalized* U.S. citizen who was born in the Northern Mariana Islands before November 3, 1986);
- (8) Statement provided by a U.S. consular official certifying that the individual is a U.S. citizen (given to an individual born outside the United States who derives citizenship through a parent but does not have an FS-240, FS-545, or DS-1350); or
- (9) Form I-872 (or prior versions), American Indian Card with a classification code "KIC" and a statement on the back identifying the bearer as a U.S. citizen (issued by the Service to U.S. citizen members of the Texas Band of Kickapoos living near the U.S./Mexican border).

[Source: Interim Guidance of Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 ("Interim Guidance"), 62 FR 61344 (Nov. 17, 1997), Attachment 4]

b. Secondary Evidence

If the applicant cannot present one of the documents listed in (a) above, the following may be relied upon to establish U.S. citizenship or U.S. national status:

- (1) Religious record recorded in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 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) (unless the applicant was born to foreign diplomats residing in such a jurisdiction) within three 3 months after birth showing that

the birth occurred in such jurisdiction and the date of birth or the individual's age at the time the record was made;

- (2) Evidence of civil service employment by the U.S. government before June 1, 1976;
- (3) Early school records (preferably from the first school) showing the date of admission to the school, the applicant's date and U.S. place of birth, and the name(s) and place(s) of birth of the applicant's parents(s);
- (4) Census record showing name, U.S. nationality or a U.S. place of birth, and applicant's date of birth or age;
- (5) Adoption finalization papers showing the applicant's name and place of birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 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) (unless the applicant was born to foreign diplomats residing in such a jurisdiction), or, when the adoption is not finalized and the state or other U.S. jurisdiction listed above will not release a birth certificate prior to final adoption, a statement from a State-or jurisdiction-approved adoption agency showing the applicant's name and place of birth in one of such jurisdictions, and stating that the source of the information is an original birth certificate;
- (6) Any other document that establishes a U.S. place of birth or otherwise indicates U.S. nationality (e.g., a contemporaneous hospital record of birth in that hospital in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 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) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);

c. Collective Naturalization

If the applicant cannot present one of the documents listed in (a) or (b) above, the following will establish U.S. citizenship for collectively naturalized individuals:

Puerto Rico:

- Evidence of birth in Puerto Rico on or after April 11, 1899 and the applicant's statement that he or she was residing in the U.S., a U.S. possession or Puerto Rico on January 13, 1941; or
- Evidence that the applicant was a Puerto Rican citizen and the applicant's statement that he or she was residing in Puerto Rico on March 1, 1917 and that he or she did not take an oath of allegiance to Spain.

U.S. Virgin Islands:

- Evidence of birth in the U.S. Virgin Islands, and the applicant's statement of residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927;
- The applicant's statement indicating resident in the U.S. Virgin Islands as a Danish citizen on January 17, 1917 and residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927, and that he or she did not make a declaration to maintain Danish citizenship; or
- Evidence of birth in the U.S. Virgin Islands and the applicant's statement indicating residence in the U.S., a U.S. possession or territory or the Canal Zone on June 28, 1932.

Northern Mariana Islands (NMI) (formerly part of the Trust Territory of the Pacific Islands (TTPI)):

- Evidence of birth in the NMI, TTPI citizenship and residence in the NMI, the U.S., or a U.S. territory or possession on November 3, 1986 (NMI local time) and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time);
- Evidence of TTPI citizenship, continuous residence in the NMI since before November 3, 1981 (NMI local time), voter registration prior to January 1, 1975 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time); or
- Evidence of continuous domicile in the NMI since before January 1, 1974 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time). Note: If a person entered the NMI as a nonimmigrant and lived in the NMI since January 1, 1974, this does not constitute continuous domicile and the individual is not a U.S. citizen

d. Derivative Citizenship

If the applicant cannot present one of the documents listed in a or b above, the following may be used to make a determination of derivative U.S. citizenship:

Applicant born abroad to two U.S. citizen parents: Evidence of the U.S. citizenship of the parents and the relationship of the applicant to the parents, and evidence that at least one parent resided in the U.S. or an outlying possession prior to the applicant's birth.

Applicant born abroad to a U.S. citizen parent and a U.S. non-citizen national parent: Evidence that one parent is a U.S. citizen and that the other is a U.S. non-citizen national, evidence of the relationship of the applicant

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to the U.S. citizen parent, and evidence that the U.S. citizen parent resided in the U.S., a U.S. possession, American Samoa or Swain's Island for a period of at least one year prior to the applicant's birth.

Applicant born out of wedlock abroad to a U.S. citizen mother: - Evidence of the U.S. citizenship of the mother, evidence of the relationship to the applicant and, for births on or before December 24, 1952, evidence that the mother resided in the U.S. prior to the applicant's birth or, for births after December 24, 1952, evidence that the mother had resided, prior to the child's birth, in the U.S. or a U.S. possession for a period of one year.

Applicant born in the Canal Zone or the Republic of Panama:

- A birth certificate showing birth in the Canal Zone on or after February 26, 1904 and before October 1, 1979 and evidence that one parent was a U.S. citizen at the time of the applicant's birth; or
- A birth certificate showing birth in the Republic of Panama on or after February 26, 1904 and before October 1, 1979 and evidence that at least one parent was a U.S. citizen and employed by the U.S. government or the Panama Railroad Company or its successor in title.

In all other situations in which an applicant claims to have a U.S. citizen parent and an alien parent, or claims to fall within one of the above categories, but is unable to present the listed documentation:

- If the applicant is in the U.S., the applicant should contact the local U.S. Citizenship and Immigration Service office for determination of U.S. citizenship;
- If the applicant is outside the U.S., the applicant should contact the State Department for a U.S. citizenship determination.

e. Adoption of Foreign-Born Child by U.S. Citizen

- If the birth certificate shows a foreign place of birth and the applicant cannot be determined to be a naturalized citizen under any of the above criteria, obtain other evidence of U.S. citizenship;
- Because foreign-born adopted children do not automatically acquire U.S. citizenship by virtue of adoption by U.S. citizens, the applicant should contact the local U.S. Citizenship and Immigration Service office for a determination of U.S. citizenship, if the applicant provides no evidence of U.S. citizenship.

f. U.S. Citizenship By Marriage

A woman acquired U.S. citizenship through marriage to a U.S. citizen before September 22, 1922. Provide evidence of U.S. citizenship of the husband, and evidence showing the marriage occurred before September 22, 1922.

Note: If the husband was an alien at the time of the marriage, and became naturalized before September 22, 1922, the wife also acquired naturalized citizenship. If the marriage terminated, the wife maintained her U.S. citizenship if she was residing in the U.S. at that time and continued to reside in the U.S.

LIST B: QUALIFIED ALIENS, NONIMMIGRANTS, AND ALIENS PAROLED INTO U.S. FOR LESS THAN ONE YEAR

The documents listed below that are registration documents are indicated with an asterisk ("*").

a. "Qualified Aliens"

Evidence of "Qualified Alien" status includes the following:

Alien Lawfully Admitted for Permanent Residence

- *Form I-551 (Alien Registration Receipt Card, commonly known as a "green card"); or
- Unexpired Temporary I-551 stamp in foreign passport or on *I Form I-94.

Asylee

- * Form I-94 annotated with stamp showing grant of asylum under section 208 of the INA;
- *Form I-688B (Employment Authorization Card) annotated "274a.12(a)(5)";
- * Form I-766 (Employment Authorization Document) annotated "A5";
- Grant letter from the Asylum Office of the U.S. Citizenship and Immigration Service; or
- Order of an immigration judge granting asylum.

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Refugee

- * Form I-94 annotated with stamp showing admission under § 207 of the INA;
- * Form I-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or
- * Form I-766 (Employment Authorization Document) annotated "A3"

Alien Paroled Into the U.S. for a Least One Year

- * Form I-94 with stamp showing admission for at least one year under section 212(d)(5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.)

Alien Whose Deportation or Removal Was Withheld

- * Form I-688B (Employment Authorization Card) annotated "274a.12(a)(10)";
- * Form I-766 (Employment Authorization Document) annotated "A10"; or
- Order from an immigration judge showing deportation withheld under §243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under § 241(b)(3) of the INA.

Alien Granted Conditional Entry

- * Form I-94 with stamp showing admission under §203(a)(7) of the INA;
- * Form I-688B (Employment Authorization Card) annotated "274a.12(a)(3)"; or
- * Form I-766 (Employment Authorization Document) annotated "A3."

Cuban/Haitian Entrant

- * Form I-551 (Alien Registration Receipt Card, commonly known as a "green card") with the code CU6, CU7, or CH6;
- Unexpired temporary I-551 stamp in foreign passport or on * Form I-94 with the code CU6 or CU7; or
- Form I-94 with stamp showing parole as "Cuba/Haitian Entrant" under Section 212(d)(5) of the INA.

Alien Who Has Been Declared a Battered Alien or Alien Subjected to Extreme Cruelty

- U.S. Citizenship and Immigration Service petition and supporting documentation

b. Nonimmigrant

Evidence of "Nonimmigrant" status includes the following:

- * Form I-94 with stamp showing authorized admission as nonimmigrant

c. Alien Paroled into U.S. for Less than One Year

Evidence includes:

- * Form I-94 with stamp showing admission for less than one year under section 212(d)(5) of the INA

68353

Arizona Department of Liquor Licenses and Control
800 West Washington, 5th Floor
Phoenix, Arizona 85007
www.azliquor.gov
602-542-5141

CERTIFICATE OF TITLE 4 TRAINING COMPLETION

Do Not Duplicate This Form

Certificates must be completed by a state-approved training course provider, in black ink, on an original form.

BRANDON DIEU TAT

Full Name (please print)

Brandon Dieu Tat

Signature

1/10/2011

Training Completion Date

1/10/2016

Certificate Expiration Date

(MANAGEMENT - 5 years from completion date)
(BASIC - 3 years from completion date)

Type of Training Completed (check Yes or No)

<input type="checkbox"/> Yes	<input type="checkbox"/> No	BASIC	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	ON SALE
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	MANAGEMENT	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	OFF SALE
<input type="checkbox"/> Yes	<input type="checkbox"/> No	BOTH	<input type="checkbox"/> Yes	<input type="checkbox"/> No	OTHER

If Trainee Is Employed By A Licensee

Name of Licensee

Business Name

Liquor License #

Alcohol Training Program Provider Information

ARIZONA BUSINESS COUNCIL FOR ALCOHOL EDUCATION

Company or Individual Name (please print)

77 EAST COLUMBUS AVENUE, SUITE 102

Address

Phoenix

AZ

85012

(602) 285-1396

City

State

Zip

Daytime Contact Phone #

I certify the above named individual has successfully completed the training specified above in accordance with Arizona Revised Statute, Arizona Administrative Code, and the training course curriculum approved by the Department of Liquor Licenses and Control:

Jeff Miller

Name of Trainer (please print)

Jeff Miller

Trainer Signature

1-10-11

Date

Pursuant to A.R.S. 4-112(G)(2), mandatory Title 4 liquor law training is required prior to the issuance of all new liquor license applications submitted after November 1, 1997.

The persons(s) required to attend both the BASIC and MANAGEMENT Title 4 liquor law training, on- or off-sale, will include all of the following:

- Owner(s)
- Licensee/agent or manager(s) actively involved in daily business operation

A valid (not expired) Certificate of Title 4 Training Completion must be submitted to the Department of Liquor Licenses and Control before a liquor license application is considered complete.

Before acceptance of a manager's questionnaire and/or agent change for an existing liquor license, proof of attendance for the BASIC and MANAGEMENT Title 4 liquor law training (on- or off-sale) is required.

68800

Arizona Department of Liquor Licenses and Control
800 West Washington, 5th Floor
Phoenix, Arizona 85007
www.azliquor.gov
602-542-5141

CERTIFICATE OF TITLE 4 TRAINING COMPLETION

Do Not Duplicate This Form

Certificates must be completed by a state-approved training course provider, in black ink, on an original form.

BRANDON DIEU TAT

Full Name (please print)

[Signature]

Signature

1/10/2011

Training Completion Date

1/10/2014

Certificate Expiration Date

(MANAGEMENT - 5 years from completion date)
(BASIC - 3 years from completion date)

Type of Training Completed (check Yes or No)

- | | | | | | |
|---|--|------------|---|--|----------|
| <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | BASIC | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | ON SALE |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | MANAGEMENT | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | OFF SALE |
| <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | BOTH | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | OTHER |

If Trainee Is Employed By A Licensee

Name of Licensee

Business Name

Liquor License #

Alcohol Training Program Provider Information

ARIZONA BUSINESS COUNCIL FOR ALCOHOL EDUCATION

Company or Individual Name (please print)

77 EAST COLUMBUS AVENUE, SUITE 102

Address

Phoenix

AZ

85012

(602) 285-1396

City

State

Zip

Daytime Contact Phone #

I certify the above named individual has successfully completed the training specified above in accordance with Arizona Revised Statute, Arizona Administrative Code, and the training course curriculum approved by the Department of Liquor Licenses and Control:

Jett Miller

Name of Trainer (please print)

[Signature]

Trainer Signature

1-10-11

Date

Pursuant to A.R.S. § 4-112(G)(2), mandatory Title 4 liquor law training is required prior to the issuance of all new liquor license applications submitted after November 1, 1997.

The persons(s) required to attend both the BASIC and MANAGEMENT Title 4 liquor law training, on- or off-sale, will include all of the following:

- Owner(s)
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AZ CORPORATION COMMISSION
FILED

ARTICLES OF ORGANIZATION
OF
T&L CONVENIENCE, LLC

DEC 14 2010

FILE NO. L-1104101058

ARTICLE I

Name

The name of this limited liability company is T&L CONVENIENCE, LLC (the "Company").

