

State of Arizona
Department of Liquor Licenses and Control

Created 07/20/2023 @ 11:54:50 AM

Local Governing Body Report

LICENSE

Number:	07130076	Type:	007 BEER AND WINE BAR
Name:	WICKED CITY PUB		
State:	Pending		
Issue Date:		Expiration Date:	08/31/2024
Original Issue Date:	01/20/1985		
Location:	403 CLARK STREET #A3 JEROME, AZ 86331 USA		
Mailing Address:	PO BOX 1284 JEROME, AZ 86331 USA		
Phone:	(928)274-1329		
Alt. Phone:	[REDACTED]		
Email:	[REDACTED]		

Currently, this license has pending applications.

AGENT

Name:	ALLEN FREDERIC STEFFEY
Gender:	Male
Correspondence Address:	PO BOX 1284 JEROME, AZ 86331 USA
Phone:	[REDACTED]
Alt. Phone:	[REDACTED]
Email:	[REDACTED]

OWNER

Name:	WICKED CITY PUB LLC		
Contact Name:	ALLEN FREDERIC STEFFEY		
Type:	LIMITED LIABILITY COMPANY		
AZ. CC File Number:	23510560	State of Incorporation:	AZ
Incorporation Date:	04/04/2023		
Correspondence Address:	PO BOX 1284 JEROME, AZ 86331 USA		
Phone:	(928)274-6182		
Alt. Phone:	[REDACTED]		
Email:	[REDACTED]		

Officers / Stockholders

Name:	Title:	% Interest:
ALLEN FREDERIC STEFFEY	MEMBER	100.00

WICKED CITY PUB LLC - MEMBER

Name: ALLEN FREDERIC STEFFEY

Gender: Male

Correspondence Address: PO BOX 1284
JEROME, AZ 86331
USA

Phone: [REDACTED]

Alt. Phone: [REDACTED]

Email: [REDACTED]

APPLICATION INFORMATION

Application Number: 251651
Application Type: Owner Transfer
Created Date: 07/13/2023

QUESTIONS & ANSWERS

007 Beer and Wine Bar

- 1) Are you applying for an Interim Permit (INP)?
Yes
A Document of type INTERIM PERMIT (INP) NOTARY PAGE is required.
- 4) Does the Business location address have a street address for a City or Town but is actually in the boundaries of another City, Town or Tribal Reservation?
No
- 8) Did the Premises phone number change?
Yes
What is the new phone number?
928-274-6182
- 10) Provide name, address, and distance of nearest school. (If less than one (1) mile note footage)
CLARKDALE ELEMENTARY 1615 MAIN ST CLARKDALE, AZ 86324 5.9 MILES
- 11) Are you one of the following? Please indicate below.
Property Tenant
Subtenant
Property Owner
Property Purchaser
Property Management Company
PROPERTY TENANT
- 12) Is there a penalty if lease is not fulfilled?
Yes
What is the penalty?
DEPOSIT
- 13) What is the total money borrowed for the business not including the lease?
Please list lenders/people owed money for the business.
SCOTT STAAB 687 MAIN ST #32 JEROME, AZ 86331 \$45,000.00
- 14) Is there a drive through window on the premises?
No
- 15) If there is a patio please indicate contiguous or non-contiguous within 30 feet.
NONE
- 16) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
No
- 17) Total Price paid for Series 6 Bar, Series 7 Beer & Wine Bar or Series 9 Liquor Store (license only)
\$38,300.00

IP

State of Arizona
Department of Liquor Licenses and Control

Created 07/20/2023 @ 11:57:30 AM

Local Governing Body Report

LICENSE

Number: Type: INP INTERIM PERMIT
 Name: WICKED CITY PUB
 State: Pending
 Issue Date: Expiration Date:
 Original Issue Date:
 Location: 403 CLARK STREET
 #A3
 JEROME, AZ 86331
 USA
 Mailing Address: PO BOX 1284
 JEROME, AZ 86331
 USA
 Phone: (928)274-1329
 Alt. Phone: [REDACTED]
 Email: [REDACTED]

AGENT

Name: ALLEN FREDERIC STEFFEY
 Gender: Male
 Correspondence Address: PO BOX 1284
 JEROME, AZ 86331
 USA
 Phone: [REDACTED]
 Alt. Phone:
 Email: [REDACTED]

