AGENDA ITEM or FINAL CONTRACT REVIEW SUBMITTAL FORM

Agenda Item: Public Hearing; Colorado Liquor Retail License App

Action Requested: Motion

Parties to the Agreement:

Term Begins: **Term Ends:** **Grant Contract #:**

Summary:

Please see the attached application from Irwin Backcountry Guides, LLC (dba Taylor River Lodge). The public hearing has been noticed for 9:05 am on July 7th.

Fiscal Impact: N/A

Submitted by: Katherine Haase for Kathy Simillion **Submitter's Email Address:** ksimillion@gunnisoncounty.org

Finance Review: ○ Required ◉ Not Required

Comments:

Reviewed by: Discharge Date:

County Attorney Review: ◉ Required ○ Not Required

Comments:
ok db 5/27/15

Reveiwed by: Discharge Date: 5/30/2015 Certificate of Insurance Required Yes ○ No ◉

County Manager Review:

Comments:

Reveiwed by: GUNCOUNTY1\mbirnie Discharge Date: 6/2/2015

○ Consent Agenda ◉ Regular Agenda ○ Worksession Time Allotted: 10

Agenda Date: 7/7/2015

Revised April 2015

DR 8404 (12/30/14)
COLORADO DEPARTMENT OF REVENUE
Liquor Enforcement Division
(303) 205-2300

Colorado Liquor Retail License Application

RECEIVED 4-14-15 KB

☐ **New License** ☑ **New-Concurrent** ☐ **Transfer of Ownership**

- **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:** *www.colorado.gov/enforcement/liquor*
- **Local License Fee $**_____

1. Applicant is applying as a/an

☐ Corporation
☐ Partnership (includes Limited Liability and Husband and Wife Partnerships)
☐ Individual
☑ Limited Liability Company
☐ Association or Other

2. Applicant If an LLC, name of LLC; if partnership, at least 2 partner's names; if corporation, name of corporation		FEIN Number
Irwin Backcountry Guides LLC		30-0459512
2a. Trade Name of Establishment (DBA)	State Sales Tax Number	Business Telephone
Taylor River Lodge	30178000-0004	(970)349-7761

3. Address of Premises (specify exact location of premises, include suite/unit numbers)
10931 County Road 742

City	County	State	ZIP Code
Taylor River Canyon	Gunnison	CO	81210
4. Mailing Address (Number and Street)	City or Town	State	ZIP Code
PO Box 1807	Crested Butte	CO	81224

5. Email Address
kyra@grassycreek.nl

6. 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
N/A			

Section A	**Nonrefundable Application Fees**
☐ Application Fee for New License	$ 600.00
☑ Application Fee for New License w/Concurrent Review	$ 700.00
☐ Application Fee for Transfer	$ 600.00

Section B	**Liquor License Fees**
☐ Add Optional Premises to H & R	$100.00 X _____ Total _____
☐ Add Related Facility to Resort Complex	$ 75.00 X _____ Total _____
☐ 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
☐ Club License (City)	$308.75
☐ Club License (County)	$308.75
☐ Hotel and Restaurant License (City	$500.00
☑ Hotel and Restaurant License (County)	$500.00
☐ Hotel and Restaurant License w/one opt premises (City)	$600.00
☐ Hotel and Restaurant License w/one opt premises(County)	$600.00

Section B (Cont.)	**Liquor License Fees**
☐ Liquor Licensed Drugstore (City)	$227.50
☐ Liquor Licensed Drugstore (County)	$312.50
☑ Manager Registration - H & R	$ 75.00
☐ Manager Registration - Tavern	$ 75.00
☐ Master File Location Fee	$ 25.00 X_____ Total _____
☐ Master File Background	$250.00 X_____ Total _____
☐ 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
☐ Retail Gaming Tavern License (City)	$500.00
☐ Retail Gaming Tavern License (County)	$500.00
☐ Retail Liquor Store License (City)	$227.50
☐ Retail Liquor Store License (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: *www.colorado.gov/enforcement/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: *www.colorado.gov/enforcement/liquor* **for more information**

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

I. Applicant information

- ☐ A. Applicant/Licensee identified
- ☐ B. State sales tax license number listed or applied for at time of application
- ☐ C. License type or other transaction identified
- ☐ D. Return originals to local authority
- ☐ E. Additional information may be required by the local licensing authority

II. Diagram of the premises

- ☐ A. No larger than 8 1/2" X 11"
- ☐ B. Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.)
- ☐ C. Separate diagram for each floor (if multiple levels)
- ☐ D. Kitchen - identified if Hotel and Restaurant
- ☐ E. Bold/Outlined Licensed Premises

III. Proof of property possession (One Year Needed)

- ☐ A. Deed in name of the Applicant (or) (matching question #2) date stamped / filed with County Clerk
- ☐ B. Lease in the name of the Applicant (or) (matching question #2)
- ☐ C. Lease Assignment in the name of the Applicant with proper consent from the Landlord and acceptance by the Applicant
- ☐ D. Other Agreement if not deed or lease. (matching question #2) (Attach prior lease to show right to assumption)

IV. Background information and financial documents

- ☐ A. Individual History Records(s) (Form DR 8404-I)
- ☐ B. Fingerprints taken and submitted to local authority (State Authority for Master File applicants)
- ☐ C. Purchase agreement, stock transfer agreement, and or authorization to transfer license
- ☐ D. List of all notes and loans (Copies to also be attached)