ARTICLE II

Purpose

The purpose for which the Company is organized is the transaction of any and all lawful business for which a limited liability company may be organized under the laws of the State of Arizona, as such laws may be amended from time to time.

ARTICLE III

Registered Office and Statutory Agent

The address of the registered office of the Company and the name and address of the agent for service of process are:

Registered Office: T&L CONVENIENCE, LLC
411 S. Arizona Boulevard
Coolidge, Arizona 85128

Statutory Agent: Brandon D. Tat
411 S. Arizona Boulevard
Coolidge, Arizona 85128

ARTICLE IV

Perpetual Existence

The Company shall have perpetual existence and shall continue until dissolved by the members or by law otherwise.

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ARTICLE V

Management

Management of the Company is vested in a manager or managers.

ARTICLE VI

Manager

The name and mailing address of the manager of the Company is:

Brandon D. Tat
411 S. Arizona Boulevard
Coolidge, Arizona 85128

ARTICLE VII

Members

The name and business, residence, or mailing address of each member who owns a twenty percent (20%) or greater interest in the capital or profits of this limited liability company are:

Brandon D. Tat
411 S. Arizona Boulevard
Coolidge, Arizona 85128

ARTICLE VIII

Capital

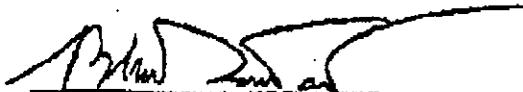
The authorized capital of the Company shall consist of percentage interests or units of interest in the Company, which may be issued in separate classes and series of units, as provided in the Company's Operating Agreement, and which shall have the designations, rights, preferences, privileges and voting rights as set forth in the Company's Operating Agreement from time to time.

ARTICLE IX

Liability and Indemnification

Except as provided under Chapter 4 of Title 29 of the Arizona Revised Statutes, as amended from time to time, a member, manager, employee, officer or agent of the Company is not liable, solely by reason of being a member, manager, employee, officer or agent, for the debts, obligations and liabilities of the Company, whether arising in contract or tort, under a judgment, decree or order of a court, or otherwise. The Company shall indemnify, to the maximum extent from time to time permitted by applicable law, any person who incurs liability or expense by reason of such person being a member, manager, employee, officer, or agent of the Company. This indemnification shall be mandatory in all circumstances in which indemnification is permitted by law. In addition, the Company shall advance the costs of defense (including costs of investigation) if claim or suit is asserted against any member, manager, employee, officer or agent in connection with such person acting on behalf of the Company, upon the execution of a written undertaking to the Company that such person will repay to the Company the full amount of such advances, plus interest at the short term federal rate, if it is determined by a court of competent jurisdiction or an arbitrator that such person is not entitled to indemnity.

IN WITNESS WHEREOF, the undersigned has set his hand this 14th day of December, 2010.



BRANDON D. TAT, Manager

11 FEB 24 11:41 AM '10

CONSENT TO ACT AS STATUTORY AGENT

I, Brandon D. Tat, 411 S. Arizona Boulevard, Coolidge, Arizona 85128, having been appointed as agent for service of process for T&L CONVENIENCE, LLC, an Arizona limited liability company, hereby consent to act in that capacity until removal or resignation is submitted in accordance with the Arizona Revised Statutes.

DATED: December 14, 2010.



BRANDON D. TAT

COMMISSIONERS
KRISTINK MAYES - Chairman
GARY PIERCE
PAUL NEWMAN
SANDRA D. KENNEDY
BOB STUMP



ARIZONA CORPORATION COMMISSION

ERNEST G. JOHNSON
Executive Director

JEFF GRANT
Director
Corporations Division

December 16, 2010

CRAMPTON LAW FIRM PC
% LIZ A CRAMPTON
20100 N 51ST AVE STE E-540
GLENDALE, AZ 85308

RE: T & L CONVENIENCE, LLC
File Number: L16461658

We are pleased to notify you that the Articles of Organization for the above-referenced entity **HAVE BEEN APPROVED**.

You must publish a Notice of the filing of your Articles of Organization or, alternatively, you may publish the Articles of Organization in their entirety. For your convenience, we have provided a Notice form that you can complete and submit to the newspaper of your choice. The publication must be in a newspaper of general circulation in the county of the known place of business in Arizona for three consecutive publications. Publication must be completed **WITHIN 60 DAYS** after December 16, 2010, which is the date the document was approved for filing by the Commission. A list of acceptable newspapers in each county is enclosed and is also available on the Commission website. The limited liability company may be subject to administrative dissolution if it fails to publish. You will receive an Affidavit of Publication from the newspaper, and you may file it with the Commission.

We strongly recommend that you periodically monitor your company's record with the Commission, which can be viewed at www.azcc.gov/Divisions/Corporations. If you have questions or need further information, please contact us at (602) 542-3026 in Phoenix, or Toll Free (Arizona Residents only) at 1-800-345-5819.

Sincerely,

Yvonne Contreras
Examiner
Corporations Division

LL:13
REV. 01/2009

T&L CONVENIENCE, LLC

Statement of Address Change
(A.R.S. §§ 29-605)

FILING FEE \$5.00 (A.R.S. § 29-851)

1. The exact name of the Limited Liability Company (LLC) currently on file with the Arizona Corporation Commission (ACC) is:

T&L CONVENIENCE, LLC

2. The ACC file number is: L-1646165-8
3. The current address of the LLC's known place of business on file with the ACC is:

411 S. Arizona Boulevard
Coolidge, Arizona 85128

4. The new address of the LLC's known place of business is:

411 N. Arizona Boulevard
Coolidge, Arizona 85128

5. The name and street address of the current statutory agent on file with the ACC are:

Brandon D. Tat
411 S. Arizona Boulevard
Coolidge, Arizona 85128

6. The new address of the current statutory agent is:

Brandon D. Tat
411 N. Arizona Boulevard
Coolidge, Arizona 85128

7. The name and mailing address of the manager of the Company on file with the ACC are:

Brandon D. Tat
411 S. Arizona Boulevard
Coolidge, Arizona 85128

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T&L CONVENIENCE, LLC

ACC File Number: L-1646165-8

8. The name and new mailing address of the manager of the Company are:

Brandon D. Tat
411 N. Arizona Boulevard
Coolidge, Arizona 85128

9. The name and mailing address of the member of the Company on file with the ACC are:

Brandon D. Tat
411 S. Arizona Boulevard
Coolidge, Arizona 85128

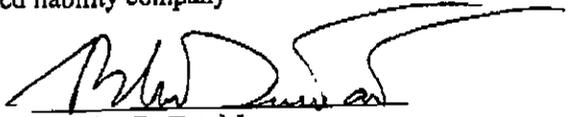
10. The name and new mailing address of the member of the Company are:

Brandon D. Tat
411 N. Arizona Boulevard
Coolidge, Arizona 85128

Dated this 4th day of January, 2011.

T&L CONVENIENCE, LLC, an Arizona
limited liability company

By:


Brandon D. Tat, Manager

ARIZONA CORPORATION COMMISSION
CORPORATIONS DIVISION
Transmittal for Fax Filing

FAX NUMBERS

Corp. Filings: 602-542-4100
Annual Reports: 602-542-0082
Tucson: 520-628-6614

Certifications: 602-542-9788
Corp. Records: 602-542-3414

Date: 01/04/11

From: Crampton Law Firm, P.C.

(Account Holder Name)

20100 N. 51st Avenue, Suite E-540, Glendale, Arizona 85308

(Account Holder Address)

Advance Account Number: 1810 Account Fax Number: 602-354-4669

Telephone Number: 602-354-3771

Contact Person: Liz Crampton

Corporation Name: T&L CONVENIENCE, LLC

Document Type: Statement of Change of Address

Please indicate the applicable fee

Processing *Expedited* (usually 1-3 day turn-around, \$35 Additional Fee Per Document)
 X *Regular* (usually 4-7 week turn-around)

Number of pages (including transmittal) 4

.....
_____ The Corporation Commission hereby acknowledges receipt of the document type described herein.*

(Date Stamp)

Filing fee(s) charged to your account in the amount of \$ _____.

_____ *There is a problem with your transmittal. Please call the undersigned at your earliest convenience. Thank you.*

Examiner: _____

Telephone: _____

Note: *All documents are subject to review before filing.

All fax filings received will be faxed back to the customer, unless otherwise indicated. If you wish us to mail the documents back to you, please provide a return mailing address on the line(s) below.

Mailing address: _____

**ARIZONA CORPORATION COMMISSION
CORPORATIONS DIVISION COVER SHEET**

USE A SEPARATE COVER SHEET FOR EACH DOCUMENT

ARE YOU FILING: New Entity Change to existing entity Re-submission/Correction

PLEASE COMPLETE ALL APPROPRIATE SECTIONS

Type in Corp/LLC Name: T&L CONVENIENCE, LLC

FILING TYPE	REGULAR SERVICE FEE	EXPEDITED SERVICE FEE
<input type="checkbox"/> Articles of Domestication	<input type="checkbox"/> \$100.00	<input type="checkbox"/> \$135.00
<input type="checkbox"/> Articles of Incorporation (Profit)	<input type="checkbox"/> \$ 60.00	<input type="checkbox"/> \$ 95.00
<input type="checkbox"/> Articles of Incorporation (Non Profit)	<input type="checkbox"/> \$ 40.00	<input type="checkbox"/> \$ 75.00
<input type="checkbox"/> Articles of Organization (Limited Liability Company)	<input type="checkbox"/> \$ 50.00	<input type="checkbox"/> \$ 85.00
<input type="checkbox"/> Application For Authority (Business)	<input type="checkbox"/> \$175.00	<input type="checkbox"/> \$210.00
<input type="checkbox"/> Application to Conduct Affairs (Non Profit)	<input type="checkbox"/> \$175.00	<input type="checkbox"/> \$210.00
<input type="checkbox"/> Application for New Authority	<input type="checkbox"/> \$175.00	<input type="checkbox"/> \$210.00
<input type="checkbox"/> Application for Registration	<input type="checkbox"/> \$150.00	<input type="checkbox"/> \$185.00
<input type="checkbox"/> Articles of Amendment	<input type="checkbox"/> \$ 25.00	<input type="checkbox"/> \$ 60.00
<input type="checkbox"/> Articles of Amendment & Restatement	<input type="checkbox"/> \$ 25.00	<input type="checkbox"/> \$ 60.00
<input type="checkbox"/> Articles of Correction	<input type="checkbox"/> \$ 25.00	<input type="checkbox"/> \$ 60.00
<input type="checkbox"/> Articles of Merger/Share Exchange	<input type="checkbox"/> \$100.00	<input type="checkbox"/> \$135.00
<input type="checkbox"/> Articles of Merger (Limited Liability Company)	<input type="checkbox"/> \$ 50.00	<input type="checkbox"/> \$ 85.00
<input type="checkbox"/> Affidavit of Publication	<input type="checkbox"/> \$ 0.00	<input type="checkbox"/> \$ 35.00
<input type="checkbox"/> CORPORATIONS - Certified Copies* <small>*If copies are for different entities the Expedite fee applies to each entity</small>	<input type="checkbox"/> \$5.00 Each () (Enter Quantity)	<input type="checkbox"/> \$40.00 () (Enter Quantity)
<input type="checkbox"/> LLCs - Certified Copies* <small>*If copies are for different entities the Expedite fee applies to each entity</small>	<input type="checkbox"/> \$10.00 Each () (Enter Quantity)	<input type="checkbox"/> \$45.00 () (Enter Quantity)
<input type="checkbox"/> Good Standing Certificate* <small>*If Good Standing Certificates are for different entities the Expedite fee applies to each entity</small>	<input type="checkbox"/> \$10.00 Each () (Enter Quantity)	<input type="checkbox"/> \$45.00 () (Enter Quantity)
<input checked="" type="checkbox"/> Other: <u>Statement of Change of Address</u>	<input checked="" type="checkbox"/> Regular Fee	<input type="checkbox"/> Expedite Fee

SELECT PAYMENT TYPE: **DO NOT WRITE YOUR CREDIT CARD NUMBER ON THIS FORM!**

- Check Check # _____ Check Amount \$ _____
- M.O.D. Account MOD Acct # 1810 Mod Amount \$ 5.00
- Cash Cash Amount \$ _____
- Credit Card -- for in-person filings only CC Amount \$ _____
- No fee required

SELECT ONE RETURN DELIVERY OPTION: Mail Pick Up Fax # (602) 354-4669

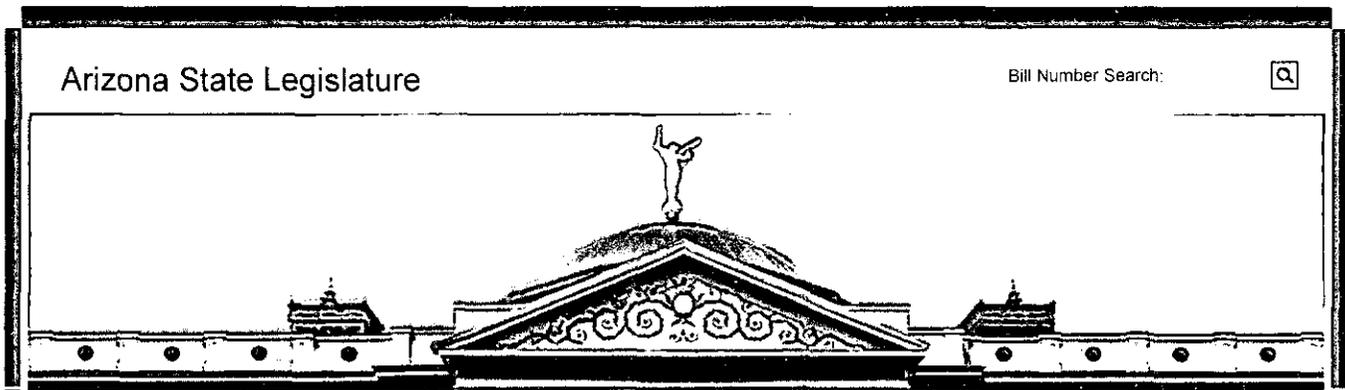
REQUIRED: Please list the person or company who will be picking up the completed documents.
DOCUMENTS WILL BE MAILED IF THEY ARE NOT PICKED UP IN A TIMELY MANNER (APPROXIMATELY TWO WEEKS).

