



NEW LIQUOR LICENSE APPLICATION INFORMATION / PROCESS

Listed below are all forms and supporting documents that must be submitted to the Local Licensing Authority for a New Liquor License. This packet contains all City specific information. Please follow the link on this page to the Colorado Department of Revenue for appropriate state forms. **All forms and documents must be properly signed and correspond exactly with the name of the applicant.**

All State forms are available at <https://www.colorado.gov/pacific/enforcement/liquor-forms>

License Application: Completed State Form DR8404 (Retail License Application) *or* DR8403 (Fermented Malt Beverage On (or) Off-Premise)

- ✓ Submit *one* copy. If requesting a concurrent review, the Clerk's office will scan and forward a copy to the Colorado Department of Revenue. Concurrent review is available on *new license applications only*.
- ✓ All appropriate sections completed
- ✓ Authorized signature
- ✓ Appropriate Fees attached (see attached schedule)

Proof of Possession and Diagram: This includes a copy of a deed, lease or sublease. Term of the deed, lease or sublease should be for at least one year from the date of issuance of the liquor license. Deed, lease or sublease ***must be*** in the name of the applicant, i.e. the LLC or Corp., not an individual.

- ✓ All documents must be signed
- ✓ Diagram of premises, no larger than 8 ½ X 11, with area to be licensed heavily outlined. Each floor should be drawn separately. Outdoor seating, liquor storage areas, etc., should be indicated on the drawing. Dimensions must be included however the drawing does not have to be to scale. If applying for a Hotel/Restaurant license, the kitchen must be shown on the diagram. Make sure the diagram includes the entire area you want to be included on the license.
- ✓

Financial Documents: Copies of all notes, loans, security agreements, purchase agreements, stock transfer agreements, etc., used in and for the business. All copies must total the amount claimed on the application.

Background Information: Individual History Record (Form DR8404-I) must be submitted for each individual applicant, all general partners, all limited partners with 10% or more interest, all corporate officers & directors, all 10% or more stockholders, all LLC managing members, all LLC members with 10% or more interest, and any personal loan makers.

Fingerprints: Each person required to fill out an Individual History Record must be fingerprinted for a background investigation. The Colorado Bureau of Investigation (CBI) provides fingerprinting service via CABS (Colorado Applicant Background Services). Go to www.colorado.gov.cbi to schedule an appointment with any of the authorized vendors. When prompted for the ORI (Originating Agency Identification) number, enter CONCI1003 for City of Littleton. It is the responsibility of the applicant to notify the City Clerk's office when all parties have been fingerprinted (names and date of fingerprinting). Failure to do so may delay

the completion of local processing of the license application and may result in postponement of any hearing scheduled before the Littleton Licensing Authority.

Manager's Registration (if different from applicant/owner): Must be completed for a Hotel/Restaurant, Tavern, or Lodging & Entertainment class of license only if the manager is someone other than the applicant(s). Managers other than owners must complete fingerprinting and background investigation. Checks in the amount(s) of \$75 to the City of Littleton and \$30 to the Colorado Department of Revenue must accompany the application/fees. These fees can be combined in the same check for application/license fees.

Additional Documents needed dependant on type of business.

Sole Proprietor:

Individual History Record (All Sole Proprietors, if husband and wife – both) DR4679 Affidavit – Restrictions on Public Benefits

Partnership Applicant: Individual History Record (All general partners, if husband and wife – both)

DR4679 Affidavit – Restrictions on Public Benefits Partnership agreement – except for husband-wife partnerships Certificate of co-partnership – if applicable

Certificate of Good Standing from Secretary of State's office issued within 2 years from date of application

Limited Liability Applicant: Individual History Record (10% or more stockholders, limited partners, or members; all managers of an LLC)

Date-stamped Articles of Organization

Certificate of Good Standing from Secretary of State's office within 2 years from date of application

Operating Agreement

Corporate Applicant: Individual History Record (10% or more stockholders, limited partners, or members; all corporate officers and directors)

Date-stamped Articles of Incorporation

Certificate of Good Standing from Secretary of State issued within 2 years from date of application

If Applicant is a Subsidiary Corporation: List name and address of parent corporation; List name, DOB, and address of all officers, directors and stockholders holding 10% or more of the parent company; Background investigation done on one principal officer of Parent Corporation

PUBLIC HEARING

The Littleton Licensing Authority meets the second Wednesday of each month at 6:30 p.m. at the Littleton Center, 2255 West Berry Avenue in the Council Chamber. Upon receipt of a complete application for a new license, the City Clerk will determine the neighborhood boundaries for purposes of proving the needs and desires of the adult inhabitants of the neighborhood and will schedule a public hearing to be held no sooner than 30 days from the date of the application. A representative of the business MUST attend this hearing. The City Clerk will notify the applicant, via U.S. Mail or email, of the proposed boundaries and the scheduled hearing date.

