

"HUB OF THE SOUTHWEST"

465 1st Avenue
P.O. Box 970
Holbrook, AZ 86025

OUR MISSION

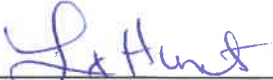
City of Holbrook Government exists to provide ethical and responsible local government.

AGENDA

Regular City Council Meeting
6:00 p.m. August 24, 2023

1. CALL TO ORDER:
2. ROLL CALL:
3. PLEDGE OF ALLEGIANCE/INVOCATION:
4. CONSENT AGENDA:
August 10, 2023, meeting minutes. Tab 1
Check Register, 08/02/2023 – 08/09/2023.
5. CALL TO THE PUBLIC FOR NON-AGENDA ITEMS:
*Three-minute time limit per individual.
6. CALL TO THE PUBLIC FOR AGENDA ITEMS:
*Five-minute time limit per individual.
7. NEW BUSINESS (DISCUSSION AND POSSIBLE ACTION):
 - a. Family Dollar Liquor License officer and ownership changes. Tab 2
 - b. Resolution 23-09: 2022 CFO designation Tab 3
 - c. Resolution 23-10: 2024 CFO designation Tab 4
 - d. Possible action to cancel the September 14th meeting.
 - e. Ordinance 23-04 Amending fees for Animal Control – 1st Reading Tab 5
 - f. Department Update: Animal Control
8. SUMMARY OF CURRENT EVENTS:
Mayor:
Council Members:
City Manager:
9. **SUBMISSION OF WRITTEN PETITION FOR ITEMS NOT ON THE AGENDA:
10. ADJOURNMENT

Posted the 21st day of August 2023.



Lisa Hunt, City Clerk

*Individuals must submit a "Request to Address City Council" form to the City Clerk prior to the start of the meeting.

Anyone may address the City Council on any issue within the jurisdiction of the Council. City Council may generally not discuss items that are not specifically identified on the agenda, except in certain circumstances. Therefore, pursuant to A.R.S. § 38-431.01 (H), action taken as a result of public comment will be limited to directing City staff to study the matter, responding to any criticism, or scheduling the matter for further consideration and decision at a later date. Items on the agenda will not be heard or discussed in Call to the Public. Video or audio tapes or other overhead visual aids may not be presented during these public appearances. All speakers should begin their remarks by stating their name and address for the record.

**Any citizen of the City may appear before the Council at any regular meeting and present a written petition. Such petitions shall be considered, and response given within 31 days in conformity with the requirements of the Charter, the Open Meeting Law, and other statutory and constitutional provisions per Holbrook City Charter Article II, Section 2.18.

Unauthorized remarks from the audience, clapping, stomping of feet, yelling or any similar demonstrations are also prohibited. Violations of these rules may result in removal from the meeting. Individual members of the public body may respond to comments made by others who have addressed the public body.

The Holbrook City Council may discuss or take legal action on any item listed on the Agenda.

Pursuant to ARS 38-431.02, notice is hereby given to the Holbrook City Council, and to the General public that a meeting, which is open to the public, will be held on above-mentioned date, in the City Council Chambers, at 465 First Avenue, Holbrook, Arizona. Members of the City Council may choose to participate in this meeting telephonically. The City Council may adjourn into executive session, which will not be open to the public, to discuss any matter listed on the agenda in accordance with A.R.S. 38-431.03. The Holbrook City Council may vote to hold an executive session for the purpose of obtaining legal advice from the Council's attorney on any matter listed on the agenda pursuant to A.R.S. § 38-431.03(A)(3).

Electronic versions of this agenda can be found at www.holbrookaz.gov.

MINUTES OF THE REGULAR MEETING
OF THE HOLBROOK CITY COUNCIL HELD ON
August 10, 2023

CALL TO ORDER: Mayor Smith called the meeting to order at 6:00 p.m.

ROLL CALL: Mayor Kathleen Smith, Vice Mayor Nilsson, Councilmembers Robert Black, Tim Dixon, Arcenia Pacheco, Karina Pack, and Teri Tafoya appeared in Council Chambers.

CITY STAFF: Finance Director Randy Sullivan. Police Chief Nathan Christensen and City Clerk Lisa Hunt.

PLEDGE OF ALLEGIANCE/INVOCATION: The Pledge of Allegiance was led by Councilmember Pack. The Invocation was given by Gloria Montoya of Daystar.

CONSENT AGENDA:

July 27, 2023, meeting minutes

MOTION: Vice Mayor Nilsson

SECONDED: Councilmember Dixon

MOTION CARRIED

CALL TO THE PUBLIC FOR NON-AGENDA ITEMS:

-Lynn Huenemann from Sun Valley addressed the Council regarding the brown water in Sun Valley.

CALL TO THE PUBLIC FOR AGENDA ITEMS: None

NEW BUSINESS:

- a. Travel Centers of America Liquor License officer and ownership changes: Casey Lee Scott from Travel Centers of America was present.
MOTION: Councilmember Dixon
SECONDED: Councilmember Pacheco
MOTION CARRIED
- b. Presentation from Betsy Wilson and Dr. Chato Hazelbaker from Northland Pioneer College: Dr. Hazelbaker was unable to attend. Betsy Wilson shared the achievements of NPC Student over the last year. She also shared information about new degree programs that are being offered. Ms. Wilson discussed the Friends and Families of NPC and everything that they are doing for our community.
- c. Proclamation General Aviation Month: Mayor Smith read the proclamation and proclaimed August 2023 as General Aviation Appreciation Month.
- d. Resolution 23-08: Amending fees for commercial and non-commercial public records requests. Mayor Smith read Resolution 23-08 by heading. Interim Manager Randy Sullivan reviewed the resolution.
Discussion held.
MOTION: Councilmember Dixon
SECONDED: Councilmember Tafoya
ROLL CALL VOTE: Councilmember Black "Aye", Councilmember Dixon "Aye", Vice Mayor Nilsson "Aye", Councilmember Pacheco "Aye", Councilmember Pack "Aye", Mayor Smith "Aye", and Councilmember Tafoya "Aye"
- e. Discussion and possible action on Public Participation Policy:
MOTION: Councilmember Black
SECONDED: Vice Mayor Nilsson
MOTION CARRIED
- f. Discussion and possible action on Manager Selection Plan: Discussion was held. Council requested to modify the first action on the Manager Selection Plan from "Create a Strategic plan and Mission Statement" to "Identify Council priorities and Manager qualities".

MOTION to approve with modifications made by Vice Mayor Nilsson
SECONDED: Councilmember Dixon
MOTION CARRIED

SUMMARY OF CURRENT EVENTS-MAYOR:

-Mayor Smith shared that Libby Budenholzer passed away on Monday the 8th. The Budenholzer family has left a lasting impression in Holbrook. Libby and Vince were married for 70 years.

Libby served as Councilwoman and then as Mayor of Holbrook. She also was appointed by Governor Bruce Babbitt to the Arizona Woman's Commission, and her husband, Vince, became an Arizona Hall of Fame Basketball coach.

-She gave a big shout out to Dalene and Terry Brinkerhoff who painted the Petroglyph Museum, Kip Woolford assisted as well. It looks fresh and new.

-Mayor Smith also shared that we will be losing the Summit Healthcare clinic and physical therapy office- they will be closing on September 6, 2023. Summit did meet with Mayor Smith and let her know that they will be closing because of financial reasons at this particular clinic. They do still own property in Holbrook, and they would love to someday come back. We are thankful that we still have North Country, and we appreciate them serving our area. This is a reminder to us as a council how important economic growth is to all different aspects of our community and the impact it makes. As we go forward with our general and strategic plan, we can discuss what ways the city can foster relationships with industry and healthcare organizations. No we don't get involved with private industry but we can do what is appropriate from a civic side to help entice organizations to our area.

