

# COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-9200

Fax (520) 432-5016

## APPLICANT INFORMATION

Applicant Name: David Charles Braun Address: 135 N Frontage Rd  
Business Name: TJ's Bar & Grill City/Zip: Pearce/85625  
Liquor License #: 06020001 Parcel #: 114-14-166  
Ownership Type: Corporation Liquor License  Special Event Liquor License   
Partner(s): NA

## TO BE COMPLETED BY THE ENVIRONMENTAL HEALTH DEPARTMENT

We would like to request your assistance in reviewing the attached application.

Please provide any pertinent information for the Board's consideration:

TJ's Bar & Grill, [W-4153 and W-4154] is a licensed establishment with the Cochise County Environmental Health Division and meets all requirements of the Cochise County Sanitary Code; Arizona Food Code and Prop 201; therefore this division has no objection to the Agent Change or Acquisition of Control to the applicant of Liquor License #06020001.

## OTHER PERTINENT INFORMATION FOR THE BOARD'S CONSIDERATION:

- The Health Department will notify the applicant that he/she will be required to obtain the proper permits before operating the business.
- The Health Department is currently working with the property owner on health-related issues with the subject property.

Name: Michael McGee Title: Director  
Signature: *Michael McGee* Date: August 18, 2011  
Contact phone: (520) 432-9444 or (520) 586-8206 Email: mmcgee@cochise.az.gov

Return completed form with any attachments by: 08/23/2011

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**For internal use only:**

- Restaurant/Hotel-Motel
- Club/Government
- Transfer of Premises

### APPLICANT INFORMATION

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 Partner(s): NA

### TO BE COMPLETED BY THE PLANNING & ZONING DEPARTMENT

Please advise if, at the time the application was filed:

1. The premises for which the license is being applied for is within 300 horizontal feet of a church; or
2. The premises for which the license is being applied for is within 300 horizontal feet of a public or private school, or a fenced recreation area adjacent to a school building.

If so, please attach pertinent documentation and drawings or maps.

Comments: Proposed area not within 300 horizontal feet of a church, public or private school, or fenced recreation area adjacent to a school building.

Based on the above information, the Planning and Zoning Department's recommendation to the Board of Supervisors is:	Approval <input checked="" type="checkbox"/>	Disapproval <input type="checkbox"/>
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### OTHER PERTINENT INFORMATION FOR THE BOARD'S CONSIDERATION:

Proper Zoning?	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Zoning:	GB
Use permitted by P&Z?	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Permit#:	N/A
Date Permit Issued:	N/A	Use Permitted:	Bar/Tavern
If use not permitted, is it LNC?	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Year LNC Established:	1968

- The Planning Department will notify the applicant that if any construction is proposed, a Non-Residential Permit must first be submitted and approved by this Department, or if there is a lapse of 12 months of non-operation of the business, a Non-Residential Permit will be required to re-establish the use from this Department.
- The Planning Department will notify the applicant that he/she will be required to obtain the proper permits before operating the business.
- The Planning Department is currently working with the property owner on several zoning-related issues with the subject property.
- The Planning Department is currently working with the property owner on obtaining the proper permits to operate the business.

Name: Dora V Flores Title: Permit and Customer Service Coordinator  
 Signature: Dora V Flores Date: August 17, 2011  
 Contact phone: (520) 432-9240 Email: dflores@cochise.az.gov

*Return completed form with any attachments by:* 8/23/11

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Partner(s): NA

## TO BE COMPLETED BY THE SHERIFF'S OFFICE

Please advise if:

1. The applicant, or any named partner(s), has had a felony conviction within five (5) years prior to the application or;
2. There have been a significant number of incidents at the named location within five (5) years prior to the application.

If so, please attach pertinent documentation.

Comments:

Based on the above information, the Sheriff's Office recommendation to the Board of Supervisors is:

Approval

Disapproval



Name:

*U. Catero*

Title:

*Secy Civil Div*

Signature:

*U. Catero*

Date:

*Aug 14, 2011*

Contact phone:

*432-9513*

Email:

Return completed form with any attachments by:

8/23/11

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## TO BE COMPLETED BY THE TREASURER'S OFFICE

Please advise if the property taxes for the parcel in question are current.

Yes  No

If not, please attach pertinent documentation.

Comments:

Name: P.J. Green Title: Tax Specialist  
Signature: \_\_\_\_\_ Date: 8/16/11  
Contact phone: 432-8406 Email: \_\_\_\_\_

Return completed form with any attachments by: 8/23/11