Person or Company Name: Crampton Law Firm, P.C. c/o Liz A. Crampton Phone Number: 602-354-3771
Address: 20100 N. 51st Avenue, Suite E-540, Glendale, Arizona 85308
City: _____ State: _____ Zip: _____

FOR ARIZONA CORPORATION COMMISSION USE ONLY

PICK-UP BY: _____ DATE: _____

View current process times at: www.azcc.gov/Divisions/Corporations



Arizona State Legislature

Bill Number Search:



Fiftieth Legislature - First Regular Session

[Email a Member](#) | [Email Webmaster](#)
[change session](#) | [printer friendly version](#)
[Senate](#) [House](#) [Legislative Council](#) [JLBC](#) [More Agencies](#) [Bills](#) [Committees](#) [Calendars/News](#)
[ARS TITLE PAGE](#) [NEXT DOCUMENT](#) [PREVIOUS DOCUMENT](#)

4-207. Restrictions on licensing premises near school or church buildings; definitions

A. A retailer's license shall not be issued for any premises which are, at the time the license application is received by the director, within three hundred horizontal feet of a church, within three hundred horizontal feet of a public or private school building with kindergarten programs or any of grades one through twelve or within three hundred horizontal feet of a fenced recreational area adjacent to such school building. This section does not prohibit the renewal of a valid license issued pursuant to this title if, on the date that the original application for the license is filed, the premises were not within three hundred horizontal feet of a church, within three hundred horizontal feet of a public or private school building with kindergarten programs or any of grades one through twelve or within three hundred horizontal feet of a fenced recreational area adjacent to such school building.

B. Subsection A of this section does not apply to a:

1. Restaurant issued a license pursuant to section 4-205.02.
2. Special event license issued pursuant to section 4-203.02.
3. Hotel-motel issued a license pursuant to section 4-205.01.
4. Government license issued pursuant to section 4-205.03.
5. Fenced playing area of a golf course issued a license pursuant to this article.

C. Notwithstanding subsection A of this section:

1. A spirituous liquor license which is validly issued and which is, on the date an application for a transfer is filed, within three hundred horizontal feet of a church, within three hundred horizontal feet of a public or private school building with kindergarten programs or any of grades one through twelve or within three hundred horizontal feet of a fenced recreational area adjacent to such school building may be transferred person to person pursuant to sections 4-201, 4-202 and 4-203 and remains in full force until the license is terminated in any manner, unless renewed pursuant to section 4-209, subsection A.
2. A person may be issued a spirituous liquor license pursuant to sections 4-201, 4-202 and 4-203 of the same class for premises which have a nontransferable spirituous liquor license validly issued if the premises are, on the date an application for such license is filed, within three hundred horizontal feet of a church, within three hundred horizontal feet of a public or private school building with kindergarten programs or any of grades one through twelve or within three hundred horizontal feet of a fenced recreational area adjacent to such school building and the license remains in full force until the license is terminated in any manner, unless renewed pursuant to section 4-209, subsection A.
3. A person may be issued a liquor store license pursuant to sections 4-201, 4-202, 4-203 and 4-206.01 for premises which have a beer and wine store license validly issued if the premises, on the date an application for such license is filed, are within three hundred horizontal feet of a church, within three hundred horizontal feet of a public or private school building with kindergarten programs or any of grades one through twelve or within three hundred horizontal feet of a fenced recreational area adjacent to such school building and the license remains in full force until the license is terminated in any manner, unless renewed pursuant to section 4-209, subsection A.
4. The governing body of a city or town, on a case-by-case basis, may approve an exemption from the distance restrictions prescribed in this section for a church or charter school that is located in an area that is designated an entertainment district by the governing body of that city or town. A city or town with a population of at least five hundred thousand persons may designate no more than three entertainment districts within the boundaries of the city or town pursuant to this paragraph. A city or town with a population of at least two hundred thousand persons but less than five hundred thousand persons may designate no more than two entertainment districts

within the boundaries of the city or town pursuant to this paragraph. A city or town with a population of less than two hundred thousand persons may designate no more than one entertainment district within the boundaries of the city or town pursuant to this paragraph.

D. For the purposes of this section:

1. "Church" means a building which is erected or converted for use as a church, where services are regularly convened, which is used primarily for religious worship and schooling and which a reasonable person would conclude is a church by reason of design, signs or architectural or other features.
2. "Entertainment district" means a specific contiguous area that is designated an entertainment district by a resolution adopted by the governing body of a city or town, that consists of no more than one square mile, that is no less than one-eighth of a mile in width and that contains a significant number of entertainment, artistic and cultural venues, including music halls, concert facilities, theaters, arenas, stadiums, museums, studios, galleries, restaurants, bars and other related facilities.

COOLIDGE POLICE DEPARTMENT
A.C.I.C/N.C.I.C COMPUTER ENTRY REMOVAL FORM

DATE: 3.11.11 CRIME: Informational / Liquor license REPORT NUMBER: 2011-4503

INITIAL ENTRY _____ REMOVAL: _____

PROPERTY

DATE OF LOSS: _____ DATE OF RECOVERY: _____

ITEM #: _____
SERIAL #: _____
MAKE: _____
TYPE OF ARTICLE: _____
DESCRIPTION: _____

ITEM #: _____
SERIAL #: _____
MAKE: _____
TYPE OF ARTICLE: _____
DESCRIPTION: _____

PERSON ENTRY INFORMATION

NAME: _____ SEX: _____ RACE: _____ DOB: _____ DATE OF EMANCIPATION: _____ (IF JUV)
HGT: _____ WGT: _____ EYE: _____ HAIR: _____ SOC: _____ POB: _____
SCARS, MARKS, TATTOOS: _____
DATE OF LAST SEEN: _____ LAST SEEN WEARING: _____

VEHICLE INFORMATION

DATE OF THEFT: _____ ABANDONED: _____ ABANDONED STORED: _____ IMPOUNDED: _____
ARMED: _____ PRINTS: _____ BOTH: _____

LIC: _____ LIY: _____ LIT: _____ VST: _____ VCO: _____ VYR: _____ VMA: _____
VMO: _____ VIN: _____ OAN: _____ MISC: _____

STORAGE / IMPOUND LOCATION & CONTACT INFORMATION: _____

NOTE: DATE OF LOSS/THEFT/LAST SEEN IS THE EARLIEST DATE POSSIBLE

CCH III CRIMINAL HISTORY REQUEST (INCLUDES III) In Q as well

NAME: Brandon Dica Tat SSN: 600-43-5865 DOB: 12/23/79 SEX: M RACE: Asian

NAME: _____ SSN: _____ DOB: _____ SEX: _____ RACE: _____

NAME: _____ SSN: _____ DOB: _____ SEX: _____ RACE: _____

NAME: _____ SSN: _____ DOB: _____ SEX: _____ RACE: _____

ENTRY/REMOVAL INFORMATION

REQUESTING OFFICER: J. Collazo BADGE #: 72 INITIAL: JC

ASSIGNED DISPATCHER: [Signature] BADGE #: 423 INITIAL: BH
TO BE FILLED OUT BY DISPATCHER ASSIGNED

ACIC/NCIC ENTRY NUMBER: _____ DATE OF ENTRY: _____
NIC#: _____ DATE OF LOCATE: _____ DATE OF REMOVAL: _____

2ND PARTY CHECK: _____ DATE: _____

MVD:40-01 DR.01103050.AZ0110300.*BDG/-----.

TXT NAM/TAT, BRANDON.DOB/19791223

NAME:BRANDON,DIEU,TAT

DOB:12/23/1979

RCPT#:6A233853

ADDR:3209 N SPYGLASS CT

FLORENCE

AZ 85132

ISSUE DT:01/18/2008 EXP:12/23/2044

SEX:M HGT:507 WGT:150 HAIR:BLK EYE:BLK

OLN:B13676436

SSN:600435865

OLT:OPERATOR CLASS D

PREV LIC: B13676436

PREV ST: AZ

B13676436

AZ

B13676436

AZ

EST 17

TEXT

MVD:40-01 DR.01103050.AZ0110300.*BDG/-----.

TXT NAM/TAT, BRANDON.DOB/19791223

NAME:BRANDON,DIEU,TAT

DOB:12/23/1979

RCPT#:6A233853

ADDR:3209 N SPYGLASS CT

FLORENCE

AZ 85132

ISSUE DT:01/18/2008 EXP:12/23/2044

SEX:M HGT:507 WGT:150 HAIR:BLK EYE:BLK

OLN:B13676436

SSN:600435865

OLT:OPERATOR CLASS D

PREV LIC: B13676436

PREV ST: AZ

B13676436

AZ

B13676436

AZ

EST 17

TEXT

6A233853
AZ 85132
MSG ONDEQUE

MVD:40-01 DR.01103050.AZ0110300.*BDG/-----.

TXT NAM/TAT, BRANDON.DOB/19791223

NAME:BRANDON,DIEU,TAT

DOB:12/23/1979

RCPT#:6A233853

ADDR:3209 N SPYGLASS CT

FLORENCE

AZ 85132

ISSUE DT:01/18/2008 EXP:12/23/2044

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OLN:B13676436

SSN:600435865

OLT:OPERATOR CLASS D

PREV LIC: B13676436

PREV ST: AZ

B13676436

AZ

B13676436

AZ

EST 17

TEXT

6A233853
AZ 85132
MSG ONDEQUE

MVD:40-01 DR.01103050.AZ0110300.*BDG/-----.

TXT NAM/TAT, BRANDON.DOB/19791223

NAME:BRANDON,DIEU,TAT

DOB:12/23/1979

RCPT#:6A233853

ADDR:3209 N SPYGLASS CT

FLORENCE

AZ 85132

ISSUE DT:01/18/2008 EXP:12/23/2044

SEX:M HGT:507 WGT:150 HAIR:BLK EYE:BLK

OLN:B13676436

SSN:600435865

OLT:OPERATOR CLASS D

PREV LIC: B13676436

PREV ST: AZ

B13676436

AZ

B13676436

AZ

EST 17

TEXT

6A233853
AZ 85132
MSG ONDEQUE

ACCH INQUIRY ON NAM/TAT, BRANDON DIEU DOB/12231979
DATE 03-11-2011 ARIZONA DEPARTMENT OF PUBLIC SAFETY PAGE 0001
TIME 13.38 AUTOMATED CRIMINAL HISTORY
AHSI.*ENTER SID.0449.AZ0110300.CI.COLLAZO
SID: NAM DOB SEX RAC AUT
AZ15610867 TADDEY, BRENDA ALICIA 10-03-1980 F W YES
AZ15226358 TODUS, BRANDON ALLEN 07-01-1981 M W YES
DATA TO BE USED ONLY FOR CRIMINAL JUSTICE OR OTHER LAWFUL PURPOSES.

TIME 13.38
AHSI.*ENTER SID.04
SID: NAM
AZ15610867 TADDEY, BRENDA ALICIA
AZ15226358 TODUS, BRANDON ALLEN

TIME 13.38
AHSI.*ENTER SID.04
SID: NAM
AZ15610867 TADDEY, BRENDA ALICIA
AZ15226358 TODUS, BRANDON ALLEN

TIME 13.38
AHSI.*ENTER SID.04
SID: NAM
AZ15610867 TADDEY, BRENDA ALICIA
AZ15226358 TODUS, BRANDON ALLEN

AHQH

NCIC III - IDENTIFIER INQUIRY

OPI: 0449 ORI: AZ0110300 PUR: C
ATN: COLLAZO
DPT: INVESTIGATION
COM: 2011-4503

SELECTION CRITERIA: NAM: TAT, BRANDON DIEU

ENTER ONLY ONE OF THE FOLLOWING GROUPS. IF KNOWN, SID OR FBI SHOULD BE USED.

FBI:
SID:
SOC:
MNU:
SEX: M RAC: W DOB: 12231979 SOC: 600435865
SEX: RAC: DOB: MNU:
SEX: RAC: DOB:

OPI: 0449
ATN: COLLAZO
DPT: INVESTIGATION
COM: 2011-4503

MSG ON QUE

SELECTION CRITERIA:

ENTER ONLY ONE OF THE FOLLOWING GROUPS.
IF KNOWN, SID OR FBI SHOULD BE USED.

SELECTION CRITERIA:

ENTER ONLY ONE OF THE FOLLOWING GROUPS.
IF KNOWN, SID OR FBI SHOULD BE USED.

MSG ON QUE

MSG ON QUE

NCIC.NL01T00110305000074

AZ0110300

NO IDENTIFIABLE RECORD IN THE NCIC INTERSTATE IDENTIFICATION INDEX
(III) FOR NAM/TAT, BRANDON DIEU. PUR/C. SEX/M. RAC/W. DOB/19791223.
SOC/600435865.

END

OR QUR

OR QUR

NO IDENTIFIABLE RECORD IN THE NCIC INTERSTATE IDENTIFICATION INDEX
(III) FOR NAM/TAT, BRANDON DIEU. PUR/C. SEX/M. RAC/W. DOB/19791223.
SOC/600435865.

