## **City of Phoenix**

**OFF-TRACK BETTING APPLICATION** 

**STAFF** USE

OTB Account #

Liquor License Account #

City Clark Danagement	ONLY	State Liquor License #				
City Clerk Department License Services Section						
New Application		Renewal		Application Date:		
$\checkmark$		Octob		October 2	per 21, 2025	
Name of Bar/Restaurant where OTB will be located:			OTB Location Phone #:			
Connolly's Sports Grill			(623) 879-5997			
Address of Bar/Restaurant when	e OTB will be lo	ocated:				
2605 W. Carefree Hwy., Ste 14	0					
Street Address (include Apt./Suite	#)					
Phoenix, AZ. 85085						
City, State, Zip					The state of the s	
Racetrack requesting OTB:			Licensee Type: (please check one)			
Turf Paradise			□ Indiv	ridual	☐ Corporation	
Racetrack Licensee:			☐ Partnership ☐ LLC			
Skyfall 7 LLC			□ Other (specify)			
OTB Agent Name:				Agent Contact Phone #:		
David W Johnson			(602) 375-6431			
Mailing Address for OTB Agent:						
1501 W. Bell Rd.						
Street Address (include Apt./Suite	#)					
Phoenix, AZ. 85023						
City, State, Zip						
0100						
V/n//_	- VP/Asst. GM	1	Octobei	21, 2025	Staff initials:	
Agent Signature	Title		Date			
STAFF USE ONLY						
☐ Recommended for Approval	☐ No legal basi	is for disapproval	☐ Disapp	proved		
☐ Recommended for Disapproval					Response due:	
☐ No Recommendation	☐ Planning (7c	one:)	☐ Police			
	(20	,	_ 1 0.100		Attach memo	
License Services Supervisor	Date				for disapproval	
					),	
Date						