

## Arizona Department of Liquor Licenses and Control 800 W Washington 5th Floor Phoenix, AZ 85007-2934 www.azliquor.gov (602) 542-5141

## SECURITY PERSONNEL ATTESTATION FORM

ARS 4-112.G(12): THE FORM SHALL REQUIRE THE APPLICANT OR OTHER PERSON TO DISCLOSE WHETHER IN THE PREVIOUS FIVE YEARS THE PERSON HAS BEEN A REGISTERED SEX OFFENDER OR PLED GUILTY, PLED NO CONTEST OR BEEN CONVICTED OF ANY OFFENSE THAT CONSTITUTES ASSAULT, HOMICIDE, DOMESTIC VIOLENCE, SEXUAL MISCONDUCT, MISCONDUCT INVOLVING A DEADLY WEAPON OR A DRUG VIOLATION THAT CONSTITUTES THE ILLEGAL SALE, MANUFACTURING, CULTIVATION OR TRANSPORTATION FOR SALE OF MARIJUANA, A DANGEROUS DRUG OR A NARCOTIC DRUG. A LICENSEE MAY NOT HIRE OR ASSIGN TO A ROLE AS SECURITY PERSONNEL ANY PERSON WHO FAILS TO COMPLETE THE FORM OR IF THE FORM DISCLOSES ONE OF THE LISTED OFFENSES WITHIN THE PREVIOUS FIVE YEARS. THE LICENSEE SHALL MAINTAIN ON FILE AFFIDAVITS OF ALL SECURITY PERSONNEL HIRED OR DESIGNATED BY THE LICENSEE.

In the past 5 years have you pleaded Guilty, No Contest, or have been Convicted of any the following Offenses?

Domestic Violence	Yes	No	
Assault	Yes	No	
Homicide	Yes	No	
Sexual Misconduct	Yes	No	
Misconduct involving a deadly weapon	Yes	No	
Drug Violations	Yes	No	
Are you a registered Sex Offender?	Yes	No	

	<u>NOTARY</u>			
l (Print Full Name) to the best of my knowledge.	hereby de	eclare that all statements are	true and correct	
Signature:		County of bing instrument was acknowledge		
My Commission Expires on:	Day of,,			
Date	Day	Month	Year	
		Signature of Notary		