MSG ON QUE

OR QUR

OR QUR

AHQH

NCIC III - IDENTIFIER INQUIRY

OPI: 0449 ORI: AZ0110300 PUR: C
ATN: COLLAZO
DPT: INVESTIGATION
COM: 2011-4503

SELECTION CRITERIA: NAM: TAT, BRANDON DIEU

ENTER ONLY ONE OF THE FOLLOWING GROUPS. IF KNOWN, SID OR FBI SHOULD BE USED.

FBI:
SID:
SOC:
MNU:
SEX: M RAC: W DOB: 12231979 SOC: 600435865
SEX: RAC: DOB: MNU:
SEX: RAC: DOB:

INQUIRY FORWARDED TO NCIC

INQUIRY FORWARDED TO NCIC

INQUIRY FORWARDED TO NCIC

Pending Applications

License Number:	10113208	Date Submitted:	2/24/11
Business Name:	T & L CONVENIENCE		
Location Address:	411 N ARIZONA BLVD		
	COOLIDGE	85228	
County/License Type:	PINAL	BrWnStor	
Licensee/Agent/Tel.:	TAT, BRANDON	(623)810-6573	
Type/IP Exp./Lic. #:	New		

W3-mSQL 2.0.3 by [Hughes Technologies](#)

Date: 01/28/2011
Date: 01/28/2011
Date: 01/28/2011
Date: 01/28/2011
Date: 01/28/2011
Date: 01/26/2011
Date: 01/19/2011

Activity: FUND: 2007 SURCHARGES (84%)
Activity: FUND: BASE FINE (84%)
Activity: FUND: LOCAL COST/FEES
Activity: FUND:PROBATION ASSESSMENT
Activity: PLEA-GUILTY/RESP CODE 11 & 12
Activity: TELEPHONE CALL
Activity: COMPLAINT FILED-UNIFORM CITATN



Arizona Court Report

Offender Information:

Name: BRANDON TAT
Address: 3209 N SPYGLASS CT, FLORENCE AZ 85132-6783, PINAL COUNTY
Case Filing Date: 07/30/2010
County of Origin:

DOB: SSN: 600-43-xxxx Place of Birth:
Race: Sex: Male Eyes:
Height: Weight:

Offenses:

Offense #1

Case Number: M-1141-TR-20100540
Component: 1
Offense Date:
Arrest Date:
Arresting Agency:
Arrest Type:
Arrest Disposition Date:

Case Type:
Number Counts:
Offense:
Arrest Statute:
Agency Case #:
Arrest Level/Degree:
Arrest Disposition:

Court Description: Florence Municipal
Court Offense: STOP SIGN VIOLATION
Court Statute:
Court Disposition Date: 09/27/2010
Court Fine:
Court Costs:

Court Case Number: M-1141-TR-20100540
Court Plea:
Court Disposition: DEFENSIVE DRIVING/DISM NO MVD
Court Suspended Fine:
Court Level/Degree: Traffic

Court Activity:

Date: 09/27/2010
Date: 07/30/2010

Activity: FUND: DEF DRVNG DIVERSION FEES
Activity: COMPLAINT FILED-UNIFORM CITATN



Arizona Court Report

Offender Information:

Name: BINH DIEM TAT

Address: 5614 W BLUEFIELD AVE, GLENDALE AZ 85308-7221, MARICOPA COUNTY

Case Filing Date: 11/30/2004

County of Origin:

DOB: 12/xx/1979

SSN: 600-43-xxxx

Place of Birth:

Race:

Sex: Male

Eyes:

Height:

Weight:

Offenses:

Offense #1

Case Number: J-1102-TR-200405560

Component: 1

Offense Date:

Arrest Date:

Arresting Agency:

Arrest Type:

Arrest Disposition Date:

Court Description: Casa Grande Justice

Court Offense: LESS THAN 65 IN 55 / WASTE OF FINITE RES

Court Statute:

Court Disposition Date: 12/22/2004

Court Fine:

Court Costs:

Case Type:

Number Counts:

Offense:

Arrest Statute:

Agency Case #:

Arrest Level/Degree:

Arrest Disposition:

Court Case Number: J-1102-TR-200405560

Court Plea:

Court Disposition: GUILTY/RESPONSIBLE/NO MVD RPT

Court Suspended Fine:

Court Level/Degree: Traffic

Court Activity:

Date: 12/22/2004

Date: 12/22/2004

Date: 12/22/2004

Date: 12/22/2004

Date: 11/30/2004

Activity: FUND: 2002 PROBATION SURCHARGE

Activity: FUND: 2002 SURCHARGES (80%)

Activity: FUND: BASE FINE

Activity: FUND: JUSTICE COURT RECOVERY

Activity: COMPLAINT FILED-UNIFORM CITATN

Global Subject Activity Report

Detail

Print Date/Time: 03/11/2011 14:11

Coolidge Police Department
ORI Number: AZ0110300

Login ID: collazoj

Tat, Brandon Dieu Jacket: 16144 A SSN: 600-43-5865

Address: 3209 N SPYGLASS Sex: Male
Florence
Arizona 85132 Height: 5ft 7in to 5ft 7in

Phone #: (623)810-6513 Weight: 150.0 lbs. to 150.0 lbs.

DOB: 12/23/1979 Eyes: Black

Race: Asian or Pacific Islander Hair: Black

DL State: Arizona DL#: B13676436

Physical Characteristics:

Appearance:	Country/State of Birth:	Age Range:
Hair Style:	City of Birth:	Hand Preference:
Hair Length:	County of Origin:	Place of Birth:
Facial Shape:	Ethnicity: Non Hispanic	Occupation:
Complexion:	Citizenship:	# of Dependents:
Build:	Tribe:	Primary Language:
Glasses:	Hate Group:	Second Language:
Teeth:	Military Service:	Gang Affiliation:
Speech:	Military Discharge:	Marital Status:
Voice:	School:	Blood Type:
Mustache:	Beard:	Religion:
DNA Collected: No	DNA Collected Date:	

Known Offender: County of Conviction: State Of Conviction:

Modus Operandi

Crime Specialities

Aliases

Type	Alias	DOB	Race	Sex	SSN	Hair	Eyes	DL#	Height	Weight	Phone
------	-------	-----	------	-----	-----	------	------	-----	--------	--------	-------

Nicknames

Entered Date/Time	Nickname Type	Nickname
-------------------	---------------	----------

Associated IDs

Issue Date	ID Type	Number	Issuing State	Start Date	Expire Date
------------	---------	--------	---------------	------------	-------------

Known Associates

Relationship	Name
--------------	------

School/Employer Information

Relationship	School/Employer Name	Phone Type	Phone
--------------	----------------------	------------	-------

Scars, Marks, Tattoos

Type	Location	Scar, Mark or Tattoo Detail	Description
------	----------	-----------------------------	-------------

Handicap Information

Handicap

Current Address Information

Address Type	Address	City	State	Zip
--------------	---------	------	-------	-----

Global Subject Activity Report

Detail

Print Date/Time: 03/11/2011 14:11
 Login ID: collazoj

Coolidge Police Department
 ORI Number: AZ0110300

Prior Address Information

Address Type	Address	City	State	Zip	From Date	To Date
	3209 N SPYGLASS	florence	Arizona	85132		
	308 S MAIN ST	Coolidge	Arizona			

Contact Information

Date	Type	Phone	Extension
01/12/2011 21:28	Cellular Phone	(623)810-6513	

Vehicle Information

Vehicle #	Role	Contact Date	Vehicle Type	Make	Model	Vehicle Year	Registration Number	State
-----------	------	--------------	--------------	------	-------	--------------	---------------------	-------

Activity

Type : Case

Date	Activity Reference	Description	ORI
02/06/2006 18:25	2006-00002497	Subject Type: Witness, Incident Type: Disorderly Conduct Charge(s):	AZ0110300
06/23/2006 17:56	2006-00013221	Subject Type: Mention, Incident Type: Forgery/Counterfeit Charge(s):	AZ0110300
09/26/2007 11:39	2007-00024450	Subject Type: Complainant, Incident Type: Warrant-City Charge(s):	AZ0110300
01/11/2011 17:52	2011-00000695	Subject Type :Other, Incident Type: Accident/No Injuries Charge(s):	AZ0110300

Type : Incident

Date	Activity Reference	Description	ORI
01/11/2011 17:52	2011-00000695	Incident Type : Accident/No Injuries, Role : 10-27 / 10-29 Charge(s):	AZ0110300

Type : Tickets & Citations

Date	Activity Reference	Description	ORI
01/11/2011 17:52	66569	Civil Citation Charge(s): 28-701A,Speed Greater than Reas/Prud	AZ0110300

Type : Vehicle

Date	Activity Reference	Description	ORI
01/18/2011 10:41	16439	Vehicle Type: 02-Pickup Truck Charge(s):	AZ0110300

Total Activity : 7

+20110314 14:44:15 00002.

MSG/NLETS AX00000000
14:44 03/14/2011 51078
14:44 03/14/2011 40421 AZ0110300
*439

TXT
YOUR INQUIRY HAS BEEN RECEIVED BY
THE ICE LAW ENFORCEMENT SUPPORT CENTER.

EDT 1738.
TEXT OF INQUIRY WAS:
PUR/C.ATN/DET COLLAZO.PHN/5207235311.NAM/DIEU, BRANDON.DOB/19791223.SEX/M.POB/VN
.CUS/N.OFF/0399.PPN/306172829

END

+20110314 14:44:15 00002.

MSG/NLETS AX00000000
14:44 03/14/2011 51078
14:44 03/14/2011 40421 AZ0110300
*439

TXT
YOUR INQUIRY HAS BEEN RECEIVED BY
THE ICE LAW ENFORCEMENT SUPPORT CENTER.

EDT 1738.
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PUR/C.ATN/DET COLLAZO.PHN/5207235311.NAM/DIEU, BRANDON.DOB/19791223.SEX/M.POB/VN
.CUS/N.OFF/0399.PPN/306172829

END

+20110314 14:44:15 00002.

MSG/NLETS AX00000000
14:44 03/14/2011 51078
14:44 03/14/2011 40421 AZ0110300
*439

TXT
YOUR INQUIRY HAS BEEN RECEIVED BY
THE ICE LAW ENFORCEMENT SUPPORT CENTER.

EDT 1738.
TEXT OF INQUIRY WAS:
PUR/C.ATN/DET COLLAZO.PHN/5207235311.NAM/DIEU, BRANDON.DOB/19791223.SEX/M.POB/VN
.CUS/N.OFF/0399.PPN/306172829

+20110314 14:44:15 00002.

MSG/NLETS AX00000000
14:44 03/14/2011 51078
14:44 03/14/2011 40421 AZ0110300
*439

TXT
YOUR INQUIRY HAS BEEN RECEIVED BY
THE ICE LAW ENFORCEMENT SUPPORT CENTER.

+20110314 21:07:35 00003.

IAR:VTICE0954
21:07 03/14/2011 55354
21:07 03/14/2011 51691 AZ0110300
*0000000439
TXT

*** LAW ENFORCEMENT SENSITIVE ***

IAQ RECEIVED: 03/14/11 05:44:30 PM
ORI/AZ0110300 ATN/ DET COLLAZO PHN/5207235311
NAM/ DIEU, BRANDON
DOB/ 19791223 CUS/N OFF/0399 PUR/ C POB/VN SEX/M

**** QUERY MESSAGE TEXT ENDS - L.E.S.C. RESPONSE BEGINS ****
THIS IS NOT A GOVERNMENT DETAINER! THIS INFORMATION IS FOR
LAW ENFORCEMENT USE AND IS BEING PROVIDED FOR INFORMATIONAL
+PURPOSES ONLY!: THIS RESPONSE IS NOT SUPPORTED BY FINGERPRINTS.

THE LAW ENFORCEMENT SUPPORT CENTER IS UNABLE TO FIND, BASED ON
THE INFORMATION PROVIDED, A MATCH IN THE DHS DATABASES QUERIED.
IF YOU HAVE ADDITIONAL IDENTIFIERS, PLEASE RESUBMIT YOUR REQUEST.
PAGE 001

IAQ RECEIVED: 03/14/11 05:44:30 PM
ORI/AZ0110300 ATN/ DET COLLAZO
NAM/ DIEU, BRANDON

THIS IS NOT A GOVERNMENT DETAINER!
LAW ENFORCEMENT USE AND IS BEING PROVIDED FOR INFORMATIONAL
+PURPOSES ONLY!: THIS RESPONSE IS NOT SUPPORTED BY FINGERPRINTS.

THE LAW ENFORCEMENT SUPPORT CENTER IS UNABLE TO FIND, BASED ON
THE INFORMATION PROVIDED, A MATCH IN THE DHS DATABASES QUERIED.
IF YOU HAVE ADDITIONAL IDENTIFIERS, PLEASE RESUBMIT YOUR REQUEST.

IAQ RECEIVED: 03/14/11 05:44:30 PM
ORI/AZ0110300 ATN/ DET COLLAZO
NAM/ DIEU, BRANDON

THIS IS NOT A GOVERNMENT DETAINER!
LAW ENFORCEMENT USE AND IS BEING PROVIDED FOR INFORMATIONAL
+PURPOSES ONLY!: THIS RESPONSE IS NOT SUPPORTED BY FINGERPRINTS.

PAGE 001

072

+20110314 21:07:35 00004.