Not less than 10 days prior to the date of the public hearing, the premises must be posted with a public hearing sign. Public hearing signs are prepared by the City Clerk's office and applicant will be notified when the sign is ready for posting. Applicant must provide proof of posting to

the City Clerk's office. The City Clerk will publish notice of public hearing in the Littleton Independent.

The Licensing Authority considers the reasonable requirements of the neighborhood to which the applicant seeks a new license and the desires of the adult inhabitants as evidenced by petition. The petition process cannot begin before the applicant has received the proposed boundaries from the City Clerk and a signed "Waiver of Hearing" form is received in the City Clerk's office. If you have objections to the boundaries, a special hearing will be set to determine the boundaries. Signatures on petitions must be obtained from the designated neighborhood boundaries and must be from residents 21 years of age or older and owner/managers of businesses who are 21 years of age or older. The completed petitions must be submitted to the City Clerk's Office not less than 14 business days prior to the public hearing date.

Food Service Requirements

On-Premises Liquor Licenses:

Club licensees, Arts licensees, Optional premises licensees, and Public Transportation System licensees are not obligated to serve food at any time.

Hotel and Restaurant licensees must have full meals available until 8:00 p.m. every day, and snacks and sandwiches after 8:00 p.m. Food sales must provide at least 25% of the gross income from the sale of food and beverages.

Brew Pubs must serve meals and must derive 15% of the on-premises gross sales from the sale of food.

Taverns and Beer & Wine licensees must have sandwiches and snacks available during operating hours.

When food is required to be served, it must be available wherever alcoholic beverages are served.

Off-premises Liquor Licenses:

Liquor stores are prohibited from the sale of food items except those approved by the State Licensing Authority that are prepackaged, labeled, directly related to the consumption of liquor, and are sold in containers up to 16 ounces for the purpose of cocktail garnish. Liquor-licensed Drug stores are not subject to prohibitions or requirements regarding sale of food items.

Complete applications, with appropriate funds and applicable paperwork, must be submitted to your local Licensing Authority at: City of Littleton, City Clerk's Office; 2255 West Berry Avenue. Please call 303-795-3780 with any questions.

**Colorado Liquor Enforcement
Top 10 (Actually 11) Application Errors**

Possession Document

1. The possession document, such as the lease or warranty deed, needs to include all areas proposed for licensure. Patio areas will no longer be scrutinized as long as the patio area is included in the premises diagram.
2. The possession document needs to be in the name of the applying entity only. We often times see the lease in the name of the LLC or corporation and the individuals as well. The individuals may be in the lease later as guarantors, but not stated as the Lessee.

Individual History Record

3. The bank name needs to be listed on #14c indicating from where the funds originated. This should resolve with the new form version.
4. We need items 13e-r fully completed, to include from what state the applicant's identification issued and the number of that identification card.

Application

5. We need the applicant to provide on questions 11 or 12 (depending upon the applicant) the information for anyone interested in the license by way of gift, promissory note, percentage lease etc.
6. There should be a trade name provided. Please let us know the circumstances if they do not have one or do not plan to ever have one.
7. The information on the tenant/landlord on question 11 and 11a are often incorrect. These must match #2 on the application and match the lease or other possessory document.
8. We need the local authority section to be filled out completely. Please check all boxes and sign and date.
9. The licensed area on the diagram provided needs to be outlined in bold so we understand what area is being requested for licensure.
10. The sales tax license must be in the name of the applying entity and not in an individual's name or under another entity.
11. The transfer affidavit needs to be signed by both the transferring party and the party applying for the license. If it is an operation of law (or similar) issue, you can inquire as to who is required in those rare cases.

FINGERPRINTING

The Colorado Bureau of Investigation has implemented the Colorado Applicant Background Services (CABS) program in response to Senate Bill 17-189.

Website for Colorado Bureau of Investigation:

www.colorado.gov/cbi

Select - Sections

- Identification Unit
- Employment & Background Checks

Beginning **September 24th, 2018** citizens requesting to be fingerprinted for licensing, certification or background checks will be referred to the vendor selected by CBI to process electronic submissions. **Littleton Police Records will not accept requests from the public for fingerprinting services except for court ordered fingerprints.**

Public fingerprinting is available through:

Idemia Identity and Security USA (IDEMIA) (by appointment only)

www.identogo.com

1-844-539-5539

Liquor license applicants use service code 25YQ6K

Medical marijuana applicants use service code 25YQ8H

ORI number for City of Littleton is CON CJ1003



There are several departments at the City of Littleton that you may need to work with in order to be in compliance with local regulations. Please be sure to contact each one so you remain informed of any requirements that relate to your business and receive all the information you need concerning City services.