SUMMARY OF CURRENT EVENTS-COUNCILMEMBERS:

-Vice Mayor Nilsson shared that on October 8th there will be a Senior Health Fair at the Senior Center. Also, on Nov 5th there will be a Bingo/Auction for the Holbrook Food Bank Christmas Boxes. He also shared that on the corner of W. Florida and 8th Avenue there is now a 4 way stop and that HPD is enforcing it.

-Councilmember Black- None

-Councilmember Pack is glad for the rain and she is glad that school started.

-Councilmember Dixon attended the Rap Concert at Gillespie Park. He said that some of the band had roots in Holbrook. He also stated that there was an email sent from Mayor Smith to Ted Soltis stating that she had asked Randy Sullivan to attend the work session about the budget. He warned that this was not appropriate.

-Councilmember Tafoya gave condolences to the family of Libby Budenholzer. She said that her funeral will be held in Pinetop on August 19th at 2:00 p.m. She also shared that she had pulled weeds and that Sam had done an excellent job of picking them up. She then stated that she was disappointed in the cleanup of a project on 8th Avenue and W. Arizona, much debris has been left after the project and she hopes that it will be cleaned up. Lastly, she stated the Kiwana's are looking for volunteers to work at the ticket booths for the Navajo County Fair.

-Councilmember Pacheco said that Micheala Saxton from Saxton Projects wanted to thank Mike Young and Steve Rutherford for helping to make their Golf Tournament a success. Councilmember Pacheco said that she talked with the new owner of the building on Hopi Dr. that the council had talked about having Liz Nichols re paint the mural that she did years ago. She also wanted to know if the Council could network about a way to get daycare in Holbrook.

SUMMARY OF CURRENT EVENTS-CITY MANAGER:

-Interim City Manager Sullivan clarified that the new pool heater will be replacing a heater that was purchased in 1983.

-There is a new photo opportunity at Gillespie Park by the windmill.

-He is making plans to build a new Pickleball Court at Hunt Park.

- He discussed the 4 way stop on W. Florida and 8th Avenue and shared that there have been suggestions made for 2 more 4 way stops.
- He has received calls about stop signs being block by tree limbs and has been cutting back the trees.
- Interim Manager Sullivan discussed the progress of the CDBG grant work on the Sun Valley north water tank. He said that they have a site plan and that it should be completed by October.
- He is also getting quotes to fix another well for Sun Valley.
- Mr. Sullivan is still working with ADEQ on how to filter out the Manganese that is naturally found in the water and creates a reddish color.

SUBMISSION OF WRITTEN PETITION FOR ITEMS NOT ON THE AGENDA: None

ADJOURNMENT:

MOTION: Councilmember Tafoya

SECONDED: Councilmember Pack

MOTION CARRIED

Meeting adjourned at 7:12 p.m.

I hereby certify that the forgoing minutes are a true and correct copy of the minutes of the Regular Meeting of the Holbrook City Council held on August 10, 2023. I further certify that the meeting was duly called and held and that a quorum was present.

Lisa Hunt, City Clerk

PASSED, APPROVED AND ADOPTED this 24th day of August 2023.

Kathleen Smith, Mayor

Report Criteria:

Report type: Summary
 Check.Type = {<>} "Adjustment"

GL Period	Check Issue Date	Check Number	Vendor Number	Payee	Check GL Account	Amount
08/23	08/07/2023	31783	5891	HATCH CONCRETE INC.	0010002100	1,055.57- V
08/23	08/08/2023	31835	1380	ARIZONA STATE TREASURER	0010002100	194.98
08/23	08/08/2023	31836	2200	BANK OF THE WEST - CC	0010002100	16,989.93
08/23	08/08/2023	31837	3140	CASELLE INC	0010002100	1,659.00
08/23	08/08/2023	31838	3241	Char B's Detailing	0010002100	450.00
08/23	08/08/2023	31839	3350	FRONTIER COMMUNICATIONS	0010002100	1,760.50
08/23	08/08/2023	31840	5580	GRAINGER	0010002100	192.18
08/23	08/08/2023	31841	5870	HATCH'S QUICK STOP	0010002100	172.61
08/23	08/08/2023	31842	20796	HOLBROOK VETERINARY CLINIC	0010002100	2,317.24
08/23	08/08/2023	31843	6260	HOLBROOK VOL FIRE DEPT	0010002100	6,485.31
08/23	08/08/2023	31844	7283	KONICA-MINOLTA	0010002100	114.22
08/23	08/08/2023	31845	8270	MOHAVE ENVIRONMENTAL LAB	0010002100	245.00
08/23	08/08/2023	31846	8680	NAVAJO COUNTY FAIR	0010002100	54,000.00
08/23	08/08/2023	31847	8690	NAVAJO COUNTY FINANCE	0010002100	81,350.50
08/23	08/08/2023	31848	8735	NAVAJO COUNTY SHERIFF OFFICE	0010002100	45,000.00
08/23	08/08/2023	31849	8750	NAVAJO COUNTY TREASURER	0010002100	1.19
08/23	08/08/2023	31850	8960	NORTHERN ARIZONA TRAINING CENTER	0010002100	1,500.00
08/23	08/08/2023	31851	20024	OUR LADY OF GUADALUPE PARISH	0010002100	50.00
08/23	08/08/2023	31852	21477	PERKINS AGGREGATES	0010002100	1,874.75
08/23	08/08/2023	31853	2590	Rhinehart Oil	0010002100	4,828.28
08/23	08/08/2023	31854	10005	Rural Arizona Group Health Trust	0010002100	63,859.88
08/23	08/08/2023	31855	10530	SAM'S CLUB/SYNC BANK	0010002100	614.25
08/23	08/08/2023	31856	10840	SIMPSON NORTON	0010002100	278.14
08/23	08/08/2023	31857	20264	SIOUX VALLEY ENVIRONMENTAL	0010002100	4,441.50
08/23	08/08/2023	31858	20058	STANDARD PRINTING CO	0010002100	370.22
08/23	08/08/2023	31859	6240	THE TRIBUNE OF HOLBROOK	0010002100	19.50
08/23	08/08/2023	31860	3380	UNISOURCE ENERGY SERVICES	0010002100	296.61
08/23	08/08/2023	31861	12370	UNITED FIRE EQUIPMENT	0010002100	150.00
08/23	08/08/2023	31862	12400	UNIVERSAL POLICE SUPPLY CO.	0010002100	3,848.99
08/23	08/08/2023	31863	12482	USA BLUE BOOK	0010002100	379.16
08/23	08/08/2023	31864	9700	WALT'S HARDWARE	0010002100	3,378.78
08/23	08/08/2023	31865	12815	WELDING SERVICES & SUPPLY	0010002100	17.01
08/23	08/08/2023	31866	12760	WM Corporate Services	0010002100	5,696.76
Grand Totals:						301,480.92

Dated: _____

Mayor: _____

City Council: _____

City Recorder: _____

Report Criteria:

Report type: Summary

Check.Type = {<>} "Adjustment"

**State of Arizona
Department of Liquor Licenses and Control**

Created 07/28/2023 @ 11:48:13 AM

Local Governing Body Report

LICENSE

Number:		Type:	010 BEER AND WINE STORE
Name:	FAMILY DOLLAR #24436		
State:	Pending		
Issue Date:		Expiration Date:	
Original Issue Date:			
Location:	615 W HOPI DRIVE HOLBROOK, AZ 86025 USA		
Mailing Address:	500 VOLVO PARKWAY ATTN: 8TH FLOOR ALCOHOL / TOBACCO TEAM CHESAPEAKE, VA 23320 USA		
Phone:	(928)225-8546		
Alt. Phone:			
Email:	AB-LICENSING@DOLLARTREE.COM		

AGENT

Name:	ANITA MARTINEZ
Gender:	Female
Correspondence Address:	500 VOLVO PARKWAY CHESAPEAKE, VA 23320 USA
Phone:	(757)321-5493
Alt. Phone:	
Email:	AB-LICENSING@DOLLARTREE.COM

