City of Phoenix

OFF-TRACK BETTING APPLICATION

STAFF USE **ONLY**

OTB Account #

Liquor License Account #

State Liquor License # \(\)

License Services Section	Master Account #	
New Application	Renewal	Application Date:
\square		TUNE JG1L, 2018 OTB Location Phone #:
Name of Bar/Restaurant where OT	B will be located:	OTB Location Phone #:
BULLSHOOTERS		602,441, 2447
> pate)		
3337 W. PEONIA A	WENUE 85029	
Street Address (include Apt./Suite #)		
PhOENIX, ARIZONG	1	
City, State, Zip		<u> </u>
Racetrack requesting OTB:		Licensee Type: (please check ope)
ARIZONA DOWNS		☐ Individual ☐ Corporation
Racetrack Licensee:		☐ Partnership ☐ LLC
ARIZONA DOWNS,	L.L.C.	Other (specify)
OTB Agent Name:		Agent Contact Phone #:
DAVID AUTHER		602-393-0058
Mailing Address for OTB Agent:		
Street Address (include Apt./Suite #)		
PHOENIX, AZ 85014		
City, State, Zip		
When Centrely Partner 6.26.18 Staff initials:		
Jana C.	en mer tarther	6.26.18
Agent Signature	Title	Date
STAFF USE ONLY		
☐ Recommended for Approval	☐ No legal basis for disapproval	☐ Disapproved
\square Recommended for Disapproval		Response due:
☐ No Recommendation	☐ Planning (Zone:)	☐ Police
		Attach memo
License Services Supervisor	Date	for disapproval
Date		