Building Department (Permits, Codes and Inspections)
303-795-3784 (or) 303-795-3754

Planning Department (Zoning, Signs)
303-795-3748

Sales Tax Department (Sales Tax licensing and remittal questions)
303-795-3768

Economic Development (Business Services)
303-795-3749

Public Services (Utilities, Sewer, Engineering, Trees/Landscaping, Traffic Control)
303-795-3863

Fire Department / South Metro Fire Rescue
720-989-2000

Police Department
303-795-3875

Tri-County Health Department (If you plan on serving or selling any food)
303-220-9200



**2255 WEST BERRY AVENUE
LITTLETON, COLORADO 80120**

Business Emergency Contact Information

This information will be used for after hour emergencies when access is required into the business by the Police Department or Fire Department

Name of Business _____

Business Address _____

Business Telephone Number _____

Emergency Contact Name #1 _____

Emergency Contact Telephone Number #1 _____

Emergency Contact Name #2 _____

Emergency Contact Telephone Number #2 _____

This information is effective as of _____

NEW LIQUOR LICENSE APPLICATION - FORMS

Name & Address of Applicant _____

Date application received _____

Concurrent Review? _____

_____ Form 8404 – Retail License Application

_____ Form 8404-I - Individual History Record

_____ Lawful Presence Affidavit (sole proprietorship only)

_____ Fees – State and Local

_____ Fingerprints

_____ State Sales Tax number

_____ Lease or Deed in name of applicant (expiration date: _____)

_____ List/Copies of notes and loans

_____ Diagram of premises

If application is for a Hotel & Restaurant, Tavern license or Lodging & Entertainment:

_____ Manager's Registration form (8404-I) & fee (unless manager is owner)

If application is for a Brew Pub or Vintner's Restaurant:

_____ Copy of application(s) to TTB

If applicant is a corporation:

_____ Articles of Incorporation
(date stamped by Colorado Secretary of State's office)

_____ Certificate of Good Standing if incorporated more than 2 years ago

If applicant is a partnership:

_____ Partnership Agreement

If applicant is a limited liability company:

_____ Articles of Organization
(date stamped by Colorado Secretary of State's office)

_____ Operating Agreement



RETAIL LIQUOR STORE (OR) DRUG STORE LIQUOR LICENSE FEE SCHEDULE

Checks Required:

\$1,437.50 City of Littleton

\$1,427.50 Colorado Department of Revenue with

\$1,327.50 Colorado Department of Revenue with

* City = checks only

** State = check or on-line <https://secure.colorado.gov/payment/liquor>

New License Fees

	<u>City Fees</u>	<u>State Fees</u>
Application	\$695.00	\$1,100.00
Concurrent Review		\$100.00
License	\$742.50	\$227.50
Manager Registration	N/A	N/A
Total	\$1,437.50	\$1,427.50

City License Fee breakdown:

\$22.50	License
\$720.00	Occupation Tax
<u>\$742.50</u>	Total

Transfer of License Fees

	<u>City</u>	<u>State</u>
Transfer Application	\$695.00	\$1,100.00
License	\$742.50	\$227.50
Temporary License Fee	\$100.00	
Total	\$1,537.50	\$1,327.50

Colorado Liquor Retail License Application

*** Note that the Division will not accept cash**

Paid by Check Date Uploaded to MoveIt

Paid Online

New License

New-Concurrent

Transfer of Ownership

State Property Only

Master file

- **All answers must be printed in black ink or typewritten**
- **Applicant must check the appropriate box(es)**
- **Applicant should obtain a copy of the Colorado Liquor and Beer Code: [SBG.Colorado.gov/Liquor](https://sbgl.leg.state.co.us/Liquor)**

Applicant is applying as a/an

Individual

Limited Liability Company

Association or Other

Corporation

Partnership (includes Limited Liability and Spouse
or Partner in a Civil Union)

Applicant Name If an LLC, name of LLC; if partnership, at least 2 partner's names; if corporation, name of corporation

FEIN Number

State Sales Tax Number

Trade Name of Establishment (DBA)

Business Telephone

Address of Premises (specify exact location of premises, include suite/unit numbers)

City

County

State ZIP Code

Mailing Address (Number and Street)

City or Town

State ZIP Code

Email Address

If the premises currently has a liquor or beer license, you **must** answer the following questions.

Present Trade Name of Establishment (DBA)

Present State License Number

Present Class of License

Present Expiration Date

Section A Nonrefundable application fees*

Application Fee for New License.....	\$1,100.00
Application Fee for New License with Concurrent Review.....	\$1,200.00
Application Fee for Transfer.....	\$1,100.00

Section B Liquor License Fees*

Add Optional Premises to H & R.....	\$100.00 X	Total
Add Sidewalk Service Area.....		\$75.00
Arts License (City).....		\$308.75
Arts License (County).....		\$308.75
Beer and Wine License (City).....		\$351.25
Beer and Wine License (County).....		\$436.25
Brew Pub License (City).....		\$750.00
Brew Pub License (County).....		\$750.00
Campus Liquor Complex (City).....		\$500.00
Campus Liquor Complex (County).....		\$500.00
Campus Liquor Complex (State).....		\$500.00
Club License (City).....		\$308.75
Club License (County).....		\$308.75
Distillery Pub License (City).....		\$750.00
Distillery Pub License (County).....		\$750.00
Entertainment Facility License (City).....		\$500.00
Entertainment Facility License (County).....		\$500.00
Hotel and Restaurant License (City).....		\$500.00
Hotel and Restaurant License (County).....		\$500.00
Hotel and Restaurant License with one optional premises (City).....		\$600.00
Hotel and Restaurant License with one optional premises (County).....		\$600.00
Liquor–Licensed Drugstore (City).....		\$227.50
Liquor–Licensed Drugstore (County).....		\$312.50
Lodging Facility License (City).....		\$500.00
Lodging Facility License (County).....		\$500.00