OWNER

Name: FAMILY DOLLAR, LLC
Contact Name: ANITA MARTINEZ
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: 23489731 State of Incorporation: NC
Incorporation Date: 02/27/2023
Correspondence Address: 500 VOLVO PARKWAY
ATTN: 8TH FLOOR ALCOHOL / TOBACCO TEAM
CHESAPEAKE, VA 23320
USA
Phone: (928)225-8546
Alt. Phone:
Email: AB-LICENSING@DOLLARTREE.COM

Officers / Stockholders

Name:	Title:	% Interest:
FAMILY DOLLAR STORE HOLDINGS LLC	MEMBER	100.00
HARRY RASHAD SPENCER	ASST SECRETARY	
PETER ALLEN BARNETT	PRESIDENT	
ROGER WAYNE DEAN	VP	

FAMILY DOLLAR STORES INC - Shareholder

Name: DOLLAR TREE INC
Contact Name: BRENDA E SALLARD
Type: CORPORATION
AZ CC File Number: State of Incorporation:
Incorporation Date:
Correspondence Address: 500 VOLVO PARKWAY
CHESAPEAKE, VA 23320
USA
Phone: (520)260-0276
Alt. Phone:
Email: AB-LICENSING@DOLLARTREE.COM

**FAMILY DOLLAR, LLC - ASST SECRETARY
FAMILY DOLLAR STORES INC - ASST
SECRETARY
FAMILY DOLLAR STORE HOLDINGS LLC - ASST
SECRETARY**

Name: HARRY RASHAD SPENCER
Gender: Male
Correspondence Address: 500 VOLVO PARKWAY
CHESAPEAKE, VA 23320
USA
Phone: (757)321-5493
Alt. Phone:
Email: AB-LICENSING@DOLLARTREE.COM

**FAMILY DOLLAR STORE HOLDINGS LLC -
Shareholder**

Name: FAMILY DOLLAR STORES INC
Contact Name: VARIOUS AGENTS
Type: CORPORATION
AZ CC File Number: F08710462 State of Incorporation: NC
Incorporation Date: 04/01/1999
Correspondence Address: 500 VOLVO PARKWAY
CHESAPEAKE, VA 23320
USA
Phone: (850)577-6962
Alt. Phone:
Email: AB-LICENSING@DOLLARTREE.COM

**FAMILY DOLLAR, LLC - VP
FAMILY DOLLAR STORE HOLDINGS LLC - VP
FAMILY DOLLAR STORES INC - VP**

Name: ROGER WAYNE DEAN
Gender: Male
Correspondence Address: 500 VOLVO PARKWAY
CHESAPEAKE, VA 23320
USA
Phone: (757)321-5393
Alt. Phone:
Email: AB-LICENSING@DOLLARTREE.COM

**FAMILY DOLLAR, LLC - PRESIDENT
FAMILY DOLLAR STORES INC - PRESIDENT
FAMILY DOLLAR STORE HOLDINGS LLC -
PRESIDENT**

Name: PETER ALLEN BARNETT
Gender: Male
Correspondence Address: 500 VOLVO PARKWAY
CHESAPEAKE, VA 23320
USA
Phone: (757)428-2789
Alt. Phone:
Email: PBARNETT@FAMILYDOLLAR.COM

FAMILY DOLLAR, LLC - MEMBER

Name: FAMILY DOLLAR STORE HOLDINGS LLC
Contact Name: VARIOUS AGENTS
Type: LIMITED LIABILITY COMPANY
AZ CC File Number: State of Incorporation:
Incorporation Date:
Correspondence Address: 500 VOLVO PARKWAY
CHESAPEAKE, VA 23320
USA
Phone: (850)577-6962
Alt. Phone:
Email: AB-LICENSING@DOLLARTREE.COM

APPLICATION INFORMATION

Application Number: 249463
Application Type: New Application
Created Date: 06/22/2023

CDP

QUESTIONS & ANSWERS

010 Beer and Wine Store

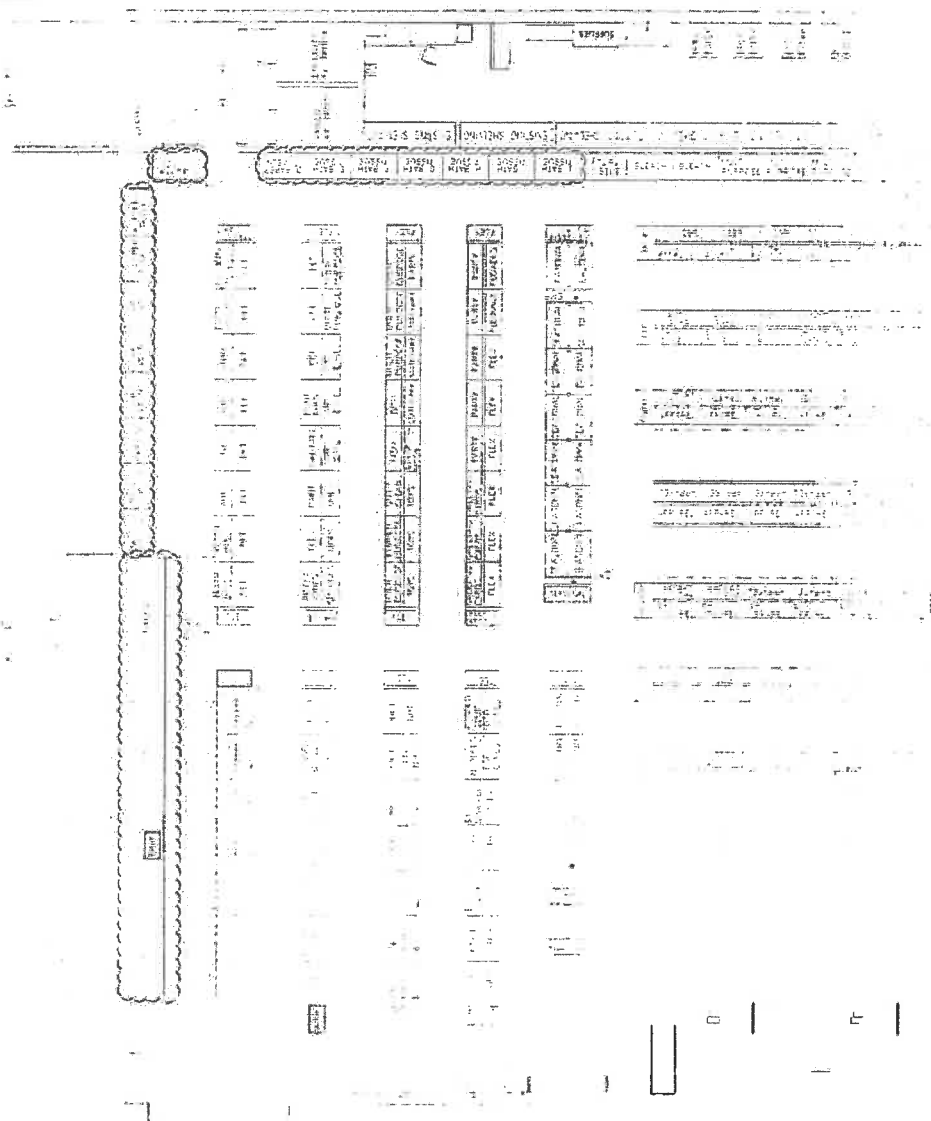
- 1) Are you applying for an Interim Permit (INP)?
No
- 2) Provide name, address, and distance of nearest school.
(If less than one (1) mile note footage)
Holbrook Junior High School
412 W Buffalo St, Holbrook, AZ 86025
.3 miles
- 3) Are you one of the following? Please indicate below.
Property Tenant
Subtenant
Property Owner
Property Purchaser
Property Management Company
property tenant
- 4) Is there a penalty if lease is not fulfilled?
Yes
What is the penalty?
see attached "Tenant's Default"
- 5) Is the Business located within the incorporated limits of the city or town of which it is located?
Yes
- 6) What is the total money borrowed for the business not including the lease?
Please list each amount owed to lenders/individuals.
none
- 7) Are there walk-up or drive-through windows on the premises?
No
- 8) Does the establishment have a patio?
No
- 9) Is your licensed premises now closed due to construction, renovation or redesign or rebuild?
No

