AGENDA ITEM or FINAL CONTRACT REVIEW SUBMITTAL FORM

Agenda Item: Kebler Corners Liquors; Modification of Premises

Action Requested: Board of County Commissioners' Signature

Parties to the Agreement: BOCC & Kebler Corners Liquors

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

Summary:

Kebler Corners Liquors, modification of premises. Approved by the Colorado of Department of Revenue Liquors Licensing on April 4-16-19

Fiscal Impact:

Submitted by: Kathy Simillion, County Clerk **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 5/3/19

Reveiwed by: GUNCOUNTY1\dBaumgarten Discharge Date: 5/3/2019 Certificate of Insurance Required

Yes ○ No ◉

County Manager Review:

Comments:

Reveiwed by: GUNCOUNTY1\mbirnie Discharge Date: 5/3/2019

◉ Consent Agenda ○ Regular Agenda ○ Worksession Time Allotted: 0

Agenda Date: 5/7/2019

Revised April 2015

March 28th 2019

Dear Sir,

Per the email below and our telephone conversation I have included a completed form DR 8442 and a diagram showing the extended area to be licensed which will allow us to use a single desk for store & liquor sales.

As mentioned nothing else will change the liquor store will still be a separate entity legally with a separate point of sale system and a separate entry and exit door.

Thank you in advance for your help with this.

Paul St Ruth
Owner

Yes Sir,

DR 8442 for the modification of
premises. https://www.colorado.gov/pacific/sites/default/files/DR%208442_e_wo_0.pdf

Thank You,

Robert W. Darrow
Agent In Charge, Licensing and Complex Investigations
Liquor Enforcement Division

COLORADO
Department of Revenue

1697 Cole Blvd, Suite 200, Lakewood, CO 80401
office: 303-866-2410 | fax: 303-205-2341
email: robert.darrow@state.co.us
www.colorado.gov/enforcement/liquor

DR 8442 (09/27/18)
COLORADO DEPARTMENT OF REVENUE
Liquor Enforcement Division
(303)-205-2300

FOR DEPARTMENT USE ONLY

received
4-1-19

Permit Application and Report of Changes

Current License Number 03-10559
All Answers Must Be Printed in Black Ink or Typewritten
Local License Fee $ _____

1. Applicant is a

☐ Corporation ☐ Individual
☐ Partnership ☒ Limited Liability Company

Present License Number: 03-10559

2. Name of Licensee: Kebler Corner Liquors LLC

3. Trade Name: Kebler Corner Liquors

4. Location Address: 30682 County Road 12

City: Somerset | County: Gunnison | ZIP: 81434

SELECT THE APPROPRIATE SECTION BELOW AND PROCEED TO THE INSTRUCTIONS ON PAGE 2.

Section A – Manager reg/change

• License Account No. _____

☐ Manager's Registration (Hotel & Restr.) $75.00

☐ Manager's Registration (Tavern) $75.00

☐ Manager's Registration (Lodging & Entertainment) $75.00

☐ Change of Manager (Other Licenses pursuant to section 44-3-301(8), C.R.S.) NO FEE

Section B – Duplicate License

• Liquor License No. _____

☐ Duplicate License $50.00

Section C

☐ Retail Warehouse Storage Permit (ea) $100.00

☐ Wholesale Branch House Permit (ea) 100.00

☐ Change Corp. or Trade Name Permit (ea) 50.00

☐ Change Location Permit (ea) 150.00

☒ Change, Alter or Modify Premises $150.00 x 1
Total Fee $150.00

☐ Addition of Optional Premises to Existing H/R $100.00 x _____
Total Fee _____

☐ Addition of Related Facility to an Existing Resort or Campus Liquor Complex $160.00 x _____ Total Fee _____

☐ Campus Liquor Complex Designation No Fee

Do Not Write In This Space – For Department of Revenue Use Only

Date License Issued	License Account Number	Period

The State may convert your check to a one time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.

TOTAL AMOUNT DUE $ .00

Storage Permit

5. Retail Warehouse Storage Permit or a Wholesalers Branch House Permit

☐ ***Retail Warehouse Permit for:***

☐ On–Premises Licensee (Taverns, Restaurants etc.)

☐ Off–Premises Licensee (Liquor stores)

☐ **Wholesalers Branch House Permit**

Address of storage premise: _____

City _____, County _____, Zip _____

Attach a deed/ lease or rental agreement for the storage premises.
Attach a detailed diagram of the storage premises.

Change Trade Name or Corporate Name

6. Change of Trade Name or Corporation Name

☐ Change of Trade name / DBA only

☐ Corporate Name Change (Attach the following supporting documents)

1. Certificate of Amendment filed with the Secretary of State, or
2. Statement of Change filed with the Secretary of State, and
3. Minutes of Corporate meeting, Limited Liability Members meeting, Partnership agreement.

Old Trade Name	New Trade Name
Old Corporate Name	New Corporate Name

Change of Location

7. Change of Location

NOTE TO RETAIL LICENSEES: An application to change location has a local application fee of $750 payable to your local licensing authority. You may only change location within the same jurisdiction as the original license that was issued. Pursuant to 44-3-311(1) C.R.S. Your application must be on file with the local authority thirty (30) days before a public hearing can be held.

Date filed with Local Authority _____ **Date of Hearing** _____

(a) Address of current premises _____

City_____County_____Zip_____

(b) Address of proposed New Premises (Attach copy of the deed or lease that establishes possession of the premises by the licensee)

Address _____

City_____County_____Zip_____

(c) New mailing address if applicable.