Section B Liquor License Fees* (Continued)

Manager Registration - H & R.....	\$30.00
Manager Registration - Tavern.....	\$30.00
Manager Registration - Lodging & Entertainment.....	\$30.00
Manager Registration - Campus Liquor Complex.....	\$30.00
Optional Premises License (City).....	\$500.00
Optional Premises License (County).....	\$500.00
Racetrack License (City).....	\$500.00
Racetrack License (County).....	\$500.00
Resort Complex License (City).....	\$500.00
Resort Complex License (County).....	\$500.00
Related Facility - Campus Liquor Complex (City).....	\$160.00
Related Facility - Campus Liquor Complex (County).....	\$160.00
Related Facility - Campus Liquor Complex (State).....	\$160.00
Retail Gaming Tavern License (City).....	\$500.00
Retail Gaming Tavern License (County).....	\$500.00
Retail Liquor Store License - Additional (City).....	\$227.50
Retail Liquor Store License - Additional (County).....	\$312.50
Retail Liquor Store (City).....	\$227.50
Retail Liquor Store (County).....	\$312.50
Tavern License (City).....	\$500.00
Tavern License (County).....	\$500.00
Vintners Restaurant License (City).....	\$750.00
Vintners Restaurant License (County).....	\$750.00

Questions? Visit: SBG.Colorado.gov/Liquor for more information

Do not write in this space - For Department of Revenue use only

Liability Information

License Account Number

Liability Date

License Issued Through (Expiration Date)

Total

\$

Application Documents Checklist and Worksheet

Instructions: This checklist should be utilized to assist applicants with filing all required documents for licensure. **All** documents must be properly signed and correspond with the name of the applicant exactly. **All** documents must be typed or legibly printed. Upon final State approval the license will be mailed to the local licensing authority. Application fees are nonrefundable.

Questions? Visit: SBG.Colorado.gov/Liquor for more information

Items submitted, please check all appropriate boxes completed or documents submitted

I. Applicant information

Applicant/Licensee identified

State sales tax license number listed or applied for at time of application

License type or other transaction identified

Return originals to local authority (additional items may be required by the local licensing authority)

All sections of the application need to be completed

Master file applicants must include the Application for Master File form DR 8415 and applicable fees to this Retail License Application

II. Diagram of the premises

No larger than 8½" X 11"

Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.)

Separate diagram for each floor (if multiple levels)

Return originals to local authority (additional items may be required by the local licensing authority)

Kitchen - identified if Hotel and Restaurant

Bold/Outlined Licensed Premises

III. Proof of property possession (One Year Needed)

Deed in name of the applicant (or) (matching Applicant Name provided on page 1) date stamped / filed with County Clerk

Lease in the name of the applicant (or) (matching Applicant Name provided on page 1)

Lease assignment in the name of the applicant with proper consent from the landlord and acceptance by the applicant

Other agreement if not deed or lease. (matching Applicant Name provided on page 1)

IV. Background information (DR 8404-I) and financial documents

Complete DR 8404-I for each principal (individuals with more than 10% ownership, officers, directors, partners, members)

Fingerprints taken and submitted to the appropriate Local Licensing Authority through an approved State Vendor. Master File applicants submit results to the State

Do not complete fingerprint cards prior to submitting your application.

The Vendors are as follows:

IdentoGO

Appointment Scheduling Website: <https://uenroll.identogo.com/workflows/25YQHT>

Phone: 844-539-5539 (toll-free)

IdentoGO FAQs: <https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/biometric-identification-and-records-unit-faqs>

State Liquor Code for IdentoGO: 25YQHT

Colorado Fingerprinting

Appointment Scheduling Website: <http://www.coloradofingerprinting.com/cabs/>

Phone: 720-292-2722 833-224-2227 (toll free)

State Liquor Code for Colorado Fingerprinting: C030LIQI

Purchase agreement, stock transfer agreement, and/or authorization to transfer license

List of all notes and loans (Copies to also be attached)

V. Sole proprietor/Spouse or partners in a civil union (if applicable)

Form DR 4679 Lawful Presence Affidavit

Copy of State issued Driver's License or Colorado Identification Card for each applicant

VI. Corporate applicant information (if applicable)

Certificate of Incorporation

Certificate of Good Standing

Certificate of Authorization if foreign corporation (out of state applicants only)

VII. Partnership applicant information (if applicable)

Partnership Agreement (general or limited).