DOCUMENTS

DOCUMENT TYPE	FILE NAME	UPLOADED DATE
DIAGRAM/FLOOR PLAN	24436 AZ Floor plan.pdf	06/22/2023
MISCELLANEOUS	24436 AZ Lease 1.pdf	06/22/2023
MISCELLANEOUS	Tenant's Default.pdf	06/22/2023
ALIEN STATUS	driver's license.pdf	06/22/2023
QUESTIONNAIRE	Anita Martinez Questionnaire.pdf	06/22/2023
QUESTIONNAIRE	Harry Spencer Signed Form.pdf	06/22/2023
QUESTIONNAIRE	Peter Barnett Signed Form.pdf	06/22/2023
QUESTIONNAIRE	Roger Dean Signed Form.pdf	06/22/2023
ORGANIZATIONAL DOCUMENTS	Arizona Flowchart.pdf	06/22/2023
ALIEN STATUS	ABC24743 - CITIZENSHIP.pdf	06/22/2023
ORGANIZATIONAL DOCUMENTS	Family Dollar, LLC Certificate of Registration 02.27.23- AZ.pdf	06/22/2023
ORGANIZATIONAL DOCUMENTS	Family Dollar, LLC Foreign Registration Statement 02.14.23- AZ.pdf	06/22/2023
MISCELLANEOUS	24436 AZ Amendment 1.pdf	06/22/2023
MISCELLANEOUS	24436 AZ MOL 2002.pdf	06/22/2023
MISCELLANEOUS	24436 AZ MOL 2011 (1).pdf	06/22/2023
MISCELLANEOUS	Anita Martinez Signed Basic.pdf	06/22/2023
ALIEN STATUS	Anita Martinez Signed Management.pdf	06/22/2023

Scale: 1/4" = 1'-0"

DATE: 06/03/2019



STORE NUMBER: 5102 LOCATION: GLOBE, AZ DATE: 06/03/2019

FORMAT: CR3 DRAWN BY: D. FRANCIS

FREZZER COOLER PROJECT
 CONFIDENTIAL - FAMILY DOLLAR USE ONLY
 FREEZER COOLER PROJECT LAYOUT

FAMILY DOLLAR
 10401 MONROE ROAD | MATTHEWS, NC 28105

REVISIONS

Dollar Tree, Inc.
(100% Stockholder)
NASDAQ: DLTR



Family Dollar Stores, Inc.
(100% Member)



Family Dollar Stores Holdings, LLC
(100% Member)



Family Dollar, LLC
(100% Member)

Family Dollar Inc. Flowchart

23 JUN 28 11:44 AM '14

Dollar Tree, Inc.
(100% Stockholder)
NASDAQ: DLTR



Family Dollar Stores, Inc.
(100% Stockholder)
Controlling Officers:
President: Peter Barnett
Vice President & Treasurer: Roger Dean
Assistant Secretary: Harry Spencer



Family Dollar Stores Holdings, LLC
(100% Stockholder)
Controlling Officers:
President: Peter Barnett
Vice President & Treasurer: Roger Dean
Assistant Secretary: Harry Spencer



Family Dollar, Inc.
(100% Stockholder)
Controlling Officers:
President: Peter Barnett
Vice President & Treasurer: Roger Dean
Assistant Secretary: Harry Spencer

CSR:
Amount:



AGENT/CONTROLLING PERSON QUESTIONNAIRE

DLIC USE ONLY	
Job #:	249463
Date Accepted:	6-22-23
CSR:	DB

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

Current
12-21-23

License Number:

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 →

<input checked="" type="checkbox"/> Agent	<input type="checkbox"/> Controlling Person
---	---

2. Name: Martinez Anita Birth Date: _____
Last First Middle (NOT a public record)

3. Social Security # _____ Drivers License # _____ State Issued: AZ

4. Place of birth: Flagstaff, AZ USA Height: 5'2" Weight: 240 Eyes: Brown Hair: Black
City State COUNTRY

5. Name of current/most recent spouse: Nunez Martinez Enrique Alejandro Birth Date: _____
Last First Middle (NOT a public record)

6. Are you a bonafide resident of Arizona? Yes No If yes, what is your date of residency? 1984

7. Daytime telephone number: 928-225-8546 Email address: ab-licensing@dollartree.com

8. Premises Name: Family Dollar, LLC # 244316 Business Phone: 928-414-2001

9. Premises Address: 665 W. Hopi Drive Holbrook AZ Navajo 86025
Street (do not use PO Box) City State County Zip

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

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (Street Address, City, State & Zip)
09/2019	CURRENT	District Manager	Family Dollar - 500 Volvo Parkway, Chesapeake, VA 23320
07/13	09/19	Subway	5060 North Highway 89 Flagstaff, Arizona 86004

(ATTACH ADDITIONAL SHEET IF NECESSARY)

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

FROM Month/Year	To Month/Year	Street	City	State	Zip
09/16	CURRENT	10013 North Lunar Drive, Flagstaff, Arizona 86004			

(ATTACH ADDITIONAL SHEET IF NECESSARY)

12. As a Controlling Person or Agent, will you be physically present and operating 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? If yes, attach certificate(s) 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) Anita Martinez 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: Anita Martinez

Date: 6-8-23



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

**ARIZONA STATEMENT OF CITIZENSHIP
OR ALIEN STATUS FOR STATE PUBLIC BENEFITS**

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

INDIVIDUAL OWNER/AGENT NAME (Print or type) _____

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 Flagstaff State (or equivalent) Arizona Country or Territory United States

If you answered Yes, 1) Attach a legible copy of a document from the attached list
2) Name of document: _____
Go to Section IV.

If you answered No, you must complete Section III and IV.

SECTION III – ALIEN STATUS DECLARATION

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 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 et seq.];
- 13. A foreign national not physically present in the United States.

Otherwise Lawfully Present

- 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 and evidence I have given are true and correct to the best of my knowledge.

Anita Martinez
Individual Owner/Agent Printed Name

Anita Martinez
Individual Owner/Agent Signature

10-26-21
Today's Date

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 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)
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.

Arizona

DRIVER LICENSE

USA



9 CLASS D
9a END NONE 4d DLN
12 REST NONE 3 DOB

1 MARTINEZ
2 ANITA

8 10013 N LUNAR DR
FLAGSTAFF, AZ 86004-1107

4b EXP 03/11/2027 4c ISS 03/11/2019

15 SEX: F 18 EYES BRO
16 HGT 5'-02" 19 HAIR BLK
17 WGT 240 lb

DONOR ♥

5 DD 1100C3987M1259A4

Anita Martinez





CLASS: D-Operator
ENDORSEMENTS:
None

RESTRICTIONS:
None

Rev 02/14/2014

You Must Report a
Change of Address
Within 10 Days



18070RZ0077306890301

Certificate # 5691771

Certificate of Completion
For
Title 4 BASIC Liquor Law Training

<input type="checkbox"/>	On-sale
<input type="checkbox"/>	Off-sale
<input 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 back of this Certificate. Licenses sometimes require BASIC Title 4 training as 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

Anita Martinez

(Please Print)

Anita Martinez

Signature

4-12-22

Training Completion Date

04/12/2025

Certificate Expiration Date
(Three years from completion date)

Training Provider Information

Health Communications, Inc.

