Manager's Registration Application Packet

Prepared by:
Greeley City Clerk's Office
1000 10th Street
Greeley, CO 80631
970.350.9743
cheryl.aragon@greeleygov.com

MANAGER'S REGISTRATION
Document Checklist

Application:

- ❒ Original *Permit Application & Report of Changes*
- ❒ Complete Sections 1-4 on Page 1, Section 9 on Page 4, and Oath of Applicant on Page 4
- ❒ Attach appropriate fees
  - -$38.50 in certified funds, money order, or business check made payable to the Colorado Bureau of Investigations, C.B.I.;
  - -$75 made payable to the City of Greeley; and
  - -$75 made payable to the Colorado Department of Revenue
- ❒ Written Management Agreement, if applicable

Background Information:

- ❒ Individual History Record (Form DR8404-1)
- ❒ Completed fingerprint card
- ❒ Certified funds, money order, or business check made payable to the Colorado Bureau of Investigations, C.B.I., as noted above

DR 8442 (09/14/07) Page 1
COLORADO DEPARTMENT OF REVENUE
DENVER, COLORADO 80261

21

PERMIT APPLICATION & REPORT OF CHANGES

CURRENT LICENSE NUMBER _____
ALL ANSWERS MUST BE PRINTED IN BLACK INK OR TYPEWRITTEN
LOCAL LICENSE FEE $ _____
APPLICANT SHOULD OBTAIN A COLORADO LIQUOR & BEER CODE BOOK
TO ORDER CALL (303) 370-2165

DO NOT WRITE IN THIS SPACE

PRESENT LICENSE NUMBER

1. Applicant is a

☐ Corporation ☐ Individual
☐ Partnership ☐ Limited Liability Company

2. Name of Licensee

3. Trade Name

4. Location Address

City | **County** | **ZIP**

Select the appropriate section below and proceed to the instructions on page 2.

SECTION A – MANAGER REG/CHANGE

• **License Account No.** _____

1983-750 (999) ☐ Manager's Registration (Hotel & Restr.) **$75.00**

2012-750 (999) ☐ Manager's Registration (Tavern) **$75.00**

☐ Change of Manager (Other Licenses) ..... NO FEE

2315-100 (999) ☐ Concurrent Review **$100.00**

SECTION B – DUPLICATE LICENSE

• **LIQUOR LICENSE No.** _____

☐ **2270-100 (999) DUPLICATE LICENSE** ..... **$ 50.00**

SECTION C

1) ☐ **2210-100 (999)** Retail Warehouse Storage Permit (ea) ..... **$ 100.00**

2) ☐ **2200-100 (999)** Wholesale Branch House Permit (ea) **100.00**

3) ☐ **2260-100 (999)** Change Corp or Trade Name Permit (ea) **50.00**

4) ☐ **2230-100 (999)** Change Location Permit (ea) **150.00**

5) ☐ **2280-100 (999)** Change, Alter or Modify Premises

$150.00 x _____ Total Fee _____

6) ☐ **2220-100 (999)** Addition of Optional Premises to Existing H/R

$100.00 x _____ Total Fee _____

7) ☐ **1988-100 (999)** Addition of Related Facility to Resort Complex

$75.00 x _____ Total Fee _____

8) ☐ **2340-100 (999)** Bed and Breakfast Permit **50.00**

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

DATE LICENSE ISSUED	LICENSE ACCOUNT NUMBER	PERIOD

-750 (999)	-100 (999)	TOTAL

INSTRUCTION SHEET

For all sections, complete questions 1-4 located on page 1

☐ Section A

To Register or Change Managers, check the appropriate box in section A and complete question 9 on page 4. Proceed to the Oath of Applicant for signature (Please note: Hotel, Restaurant, and Tavern licensees are required to register their managers).

☐ Section B

For a Duplicate license, be sure to include the liquor license number in section B on page 1 and proceed to page 4 for Oath of Applicant signature.

☐ Section C

Check the appropriate box in section C and proceed below.

1) ***For a Retail Warehouse Storage Permit,*** go to page 3 complete question 5 (be sure to check the appropriate box). Submit the necessary information and proceed to page 4 for Oath of Applicant signature.

2) ***For a Wholesale Branch House Permit,*** go to page 3 and complete question 5 (be sure to check the appropriate box). Submit the necessary information and proceed to page 4 for Oath of Applicant signature.