Certificate of Good Standing

VIII. Limited Liability Company applicant information (if applicable)

Copy of articles of organization

Certificate of Good Standing

Copy of Operating Agreement (if applicable)

Certificate of Authority if foreign LLC (out of state applicants only)

IX. Manager registration for Hotel and Restaurant, Tavern, Lodging & Entertainment, and Campus Liquor Complex licenses when included with this application

\$30.00 fee

If owner is managing, no fee required

1. Is the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers under the age of twenty-one years?..... Yes No
2. Has the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers ever (in Colorado or any other state):
- a. Been denied an alcohol beverage license?..... Yes No
- b. Had an alcohol beverage license suspended or revoked?..... Yes No
- c. Had interest in another entity that had an alcohol beverage license suspended or revoked?..... Yes No
- If you answered yes to a, b or c above, explain in detail on a separate sheet.
3. Has a liquor license application (same license class), that was located within 500 feet of the proposed premises, been denied within the preceding two years?..... Yes No
- If "yes", explain in detail.

4. Are the premises to be licensed within 500 feet, of any public or private school that meets compulsory education requirements of Colorado law, or the principal campus of any college, university or seminary?..... Yes No
- or**
- Waiver by local ordinance? Yes No
- Other

5. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of greater than (>) 10,000? **NOTE:** The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS..... Yes No

6. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 3000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of less than (<) 10,0000? **NOTE:** The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS..... Yes No

For additional Retail Liquor Store only.

a. Was your Retail Liquor Store License issued on or before January 1, 2016?.... Yes No

b. Are you a Colorado resident?..... Yes No

7. Has a liquor or beer license ever been issued to the applicant (including any of the partners, if a partnership; members or manager if a Limited Liability Company; or officers, stockholders or directors if a corporation)? If yes, identify the name of the business and list any current financial interest in said business including any loans to or from a licensee..... Yes No

8. Does the applicant, as listed on line 2 of this application, **have legal possession of the premises by ownership**, lease or other arrangement?..... Yes No

Ownership Lease Other (Explain in detail)

a. If leased, list name of landlord and tenant, and date of expiration, **exactly** as they appear on the lease:

Landlord	Tenant	Expires
----------	--------	---------

b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question on page 9..... Yes No

c. Attach a diagram that designates the area to be licensed in black bold outline (including dimensions) which shows the bars, brewery, walls, partitions, entrances, exits and what each room shall be utilized for in this business. This diagram should be no larger than 8½" X 11".

9. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies) will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money from this business? Attach a separate sheet if necessary.

Last Name	First Name	
Date of Birth (MM/DD/YY)	FEIN or SSN Number	Interest/Percentage
Last Name	First Name	
Date of Birth (MM/DD/YY)	FEIN or SSN Number	Interest/Percentage
Last Name	First Name	
Date of Birth (MM/DD/YY)	FEIN or SSN Number	Interest/Percentage

Attach copies of all notes and security instruments and any written agreement or details of any oral agreement, by which any person (including partnerships, corporations, limited liability companies, etc.) will share in the profit or gross proceeds of this establishment, and any agreement relating to the business which is contingent or conditional in any way by volume, profit, sales, giving of advice or consultation.

10. Optional Premises or Hotel and Restaurant Licenses with Optional Premises: Has a local ordinance or resolution authorizing optional premises been adopted?..... Yes No

Number of additional Optional Premise areas requested. (See license fee chart)

For the addition of a Sidewalk Service Area per Regulation 47-302(A)(4), include a diagram of the service area and documentation received from the local governing body authorizing use of the sidewalk. Documentation may include but is not limited to a statement of use, permit, easement, or other legal permissions.

11. Liquor Licensed Drugstore (LLDS) applicants, answer the following:

a. Is there a pharmacy, licensed by the Colorado Board of Pharmacy, located within the applicant's L L D S premise?..... Yes No

If "yes" a copy of license must be attached.

12. Club Liquor License applicants answer the following: Attach a copy of applicable documentation

- a. Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain?..... Yes No
- b. Is the applicant organization a regularly chartered branch, lodge or chapter of a national organization which is operated solely for the object of a patriotic or fraternal organization or society, but not for pecuniary gain?..... Yes No
- c. How long has the club been incorporated?.....
- d. Has applicant occupied an establishment for three years (three years required) that was operated solely for the reasons stated above?..... Yes No

13. Brew-Pub, Distillery Pub or Vintner's Restaurant applicants answer the following:

- a. Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached)..... Yes No

14. Campus Liquor Complex applicants answer the following:

- a. Is the applicant an institution of higher education?..... Yes No
- b. Is the applicant a person who contracts with the institution of higher education to provide food services?..... Yes No

If "yes" please provide a copy of the contract with the institution of higher education to provide food services.

15. For all on-premises applicants.

- a. For all Liquor Licensed Drugstores (LLDS) the Permitted Manager must also submit an Manager Permit Application - DR 8000 and fingerprints.

Last Name of Manager

First Name of Manager

- 16. Does this manager act as the manager of, or have a financial interest in, any other liquor licensed establishment in the State of Colorado? If yes, provide name, type of license and account number.....**

Yes No

Name

Type of License

Account Number

17. Related Facility - Campus Liquor Complex applicants answer the following:

- a.** Is the related facility located within the boundaries of the Campus Liquor Complex?..... Yes No

If yes, please provide a map of the geographical location within the Campus Liquor Complex.

