



Legal Entity Name from Question 2	Type of License
<b>Section IV — Eligibility Question</b>	
<b>All License Types</b>	
5. Is the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders of 10% or more, or directors if a corporation) or managers under the age of twenty-one years?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Has the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders of 10% or more, or directors if a corporation) or managers ever (in Colorado or any other state):	
(a) Been denied an alcohol beverage license?	<input type="checkbox"/> <input type="checkbox"/>
(b) Had an alcohol beverage license suspended or revoked?	<input type="checkbox"/> <input type="checkbox"/>
(c) Had interest in another entity that had an alcohol beverage license suspended or revoked?	<input type="checkbox"/> <input type="checkbox"/>
If you answered yes to 6a, b or c, explain in detail on a separate sheet.	
7. 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. _____	<input type="checkbox"/> <input type="checkbox"/>
8. 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?	<input type="checkbox"/> <input type="checkbox"/>
Waiver by local ordinance? <b>or</b>	<input type="checkbox"/> <input type="checkbox"/>
Other: _____	<input type="checkbox"/> <input type="checkbox"/>
<b>Liquor Stores and Liquor Licensed Drug Stores Only</b>	
9. 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? <b>NOTE:</b> 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.	<input type="checkbox"/> <input type="checkbox"/>
10. 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 (<) 10,000? <b>NOTE:</b> 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.	<input type="checkbox"/> <input type="checkbox"/>
11. (a) For additional Retail Liquor Store only. Was your Retail Liquor Store License issued on or before January 1, 2016?	<input type="checkbox"/> <input type="checkbox"/>
(b) If yes, is each member listed as an owner in Section VII a Colorado resident?	<input type="checkbox"/> <input type="checkbox"/>
12. 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 LLDS premise?	<input type="checkbox"/> <input type="checkbox"/>
<b>If "yes" a copy of license must be attached.</b>	
<b>Club Liquor License Applicants Only</b>	
13. 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?	<input type="checkbox"/> <input type="checkbox"/>
(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?	<input type="checkbox"/> <input type="checkbox"/>
(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?	<input type="checkbox"/> <input type="checkbox"/>
<b>Brew Pub, Distillery Pubs, and Vintner's Restaurant Applicants Only</b>	
14. Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached)	<input type="checkbox"/> <input type="checkbox"/>
<b>Optional Premises or Hotel and Restaurant with Optional Premises Applicants Only</b>	
15. Has a local ordinance or resolution authorizing optional premises been adopted?	<input type="checkbox"/> <input type="checkbox"/>
Number of additional Optional Premises areas requested. (See license fee chart)	_____
<b>Campus Liquor Complex Applicants Only</b>	
16. (a) Is the applicant an institution of higher education?	<input type="checkbox"/> <input type="checkbox"/>
(b) Is the applicant a person who contracts with the institution of higher education to provide food services?	<input type="checkbox"/> <input type="checkbox"/>
<b>If "yes" please provide a copy of the contract with the institution of higher education to provide food services.</b>	
17. Related Facility - Campus Liquor Complex applicants answer the following:	
(a) Is the related facility located within the boundaries of the Campus Liquor Complex?	<input type="checkbox"/> <input type="checkbox"/>
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>Section V — Premises Information</b>	
18. Does the applicant, as listed on line 2 of this application, have legal possession of the premises by ownership, lease or other arrangement?	<input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Ownership <input type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____	
(a) If leased, list name of landlord and tenant, and date of expiration, <b>exactly</b> as they appear on the lease:	
Landlord	Expires
Tenant (The tenant listed in the lease must match the entity listed in question 2)	
(b) Attach a diagram that designates the area to be licensed in black bold outline (including dimensions) which shows the bars, brewery, storage areas, 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".	

Legal Entity Name from Question 2	Type of License
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**Section VI — Financial Information**

19. 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.

20. 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.

Legal Company Name or Individual Name	Date of Birth (if individual)	FEIN or SSN	Interest/Percentage
Legal Company Name or Individual Name	Date of Birth (if individual)	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.**

**Section VII — Ownership Information**

21. Tax Distraint Information. Does the applicant or any other person listed on this application 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.

22. 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 submit fingerprint cards to the local licensing authority.

Name	Home Address, City & State	DOB	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 Title 47 or 48, C.R.S.**

**Section VIII — Manager Information**

Last Name of Manager	First Name of Manager
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23. For all on-premises applicants.  
 (a) Hotel and Restaurant, Lodging and Entertainment, Tavern License and Campus Liquor Complex, the Registered Manager must also submit an Individual History Record - DR 8404-I and fingerprints.  
 (b) For all Liquor Licensed Drugstores (LLDS) the Permitted Manager must also submit a Manager Permit Application - DR 8000 and fingerprints.