OWNER

Name: WICKED CITY PUB LLC
 Contact Name: ALLEN FREDERIC STEFFEY
 Type: LIMITED LIABILITY COMPANY
 AZ CC File Number: 23510560 State of Incorporation: AZ
 Incorporation Date: 04/04/2023
 Correspondence Address: PO BOX 1284
 JEROME, AZ 86331
 USA
 Phone: (928)274-6182
 Alt. Phone:
 Email: [REDACTED]

Officers / Stockholders

Name:
ALLEN FREDERIC STEFFEY

Title:
MEMBER

% Interest:
100.00

WICKED CITY PUB LLC - MEMBER

Name: ALLEN FREDERIC STEFFEY
Gender: Male
Correspondence Address: PO BOX 1284
JEROME, AZ 86331
USA
Phone: [REDACTED]
Alt. Phone:
Email: [REDACTED]

APPLICATION INFORMATION

Application Number: 251652
Application Type: New Application
Created Date: 07/13/2023

QUESTIONS & ANSWERS

INP Interim Permit

- 1) Enter License Number currently at location
07130076
- 2) Is the license currently in use?
Yes
- 3) Will you please submit section 5, page 6, of the license application when you reach the upload page?
Yes
A Document of type INTERIM NOTARY PAGE is required.

This Bill of Sale, for Wicked City Brew LLC and the Arizona Series 7 Liquor License, Number 07130076, was signed on April 29th, 2023.

Buyer: Wicked City Pub LLC
Liquor License Agent: Allen Frederick Steffery
Entity Name: Wicked City Pub LLC
Entity Mailing Address: P.O. Box 1284, Jerome Az., 86331
State of Incorporation / Organization: Arizona
Entity Type: Limited Liability Company (LLC)

Seller: The Estate of John Ward Bartell
Entity name: Wicked City Brew LLC
License Type: Arizona Series 7 liquor license, number 07130076
Entity Mailing Address: 1317 Dream Island Blvd, Steamboat Springs, Co.
State of Incorporation / Organization: Arizona
Entity Type: Limited Liability Company (LLC)

The Seller, The Estate of John Ward Bartell give Wicked City Pub LLC, with Agent Allen Frederick Steffey, permission and recommendation, to operate Interim with the Series 7 Liquor License, Number 07130076.

The Purchase Price of \$38,300.00 has been paid in full.


Buyer - Wicked City Pub LLC


Seller - The Estate of John Ward Bartell

23 JUL 12 PM 1:07 AZD LLC

'23 JUL 12 PM 1:08 AZDLLC

SEDONA
〈ELITE〉
PROPERTIES

07/01/2023

To Whom It May Concern,

We are writing to confirm that Wicked City Pub LLC, does in-fact rent the commercial space located at 403 Clark Street, Unit A3, Jerome, AZ 86331.

If you have any questions, please contact us at the phone number or e-mail listed below.

Sincerely,

SEDONA ELITE PROPERTIES MANAGEMENT



Ian M. Kraut
Owner/Broker

Cc: Owner
Tenant File

LC:
Amount:

'23 JUL 12 PM 1:08 AZDLLC



AGENT/CONTROLLING PERSON QUESTIONNAIRE

DLLC USE ONLY
Job #: 251651
Date Accepted: 07-20-2023
CSR: SG

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

Type or Print with **Black Ink**

805-403

License Number: 07130076

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

Attention local governments: Social security and birth date information is confidential. This information will be given to law enforcement agencies for background checks only.

QUESTIONNAIRE IS TO BE COMPLETED ACCORDINGLY AND SUBMITTED TO THE DEPARTMENT WITH A BLUE OR BLACK LINED FINGERPRINT CARD AND \$22 FEE. FINGERPRINTS MUST BE DONE BY A LAW ENFORCEMENT AGENCY OR BONA FIDE FINGERPRINT SERVICE.

1. Check the Appropriate Box Agent Controlling Person

2. Name: STEFFEY ALLEN FREDERIC Birth Date: [REDACTED] (NOT a public record)

3. Social Security #: [REDACTED] Drivers License #: [REDACTED] State Issued: AZ

4. Place of birth: ORLEANS FRANCE Height: 5'10" Weight: 150 Eyes: BLU Hair: GRY

5. Name of current/most recent spouse: _____ Birth Date: ____/____/____ (NOT a public record)

6. Are you a bonafide resident of Arizona? Yes No If yes, what is your date of residency? 2/22

7. Daytime telephone number: [REDACTED] Email address: [REDACTED]

8. Premises Name: WICKED CITY PUB Business Phone: 928, 274, 1329

9. Premises Address: 403 CLARK ST. #A3 JEROME AZ YAV 86331

10. List your employment or type of business during the past five (5) years, if unemployed, retired, or student, list place of residence address. (ATTACH ADDITIONAL SHEET IF NECESSARY)

