DR 8403 (03/19/09)
COLORADO DEPARTMENT OF REVENUE
LIQUOR ENFORCEMENT DIVISION
1375 SHERMAN STREET
DENVER CO 80261

CLICK HERE to email a text ONLY version of this to yourself.

COLORADO FERMENTED MALT BEVERAGE (3.2% BEER) LICENSE APPLICATION

If you would like a copy of this form for your records, please print an extra copy.

☐ NEW LICENSE ☐ TRANSFER OF OWNERSHIP ☐ LICENSE RENEWAL

- ALL ANSWERS MUST BE PRINTED IN BLACK INK OR TYPEWRITTEN
- APPLICANT MUST CHECK THE APPROPRIATE BOX(ES)
- LOCAL LICENSE FEE $ _____
- APPLICANT SHOULD OBTAIN A COPY OF THE COLORADO LIQUOR AND BEER CODE (Call 303-370-2165)

DO NOT WRITE IN THIS SPACE

1. Applicant is applying as a

☐ Corporation ☐ Partnership (includes Limited Liability and Husband and Wife Partnerships)

☐ Individual ☐ Limited Liability Company ☐ Association or Other

2. Applicant(s) If an LLC, name of LLC; if partnership, at least 2 partners' names; if corporation, name of corporation		Fein Number
2a. Trade Name of Establishment (DBA)	State Sales Tax No.	Business Telephone

3. Address of Premises (specify exact location of premises)

City	County	State	ZIP Code
4. Mailing Address (Number and Street)	City or Town	State	ZIP Code

5. If the premises currently have a liquor or beer license, you MUST answer the following questions:

Present Trade Name of Establishment (DBA)	Present State License No.	Present Class of License	Present Expiration Date

LIAB	SECTION A NONREFUNDABLE APPLICATION FEES	
2300 ☐	Application Fee for New License	$ 1,025.00
2302 ☐	Application Fee for New License - w/Concurrent Review	$ 1,125.00
2310 ☐	Application Fee for Transfer	$ 1,025.00

LIAB	SECTION B 3.2% BEER LICENSE FEES	
2121 ☐	Retail 3.2% Beer On-Premises (City)	$ 96.25
2124 ☐	Retail 3.2% Beer On-Premises (County)	$ 117.50
2122 ☐	Retail 3.2% Beer Off-Premises (City)	$ 96.25
2125 ☐	Retail 3.2% Beer Off-Premises (County)	$ 117.50
2123 ☐	Retail 3.2% Beer On/Off Premises (City)	$ 96.25
2126 ☐	Retail 3.2% Beer On/Off Premises (County)	$ 117.50
2370 ☐	Master File Location Fee ..... $ 25.00 x _____	Total _____
2375 ☐	Master File Background ..... $ 250.00 x _____	Total _____

DO NOT WRITE IN THIS SPACE - FOR DEPARTMENT OF REVENUE USE ONLY

LIABILITY INFORMATION

County	City	Industry Type	License Account Number	Liability Date FROM	License Issued Through (Expiration Date) TO

State	City	County
_____-750 (999)	2180-100 (999)	2190-100 (999)

Cash Fund New License	Cash Fund Transfer License	TOTAL
2300-100 (999)	2310-100 (999)	

APPLICATION DOCUMENTS CHECKLIST AND WORKSHEET

Instructions: This check list 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.

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 (doesn't have to be to scale). Exterior areas should show control (fences, walls, etc.).
- ☐ C. Separate diagram for each floor (if multiple levels).
- ☐ D. Kitchen - identified if Hotel and Restaurant.

III. PROOF OF PROPERTY POSSESSION

- ☐ A. Deed in name of the Applicant ONLY (or)
- ☐ B. Lease in the name of the Applicant ONLY.
- ☐ C. Lease Assignment in the name of the Applicant (ONLY) with proper consent from the Landlord and acceptance by the Applicant.
- ☐ D. Other Agreement if not deed or lease.

IV. BACKGROUND INFORMATION AND FINANCIAL DOCUMENTS

- ☐ A. Individual History Record(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.

V. CORPORATE APPLICANT INFORMATION (If Applicable)

- ☐ A. Certificate of Incorporation (and/or)
- ☐ B. Certificate of Good Standing if incorporated more than 2 years ago.
- ☐ C. Certificate of Authorization if foreign corporation.
- ☐ D. List of officers, directors and stockholders of parent corporation (designate 1 person as "principal officer").

VI. PARTNERSHIP APPLICANT INFORMATION (If Applicable)

- ☐ A. Partnership Agreement (general or limited). Not needed if husband and wife.

VII. LIMITED LIABILITY COMPANY APPLICANT INFORMATION (If Applicable)

- ☐ A. Copy of articles of organization (date stamped by Colorado Secretary of State's Office).
- ☐ B. Copy of operating agreement.
- ☐ C. Certificate of Authority (if foreign company).

VIII. MANAGER REGISTRATION FOR HOTEL AND RESTAURANT, TAVERN LICENSES WHEN INCLUDED WITH THIS APPLICATION

- ☐ A. $75.00 fee.
- ☐ B. Individual History Record (DR 8404-I).

6. 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? Yes ☐ No ☐

7. 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); Yes No
(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 7a, b or c, explain in detail on a separate sheet.

8. Has a 3.2 beer license for the premises to be licensed been denied within the preceding one year? If "yes," explain in detail. Yes ☐ No ☐

9. 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 or former financial interest in said business including any loans to or from a licensee. Yes ☐ No ☐

10. 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? 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

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". (Doesn't have to be to scale)

11. 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.

Name	Date of Birth	FEIN or SSN	Interest

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.

12. Name of Manager for all on and on/off applicants. _____ Date of Birth

13. 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 ☐

14. 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? Yes ☐ No ☐
If yes, provide an explanation and include copies of any payment agreements.

15. If applicant is a corporation, partnership, association or a 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 finger print cards to their local licensing authority.

Name	Home Address, City & State	Date of Birth	Position	% Owned*

☐ * If total ownership percentage disclosed here does not total 100%, applicant must check this box
Applicant affirms that no individual, other than those disclosed herein, owns 10% or more of the applicant

Additional Documents to be submitted by type of entity

☐ **CORPORATION** ☐ Cert. of Incorp. ☐ Cert. of Good Standing (if more than 2 yrs. old) ☐ Cert. of Auth. (if a foreign corp.)
☐ **PARTNERSHIP** ☐ Partnership Agreement (General or Limited) ☐ Husband and Wife partnership (no written agreement)
☐ **LIMITED LIABILITY COMPANY** ☐ Articles of Organization ☐ Cert. of Authority (if foreign company) ☐ Operating Agrmt.
☐ **ASSOCIATION OR OTHER** Attach copy of agreements creating association or relationship between the parties

Registered Agent (if applicable)	Address for Service

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	Title	Date

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:

	Yes	No
☐ 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 _____

☐ 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
Signature	Title	Date
Signature (attest)	Title	Date

SUBMIT