



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

DLLC USE ONLY

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|--|
| Issuance fee: \$100.00 |
| License #: |
| Issuance Date: |
| <input type="checkbox"/> Liquor Store (series 9) |
| <input type="checkbox"/> Beer and Wine Store (series 10) |
| CSR: |

**SAMPLING PRIVILEGES APPLICATION
 SERIES 9 OR 10**

Applicant's Name: _____ Check one Owner Agent

Business Name: _____

Business Location: _____
 Street Address City State County Zip Code

Mailing Address: _____
 Street Address or P.O. Box City State County Zip Code

Business Phone Number: _____ Daytime Contact Number: _____

Email Address: _____

Series #10 Beer and Wine Bar Only:

- I declare that my business qualifies as a
- Premises is 5,000 square feet or larger
 - At least 75% of shelf space is dedicated to beer and wine

A.R.S. §4-206.01(J) Bar, Beer and Wine Bar or Liquor Store licenses; number permitted; fee; sampling privileges

I (Signature), _____, attest that I am the OWNER/AGENT filing this form, that I have read, and assume responsibility for compliance with, A.R.S. §4-206.01 A.R.S. §4-206.01 at the licensed establishment, and verify all statements I have made on this document to be true, correct and complete. I understand that I am responsible for the \$100 issuance fee and the annual \$75 renewal fee for these sampling privileges. Sampling privilege renewal fees are due at the same time as the renewal for the "current license #" identified on page 1 of this application.

LOCAL GOVERNING BOARD

I, _____ recommend APPROVAL DISAPPROVAL
(Government Official Signature) (Title)

on behalf of _____
(City, Town, County) Phone Date

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Investigation Recommendation: Approval Disapproval by: _____ Date: ___/___/___

Director Signature required for Disapprovals: _____ Date: ___/___/___