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
	CURRENT	FIRE/AIR ATTACK PILOT	POUNDEROSA AVIATION 4500 AVIATION WAY SAFFORD AZ 85540
5/2010	12/21		

11. Provide your residence address information for the last five (5) years A.R.S. §4-202(D) (ATTACH ADDITIONAL SHEET IF NECESSARY)

FROM Month/Year	To Month/Year	Street	City	State	Zip
10/22	CURRENT	[REDACTED]		AZ	86831
5/10	10/22	1300 N. RABBIT RIDGE RD	DEWEY	AZ	86327
5/17	5/20	4114 E. CALLE REDONDA #56	PHOENIX	AZ	85018

(ATTACH ADDITIONAL SHEET IF NECESSARY)

12. As an Agent or Controlling Person, will you be managing the day to day operation of the licensed premises? If you answered YES, then answer #13 below. If NO, skip to #14 Yes No
13. Have you attended a DLLC approved Basic and Management Liquor Law Training Course within the past 3 years? MUST attach copies of both training certificates. Yes No
14. Have you been cited, arrested, indicted, convicted, or summoned into court for violation of ANY criminal law or ordinance, regardless of the disposition, even if dismissed or expunged, within the past five (5) years? Yes No
15. Are there ANY administrative law citations, compliance actions or consents, criminal arrests, indictments or summons pending against you? (Do not include civil traffic tickets) A.R.S. §4-202, 4-210 Yes No
16. Has anyone EVER obtained a judgement against you the subject of which involved fraud or misrepresentation? Yes No
17. Have you had a liquor application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) Yes No
18. Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked, or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D) Yes No

If you answered "YES" to any Question 14 through 18 YOU MUST attach a signed statement. Give complete details including dates, agencies involved and dispositions. CHANGES TO QUESTIONS 14-18 MAY NOT BE ACCEPTED

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

Signature: Allen Steffey Date: 7/10/23

23 JUL 12 PM 1:08 AZDLLC

Certificate of Completion For Title 4 BASIC Liquor Law Training

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

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

The State requires BASIC Title 4 training only as a prerequisite for MANAGEMENT Title 4 training or as a result of a liquor law violation. Persons required to have BASIC Title 4 training are listed on the base of this Certificate. Licensees sometimes require BASIC Title 4 Training a condition of employment.

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

Student Information

DITAT DEUS

Allen Steffey

Full Name (please print)

Allen Steffey
Signature

5/4/2023

Training Completion Date

5/4/2024

Certificate Expiration Date
(three years from completion date)

Training Provider Information

ABC – Arizona Business Council for Alcohol Education

Company Name

8155 North 24th Avenue, Suite A; Phoenix, Arizona 85021

Mailing Address

(602) 285-1396

Daytime Contact Phone Number

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

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

Jesus Altamirano
Instructor Signature

4 / 5 / 2023
Day Mo Year

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

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

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

Bar (series 6)
Private Club (series 14)

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

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

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

Certificate of Completion For Title 4 MANAGEMENT Liquor Law Training

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

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

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

Student Information

Allen Steffey

Full Name (please print)

Allen Steffey
Signature

5/4/2023

Training Completion Date

5/4/2024

Certificate Expiration Date
(three years from completion date)

Training Provider Information

ABC - Arizona Business Council for Alcohol Education

Company Name

8155 North 24th Avenue, Suite A; Phoenix, Arizona 85021

Mailing Address

(602) 285-1396

Daytime Contact Phone Number

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

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

Jesus Altamirano
Instructor Signature

4 / 5 / 2023
Day Mo Year

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ALIEN STATUS

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

Type or Print with **Black Ink**

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

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

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

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

SECTION I – APPLICANT INFORMATION

APPLICANT NAME (Print or type) ALLEN FREDERICK STEFFEY

SECTION II – CITIZENSHIP OR NATIONAL STATUS DECLARATION

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

City ORLEANS State _____ COUNTRY FRANCE

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

2) Name of document: CONSULAR REPORT OF BIRTH ABROAD

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

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

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

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

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

05/21/2022 7:13 AM

SECTION III – QUALIFIED ALIEN DECLARATION

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

Name of document provided

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

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

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

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

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

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

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

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

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

ALLEN FREDERICK STEFFEY
Print Name

Allen Steffey
Signature

7/10/23
Date