Address _____

City _____ County _____ State _____ Zip _____

(d) Attach detailed diagram of the premises showing where the alcohol beverages will be stored, served, possessed or consumed. Include kitchen area(s) for hotel and restaurants.

Oath of Applicant

I declare under penalty of perjury in the second degree that I have read the foregoing application and all attachments thereto, and that all information therein is true, correct, and complete to the best of my knowledge

Signature	Title	Date
	Owner	MARCH 28th 2019

Report and Approval of LOCAL Licensing Authority (CITY / COUNTY)

The foregoing application has been examined and the premises, business conducted and character of the applicant is satisfactory, and we do report that such permit, if granted, will comply with the applicable provisions of Title 44, Articles 4 and 3, C.R.S., as amended. **Therefore, This Application is Approved.**

Local Licensing Authority (City or County)	Date filed with Local Authority
Gunnison County	4-1-19

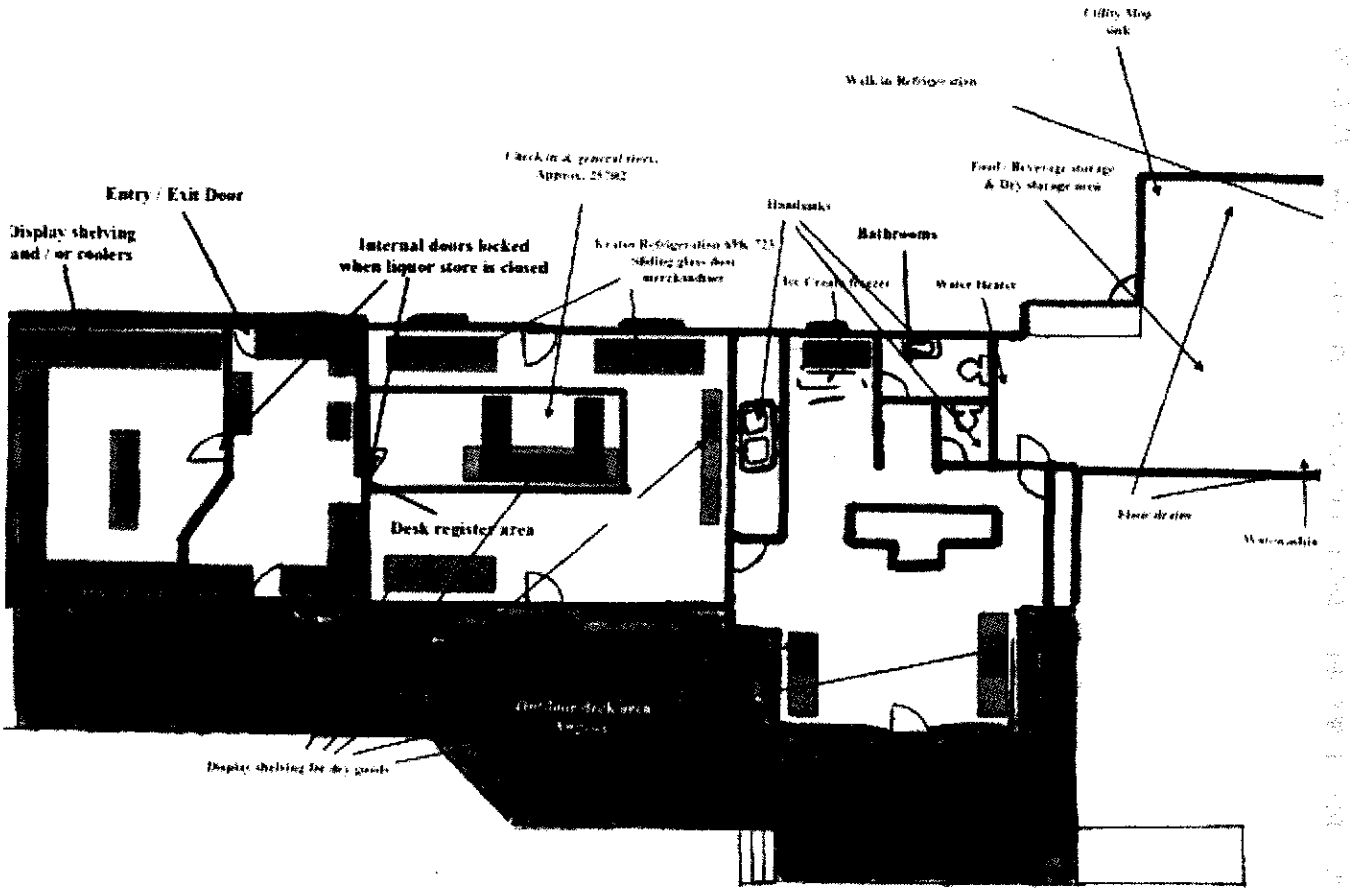
Signature	Title	Date
Kathy Semillion	County Clerk	4-1-19

Report of STATE Licensing Authority

The foregoing has been examined and complies with the filing requirements of Title 44, Article 3, C.R.S., as amended.

Signature	Title	Date

From: **Paul St Ruth** paul@outdoorhospitality.solutions
Subject: This also
Date: March 28, 2019 at 2:19 PM
To: Emily St Ruth emily@outdoorhospitality.solutions



Paul St Ruth
KEBLER CORNER
CABINS - RV - CAMPGROUND
30682 County Road 12, Somerset, CO 81434.
970.929.5029 (Office)
970.445.7610 (Cell)
www.keblercorner.com

KEBLER
CORNER