

COCHISE COUNTY BOARD OF SUPERVISORS



Telephone (520) 432-9200

Fax (520) 432-5016

For internal use only:

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

APPLICANT INFORMATION

Applicant Name: Mark Anders Jorve Address: 6777 S Zarpara Lane
 Business Name: Zarpara Vineyard City/Zip: Willcox/85643
 Liquor License #: 13023026 Parcel #: 305-32-019R
 Ownership Type: LLC Liquor License Special Event Liquor License
 Partner(s): Jorve MacMillan Vineyards, LLC

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 site 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:	RU-4
Use permitted by P&Z?	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Permit#:	115017
Date Permit Issued:	April 13, 2011	Use Permitted:	winery w/tasting room
If use not permitted, is it LNC?	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Year LNC	n/a

- 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 Servie Coordinator
 Signature: Dora V Flores Date: September 19, 2011
 Contact phone: (520) 432-9240 Email: dflores@cochise.az.gov

Return completed form with any attachments by: 9/23/11

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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:

NO RECORD

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

Approval



Disapproval



Name:

Veronica Daniel

Title:

Civil Secretary

Signature:

Veronica Daniel

Date:

09/16/11

Contact phone:

Email:

Return completed form with any attachments by:

9/23/11

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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:

Taxes have been Paid in Full for the 2010 tax year by: Mark Jorve

Name: P.J. Green Title: Tax Specialists
Signature: _____ Date: 09/16/11
Contact phone: 432-8406 Email: _____

Return completed form with any attachments by: 9/23/11

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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:

Cochise County Environmental Health Division has no objections to the issuing of Liquor License #13023026 to the applicant Mark Anders Jorve.

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: September 16, 2011
Contact phone: (520) 432-9444 or (520) 586-8206 Email: mcmgee@cochise.az.gov

Return completed form with any attachments by: 09/16/2011