If no, this license type is not available for issues outside the geographical location of the Campus Liquor Complex.

- b.** Designated Manager for Related Facility - Campus Liquor Complex

Last Name of Manager

First Name of Manager

18. Entertainment Facility License

- If Applicant is applying for an Entertainment Facility License, you affirm that your business model and aligns with the statutory privileges and requirements:..... Yes No

Pursuant to 44-3-103(15.5) C.R.S., an Entertainment Facility means an establishment in which the primary business is to provide the public with sports or entertainment activities within its licensed premises; and that, incidental to its primary business, sells and serves alcohol beverages at retail for consumption on the licensed premises; and has sandwiches and light snacks available for consumption on the licensed premises.

- If Applicant is applying for a Lodging Facility License, you affirm that your business model and aligns with the statutory privileges and requirements:..... Yes No

Pursuant to 44-3-103(29) C.R.S., a Lodging Facility means an establishment in which the primary business is to provide the public with sleeping rooms and meeting facilities; and that sells and serves alcohol beverages at retail for consumption on the licensed premises; and has sandwiches and light snacks available for consumption on the licensed premises.

19. Tax Information.

- a.** Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant, been found in final order of a tax agency to be delinquent in the payment of any state or local taxes, penalties, or interest related to a business?..... Yes No

- b.** Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant failed to pay any fees or surcharges imposed pursuant to section 44-3-503, C.R.S.?..... Yes No

If applicant is a corporation, partnership, association or limited liability company, applicant must list all **Officers, Directors, General Partners, and Managing Members**. In addition, applicant must list any stockholders, partners, or members with **ownership of 10% or more in the applicant**. **All persons listed below** must also attach form DR 8404-I (Individual History Record), and make an appointment with an approved State Vendor through their website. See application checklist, Section IV, for details.

Name			Date of Birth (MM/DD/YY)	
Street Address				
City	State	ZIP Code	Position	% Owned
Name			Date of Birth (MM/DD/YY)	
Street Address				
City	State	ZIP Code	Position	% Owned
Name			Date of Birth (MM/DD/YY)	
Street Address				
City	State	ZIP Code	Position	% Owned
Name			Date of Birth (MM/DD/YY)	
Street Address				
City	State	ZIP Code	Position	% Owned
Name			Date of Birth (MM/DD/YY)	
Street Address				
City	State	ZIP Code	Position	% Owned
Name			Date of Birth (MM/DD/YY)	
Street Address				
City	State	ZIP Code	Position	% Owned

- ** If applicant is owned 100% by a parent company, please list the designated principal officer on above.
- ** Corporations - the President, Vice-President, Secretary and Treasurer must be accounted for above (Include ownership percentage if applicable)
- ** If total ownership percentage disclosed here does not total 100%, applicant must check this box:

Applicant affirms that no individual other than these disclosed herein owns 10% or more of the applicant and does not have financial interest in a prohibited liquor license pursuant to Article 3 or 5, C.R.S.

I would like to apply for a Two-Year Renewal..... Yes No

Oath Of Applicant

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Colorado Liquor or Beer and Wine Code which affect my license.

Printed Name	Title
Authorized Signature	Date (MM/DD/YY)
<div></div>	

Report and Approval of Local Licensing Authority (City/County)

Date application filed with local authority Date of local authority hearing (for new license applicants; cannot be less than 30 days from date of application)

For Transfer Applications Only - Is the license being transferred valid?..... Yes No

The Local Licensing Authority Hereby Affirms that each person required to file DR 8404-I (Individual History Record) or a DR 8000 (Manager Permit) has been:

Fingerprinted

Subject to background investigation, including NCIC/CCIC check for outstanding warrants

That the local authority has conducted, or intends to conduct, an inspection of the proposed premises to ensure that the applicant is in compliance with and aware of, liquor code provisions affecting their class of license

(Check One)

Date of inspection or anticipated date

Will conduct inspection upon approval of state licensing authority

Is the Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1,500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of > 10,000?..... Yes No

Is the Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 3,000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of < 10,000?..... Yes No

NOTE: The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS.

Does the Liquor-Licensed Drugstore (LLDS) have at least twenty percent (20%) of the applicant's gross annual income derived from the sale of food, during the prior twelve (12) month period?..... Yes No

The foregoing application has been examined; and the premises, business to be conducted, and character of the applicant are satisfactory. We do report that such license, if granted, will meet the reasonable requirements of the neighborhood and the desires of the adult inhabitants, and will comply with the provisions of Title 44, Article 4 or 3, C.R.S., and Liquor Rules. **Therefore, this application is approved.**

Report and Approval of Local Licensing Authority (Continued)

Local Licensing Authority approves the Temporary Permit..... Yes No

Approval Date of the Temporary Permit

Expiration Date of the Temporary Permit

*If the temporary permit expires or an extension is required, the state liquor licensing authority should be notified of the status of the temporary permit.