24. 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.

**Section IX — Oath of Application**

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
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Legal Entity Name from Question 2		Type of License	
<b>Section X — Report and Approval of Local Authority (City/County)</b>			
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)	
<p>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:</p> <p><input type="checkbox"/> Fingerprinted</p> <p><input type="checkbox"/> Subject to background investigation, including NCIC/CCIC check for outstanding warrants</p> <p>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</p> <p>(Check One)</p> <p><input type="checkbox"/> Date of inspection or anticipated date _____</p> <p><input type="checkbox"/> Will conduct inspection upon approval of state licensing authority</p>			
<input type="checkbox"/> 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 > 10,0000?		Yes	No
<input type="checkbox"/> 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 < 10,0000?		Yes	No
<p><b>NOTE:</b> 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.</p>			
<input type="checkbox"/> 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
<p>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., and Liquor Rules. <b>Therefore, this application is approved.</b></p>			
Local Licensing Authority for		Telephone Number	<input type="checkbox"/> Town, City <input type="checkbox"/> County
Signature	Print	Title	Date
Signature	Print	Title	Date

## Required 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](http://www.colorado.gov/enforcement/liquor) for more information

<b>Section I — Applicant Information</b>		
	Attached	Not Applicable
<ul style="list-style-type: none"> <li>• A copy of the company's Certificate of Good Standing (Certificate of Authority if foreign entity)</li> <li>• A copy of the company's Certificate of Trade Name</li> </ul>	<input type="checkbox"/>  <input type="checkbox"/>	<input type="checkbox"/>  <input type="checkbox"/>
<b>Section III — Licensing Type Selection and Fee Assessment</b>		
<ul style="list-style-type: none"> <li>• Payment made out to the local licensing authority to cover the applicable application and licensing fees</li> </ul>	<input type="checkbox"/>	
<b>Section IV — Eligibility Questions</b>		
<ul style="list-style-type: none"> <li>• Written response to questions 6a, 6b, or 6c?</li> <li>• Written response to questions 7?</li> <li>• Liquor Licensed Drug Stores Only — A copy of the applicant's Pharmacy license as required by question 12</li> <li>• Club Liquor License Applicants Only — Written documentation per question 13a, 13b, 13c, and 13d</li> <li>• Brew Pub, Distillery, and Vintner Applicant's Only — Copy of Federal Permit as required by question 14</li> <li>• Campus Liquor Complex Applicant's Only — Copy of contract for food services as required by question 16b</li> <li>• Campus Liquor Complex Applicant's Only — Copy of diagram as required by question 17</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>Section V — Premises Information</b>		
<ul style="list-style-type: none"> <li>• <b>One</b> of the following forms of proof of possession of the premises               <ul style="list-style-type: none"> <li>• Deed in name of the applicant date stamped / filed with County Clerk</li> <li>• Lease in the name of the applicant</li> <li>• Lease assignment in the name of the applicant with proper consent from the Landlord and acceptance by the Applicant</li> <li>• Other agreement if not deed or lease</li> </ul> </li> </ul> <p><b>Note</b> — the lease or deed must be in the name of the applicant as listed in Section I, Question 2</p>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Section VI — Financial Information</b>		
<ul style="list-style-type: none"> <li>• A complete list of any person or entity who currently holds any form of financial interest in or profit sharing agreement with the business. Also include any person or entity who will loan or give money, inventory, furniture or equipment to the business. Provide copies of the actual agreements, loans, notes, etc, or a written description of any verbal agreement made.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Section VII — Ownership Information</b>		
<ul style="list-style-type: none"> <li>• Copies of any payment agreements as required by question 21</li> <li>• Copies of Valid Government Issued IDs for all owners</li> <li>• If applicant is a Sole Proprietorship, Form DR 4679</li> <li>• If applicant is a corporation, Articles of Incorporation</li> <li>• If applicant is a Partnership, copy of Partnership Agreement (not required if husband and wife)</li> <li>• If applicant is a LLC, copy of Articles of Organization</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>Section VIII — Manager Information</b>		
Hotel and Restaurant, Tavern, Lodging and Entertainment, and Campus Liquor Complex Applicants ONLY <ul style="list-style-type: none"> <li>• An individual History Record Form DR 8404-I</li> <li>• If manager is an owner, no fee is required, otherwise, a \$75 manager registration fee</li> </ul>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>