Company Name

1501 Wilson Boulevard Ste. 500, Arlington VA 22209

Mailing Address

(800) 438-8477

Daytime Contact Phone Number

I, Nicole Blossé, 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).

Nicole M. Blossé

Instructor Signature

4 / 12 / 2022
Mo Day 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) licensee, agent and manager actively involved in the daily business operations of a liquor-licensed business of a series listed below

- | | | | |
|----------------------------------|----------------------------------|--------------------------|--------------------------------------|
| In-state Microbrewery (series 3) | Government (series 5) | Bar (series 6) | Beer & Wine Bar (series 7) |
| Conveyance (series 8) | Liquor Store (series 9) | Private Club (series 14) | Hotel/Motel w/restaurant (series 11) |
| Restaurant (series 12) | In-state Farm Winery (series 13) | | 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 # 559129H

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 Licenses and Control. The form may be completed by a title 4 training provider or a training provider. The form must be completed by the training provider. The training provider must be approved by the Arizona Department of Liquor Licenses and Control. The training provider must be approved by the Arizona Department of Liquor Licenses and Control. The training provider must be approved by the Arizona Department of Liquor Licenses and Control. The training provider must be approved by the Arizona Department of Liquor Licenses and Control.

Training Provider Name

Anita Martinez

(Signature of provider)

Anita Martinez

11-8-22

Training Date (MM/DD/YYYY)

11/09/2024

Training Provider License
Number (AZ-LL-0001-1-0001)

Training Provider Information

Health Communications, Inc.

Company Name

1001 Wilson Boulevard Ste. 500, Arlington VA 22209

Main Phone

(800) 438-6477

Daytime Contact Phone Number

I, Nicole Blossé

certify that the above named individual did successfully complete

training (Name (print name))

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).

Nicole M. Blossé

Instructor Signature

11 / 8 / 2021

Mo Day 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) licensee, agent and manager actively involved in the daily business operations of a liquor-licensed business of a series listed below

In-state Microbrewery (series 3)
Conveyance (series 6)
Restaurant (series 12)

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

Bar (series 4)
Private Club (series 14)

Beer & Wine Bar (series 7)
Hotel/Hotel 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.

LC: _____
Amount: _____

*23 JUN 21 11:47 AM 4:24



AGENT/CONTROLLING PERSON QUESTIONNAIRE

DLC USE ONLY	
Job #:	249463
Date Accepted:	6-22-23
CSR:	DB

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

FP Current
12-17-2021

License Number: _____

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

<input type="checkbox"/> Agent	<input checked="" type="checkbox"/> Controlling Person
--------------------------------	--

2. Name: Spencer Harry Rashad Birth Date: / /
Last First Middle (NOT a public record)

3. Social Security #: Drivers License #: State Issued: VA

4. Place of birth: Chicago IL USA Height: 6'1" Weight: 220 Eyes: Brown Hair: Brown
City State COUNTRY

5. Name of current/most recent spouse: Spencer Janeine Berryman Birth Date: / /
Last First Middle (NOT a public record)

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

7. Daytime telephone number: 757-321-5493 Email address: ab-licensing@dollartree.com

8. Premises Name: Family Dollar, LLC # 24436 Business Phone: 928 | 414 | 2001 DB

9. Premises Address: 615 W. Hopi Drive Hellbrook AZ Navajo 86025
Street (do not use PO Box) City State County Zip

(ATTACH ADDITIONAL SHEET IF NECESSARY)

FROM Month/Year	TO Month/Year	DESCRIBE POSITION OR BUSINESS	EMPLOYERS NAME OR NAME OF BUSINESS (City, State & Zip)
08/21	CURRENT	Assistant Secretary	Dolla Truck Wash, Parkway, Chesapeake, VA 23329
1/2019	7/2021	Director	Amazon, 4200 Aurora Ave N, Seattle, WA 98109
1/2014	1/2019	Director	Mars Chocolate, 100 High St, Hackettstown, NJ 07840

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
1/2019	CURRENT	509 Woodards Ford Road, Chesapeake, VA 23322			
1/2016	1/2019	31 Walton Court, East Brunswick, NJ 08816			

(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, ever 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 is fraud, libel 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(B). 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) Harry Spencer 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, [Signature] Date 7-27-23

EXHIBIT A - Harry Spencer

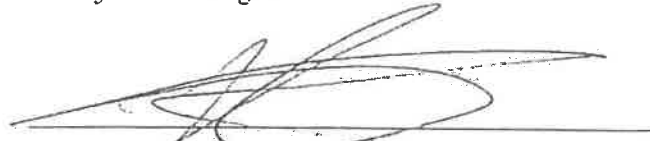
Question 18: Has an entity in which you are or have been a controlling person had an application or license rejected, denied, revoked or suspended in or outside of Arizona within the last five years? A.R.S. §4-202(D).

Answer: Yes. See below chart for details.

Citation Date	Agency	Licensed Entity	Disposition	Suspension Dates	Reinstatement Date
12/30/2019	Texas Alcoholic Beverage Control	Family Dollar Stores of Texas, LLC	License Suspension – 8 Days	1/8/2020 – 1/15/2020	1/16/2020
2/22/2020	Texas Alcoholic Beverage Control	Family Dollar Stores of Texas, LLC	License Suspension – 8 Days	12/16/2020 – 12/23/2020	12/24/2020
3/4/2020	Virginia Alcoholic Beverage Control Authority	Family Dollar Stores of Virginia, Inc.	License Suspension – 25 Days	5/14/2020 – 6/7/2020	6/8/2020
6/4/2021	Texas Alcoholic Beverage Control	Family Dollar Stores of Texas, LLC	License Suspension – 8 Days	9/8/2021 – 9/15/2021	9/16/2021

To Whom It May Concern:

I, Harry Spencer, Assistant Secretary of Family Dollar, Inc., provide this signed statement in support of its application for liquor license. I am the Controlling Person who completed the Questionnaire to be submitted with the application. The attached Exhibit A provides the details concerning my "Yes" answer to Question 18. This statement and the attached Exhibit A are true, correct, and complete, to the best of my knowledge.



By: Harry Spencer

As: Assistant Secretary, Family Dollar Inc.

LC:
Amount:

23 JUN 21 Dep. Lic. # 4 24



AGENT/CONTROLLING PERSON QUESTIONNAIRE

DLLC USE ONLY
Job #: 249463
Date Accepted: 6-22-23
CSR: DB

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

FP Current
12-17-2021

License Number:

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: Barnett Peter Allan Birth Date: _____ (NOT a public record)

3. Social Security #: _____ Drivers License #: _____ State Issued: VA

4. Place of birth: Chicago Illinois USA Height: 6' Weight: 225 Eyes: Hazel Hair: Grey

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

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

7. Daytime telephone number: 757-321-5493 Email address: ab-licensing@dollartree.com

8. Premises Name Family Dollar, LLC # 24436 Business Phone: 928 414 2001 DB

9. Premises Address: 615 W. Hopi Drive Holbrook AZ Navajo 86025

10. List your employment or license or 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)
08/13	CURRENT	President	Dollar Tree/Family Dollar 500 Volvo Parkway, Chesapeake, VA 23320

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
05/19	CURRENT	329 Cavalier Dr, Virginia Beach, VA 23451			
08/18	05/19	332 Laskin Rd #507, Virginia Beach, VA 23451			
10/13	08/18	314 Cawdor Xing, Chesapeake, VA 23322			

(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) Peter A Barnett 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: *Peter A Barnett*

Date: 7-27-23

EXHIBIT A - Peter Barnett

Question 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).

Answer: Yes. See below chart for details.