IAR.VTICE0954

21:07 03/14/2011 55354

21:07 03/14/2011 51691 AZ0110300

*0000000439

THIS RESPONSE DOES NOT INDICATE THAT THE NAME QUERIED IS EITHER AN ALIEN OR A U.S. CITIZEN, NOR DOES IT INDICATE LAWFUL OR UNLAWFUL IMMIGRATION STATUS AND SHOULD NOT BE THE SOLE BASIS FOR A COURSE OF ACTION. IF YOU HAVE ANY QUESTIONS REGARDING THIS RESPONSE, YOU MAY CALL YOUR LOCAL ICE FIELD OFFICE OR THE ICE LAW ENFORCEMENT SUPPORT CENTER AT (802) 872-6020.

FOR FURTHER INFORMATION CONTACT ICE TUCSON, AZ;
- ALIENS IN CUSTODY - ENFORCEMENT AND REMOVAL OPERATIONS AT (602) 379-3235.
- ALIENS NOT IN CUSTODY (ROADSIDE) HOMELAND SECURITY INVESTIGATIONS AT (520) 620-7551
- OR THE LAW ENFORCEMENT SUPPORT CENTER AT (802) 872 6020

REQUESTING ORI INFORMATION:

PAGE 002

THIS RESPONSE DOES NOT
AN ALIEN OR A U.S. CITIZEN

FOR FURTHER INFORMATION

PAGE 002

THIS RESPONSE DOES NOT
AN ALIEN OR A U.S. CITIZEN

FOR FURTHER INFORMATION

PAGE 002

THIS RESPONSE DOES NOT
AN ALIEN OR A U.S. CITIZEN

+20110314 21:07:35 00005.

IAR:VTICE0954
21:07 03/14/2011 55354
21:07 03/14/2011 51691 AZ0110300
*0000000439
AGENCY/
PHONE/

L.E.S.C. QUERY ID: 08272305 *** LIMITED OFFICIAL USE ***
END OF RESPONSE . . .
PAGE LAST

IAR:VTICE
21:07

L.E.S.C. QUERY ID: 08272305
END OF RESPONSE . . .
PAGE LAST

IAR:VTICE
21:07

L.E.S.C. QUERY ID: 08272305
END OF RESPONSE . . .
PAGE LAST

IAR:VTICE
21:07

CTL: (OPTIONAL NLETS CONTROL FIELD)
ORI: AZ0110300 (FOR ROUTING RESPONSE TO ANOTHER TERMINAL/PRINTER)
PUR: C ATN: DET COLLAZO PHN: 5207235311
NAM: TAT, BRANDON DIEU DOB: 12231979 SEX: M POB: VN
CUS: N OFF: 0399 (NCIC OFFENSE CODE FOR MOST SERIOUS CHARGE)

OPTIONAL FIELDS:

ARN (ALIEN REGISTRATION NO.):
* IMPORTANT, ARN IS A KEY INS FILE IDENTIFIER; USE IF KNOWN *
FBI: SID: OLN:
SOC: MNU:
HGT: WGT: EYE:
MMN (MOTHERS MAIDEN NAME): MFN (FIRST NAME):
FLN (FATHERS LAST NAME): FFN (FIRST NAME):
BKN (BOOKING NO.): PPN (PASSPORT NO.): 306172829
REM:

INQUIRY FORWARDED TO INS
PUR: C ATN: DET COLLAZO
NAM: TAT, BRANDON DIEU
CUS: N OFF: 0399 (NCIC)

ALIEN REGISTRATION NO.
ARN: A K L
FBI: SID:
SOC: MNU:
HGT: WGT:
MMN (MOTHERS MAIDEN NAME):
FLN (FATHERS LAST NAME):

INQUIRY FORWARDED TO INS
PUR: C ATN: DET COLLAZO
NAM: TAT, BRANDON DIEU
CUS: N OFF: 0399 (NCIC)

ALIEN REGISTRATION NO.
ARN: A K L
FBI: SID:
SOC: MNU:
HGT: WGT:
MMN (MOTHERS MAIDEN NAME):
FLN (FATHERS LAST NAME):

INQUIRY FORWARDED TO INS
PUR: C ATN: DET COLLAZO
NAM: TAT, BRANDON DIEU
CUS: N OFF: 0399 (NCIC)

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MSG/NLETS AX0000000

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09:33 03/15/2011 64721 AZ0110300

TXT

YOUR INQUIRY HAS BEEN RECEIVED BY
THE ICE LAW ENFORCEMENT SUPPORT CENTER.

EDT 1227.

TEXT OF INQUIRY WAS:

PUR/C.ATN/DET COLLAZO.PHN/5207235311.NAM/TAT, BRANDON DIEU.DOB/19791223.SEX/M:PO
B/VN.CUS/N.OFF/0399.PPN/306172829

END

09:33 03/15/2011 64182
09:33 03/15/2011 64721 AZ0110300
TXT
YOUR INQUIRY HAS BEEN RECEIVED BY
THE ICE LAW ENFORCEMENT SUPPORT CENTER.

END

09:33 03/15/2011 64182
09:33 03/15/2011 64721 AZ0110300
TXT
YOUR INQUIRY HAS BEEN RECEIVED BY
THE ICE LAW ENFORCEMENT SUPPORT CENTER.

END

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IAR.VTICE0508
10:05 03/15/2011 64870
10:05 03/15/2011 66012 AZ0110300
*0508172073
TXT

*** LAW ENFORCEMENT SENSITIVE ***

IAQ RECEIVED: 03/15/11 12:33:49 PM
ORI/ AZ0110300 ATN/DET COLLAZO PHN/ 5207235311

NAM/ TAT, BRANDON DIEU
DOB/ 19791223 CUS/N OFF/0399 PUR/ C POB/VN SEX/M
**** QUERY MESSA

E TEXT ENDS - L.E.S.C. RESPONSE BEGINS ****

THIS IS NOT A GOVERNMENT DETAINER! THIS INFORMATION IS FOR
LAW ENFORCEMENT USE AND IS BEING PROVIDED FOR INFORMATIONAL
PURPOSES ONLY. THIS RESPONSE IS NOT SUPPORTED BY FINGERPRINTS.

***** BASED ON THE INFORMATION PROVIDED *****
THE FOLLOWING I.C. RECORD APPEARS TO RELATE:

NAM/ TAT, BRANDON DIEU
PAGE 001

IAQ RECEIVED: 03/15/11 12:33:49 PM
ORI/ AZ0110300 ATN/DET COLLAZO

NAM/ TAT, BRANDON DIEU
DOB/ 19791223 CUS/N OFF/0399 PUR/ C POB/VN SEX/M

**** QUERY MESSA
E TEXT ENDS - L.E.S.C. RESPONSE BEGINS ****

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LAW ENFORCEMENT USE AND IS BEING PROVIDED FOR INFORMATIONAL
PURPOSES ONLY. THIS RESPONSE IS NOT SUPPORTED BY FINGERPRINTS.

***** BASED ON THE INFORMATION PROVIDED *****
THE FOLLOWING I.C. RECORD APPEARS TO RELATE:

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POB/ VIETN --> VIETNAM

ARN/ 073302885

FCO/ PHO

DOE/ 19940922

SOC/ 600435865

FFN/ CHUONG

MFN/ LAN

NATURALIZATION CERTIFICATE/ 28659365

NATURALIZATION DATE/ 20050610

NATURALIZATION LOCATION/ PHO

I.C.E. RECORDS INDICATE THAT THIS SUBJECT IS A UNITED STATES CITIZEN. THIS INDIVIDUAL IS NOT SUBJECT TO REMOVAL FROM THE UNITED STATES.

PAGES 00273

AKA/ TAT, BINH

DOB/ 19791223

POB/ VIETN --> VIETNAM

ARN/ 073302885

FCO/ PHO

MFN/ LAN

NATURALIZATION CERTIFICATE/ 28659365

NATURALIZATION DATE/ 20050610

NATURALIZATION LOCATION/ PHO

PAGES 0011

AKA/ TAT, BINH

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ARN/ 073302885

FCO/ PHO

MFN/ LAN

NATURALIZATION CERTIFICATE/ 28659365

NATURALIZATION DATE/ 20050610

NATURALIZATION LOCATION/ PHO

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10:05 03/15/2011 66012 AZ0110300

*0508172073

NO FURTHER ACTION BY I.C.E. WILL BE TAKEN.

SUBJECT IS A NATURALIZED UNITED STATES CITIZEN

FOR FURTHER INFORMATION CONTACT ICE TUCSON, AZ;

- ALIENS IN CUSTODY - ENFORCEMENT AND REMOVAL
OPERATIONS AT (602) 379-3235

- ALIENS NOT IN CUSTODY (ROADSIDE) HOMELAND
SECURITY INVESTIGATIONS AT (520) 620-7551

- OR THE LAW ENFORCEMENT SUPPORT CENTER AT

(802) 872 6020

REQUESTING ORI INFORMATION:

IAR:VTICE0508

AGENCY/

PHONE/

PAGE 003

FOR FURTHER INFORMATION CONTACT ICE TUCSON, AZ;

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LESC:QUERY ID: 08275065 *** LIMITED OFFICIAL USE ***

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CITY OF COOLIDGE
CITY COUNCIL ACTION FORM

SUBJECT: Resolution creating an Infill Incentive Zone and creating an Infill Incentive Plan.

STAFF PRESENTER: C. Alton Bruce

RECOMMENDATION:

Staff recommends that Council adopt this Resolution.

DISCUSSION:

As discussed at an earlier meeting, under State Law the City Council has the authority to create an Infill Incentive Zone that reduces Development Fees to encourage infill development. A comparison of Coolidge's Retail Development Fees demonstrates that we are higher than many neighboring communities, primarily because of high Transportation Infrastructure charges.

The attached Resolution creates such an Infill Incentive Zone based on three of the statutorily mandated criteria: A large number of vacant buildings, a large number of vacant lots and a lack of new development compared to other parts of the City. The proposed zone that meets these criteria extends from the canal on the north end along Arizona Blvd, extends to the east to encompass the old downtown and then continues along Arizona Blvd. to just past Martin Road. There is already sufficient transportation infrastructure in this area and new retail development would not overburden it.

Consequently the proposed Infill Incentive Plan reduces Transportation Impact Fees in this zone by 60% and provides for expedited plan and permit processing to encourage retail development. The proposed 60% reduction would result in a retail impact fee of a little higher than Florence and somewhat lower than Casa Grande's. The Council, if it so desires, could adopt a greater reduction in the Transportation Impact Fee. An 80% reduction in the Transportation component would result in a fee lower than that in Florence.

At the March 14 meeting, The Council requested more information on the attached Comparison Chart to make a better informed decision. The Chart has been revised to provide additional information.

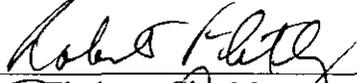
FISCAL IMPACT:

Approval of this resolution may encourage more retail development in the city core. It will however, reduce Development Fee revenue in the Transportation category for those developments.

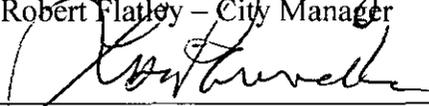
Attachments

Resolution with Map (Exhibit 1)
Revised Development Fee Comparison Chart
Table 2-09 – Development Fees for New Construction Permits

REVIEWED BY:



Robert Flatley – City Manager



Lisa Pannella – Finance Director

PREPARED BY:



C. Alton Bruce – Growth Mgmt. Director

RESOLUTION No. 11-08

A RESOLUTION OF THE MAYOR AND CITY COUNCIL OF THE CITY OF COOLIDGE, ARIZONA, TO CREATE AN INFILL INCENTIVE DISTRICT AND ADOPTING AN INFILL INCENTIVE PLAN AS DESCRIBED IN THE ARIZONA REVISED STATUTES §9-499-10.

WHEREAS: The Mayor and Council have determined that it is in the best interest of the City of Coolidge to encourage the location of additional retail businesses in the City Core; and

WHEREAS: The Mayor and Council have determined that new retail businesses will result in enhanced revenues to the City; and

WHEREAS: The Mayor and Council have made a commitment to attracting additional employment opportunities for the City of Coolidge; and

WHEREAS: There is a large number of vacant older or dilapidated buildings or structures in the City Core; and

WHEREAS: There is a large number of vacant or underused parcels of property, obsolete or inappropriate lot or parcel sizes in the City Core; and

WHEREAS: There is an absence of development and investment activity in the City Core compared to other areas in the city; and

WHEREAS: The Mayor and Council have adopted Development Fees that are levied at the time of the issuance of Building Permits to help cover the cost of essential infrastructure to support new development; and

WHEREAS: A significant portion of the such Development Fees in the case of new retail development is related to the financing of Transportation Infrastructure ; and

WHEREAS: The City Core is currently adequately served by Transportation Infrastructure; and

WHEREAS: A reduction of the Development Fees related to Transportation Infrastructure will act as an incentive in attracting new retail businesses to the City Core; and

WHEREAS: Delays in processing proposals, plans and permits can act as a disincentive to new retail development; and

WHEREAS: Expedited processing of such proposals, plans and permits can encourage new retail development.

NOW, THEREFORE, BE IT RESOLVED: That the Mayor and City Council of the City of Coolidge, Arizona, hereby designates the area shown in the attached Exhibit 1 as the Coolidge Downtown Core Infill Incentive District and adopts an Infill Incentive Plan that reduces the Transportation Infrastructure portion of the Coolidge Development Fee Schedule by 60% for new retail uses that locate in this District and direct staff to expedite processing of proposals, plans and permits for retail uses in this District.

PASSED AND ADOPTED by the Mayor and City Council of the City of Coolidge, this 28th day of March, 2011.