**If the temporary permit information is not filled out for the transfer of ownership, the Transfer Application will not be accepted and processed.

Local Licensing Authority Approves this license for a two-year renewal..... Yes No

If "No", please cite the law, regulation, local ordinance or resolution that gives the local licensing authority the ability to deny the applicant and grounds for denial. Also, please provide any and all investigative reports, and administrative or criminal action that relate or justify this denial.

Proof of Violation

Local Licensing Authority for

Telephone Number

Town, City

County

Printed Name

Title

Signature

Date (MM/DD/YY)

Printed Name

Title

Signature

Date (MM/DD/YY)

Tax Check Authorization, Waiver, and Request to Release Information

I,

am signing this Tax Check Authorization, Waiver and Request to Release Information (hereinafter

“Waiver”) on behalf of

(the “Applicant/Licensee”)

to permit the Colorado Department of Revenue and any other state or local taxing authority to release information and documentation that may otherwise be confidential, as provided below. If I am signing this Waiver for someone other than myself, including on behalf of a business entity, I certify that I have the authority to execute this Waiver on behalf of the Applicant/Licensee.

The Executive Director of the Colorado Department of Revenue is the State Licensing Authority, and oversees the Colorado Liquor Enforcement Division as his or her agents, clerks, and employees. The information and documentation obtained pursuant to this Waiver may be used in connection with the Applicant/Licensee’s liquor license application and ongoing licensure by the state and local licensing authorities. The Colorado Liquor Code, section 44-3-101. et seq. (“Liquor Code”), and the Colorado Liquor Rules, 1 CCR 203-2 (“Liquor Rules”), require compliance with certain tax obligations, and set forth the investigative, disciplinary and licensure actions the state and local licensing authorities may take for violations of the Liquor Code and Liquor Rules, including failure to meet tax reporting and payment obligations.

The Waiver is made pursuant to section 39-21-113(4), C.R.S., and any other law, regulation, resolution or ordinance concerning the confidentiality of tax information, or any document, report or return filed in connection with state or local taxes. This Waiver shall be valid until the expiration or revocation of a license, or until both the state and local licensing authorities take final action to approve or deny any application(s) for the renewal of the license, whichever is later. Applicant/Licensee agrees to execute a new waiver for each subsequent licensing period in connection with the renewal of any license, if requested.

By signing below, Applicant/Licensee requests that the Colorado Department of Revenue and any other state or local taxing authority or agency in the possession of tax documents or information, release information and documentation to the Colorado Liquor Enforcement Division, and is duly authorized employees, to act as the Applicant’s/Licensee’s duly authorized representative under section 39-21-113(4), C.R.S., solely to allow the state and local licensing authorities, and their duly authorized employees, to investigate compliance with the Liquor Code and Liquor Rules. Applicant/Licensee authorizes the state and local licensing authorities, their duly authorized employees, and their legal representatives, to use the information and documentation obtained using this Waiver in any administrative or judicial action regarding the application or license.

Name (Individual/Business)

Social Security Number/Tax Identification Number

Home Phone Number

Business/Work Phone Number

Street Address

City

State ZIP Code

Printed name of person signing on behalf of the Applicant/Licensee

Applicant/Licensee's Signature (Signature authorizing the disclosure of confidential tax information) Date Signed

--

Privacy Act Statement

Providing your Social Security Number is voluntary and no right, benefit or privilege provided by law will be denied as a result of refusal to disclose it. § 7 of Privacy Act, 5 USCS § 552a (note).

Individual History Record

To be completed by the following persons, as applicable: sole proprietors; general partners regardless of percentage ownership, and limited partners owning 10% or more of the partnership; all principal officers of a corporation, all directors of a corporation, and any stockholder of a corporation owning 10% or more of the outstanding stock; managing members or officers of a limited liability company, and members owning 10% or more of the company; and any intended registered manager of Hotel and Restaurant, Tavern, Lodging Facility, and Entertainment Facility class of retail license

Notice: This individual history record requires information that is necessary for the licensing investigation or inquiry. All questions must be answered in their entirety or the license application may be delayed or denied. If a question is not applicable, please indicate so by "N/A". **Any deliberate misrepresentation or material omission may jeopardize the license application.** (Please attach a separate sheet if necessary to enable you to answer questions completely)

Name of Business

Home Phone Number

Cellular Number

Your Full Name (last, first, middle)

List any other names you have used

Mailing address (if different from residence)

Email Address

1. List current residence address. Include any previous addresses within the last five years. (Attach separate sheet if necessary)

Current Street and Number

Current City, State, ZIP

From:

To:

Previous Street and Number

Previous City, State, ZIP

From:

To:

Individual History Record (Continued)

- 2.** List all employment within the last five years. Include any self-employment. (Attach separate sheet if necessary)

Name of Employer or Business

Address (Street, Number, City, State, ZIP)

Position Held

From:

To:

Name of Employer or Business

Address (Street, Number, City, State, ZIP)

Position Held

From:

To:

Name of Employer or Business

Address (Street, Number, City, State, ZIP)

Position Held

From:

To:

- 3.** List the name(s) of relatives working in or holding a financial interest in the Colorado alcohol beverage industry.