Citation Date	Agency	Licensed Entity	Disposition	Suspension Dates	Reinstatement Date
12/30/2019	Texas Alcoholic Beverage Control	Family Dollar Stores of Texas, LLC	License Suspension – 8 Days	1/8/2020 – 1/15/2020	1/16/2020
2/22/2020	Texas Alcoholic Beverage Control	Family Dollar Stores of Texas, LLC	License Suspension – 8 Days	12/16/2020 – 12/23/2020	12/24/2020
3/4/2020	Virginia Alcoholic Beverage Control Authority	Family Dollar Stores of Virginia, Inc.	License Suspension –25 Days	5/14/2020 – 6/7/2020	6/8/2020
6/4/2021	Texas Alcoholic Beverage Control	Family Dollar Stores of Texas, LLC	License Suspension –8 Days	9/8/2021 – 9/15/2021	9/16/2021

To Whom It May Concern:

I, Peter Barnett, President of Family Dollar Stores, Inc., provide this signed statement in support of its application for liquor license. I am the Controlling Person who completed the Questionnaire to be submitted with the application. The attached Exhibit A provides the details concerning my "Yes" answer to Question 18. This statement and the attached Exhibit A are true, correct, and complete, to the best of my knowledge.

A handwritten signature in cursive script that reads "Peter A. Barnett". The signature is written in dark ink and is positioned above a horizontal line.

By: Peter Barnett

As: President, Family Dollar Stores, Inc.

LC: _____
Amount: _____

23 JUN 21 Lic. Lic. PM 4 24



AGENT/CONTROLLING PERSON QUESTIONNAIRE

DLLC USE ONLY
Job #: 249463
Date Accepted: 6-22-23
CSR: DB

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

FP current
12-17-2021

License Number: _____

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: Dean Roger Wayne Birth Date: _____
La First Middle (NOT a public record)

3. Social Security #: _____ Drivers License #: _____ State Issued: VA

4. Place of birth: Roanoke VA USA Height: 5'9" Weight: 150 Eyes: Hazel Hair: Brown
City State COUNTRY

5. Name of current/most recent spouse: Dean Deanna Kathleen Birth Date: _____
Last First Middle (NOT a public record)

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

7. Daytime telephone number: 757-321-5493 Email address: ab-licensing@dollartree.com *DB*

8. Premises Name: Family Dollar, LLC # 24436 Business Phone: 928 414 2001

9. Premises Address: 615 W. Hopi Drive Holbrook AZ Navajo 86025
Street (do not use PO Box) City State County Zip

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)
10/99	CURRENT	VP - Treasurer	Dollar Tree/Family Dollar 500 Volvo Parkway, Chesapeake, VA 23320

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
05/12	CURRENT	2904 Ryan Court, Virginia Beach, VA 23456			

(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) Roger Dean 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: [Signature] Date: 6/7/23

EXHIBIT A - Roger Dean

Question 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).

Answer: Yes. See below chart for details.

Citation Date	Agency	Licensed Entity	Disposition	Suspension Dates	Reinstatement Date
12/30/2019	Texas Alcoholic Beverage Control	Family Dollar Stores of Texas, LLC	License Suspension - 8 Days	1/8/2020 - 1/15/2020	1/16/2020
2/22/2020	Texas Alcoholic Beverage Control	Family Dollar Stores of Texas, LLC	License Suspension - 8 Days	12/16/2020 - 12/23/2020	12/24/2020
3/4/2020	Virginia Alcoholic Beverage Control Authority	Family Dollar Stores of Virginia, Inc.	License Suspension - 25 Days	5/14/2020 - 6/7/2020	6/8/2020
6/4/2021	Texas Alcoholic Beverage Control	Family Dollar Stores of Texas, LLC	License Suspension - 8 Days	9/8/2021 - 9/15/2021	9/16/2021

To Whom It May Concern

I, Roger Dean, Vice President and Treasurer of Family Dollar, LLC, provide this signed statement in support of its application for liquor license. I am the Controlling Person who completed the Questionnaire to be submitted with the application. The attached Exhibit A provides the details concerning my "Yes" answer to Question 18. This statement and the attached Exhibit A are true, correct, and complete, to the best of my knowledge.

A handwritten signature in black ink, appearing to read 'R. Dean', is written above a horizontal line.

By: Roger Dean

As: Vice President and Treasurer, Family Dollar, LLC

separate claims based on their respective interests even if a single award for all damages is given by the public authority.

17. TENANT'S DEFAULT.

a. The occurrence of any one or more of the following (after expiration of any applicable notice and cure period) will, at the sole option of Landlord, constitute an "Event of Default" under this Lease:

(i) A failure by Tenant to pay any Basic Rent when due; provided, however, for up to two (2) times during a Lease Year, if any payment of Basic Rent is not received when due, Landlord will notify Tenant in writing (a "Basic Rent Late Notice"), and Tenant will have ten (10) calendar days from the date of receipt of the Basic Rent Late Notice to make full payment of the Basic Rent. If any Basic Rent is not received when due after Landlord has delivered to Tenant the applicable Basic Rent Late Notices as hereinabove required, or if Tenant fails to pay any Basic Rent within the required time period after receipt of the applicable Basic Rent Late Notice, then such failure will constitute an Event of Default;

(ii) A failure by Tenant to pay any Additional Rent when due; provided, however, for up to two (2) times during any Lease Year, if any payment of Additional Rent is not received when due, Landlord will notify Tenant in writing (an "Additional Rent Late Notice"), and Tenant will have ten (10) calendar days from the date of receipt of the Additional Rent Late Notice to make full payment of the Additional Rent. If any Additional Rent is not received when due after Landlord has delivered to Tenant the applicable Additional Rent Late Notices as hereinabove required, or if Tenant fails to pay any Additional Rent within the required time period after receipt of the applicable Additional Rent Late Notice, then such failure will constitute an Event of Default; provided, however, that any failure to pay any amount of Additional Rent that is disputed by Tenant in good faith shall not constitute an Event of Default hereunder;

(iii) Tenant fails to perform or observe any other material provision or condition of this agreement to be performed or observed by Tenant, and Tenant fails to commence to cure the default within thirty (30) calendar days after receipt of notice of the default from Landlord (or such other period as may be explicitly set forth herein) or having commenced to cure the default, Tenant fails to diligently pursue the curing of the default thereafter;

(iv) any material representation or warranty made by Tenant herein proves to have been incorrect when made in any material respect;

(v) Tenant shall (A) voluntarily be adjudicated a bankrupt or insolvent, (B) seek or consent to the appointment of a receiver or trustee for itself or for all or a portion of the Leased Premises, (C) file a petition seeking relief under the bankruptcy or other similar laws of the United States, any state or any jurisdiction, or (D) make a general assignment for the benefit of creditors,

(vi) a court shall enter an order, judgment or decree appointing, without the consent of Tenant, a receiver or trustee for it or for the Leased Premises or a portion thereof or approving a petition filed against Tenant which seeks relief under the bankruptcy or other similar laws of the United States, any state or any jurisdiction, and such order, judgment or decree shall remain undischarged or unstayed ninety (90) calendar days after it is entered;

(vii) Tenant shall be liquidated or dissolved or shall begin proceedings towards its liquidation or dissolution; or

(viii) the estate or interest of Tenant in the Leased Premises or any portion thereof shall be levied upon or attached in any proceeding and such estate or interest is about to be sold or transferred or such process shall not be vacated or discharged within ninety (90) calendar days after it is made.