V. Sole proprietor / husband and wife partnership

- ☐ A. Form DR4679
- ☐ B. Copy of State issued Driver's License or Colorado Identification Card for each applicant

VI. Corporate applicant information (if applicable)

- ☐ A. Certificate of Incorporation dated stamped by the Secretary of State
- ☐ B. Certificate of Good Standing
- ☐ C. Certificate of Authorization if foreign corporation
- ☐ D. List of officers, directors and stockholders of Applying Corporation (if wholly owned, designate a minimum of one person as Principal Officer of Parent)

VII. Partnership applicant information (if applicable)

- ☐ A. Partnership Agreement (general or limited). Not needed if husband and wife
- ☐ B. Certificate of Good Standing (If formed after 2009)

VIII. Limited Liability Company applicant information (if applicable)

- ☐ A. Copy of articles of organization (date stamped by Colorado Secretary of State's Office)
- ☐ B. Certificate of Good Standing if organized more than two years
- ☐ C. Copy of operating agreement
- ☐ D. Certificate of Authority if foreign company

IX. Manager registration for hotel and restaurant, tavern licenses when included with this application

- ☐ A. $75.00 fee
- ☐ B. Individual History Record (DR 8404-I)
- ☐ C. If owner is managing, no fee required

	Yes	No
7. Is 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) or manager under the age of twenty-one years?	☐	☑
8. Has 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) or manager ever (in Colorado or any other state):		
(a) Been denied an alcohol beverage license?	☐	☑
(b) Had an alcohol beverage license suspended or revoked?	☐	☑
(c) Had interest in another entity that had an alcohol beverage license suspended or revoked?	☐	☑
If you answered yes to 8a, b or c, explain in detail on a separate sheet.		
9. 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? If "yes", explain in detail.	☐	☑
10. 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?	☐	☑
or		
Waiver by local ordinance?	☐	☐
Other:		
11. 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. Please see Attachment A.	☑	☐
12. Does the Applicant, as listed on line 2 of this application, have legal possession of the premises by virtue of ownership, lease or other arrangement?	☑	☐

☐ 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
Taylor River Canyon, LLC	Irwin Backcountry Guides LLC	05/31/2019

b. Is a percentage of alcohol sales included as compensation to the landlord? If yes complete question 13.	☐	☑

c. Attach a diagram and outline or designate the area to be licensed (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 8 1/2" X 11".

13. 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	FEIN or SSN	Interest/Percentage
None				
Last Name	First Name	Date of Birth	FEIN or SSN	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.

14. Optional Premises or Hotel and Restaurant Licenses with Optional Premises: Has a local ordinance or resolution authorizing optional premises been adopted?	N/A	☐	☐
Number of additional Optional Premise areas requested. (See license fee chart)			
15. Liquor Licensed Drug Store applicants, answer the following: (a) Does the applicant for a Liquor Licensed Drug Store have a license issued by the Colorado Board of Pharmacy? If "yes" a copy of license must be attached.	N/A	☐	☐
16. Club Liquor License applicants answer the following: Attach a copy of applicable documentation	N/A		
(a) Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain?		☐	☐
(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?		☐	☐
(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?		☐	☐
17. Brew-Pub License or Vintner Restaurant Applicants answer the following: (a) Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached)	N/A	☐	☐

18a. For all on-premises applicants.
(If this is an application for a Hotel, Restaurant or Tavern License, the manager must also submit an individual History Record - DR 8404-I)

Last Name of Manager	First Name of Manager	Date of Birth
Featherman IV	John Albert	9/17/72

18b. Does this manager acts 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.	☐	☑

Type of License	Account Number

19. Tax Distraint Information. Does the applicant or any other person listed on this application and including its partners, officers, directors, stockholders, members (LLC) or managing members (LLC) and any other persons with a 10% or greater financial interest in the applicant currently have an outstanding tax distraint issued to them by the Colorado Department of Revenue?	☐	☑

If yes, provide an explanation and include copies of any payment agreements.

20. **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% of more in the applicant. All persons listed below must also attach form DR8404-I (Individual History Record), and submit fingerprint cards to their local licensing authority.

Name	Home Address, City & State	DOB	Position	%Owned
SR Lodge Management LLC	221 N. Hogan St, #403, Jacksonville, FL 32202	N/A	Member	100%
Alan Pike	7999 Barrancas Ave, Bokeelia, FL 33922	3/26/44	Manager	0%

** Limited Liability Companies and Partnerships - 100% of ownership must be accounted for on question #20
** Corporations - The President, Vice-President, Secretary and Treasurer must be accounted for on question #20 (Include ownership percentage if applicable)

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 Code which affect my license.

Authorized Signature	Printed Name and Title	Date
[signature]	Alan Pike, Manager	4-8-2015

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 12-47-311 (1) C.R.S.)

The Local Licensing Authority Hereby Affirms that each person required to file DR 8404-I (Individual History Record) has:

☒ Been fingerprinted

☐ Been 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 once completed inspection will be completed

☐ Will conduct inspection upon approval of state licensing authority

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 12, Article 46 or 47, C.R.S.
Therefore, this application is approved.

Local Licensing Authority for	Telephone Number	☐ Town, City ☒ County	
Gunnison County	(970) 641-7927	Gunnison	
Signature	**Print**	**Title**	**Date**
Kathy Simillion	Kathy Simillion	County Clerk	4/16/15
Signature (attest)	**Print**	**Title**	**Date**
Diane L. Folowell	Diane L. Folowell	Chief Deputy Clerk	4/16/15