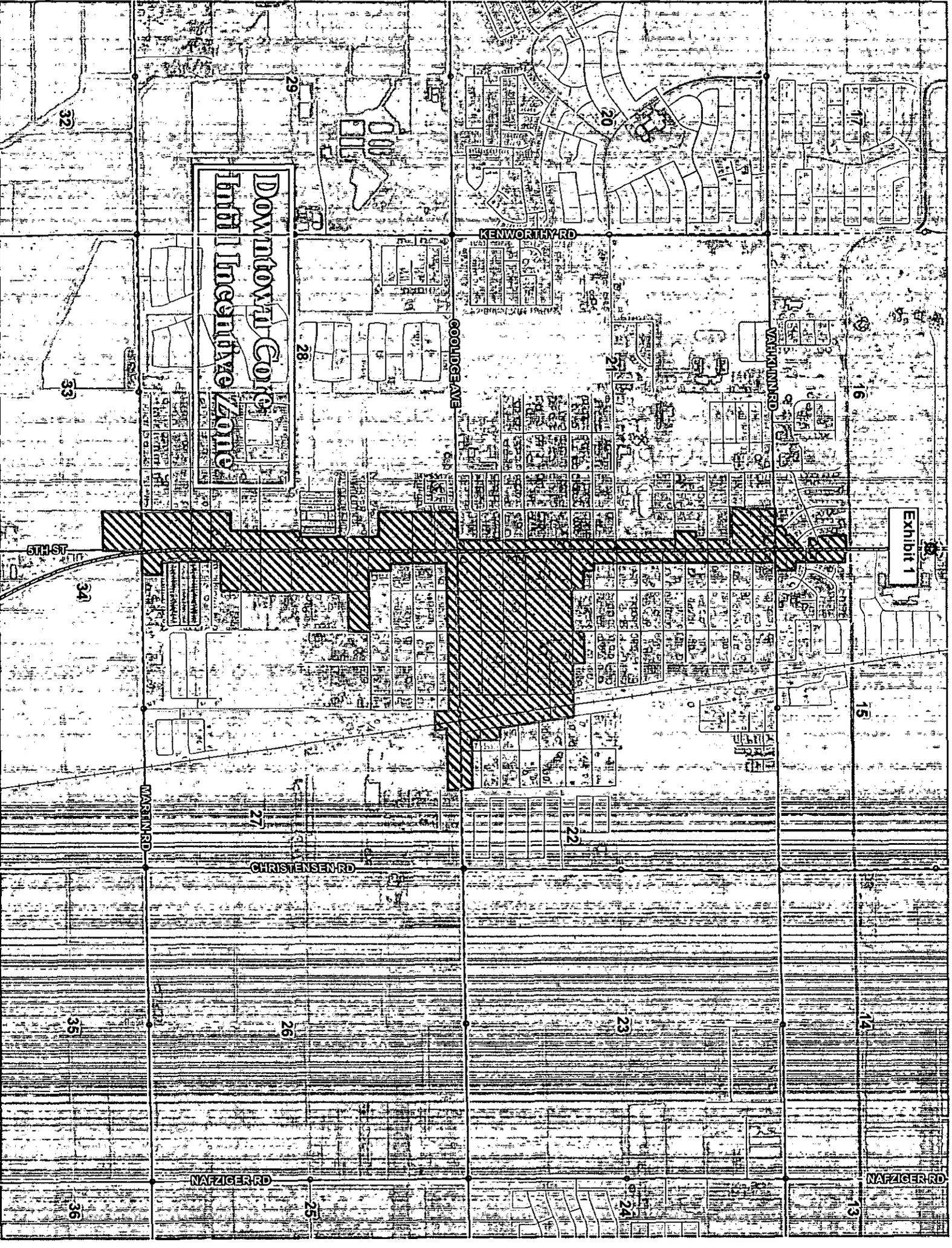
Mayor

ATTEST:

APPROVED AS TO FORM:

City Clerk

City Attorney



DOWNHOLT CORP
Infill Incentive Zone

Exhibit 1

KENWORTHY RD

COLDGATE AVE

VAHMANNED RD

CHRISTENSEN RD

NAFZIGER RD

NAFZIGER RD

9TH ST

WAIN RD

29

28

20

32

33

16

15

14

13

34

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Development Fee Comparison with Proposed Infill Overlay Zone

Category	Coolidge		Casa Grande		Florence		Eloy		Maricopa	
	Wastewater per unit, 7.5" meter	Other per unit res/ per 1000 non-res bldg	Wastewater/ Solid Waste per unit, 7.5" meter	Other per unit res/ per 1000 non-res bldg	Water/Waste per unit, 7.5" meter	Other per unit res/ per 1000 non-res bldg	Water/Waste per unit, 7.5" meter	Other per unit res/ per 1000 non-res bldg	Water/Waste per unit	Other per unit res/ per 1000 non-res bldg
Single Family Residential (per unit)	2707	9174	4753	8593	7559	4746	2928	1942	0	5346
Small Commercial (per 1000 sq ft on other category)	2707	11309	5439	10018	7435	4349	2928	1336	0	10,680
Large Commercial (per 1000 sq ft on other category)	2707	6234	5439	7372	7966	4349	2928	797	0	6,440
Industrial (per 1000 sq ft on other category)	2707	2497	5439	2583	7966	1645	2928	629	0	2,270
Includes sewer, library, parks and rec, police, fire/ems, transportation and general government										
Example: 1 Family Residential = \$11,881		Example: 1 Family Residential = \$13,346		Example: 1 Family Residential = \$12,305		Example: 1 Family Residential = \$4,870		Example: 1 Family Residential = \$5,346		
Example: Commercial 9000 sq ft = \$104,488		Example: Commercial 9000 sq ft = \$95,601		Example: Commercial 9000 sq ft = \$46,700		Example: Commercial 9000 sq ft = \$14,952		Example: 9,000 sq ft commercial = \$96,120		
Example: Industrial 50,000 sq ft = \$127,557		Example: Industrial 50,000 sq ft = \$134,589		Example: Industrial 50,000 sq ft = \$90,216		Example: Industrial 50,000 sq ft = \$34,378		Example: Industrial 50,000 sq ft = \$113,500		

Category	Coolidge with 40% Transp Reduction		Coolidge with 50% Transp Reduction		Coolidge with 60% Transp Reduction		Coolidge with 70% Transp Reduction		Coolidge with 80% Transp Reduction	
	Wastewater per unit, 7.5" meter	Other per unit res/ per 1000 non-res bldg	Wastewater per unit, 7.5" meter	Other per unit res/ per 1000 non-res bldg	Wastewater per unit, 7.5" meter	Other per unit res/ per 1000 non-res bldg	Wastewater per unit, 7.5" meter	Other per unit res/ per 1000 non-res bldg	Wastewater per unit, 7.5" meter	Other per unit res/ per 1000 non-res bldg
Small Commercial (per 1000 sq ft on other category)	2707	8224	2707	7453	2707	6882	2707	5911	2707	5139
Large Commercial (per 1000 sq ft on other category)	2707	4806	2707	4199	2707	3792	2707	3385	2707	2878
Includes sewer, library, parks and rec, police, fire/ems, transportation and general government										
Example: Dollar General @ Taylor/87 9000 sq ft = \$74,016		Example: Dollar General @ Taylor/87 9000 sq ft = \$67,077		Example: Dollar General @ Taylor/87 9000 sq ft = \$60,138		Example: Dollar General @ Taylor/87 9000 sq ft = \$53,199		Example: Dollar General @ Taylor/87 9000 sq ft = \$46,251		

Dollar General Example Calculated as 9 * Other with No Wastewater Charge (has existing Sewer Tap)

Table 2-09 Development Fees for New Construction Permits - Effective April 6, 2009

	Fire/EMS	Gen Govt.	Library	Parks/Rec	Police	Solid Waste	Transportation	Total
Residential Development Fee Per Unit								
Single Family Detached	\$954.00	\$914.00	\$599.00	\$3,410.00	\$697.00	\$309.00	\$2,291.00	\$9,174.00
All other Housing Types	\$784.00	\$751.00	\$492.00	\$2,803.00	\$573.00	\$309.00	\$1,194.00	\$6,906.00
Non-Residential Development Fee Per 1,000 sq. ft. of Building(s)								
Commercial/Shopping Center 25,000 Sq. Ft. or less	\$919.00	\$976.00	\$0.00	\$0.00	\$1,702.00	\$0.00	\$7,712.00	\$11,309.00
Commercial/Shopping Center 25,001 - 50,000 Sq. Ft.	\$789.00	\$839.00	\$0.00	\$0.00	\$1,579.00	\$0.00	\$6,700.00	\$9,907.00
Commercial/Shopping Center 50,001 - 100,000 Sq. Ft.	\$690.00	\$733.00	\$0.00	\$0.00	\$1,381.00	\$0.00	\$5,595.00	\$8,399.00
Commercial/Shopping Center 100,001 - 200,000 Sq. Ft.	\$612.00	\$651.00	\$0.00	\$0.00	\$1,196.00	\$0.00	\$4,789.00	\$7,248.00
Commercial/Shopping Center Over 200,000 Sq. Ft.	\$552.00	\$586.00	\$0.00	\$0.00	\$1,026.00	\$0.00	\$4,070.00	\$6,234.00
Office/Institutional 10,000 Sq. Ft. or less	\$1,236.00	\$1,314.00	\$0.00	\$0.00	\$794.00	\$0.00	\$3,052.00	\$6,396.00
Office/Institutional 10,001 - 25,000 sq. ft.	\$1,145.00	\$1,217.00	\$0.00	\$0.00	\$643.00	\$0.00	\$2,471.00	\$5,476.00
Office/Institutional 25,001 - 50,000 Sq. Ft.	\$1,079.00	\$1,147.00	\$0.00	\$0.00	\$549.00	\$0.00	\$2,108.00	\$4,883.00
Office/Institutional 50,001 - 100,000 Sq. Ft.	\$1,018.00	\$1,082.00	\$0.00	\$0.00	\$468.00	\$0.00	\$1,797.00	\$4,365.00
Office/Institutional over 100,000 Sq. Ft.	\$924.00	\$982.00	\$0.00	\$0.00	\$398.00	\$0.00	\$1,531.00	\$3,835.00
Business Park	\$872.00	\$927.00	\$0.00	\$0.00	\$447.00	\$0.00	\$1,719.00	\$3,965.00
Light Industrial	\$637.00	\$677.00	\$0.00	\$0.00	\$244.00	\$0.00	\$939.00	\$2,497.00
Warehousing	\$353.00	\$375.00	\$0.00	\$0.00	\$174.00	\$0.00	\$668.00	\$1,570.00
Mini-warehouse	\$11.00	\$11.00	\$0.00	\$0.00	\$87.00	\$0.00	\$337.00	\$446.00
Manufacturing	\$494.00	\$525.00	\$0.00	\$0.00	\$134.00	\$0.00	\$514.00	\$1,667.00
Hotel (per room)	\$121.00	\$129.00	\$0.00	\$0.00	\$197.00	\$0.00	\$758.00	\$1,205.00

CITY OF COOLIDGE
CITY COUNCIL ACTION FORM

SUBJECT: Request from Beau Woodring representing Dollar General for additional Development Fee Relief.	STAFF PRESENTER: C. Alton Bruce
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RECOMMENDATION:

Staff has no recommendation on this item.

DISCUSSION:

While Mr. Woodring is aware of the proposed Infill Incentive Zone that has been presented to Council, he feels that additional Impact Fee relief is warranted to encourage Dollar General to locate in Coolidge.

He has submitted the attached letter outlining his request.

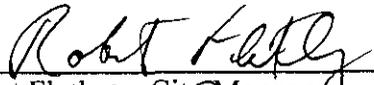
FISCAL IMPACT:

Granting of this request will further reduce Impact Fee revenue for this project beyond what has been proposed in the Infill Overlay Zone.

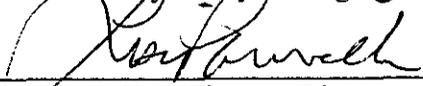
Attachments

Request letter from Beau Woodring

REVIEWED BY:

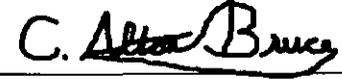


Robert Flatley – City Manager



Lisa Pannella – Finance Director

PREPARED BY:



C. Alton Bruce – Growth Mgmt. Director

Beau Woodring
Southwest General Development LLC
2122 East Highland Dr., suite 265
Phoenix, AZ 85253
Ph: (602) 955-1470 x222

February 11, 2011

Via email

Alton Bruce
Growth Management Director
City of Coolidge
131 W. Pinkley Avenue
Coolidge, AZ 85228

RE: Formal Request for Impact Fee Reduction

Dear Mr. Bruce,

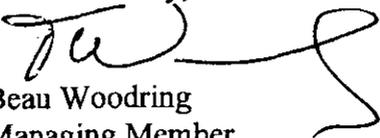
With this letter, we hereby formally request a reduction of impact fees to total no more than \$41,000 for our contemplated development at the corner of Taylor Avenue.

It continues to be our sincere desire to construct a new Dollar General Store in Coolidge. However, the City's impact fees are prohibitively expensive, even if the transportation portion is reduced by 60%. It is important to note that, even with a transportation reduction by 60%, Coolidge would still be more expensive than Florence, Eloy, Maricopa, Superior, and quite a few other towns. Our developments are extremely cost sensitive and a City's impact fees represent a significant project cost. As we develop new stores across Arizona, we first place them in towns where it is most affordable to do so.

A new Dollar General Store should provide approximately 12 to 15 new jobs and approximately \$30,000 in annual income to the City via sales taxes. No doubt there will be some construction related jobs and sales for local individuals, vendors, and proprietors.

We look forward to a final decision from City Council on the 28th. Thank you for taking the time to consider our request.