Subject to paragraph (b) below, upon the occurrence of an Event of Default, Landlord may exercise any right or remedy now or hereafter existing by law or in equity or may cure the Event of Default, and Tenant shall reimburse Landlord for all actual reasonable costs and expenses incurred by Landlord undertaking such cure. Without limiting the foregoing, Landlord may declare the term ended and enter into the Leased Premises by due process of law, and expel Tenant and repossess and enjoy the Leased Premises as though this Lease had by its terms expired. If Landlord terminates this Lease pursuant to this Section, then Tenant will peaceably surrender the Leased Premises to Landlord. Landlord shall use reasonable efforts to mitigate its damages, including, without limitation, reletting the Leased Premises in Landlord's reasonable business judgment for a commercially reasonable rent taking into consideration the condition of the Leased Premises and general market conditions. Notwithstanding the foregoing, no termination of this Lease will relieve Tenant from the obligation to pay rent and other charges due under this Lease for the remainder of the then current term as though this Lease had not been terminated for as long as the Leased Premises are vacant and for any deficiency between the rent and other charges due under this Lease for the remainder of the then current term and the rent and other charges due under any new lease if the Leased Premises are relet. The rent or deficiency in rent, as applicable, and other charges will be paid by Tenant as such obligations would have become due under this Lease in monthly or other periodic installments. In addition, Tenant will be liable for the reasonable costs of reletting the Leased Premises, but those costs will not include any attorneys' fees to negotiate a lease with a new tenant or any costs to alter or improve the Leased Premises for a new tenant.

b. The intention of this Section 17(b) is to set forth certain special provisions applicable to Events of Default of the nature referenced in Sections 17(a)(ii), (iii) and/or (iv) of this Lease (each, upon expiration of any applicable notice and cure periods, a "Parcel Event of Default") and to Landlord's rights and remedies upon the occurrence of

Parcel Events of Default. This Section 17(b) has no application to other Events of Default under this Lease and is not intended to alter or limit Landlord's rights and remedies with respect to such other Events of Default or, except as specifically set forth in this Section 17(b), for any other purpose. Subject to the foregoing, Landlord and Tenant agree that, notwithstanding anything to the contrary contained in this Lease, if, and for so long as, no more than 5 Parcel Events of Default have occurred and are then continuing during a Lease Year, then, on account of any Parcel Event of Default during such Lease Year, Landlord may not exercise any termination and/or dispossession rights and remedies available to it under this Lease on account of such Parcel Event(s) of Default against any Parcel other than the Parcel to which the aforesaid Parcel Event(s) of Default relate. If, however, more than 5 Parcel Events of Default occur and are then continuing during a Lease Year, Landlord shall be entitled to exercise all rights and remedies available to it under this Lease on account of such then continuing Parcel Event(s) of Default, provided that Landlord may only exercise termination and/or dispossession rights and remedies on account of such Parcel Event(s) of Default against either (i) any one or more of the Parcels to which such continuing Parcel Event(s) of Default relate or (ii) all Leased Premises covered by this Lease.

For the purposes of the restrictions on Landlord's exercise of remedies as set forth in this Section 17(b), a Parcel Event of Default shall no longer be considered "continuing" if (i) Tenant has cured such default or (ii) Landlord has terminated the Lease with respect to any Parcel(s) to which such Parcel Event(s) of Default relate.

18. SURRENDER OF POSSESSION. Upon the termination of this Lease, Tenant will surrender the Leased Premises broom clean and in good repair, ordinary wear and tear, damage by fire or other casualty and Landlord's maintenance and repair obligations excepted.

19. EXCLUSIVE USE. Landlord agrees that Landlord and any entity controlled by Landlord or any partner or principal of Landlord will not lease (or permit the leasing or subleasing of) or sell any space on any property contiguous with or connected to the Leased Premises or any portion thereof owned by or controlled by Landlord or any entity controlled by Landlord or any partner or principal of Landlord to any discount store occupying less than 40,000 square feet operated by or under the name of Wal-Mart, Dolgencorp or Dollar General, Dollar Tree, or any entity controlled by, affiliated with or related to any of them (each, a "Competitor"). If there is a breach of this Section by Landlord, then Tenant's rights and remedies will include, but not be limited to, the right at any time thereafter to elect to terminate this Lease with respect to the affected Parcel, and upon such election, this Lease will be terminated with respect to such Parcel only. So long as such breach exists and Tenant has not terminated this Lease with respect to the relevant Parcel, Tenant shall be entitled to a credit against the subsequent installment of Basic Rent in the amount of the positive difference, if any, between the monthly installment of Basic Rent allocable to such Parcel and 1/12th of 2% of Tenant's estimated Gross Sales at such Parcel (i.e., the amount by which Basic Rent exceeds 2% of Gross Sales for the relevant month). Tenant shall, within 120 days after the end of its Fiscal

RESOLUTION NO. 23-09

A RESOLUTION OF THE CITY OF HOLBROOK, ARIZONA MAYOR AND COMMON COUNCIL, DESIGNATING THE CHIEF FISCAL OFFICER FOR OFFICIALLY SUBMITTING THE FISCAL YEAR 2022 EXPENDITURE LIMITATION REPORT TO THE ARIZONA AUDITOR GENERAL

RECITALS:

WHEREAS, A.R.S. §41-1279.07(E) requires each county, city, town, and community college district to annually provide to the Arizona Auditor General by July 31 the name of the Chief Fiscal Officer the governing body designated to officially submit the current year's annual expenditure limitation report (AELR) on the governing body's behalf; and

WHEREAS, the City of Holbrook Mayor and Council desires to designate Randall L Sullivan Jr, as the City's Chief Fiscal Officer.

WHEREAS, Entities must submit an updated form and documentation for any changes in the individuals designated to file the AELR.

ENACTMENTS:

NOW THEREFORE BE IT RESOLVED BY THE CITY OF HOLBROOK MAYOR AND COUNCIL as follows:

SECTION 1. The recitals above are hereby incorporated as if fully set forth herein.

SECTION 2. Randall L Sullivan Jr is hereby designated as the City's Chief Fiscal Officer for purposes of submitting the fiscal year 2022 AELR to the Arizona Auditor General on the governing body's behalf.

PASSED AND ADOPTED by the City of Holbrook, Arizona Mayor and Council, this 24th day of August, 2023.

Attested to:

Kathleen Smith, Mayor

Lisa Hunt, City Clerk

Reviewed by:

Approved as to form:

Randall L Sullivan Jr, City Manager

Bradley A. Burns, City Attorney

CFO Designation Resolution Template

Instructions

A.R.S. §41-1279.07(E) requires each county, city, town, and community college district to annually provide to the Arizona Auditor General by July 31 the name of the Chief Fiscal Officer (CFO) the governing body has designated to officially submit the current year's annual expenditure limitation report (AELR) on the governing body's behalf. The current year is the fiscal year the entity is operating in on July 31.

City and town councils (councils) **must** use this resolution template to document their annual CFO designation and may not delegate the responsibility of designating the CFO.

Councils must present and act upon the resolution **annually** at a council meeting and submit the signed resolution to our Office with the electronic [CFO designation form](#). This instructions page does not need to be presented or submitted. The template includes fillable text boxes to allow entities to add any needed wording to both the recitals and enactments sections. If additional wording is not needed, please delete the textbox. The standard wording portions of the template that are not fillable may not be removed from the document adopted by the council and submitted to our Office.

These instructions and the resolution template are not legal advice. As such, you may want to consider having your legal counsel review your resolution for accuracy and form.

If you have any questions, please contact our Accountability Services Division at (602) 977-2796 or email us at asd@azauditor.gov.

RESOLUTION NO. 23-10

A RESOLUTION OF THE CITY OF HOLBROOK, ARIZONA MAYOR AND COMMON COUNCIL, DESIGNATING THE CHIEF FISCAL OFFICER FOR OFFICIALLY SUBMITTING THE FISCAL YEAR 2024 EXPENDITURE LIMITATION REPORT TO THE ARIZONA AUDITOR GENERAL

RECITALS:

WHEREAS, A.R.S. §41-1279.07(E) requires each county, city, town, and community college district to annually provide to the Arizona Auditor General by July 31 the name of the Chief Fiscal Officer the governing body designated to officially submit the current year's annual expenditure limitation report (AELR) on the governing body's behalf; and

WHEREAS, the City of Holbrook Mayor and Council desires to designate Randall L Sullivan Jr, as the City's Chief Fiscal Officer.