Name of Relative

Relationship to You:

Position Held

Name of Licensee

Name of Relative

Relationship to You:

Position Held

Name of Licensee

Individual History Record (Continued)

Name of Relative

Relationship to You:

Position Held

Name of Licensee

Name of Relative

Relationship to You:

Position Held

Name of Licensee

4. Have you ever applied for, held, or had an interest in a Colorado Liquor or Beer License, or loaned money, furniture, fixtures, equipment or inventory to any licensee? Yes No
(If yes, answer in detail.)
5. Have you ever received a violation notice, suspension, or revocation for a liquor law violation, or have you applied for or been denied a liquor or beer license anywhere in the United States?..... Yes No
(If yes, answer in detail.)
6. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?..... Yes No
(If yes, answer in detail.)
7. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence?..... Yes No
(If yes, answer in detail.)

Individual History Record (Continued)

8. Have you ever had any professional license suspended, revoked, or denied?..... Yes No
(If yes, answer in detail.)

Personal and Financial Information

Unless otherwise provided by law, the personal information required in this section will be treated as confidential. The personal information required in this section is solely for identification purposes.

Date of Birth	Social Security Number		Place of Birth	
U.S. Citizen	Yes	No	If Naturalized, state where	When
Name of District Court	Naturalization Certificate Number		Date of Certification	
If an Alien, Give Alien's Registration Card Number		Permanent Residence Card Number		
Height	Weight	Hair Color	Eye Color	Gender
Do you have a current Driver's License/ID? If so, give number and state.				Yes No
Driver's License Number		Driver's License State		

Financial Information

9. Total purchase price or investment being made by the applying entity, corporation, partnership, limited liability company, other.....
10. List the total amount of the **personal** investment, made by the person listed on page 1 in this business including any notes, loans, cash, services or equipment, operating capital, stock purchases or fees paid.....

NOTE: If corporate investment only, please skip to and complete question 12

NOTE: Question 10 should reflect the total of questions 11 and 13

Personal and Financial Information (Continued)

11. Provide details of the personal investment described in question 10. You must account for all of the sources of this investment. (Attach a separate sheet if needed)

Type: Cash, Services or Equipment	Account Type
-----------------------------------	--------------

Bank Name	Amount
-----------	--------

Type: Cash, Services or Equipment	Account Type
-----------------------------------	--------------

Bank Name	Amount
-----------	--------

Type: Cash, Services or Equipment	Account Type
-----------------------------------	--------------

Bank Name	Amount
-----------	--------

Type: Cash, Services or Equipment	Account Type
-----------------------------------	--------------

Bank Name	Amount
-----------	--------

12. Provide details of the corporate investment described in question 9. You must account for all of the sources of this investment. (Attach a separate sheet if needed)

Type: Cash, Services or Equipment	Loans	Account Type
-----------------------------------	-------	--------------

Bank Name	Amount
-----------	--------

Type: Cash, Services or Equipment	Loans	Account Type
-----------------------------------	-------	--------------

Bank Name	Amount
-----------	--------

Type: Cash, Services or Equipment	Loans	Account Type
-----------------------------------	-------	--------------

Bank Name	Amount
-----------	--------

13. Loan Information (Attach copies of all notes or loans)

Name of Lender	Address
----------------	---------

Term	Security	Amount
------	----------	--------

Personal and Financial Information (Continued)

Name of Lender	Address
----------------	---------

Term	Security	Amount
------	----------	--------

Name of Lender	Address
----------------	---------

Term	Security	Amount
------	----------	--------

Name of Lender	Address
----------------	---------

Term	Security	Amount
------	----------	--------

Oath of Applicant

I declare under penalty of perjury that this application and all attachments are true, correct, and complete to the best of my knowledge.

Electronic signature is not accepted, physical signature is required.

Print Signature

Title	Date (MM/DD/YY)
-------	-----------------

Wholesaler Affidavit of Compliance

Section 44-3-303(1)(d), C.R.S.

Wholesaler Licensee Name (If an LLC; partnership; corporation or name of corporation)

Trade Name of Establishment / Doing Business As (DBA)

License Number

Phone Number

Email Address

Physical Address

City

State ZIP Code

Transferor Retailer Licensee Name

Trade Name of Establishment / Doing Business As (D B A)

License Number

Phone Number

Physical Address

City

State ZIP Code

The above wholesaler affirms that all alcohol beverages delivered to the above transferor retailer are:

Paid in Full (only for the purposes of complying with section 44-3-303(1)(d), C.R.S.)

Note: If Paid in full is selected, the wholesaler may no longer extend credit to the transferor until the local and state licensing authorities have approved the transfer of the liquor license.

Not Paid in Full

Wholesaler

Printed Name

Title

Signature

Date (MM/DD/YY)