Most Sincerely,


Beau Woodring
Managing Member

**City of Coolidge, Arizona
Notice of Public Hearing**

Notice is hereby given that the Coolidge City Council will hold a public hearing on **Monday, March 28, 2011 at 7:00 P.M.** in the City Council Chambers at 911 S. Arizona Boulevard to consider the following:

COOLPZ 10-11-6 ZA: An Amendment to the City of Coolidge Zoning Ordinance to add new uses, namely Medical Marijuana Dispensary, Medical Marijuana Infusion Facility, Medical Marijuana Cultivation Facility and Qualifying Patient/Caregiver Cultivation Location to be allowed by right or by Conditional Use in specific Zones and setting standards regarding the design, location and operation of such uses.

The complete text of the proposed amendment along with a map showing areas where such uses could be located is available on the City of Coolidge website: www.coolidgeaz.com . Navigate to the Growth Management, Planning and Zoning Meetings, Meeting Agendas and Minutes tab to access these documents.

All persons with special accessibility needs, including large print materials or interpreters should contact the ADA Coordinator at (520) 723-5361 or TDD (520) 723-4653 no later than 10:00 am March 28, 2011.

Number of publications: 2

Date of publication: March 16, 2011 and March 23 – Coolidge Examiner

By: C. Alton Bruce – Growth Management Director

CITY OF COOLIDGE
CITY COUNCIL ACTION FORM

SUBJECT: RESOLUTION CITING PROPOSED AMENDMENT TO ZONING CODE TO REGULATE MEDICAL MARIJUANA USES IN THE CITY OF COOLIDGE BY REFERENCE	STAFF PRESENTER: C. Alton Bruce
---	--

RECOMMENDATION:

Staff recommends adoption of this Resolution.

DISCUSSION:

This Resolution cites the amendment to the Zoning Ordinance by reference saving publishing costs for adopting the amendment.

FISCAL IMPACT:

Reduces the cost of adopting the Zoning Code Amendment.

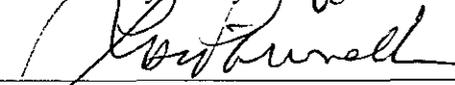
Attachments

- Resolution to be adopted by Council

REVIEWED BY:

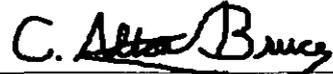


Robert Flatley - City Manager



Lisa Pannella - Finance Director

PREPARED BY:



C. Alton Bruce - Growth Mgmt. Director

RESOLUTION No. 11-09

A RESOLUTION OF THE MAYOR AND CITY COUNCIL OF THE CITY OF COOLIDGE, ARIZONA, DECLARING AS A PUBLIC RECORD THAT CERTAIN DOCUMENT FILED WITH THE CITY CLERK AND ENTITLED “CITY OF COOLIDGE ZONING CODE AMENDMENTS FOR MEDICAL MARIJUANA”, RELATING TO THE ESTABLISHMENT OF REGULATIONS AND REQUIREMENTS FOR THE DISPENSING, CULTIVATING, INFUSING, AND USE OF MEDICAL MARIJUANA BY AMENDING THE COOLIDGE CITY ZONING CODE BY AMENDING SECTIONS 302, 501, 502, 503, 504, 505, 506, 602, 603, 605, 701, 702, 801, 802 AND 1008 OF THE PREVIOUSLY ADOPTED CITY ZONING CODE.

WHEREAS, The Arizona Medical Marijuana Act, Proposition 203, approved by voters in the statewide election on November 2, 2010, provides for defined possession, use, distribution and transportation of marijuana for Medical Use within the State of Arizona; and

WHEREAS, staff for the City has provided some amendments to the Zoning Code which provides rules and regulations for medical marijuana dispensaries and cultivation facilities; and

WHEREAS, the City Council believes that declaring such document a public record and adopting its provisions by reference will be in the City’s best interests;

NOW THEREFORE, BE IT RESOLVED by the Mayor and City Council of the City of Coolidge, Arizona as follows:

That certain document known as “City of Coolidge Zoning Code Amendments for Medical Marijuana” amending the Coolidge City Zoning Code by amending the Sections 302, 501, 502, 503, 504, 505, 506, 602, 603, 605, 701, 702, 801, 802 and 1008 of the previously adopted City Zoning Code relating to the establishment of regulations and requirements for medical marijuana dispensaries, cultivation, infusion and use is hereby declared to be a public record, and three (3) copies shall remain on file in the office of the City Clerk of the City of Coolidge for examination by the public.

PASSED AND ADOPTED by the City Council of the City of Coolidge, Arizona, this 28th day of March, 2011.

APPROVED:

Mayor

ATTEST:

APPROVED AS TO FORM:

City Clerk

City Attorney

CITY OF COOLIDGE ZONING CODE AMENDMENTS FOR MEDICAL MARIJUANA

Article III, Section 302 Definitions of the Zoning Ordinance of the City of Coolidge is amended by inserting in proper alphabetical location the following definitions:

Medical marijuana

“Medical marijuana” means all parts of the plant genus cannabis whether growing or not, and the seed of such plants that may be administered to treat or alleviate a qualifying patient’s debilitating medical condition or symptoms associated with the patient’s debilitating medical condition.

Medical marijuana cultivation facility

“Medical marijuana cultivation facility” shall mean a building, structure, or premises used for the cultivation or storage of medical marijuana that is physically separate and off-site from a medical marijuana dispensary. This includes any building, structure, or premises used for cultivation by either a qualifying patient or a designated caregiver other than those accessory uses permitted by this Ordinance.

Medical marijuana dispensary

“Medical marijuana dispensary” means a nonprofit medical marijuana dispensary duly registered and certified pursuant to A.R.S. § 36-2804 that sells, distributes, transmits, gives, dispenses, or otherwise provides medical marijuana to qualifying patients. A medical marijuana dispensary as defined herein shall not cultivate or infuse marijuana onsite.

Medical marijuana dispensary cultivation facility

“Medical marijuana dispensary cultivation facility” shall mean a building, structure or premises where marijuana will be cultivated for sale at a nonprofit medical marijuana dispensary duly registered and certified pursuant to A.R.S. § 36-2804.

Medical marijuana infusion facility

“Medical marijuana infusion facility” means a facility that incorporates medical marijuana (cannabis) into consumable/edible goods by the means of cooking, blending, or any other type of incorporation.

Medical marijuana uses

“Medical marijuana uses” shall include collectively medical marijuana cultivation facilities, medical marijuana dispensaries, medical marijuana dispensary cultivation facilities and medical marijuana infusion facilities.

Qualifying patient/caregiver cultivation location

"Qualifying patient/caregiver cultivation location" means any building, structure, or premises used for the cultivation of marijuana by either a qualifying patient and/or qualified caregivers who meet the following requirements:

1. The cultivator is either:
 - a) a qualifying patient pursuant to A.R.S. §36-2801(13) who has received his/her registry identification card from the Arizona Department of Health Services; or
 - b) a designated caregiver pursuant to A.R.S. §36-2801(5) who has received his/her registry identification card from the Arizona Department of Health Services.
2. The cultivation is done only at the address approved by the Arizona Department of Health Services; and
3. The building, structure, or premises used for the cultivation is at least twentyfive (25) miles from the nearest medical marijuana dispensary.

Article V, Section 501 Agricultural Zone (AG) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Conditionally Permitted Use to Section C (Conditionally Permitted Uses): "5. Medical marijuana cultivation facility subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008." and by adding a new Permitted Accessory Use to Section D (Permitted Accessory Uses) "8. Qualifying patient/caregiver cultivation location subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008." .

Article V, Section 502 Single-Family Residential Zone (R-1) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Permitted Accessory Use to Section D (Permitted Accessory Uses) "8. Qualifying patient/caregiver cultivation location subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008."

Article V, Section 503 Single-Family/Duplex Residential Zone (R-2) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Permitted Accessory Use to Section D (Permitted Accessory Uses) "8. Qualifying patient/caregiver cultivation location subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008."

Article V, Section 504 Multi-Family Residential Zone (R-3) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Permitted Accessory Use to Section D (Permitted Accessory Uses) "8. Qualifying patient/caregiver cultivation location subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008."

Article V, Section 505 Multi-Family Residential Zone (R-4)) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Permitted

Accessory Use to Section D (Permitted Accessory Uses) "7. Qualifying patient/caregiver cultivation location subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008."

Article V, Section 506 Manufactured Home Residential Zone (R-5) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Permitted Accessory Use to Section E (Permitted Accessory Uses) "8. Qualifying patient/caregiver cultivation location subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008."

Article VI, Section 602 General Business Zone (C-2) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Conditionally Permitted Use to Section C (Conditionally Permitted Uses): "24. Medical marijuana dispensary subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008."

Article VI, Section 603 General Service Zone (C-3) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Conditionally Permitted Use to Section C (Conditionally Permitted Uses): "22. Medical marijuana dispensary subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008."

Article VI, Section 605 Commerce Park Zone (C-P) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Conditionally Permitted Use to Section C (Conditionally Permitted Uses): "6. Medical marijuana uses subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008."

Article VII, Section 701 Garden Industrial Zone (I-1) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Conditionally Permitted Use to Section C (Conditionally Permitted Uses): "5. Medical marijuana uses subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008."

Article VII, Section 702 General Industrial Zone (I-2) of the Zoning Ordinance of the City of Coolidge is amended by adding a new Conditionally Permitted Use to Section C (Conditionally Permitted Uses): "20. Medical marijuana uses subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008."

Article VIII, Section 801 Planned Area Development Zone (P.A.D.) Paragraph D. Additional building and performance standards of the Zoning Ordinance of the City of Coolidge is amended by adding:
"2. Medical marijuana uses shall not be allowed on any property zoned P.A.D. unless either:

- a) the use is specifically allowed by the P.A.D. Guide that governs said property; or
- b) the property is within a P.A.D. that primarily allows I-1 and/or I-2 land uses.

3. Any medical marijuana use permitted under the provisions of the above paragraph shall be subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008.”

Article VIII, Section 802 Section 802 Regional Mixed-Use Planned Area Development Zone (RMU-PAD) Paragraph D. Additional building and performance standards of the Zoning Ordinance of the City of Coolidge is amended by adding:

“2. Medical marijuana uses shall not be allowed on any property zoned R.M.U-P.A.D. unless either:

- a) the use is specifically allowed by the P.A.D. Guide that governs said property; or
- b) the property is within a R.M.U-P.A.D. that primarily allows I-1 and/or I-2 land uses.

3. Any medical marijuana use permitted under the provisions of the above paragraph shall be subject to the Definitions in Article III Section 302 and to the provisions of Article X Section 1008.”

Article X, GENERAL BUILDING AND DEVELOPMENT STANDARDS of the Zoning Ordinance of the City of Coolidge is amended by adding a new Section 1008 entitled “Medical Marijuana Uses” and subsequent subsections, as follows:

Section 1008 Medical Marijuana Uses

A. Application of this article.

The requirements of this article shall apply to all medical marijuana uses.

B. Days and hours of operation.

A medical marijuana dispensary shall only be allowed to operate Monday through Saturday between the hours of 7:00 a.m. and 7:00 p.m.

C. Development standards.

All medical marijuana uses shall:

1. Be located in a permanent building housing only one user or tenant, except that a medical marijuana dispensary may be in a permanent building housing more than one tenant provided that the walls separating the dispensary tenant space from the adjoining tenant space(s) are constructed to one of the following standards extending from the floor to the roof deck:

- a) Minimum 6 inch Masonry

b) Interior wall covered with sheet metal, a minimum of 18 gauge, and one layer ½" plywood fastened with screws to the interior wall studs.

c) Construction designs approved by the Building Official as providing equivalent level of security.

2. Provide a monitored security alarm system.
3. May not be located in a trailer, cargo container, or motor vehicle.
4. Not have drive-through service.
5. Not emit dust, fumes, vapors, or odors into the environment above ambient levels.
6. Not provide offsite delivery of medical marijuana to qualified patients.
7. Prohibit consumption of marijuana on the premises.
8. Not have outdoor seating areas.
9. Display a current City of Coolidge business license applicable to medical marijuana uses.

D. Distance requirements.

Medical marijuana uses shall meet the following minimum separations, measured in a straight line from the nearest point of the building or suite containing the medical marijuana use to the property boundary of the parcel containing any existing uses listed below:

1. 500 feet from any other medical marijuana use.
2. 500 feet from a substance abuse diagnostic and treatment facility or other drug or alcohol rehabilitation facility.
3. 500 feet from a public or private school.
4. 500 feet from a daycare center providing care to minor children.
5. 1 mile from any boundary of the Gila River Indian Community.

E. Prohibitions.

A medical marijuana cultivation facility not associated with a medical marijuana dispensary is prohibited, and only one medical marijuana cultivation facility shall be permitted for the single medical marijuana dispensary with which it is associated.

CITY OF COOLIDGE
CITY COUNCIL ACTION FORM

SUBJECT: PROPOSED AMENDMENT TO ZONING CODE TO REGULATE MEDICAL MARIJUANA USES IN THE CITY OF COOLIDGE

STAFF PRESENTER: C. Alton Bruce

RECOMMENDATION:

The Planning and Zoning Commission and staff recommend that Council adopt this Amendment to the Zoning Code.

DISCUSSION:

See attached Staff Report

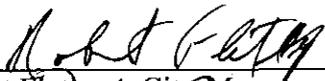
FISCAL IMPACT:

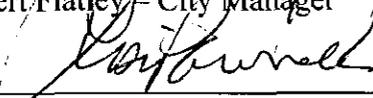
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Attachments

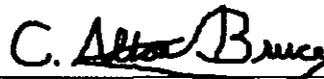
- Staff report on the proposed Zoning Ordinance Amendments.
- The text of the proposed Zoning Code Amendment
- The Ordinance adopting the Amendment
- A draft map showing potential Medical Marijuana Use Locations outside of buffer zones as provided for in the ordinance.