WHEREAS, Entities must submit an updated form and documentation for any changes in the individuals designated to file the AELR.

ENACTMENTS:

NOW THEREFORE BE IT RESOLVED BY THE CITY OF HOLBROOK MAYOR AND COUNCIL as follows:

SECTION 1. The recitals above are hereby incorporated as if fully set forth herein.

SECTION 2. Randall L Sullivan Jr is hereby designated as the City's Chief Fiscal Officer for purposes of submitting the fiscal year 2024 AELR to the Arizona Auditor General on the governing body's behalf.

PASSED AND ADOPTED by the City of Holbrook, Arizona Mayor and Council, this 24th day of August, 2023.

Attested to:

Kathleen Smith, Mayor

Lisa Hunt, City Clerk

Reviewed by:

Approved as to form:

Randall L Sullivan Jr, City Manager

Bradley A. Burns, City Attorney

CFO Designation Resolution Template

Instructions

A.R.S. §41-1279.07(E) requires each county, city, town, and community college district to annually provide to the Arizona Auditor General by July 31 the name of the Chief Fiscal Officer (CFO) the governing body has designated to officially submit the current year's annual expenditure limitation report (AELR) on the governing body's behalf. The current year is the fiscal year the entity is operating in on July 31.

City and town councils (councils) **must** use this resolution template to document their annual CFO designation and may not delegate the responsibility of designating the CFO.

Councils must present and act upon the resolution **annually** at a council meeting and submit the signed resolution to our Office with the electronic [CFO designation form](#). This instructions page does not need to be presented or submitted. The template includes fillable text boxes to allow entities to add any needed wording to both the recitals and enactments sections. If additional wording is not needed, please delete the textbox. The standard wording portions of the template that are not fillable may not be removed from the document adopted by the council and submitted to our Office.

These instructions and the resolution template are not legal advice. As such, you may want to consider having your legal counsel review your resolution for accuracy and form.

If you have any questions, please contact our Accountability Services Division at (602) 977-2796 or email us at asd@azauditor.gov.

ORDINANCE 23-04

AN ORDINANCE OF THE MAYOR AND COUNCIL OF THE CITY OF HOLBROOK, "CITY", NAVAJO COUNTY, ARIZONA, AMENDING CHAPTER 3, HEALTH AND SAFETY OF THE HOLBROOK CITY CODE, CHANGING ARTICLE 3-6 TO READ "DOGS AND CATS", AND AMENDING SECTION 3-6-4B FEES.

WHEREAS, it has been determined that the word "cats" should be added to Article 3-6 to allow for fees to be assessed; and,

WHEREAS, the expenses of operating an animal control facility need to be offset by the fees collected; and,

WHEREAS, the Mayor and Council have determined that it is in the best interest of the citizens to amend the fees.

NOW, THEREFORE, BE IT ORDAINED BY THE MAYOR AND COUNCIL OF THE CITY OF HOLBROOK, ARIZONA THAT THE HOLBROOK CITY CODE IS AMENDED AS FOLLOWS:

Chapter 3 of the Holbrook City Code, Article 3-6 to be amended to read:

ARTICLE 3-6: DOGS AND CATS

Chapter 3 of the Holbrook City Code, Article 3-6-4 Fees Section B as follows:

Adoptions	
Dogs	\$80
Cats	\$50
Kittens (under 5 months)	\$75
Puppies (under 5 months)	\$120
Small breed (under 20 lbs)	\$120

Reclaim Fees	
First	\$20
Second	\$50
Third	\$100
Fourth (doubles every time after the third)	\$200

* If an unsterilized and unlicensed animal is impounded the fee is the reclaim fee plus \$50 unless the pet is sterilized at owner's expense then fees are waived per State A.R.S. § 11-1022

City Tags

Sterilized	\$5
Unsterilized	\$20
Replacement	\$2

Daily Boarding Fee

After first 24 hours	\$10/day
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Surrender Fee

Surrender fee	\$25
Litter max	\$100

Bite Quarantine Fee

\$10 per day boarding fee plus \$50 impound

Trap Deposit

Trap deposit	\$60
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Microchip fee

Microchip fee*	\$5
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*Unless already microchipped all dogs/cats owner reclaim/adoptions/bite hold receive a \$5 microchip fee

PASSED AND ADOPTED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF HOLBROOK, ARIZONA, THIS 28th DAY OF SEPTEMBER, 2023.

APPROVED/EXECUTED:

Kathleen Smith, Mayor

ATTESTED:

Lisa Hunt, City Clerk

APPROVED AS TO FORM:

Bradley A. Burns, City Attorney

Current Fees

Adoptions

Male Dog-\$70

Female Dog-\$75

Male Cat-\$40

Female Cat-\$45

Reclaim Fees

1st-\$20

2nd-\$50

3rd-\$80

4th- Doubles every time after the 3rd

City Tags

Altered -\$5

Unaltered-\$10

Daly Boarding Fees

\$5

Bite Quarantine Fee

\$ 5 per day plus \$20 impound

Surrender Fee

\$20

Trap Deposit

\$50

ORDINANCE 03-06

AN ORDINANCE OF THE MAYOR AND THE CITY COUNCIL OF HOLBROOK, ARIZONA, AMENDING CHAPTER 3, HEALTH AND SAFETY OF THE HOLBROOK CITY CODE, CHANGING THE DEFINITION OF ANIMALS IN SECTION 3-5-1 AND ADDING ADMINISTERED BY A LICENSED VETERNIARIAN TO THE DEFINITION OF VACCINATION, AND AMENDING SECTION 3-6-4 ON FEES.

WHEREAS, it has been determined that the word “dogs” should be added to the definition of animals or animals and the phrase “except dogs” be changed to “except man” from the definition of animal or animals to be consistent with state statutes and to allow for citations for barking dogs in Article 3-5-1; and

WHEREAS, it has been determined that the sentence “Administered by a licensed veterinarian.” be added to the definition of vaccination under Article 3-5-1; and

WHEREAS, it has been determined that Article 3-6-4 should be clarified concerning impoundment and maintenance fees for dogs picked up and kept in the Animal Control Shelter,

Now, Therefore be it ordained by the Mayor and City Council of the City of Holbrook that the Holbrook City Code is amended as follows:

Chapter 3 of the Holbrook City Code, Article 3-5-1 is hereby amended as follows:

Animal or Animals: Horses, mules, burros, cattle, goats, sheep, cats, dogs, swine, llamas, ostriches, emus or other livestock, poultry or any other animal that is susceptible to rabies, except dogs man.

Vaccination: An anti-rabies vaccination using a type of vaccine approved by the State Veterinarian; administered by a licensed veterinarian.

Chapter 3 of the Holbrook City Codes, Article 3-6-4 is amended as follows:

3-6-4 FEES

- B. Specified: The license fee for a sterile dog is five dollars (\$5.00) per year. The license fee for an unsterile dog is ~~seven dollars (\$7.00)~~ ten dollars (\$10.00) per year. The fee for redemption of an impounded dog is twenty dollars (\$20.00)(Impound charge). In addition, there is a \$5.00 per day maintenance fee for every day an animal is kept in the shelter. The impound

fees will ~~double~~ increase for each subsequent impoundment within one year (of the incident) of the same dog in the following manner:

1. First Impoundment: Twenty dollars (\$20.00);
2. Second Impoundment: Fifty dollars (\$50.00);
3. Third Impoundment: Eighty dollars (\$80.00);
4. Fourth Impoundment: One hundred and sixty dollars (\$160.00);

For each impoundment after the fourth impoundment the fees will double.


Passed and adopted by the Mayor and Council of the City of Holbrook this 23rd day of September 2003.


Bryan Smithson, Mayor

ATTEST:


Cher Millage, CMC, City Clerk

APPROVED AS TO FORM:


F. Morgan Brown, Attorney