REVIEWED BY:


Robert Flatley – City Manager


Lisa Pannella – Finance Director

PREPARED BY:


C. Alton Bruce – Growth Mgmt. Director

ORDINANCE No. 11-01

AN ORDINANCE OF THE MAYOR AND CITY COUNCIL OF THE CITY OF COOLIDGE, ARIZONA, ADOPTING “CITY OF COOLIDGE ZONING CODE AMENDMENTS FOR MEDICAL MARIJUANA” BY REFERENCE WHICH AMENDS SECTIONS 302, 501, 502, 503, 504, 505, 506, 602, 603, 605, 701, 702, 801, 802 AND 1008 OF THE COOLIDGE CITY ZONING CODE AND PROVIDING FOR SEVERABILITY AND DECLARING AN EMERGENCY.

WHEREAS, that certain document known as the “City of Coolidge Zoning Code Amendments for Medical Marijuana” was adopted as a public record by Resolution No. 11-09 on March 28, 2011; and

WHEREAS, on November 29, 2010, the Arizona Secretary of State certified the election results of the November General Election during which Proposition 203 entitled “The Arizona Medical Marijuana Act” was passed by the voters of Arizona; and

WHEREAS, the Arizona Medical Marijuana Act allows qualifying patients with a debilitating medical condition to obtain marijuana from a dispensary for use in treating or alleviating the debilitating medical condition; and

WHEREAS, the Arizona Medical Marijuana Act allows cities to enact zoning regulations that limit the use of land for medical marijuana dispensaries; and

WHEREAS, the possession, delivery, manufacture, cultivation, and sale of marijuana is currently illegal under the both the federal Controlled Substances Act and the Arizona Controlled Substances Act; and

WHEREAS, nothing in this Ordinance is intended, nor shall be construed, to assist, permit, or condone any violation of federal or state law; and

WHEREAS, many jurisdictions around the country that have approved medical marijuana uses have reported significant nuisance issues, such as mobile marijuana dispensaries and a proliferation of medical marijuana dispensaries, as well as significant negative secondary impacts such as an increase in the occurrence of crime associated with medical marijuana dispensaries and cultivation locations that opened and operated subsequent to the adoption of state laws permitting their operation; and

WHEREAS, the negative secondary impacts that other jurisdictions have experienced through various nuisance issues and the increase in the occurrence of crime associated with medical marijuana dispensaries and cultivation centers requires the City to determine which zoning regulations will best limit the use of land within the City of Coolidge to mitigate those negative secondary impacts in order to protect the health, safety, and welfare of the citizens of the City of Coolidge; and

WHEREAS, the Mayor and City Council of the City of Coolidge find the zoning restrictions in this Ordinance strike the appropriate balance between the intent of the Arizona Medical Marijuana Act and the mitigation of the negative secondary impacts that are associated with medical marijuana dispensaries and cultivation locations; and

WHEREAS, the Mayor and City Council of the City of Coolidge further finds that the zoning regulations adopted by this Ordinance are in the best interests of the City of Coolidge and the health, safety, and welfare of its citizens.

WHEREAS, A.R.S. §9-802 allows a City to adopt a public record by Ordinance as a means to reduce publication costs while ensuring that the public gets fair notice and opportunity to review its operative provisions;

NOW, THEREFORE, BE IT ORDAINED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF COOLIDGE, ARIZONA, AS FOLLOWS:

SECTION 1. Pursuant to Arizona Revised Statutes Section 9-802, that certain document known as “City of Coolidge Zoning Code Amendments for Medical Marijuana,” three copies of which are on file in the office of the City Clerk of the City of Coolidge, Arizona, which document was made a public record by Resolution No. 11-09 of the City of Coolidge, Arizona, is hereby referred to, adopted and made a part hereof as if fully set out in this Ordinance.

SECTION 2. Sections 302, 501, 502, 503, 504, 505, 506, 602, 603, 605, 701, 702, 801, 802 and 1008 of the Coolidge City Zoning Code and all amendments thereto are hereby revised by adding the provisions set forth in “City of Coolidge Zoning Code Amendments for Medical Marijuana” which was made public record by Resolution No. 11-09 of the City of Coolidge, Arizona.

SECTION 3. If any section, subsection, sentence, clause, phrase or portion of this Ordinance is for any reason held to be invalid or unconstitutional by the decision of any court of competent jurisdiction, such decision shall not affect the validity of the remaining portions thereof.

SECTION 4. The Mayor and Council have determined that it is necessary for the proper preservation of the peace, health and safety of the City of Coolidge, Arizona that the provisions of this Ordinance be effective immediately upon its passage. Accordingly, the Mayor and Council declare an emergency to exist, and this Ordinance shall be effective immediately upon its final adoption by the Mayor and Council.

PASSED AND ADOPTED by the Mayor and Council of the City of Coolidge, Arizona, this 28th day of March, 2011.

APPROVED:

Mayor

ATTEST:

City Clerk

APPROVED AS TO FORM:

City Attorney

CITY OF COOLIDGE
CITY COUNCIL ACTION FORM

SUBJECT: FY 11/12 Budget Estimates and Recommendations.

STAFF PRESENTER: Lisa Pannella, Finance Director

RECOMMENDATION:

General Fund update with new projections for state shared revenues based on the 2010 census figures.

DISCUSSION:

1. Discuss the new projections for State Shared Revenues based on the 2010 Census.
2. Discuss the amount of \$459,101 revenues over expenditures for General Fund.
3. Discuss budget recommendations.

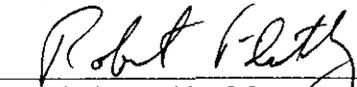
FISCAL IMPACT:

Surplus of \$459,101 new revenues over expenditures

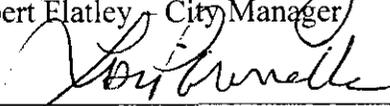
Attachments

General Fund Budget Summary

REVIEWED BY:

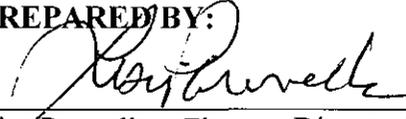


Robert Flatley - City Manager



Lisa Pannella - Finance Director

PREPARED BY:



Lisa Pannella - Finance Director/CFO

SUMMARY BY DEPARTMENT/CATEGORY OF EXPENDITURES WITHIN EACH FUND
Fiscal Year 2011-2012

FUND/ DEPARTMENT	Personal Services	Operating	Capital Outlay	Debt Services	Total
GENERAL FUND					
City Council	\$10,487	\$62,963	\$0	0	73,450
City Manager	154,537	5,315	0	0	159,852
Human Resources	74,572	6,500	0	0	81,072
City Clerk	87,787	19,030	0	0	106,817
Legal		175,000	0	0	175,000
Judicial	254,412	107,212	0	0	361,624
Finance	329,665	116,814	0	0	446,479
Police Operations	3,014,965	343,047	0	0	3,358,012
Grants & Special Projects	62,743	2,130	0	0	64,873
Fire Department	166,217	47,766	0	0	213,983
Vehicle Maintenance	56,368	30,139	0	0	86,507
Building Maintenance	150,465	58,157	0	0	208,622
Information Technology	139,096	5,063	0	0	144,159
Animal Control	0	87,017	0	0	87,017
Swimming Pool	51,385	22,424		0	73,809
Recreation	360,599	164,734	0	0	525,333
Grounds Maintenance	313,994	179,846	0	0	493,840
Library	243,161	84,745	0	0	327,906
Growth Management	344,257	67,925	0	0	412,182
Channel XI	75,302	12,861			88,163
Chamber of Commerce		35,000	0	0	35,000
Capital Improvement-City Complex		1,000,000	0		1,000,000
Contingency		2,523,467	0	0	2,523,467
Miscellaneous		85,000	0	0	85,000
GENERAL FUND TOTAL	\$5,890,012	\$5,242,155	\$0	\$0	\$11,132,167
+ Carry Over July 1, 2011	3,594,366				
+ New Revenue FY 2011/2012	7,732,319	7,732,319			
+ Transfer In (LW, SW, Streets)	215,482	215,482			
- Transfer Out Transit	190,000				
- Transfer Out Airport	50,000				
- Transfer Out FT Fire	170,000				
Total Estimated Revenue	11,132,167	7,947,801			
- Expenditures	11,132,167	7,488,700		City Operations Only	
Revenues over Expenditures	0	459,101			
		77,359	Dep. Hlth Ins.		Reserve
		36,000	ST Disability	1,699,003	15% of total
		572,460			Revenues

STATE SHARED REVENUE

Published annually by the League of Arizona Cities & Towns

March 11, 2011

CITY/TOWN	2010 CENSUS POP	2010 URS POP	VLT	HURF	SALES TAX	INCOME TAX
APACHE JUNCTION	35,840	35,840	\$1,583,238	\$2,263,506	\$2,711,525	\$3,025,047
AVONDALE	76,238	76,238	\$2,570,965	\$4,204,634	\$5,767,893	\$6,434,809
BENSON	5,105	5,105	\$235,871	\$355,852	\$386,226	\$430,884
BISBEE	5,575	5,575	\$257,587	\$388,614	\$421,784	\$470,554
BUCKEYE	50,876	50,876	\$1,715,685	\$2,805,884	\$3,849,095	\$4,294,149
BULLHEAD CITY	39,540	39,540	\$1,959,015	\$3,127,688	\$2,991,454	\$3,337,343
CAMP VERDE	10,873	10,873	\$577,351	\$742,925	\$822,612	\$917,727
CAREFREE	3,363	3,363	\$113,410	\$185,474	\$254,432	\$283,851
CASA GRANDE	48,571	48,571	\$2,145,632	\$3,067,544	\$3,674,707	\$4,099,598
CAVE CREEK	5,015	5,015	\$169,120	\$276,584	\$379,417	\$423,287
CHANDLER	236,123	236,123	\$7,962,747	\$13,022,519	\$17,864,216	\$19,929,779
CHINO VALLEY	10,817	10,817	\$574,377	\$739,098	\$818,375	\$913,001
CLARKDALE	4,097	4,097	\$217,549	\$279,938	\$309,964	\$345,804
CLIFTON	3,311	3,311	\$261,793	\$245,750	\$250,498	\$279,462
COLORADO CITY	4,821	4,821	\$238,857	\$381,350	\$364,739	\$406,913
COOLIDGE	11,825	11,825	\$522,371	\$746,818	\$894,637	\$998,080
COTTONWOOD	11,265	11,265	\$598,166	\$769,709	\$852,269	\$950,814
DEWEY-HUMBOLDT	3,894	3,894	\$206,769	\$266,067	\$294,606	\$328,670
DOUGLAS	17,378	17,378	\$802,933	\$1,211,361	\$1,314,757	\$1,466,777
DUNCAN	696	1,500	\$55,031	\$51,659	\$52,657	\$126,606
EAGAR	4,885	4,885	\$265,780	\$854,138	\$369,582	\$412,315
EL MIRAGE	31,797	31,797	\$1,072,286	\$1,753,650	\$2,405,647	\$2,683,801
ELOY	16,631	16,631	\$734,677	\$1,050,345	\$1,258,242	\$1,403,727
FLAGSTAFF	65,870	65,870	\$2,658,018	\$6,531,611	\$4,983,487	\$5,559,706
FLORENCE	25,536	25,536	\$1,128,057	\$1,612,748	\$1,931,962	\$2,155,346
FOUNTAIN HILLS	22,489	22,489	\$758,394	\$1,240,300	\$1,701,437	\$1,898,167
FREDONIA	1,314	1,500	\$53,023	\$130,295	\$99,413	\$126,606
GILA BEND	1,922	1,922	\$64,815	\$106,001	\$145,412	\$162,225
GILBERT	208,453	208,453	\$7,029,635	\$11,496,479	\$15,770,803	\$17,594,314
GLENDALE	226,721	226,721	\$7,645,685	\$12,503,985	\$17,152,894	\$19,136,210
GLOBE	7,532	7,532	\$434,629	\$680,455	\$569,844	\$635,733
GOODYEAR	65,275	65,275	\$2,201,261	\$3,600,009	\$4,938,471	\$5,509,486
GUADALUPE	5,523	5,523	\$186,251	\$304,601	\$417,850	\$466,165
HAYDEN	662	1,500	\$38,200	\$59,806	\$50,085	\$126,606
HOLBROOK	5,053	5,053	\$262,303	\$583,083	\$382,292	\$426,495
HUACHUCA CITY	1,853	1,853	\$85,616	\$129,166	\$140,191	\$156,401
JEROME	444	1,500	\$23,576	\$30,337	\$33,591	\$126,606
KEARNY	1,950	1,950	\$86,142	\$123,154	\$147,530	\$164,588
KINGMAN	28,068	28,068	\$1,390,633	\$2,220,231	\$2,123,524	\$2,369,058
LAKE HAVASU CITY	52,527	52,527	\$2,602,457	\$4,154,984	\$3,974,004	\$4,433,501
LITCHFIELD PARK	5,476	5,476	\$184,666	\$302,009	\$414,294	\$462,198
MAMMOTH	1,426	1,500	\$62,994	\$90,060	\$107,886	\$126,606
MARANA	34,961	34,961	\$1,383,587	\$2,219,050	\$2,645,023	\$2,950,856
MARICOPA	43,482	43,482	\$1,920,825	\$2,746,143	\$3,289,692	\$3,670,065
MESA	439,041	439,041	\$14,805,727	\$24,213,735	\$33,216,261	\$37,056,916
MIAMI	1,837	1,837	\$106,003	\$165,958	\$138,981	\$155,051