3) ***To Change Trade Name or Corporation Name,*** go to page 3 and complete question 6 (be sure to check the appropriate box). Submit the necessary information and proceed to page 4 for Oath of Applicant signature.

4) ***To modify Premise,*** go to page 3 and complete question 7. Submit the necessary information and proceed to page 4 for Oath of Applicant signature.

5) ***For Optional Premises or Related Facilities*** go to page 3 and complete question 7. Submit the necessary information and proceed to page 4 for Oath of Applicant signature.

6) ***To Change Location,*** go to page 3 and complete question 8. Submit the necessary information and proceed to page 4 for Oath of Applicant signature.

7) ***For a Bed and Breakfast Permit,*** go to page 4 and complete question 10. Submit the necessary information and proceed to Oath of Applicant signature.

STORAGE PERMIT

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

☐ Retail Warehouse Permit

☐ Wholesalers Branch House Permit

Include full address of storage premises. _____

If granted, will the proposed warehouse or branch house be in compliance with local building and zoning laws? Yes ☐ No ☐

Name and title of Person in Charge of Premises _____

☐ Attach a lease/deed and a diagram of storage premises.

CHANGE DBA OR CORP. NAME

6. Change of Trade Name or Corporation name

☐ Trade/DBA Name Change only

☐ Corporate Name Change (Attach a Certificate of Amendment from Secretary of State)

Old Name	New Name

MODIFY PREMISES OR ADDITION OF OPTIONAL PREMISES OR RELATED FACILITY

7. Modification of Premises, Addition of an Optional Premises, or Addition of Related Facility

NOTE: LICENSEES MAY NOT MODIFY OR ADD TO THEIR LICENSED PREMISES UNTIL APPROVED BY STATE AND LOCAL AUTHORITIES.

(a) Describe change proposed _____

(b) **If the modification is temporary,** when will the proposed change:

Start _____ (mo/day/year) End _____ (mo/day/year)

NOTE: THE TOTAL STATE FEE FOR TEMPORARY MODIFICATION IS $300.00

(c) Will the proposed change result in the licensed premises now being located 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?
(If yes, explain in detail and describe any exemptions that apply) Yes ☐ No ☐

(d) Is the proposed change in compliance with local building and zoning laws? Yes ☐ No ☐

(e) If this modification is for an additional Hotel and Restaurant Optional Premises or Resort Complex Related Facility, has the local authority authorized by resolution or ordinance the issuance of optional premises? Yes ☐ No ☐

(f) Attach a diagram of the current licensed premises and a diagram of the proposed changes for the licensed premises.

(g) Attach any existing lease that is revised due to the modification.

CHANGE OF LOCATION

8. Change of Location

(a) Address of current premises _____

City _____ County _____ ZIP _____

(b) Address of proposed New Premises (Attach a 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 _____ ZIP _____

(d) Attach a diagram of the premises showing the area where alcohol beverages will be stored, served, possessed or consumed. Include food preparation facilities for Hotel and Restaurants.

CHANGE OF MANAGER

9. **Change of Manager** or to **Register the Manager** of a Tavern or a Hotel and Restaurant liquor license.
   (a) Change of Manager (attach Individual History DR 8404-I H/R and Tavern only)
   Former manager's name _____
   New manager's name _____
   (b) Compensation of Mgr. _____ Date of Emp. _____ Exp. Date _____
   Has manager ever managed a Liquor licensed establishment? ☐ Yes ☐ No
   Does manager have a financial interest in any other liquor licensed establishment? ☐ Yes ☐ No
   If yes, give name and location of establishment _____

BED AND BREAKFAST PERMIT

10. **Bed and Breakfast Permit**
   - Attach a copy of a deed or lease in the **exact name** of the applicant **only**, reflecting possession of the permitted area for at least the minimum duration of this permit (1 year from date of issuance).
   - Attach a diagram of the premises which accurately reflects the area where alcohol beverages will be stored, served, possessed or consumed.

   1. Applicant is a:
      ☐ Corporation ☐ Partnership
      ☐ Individual ☐ Limited Liability Company
   2. Name of Applicant _____
   3. Trade Name of Establishment *(DBA)* _____
   4. Address of Premises *(specify exact location)* _____
   5. State Sales Tax Number _____ Business Phone

Pursuant to 12-47-410, C.R.S., Applicant hereby states that it qualifies for a Bed and Breakfast Permit, in order to serve complimentary alcohol beverages, and certifies to the State Licensing Authority:

_____That it has **no more than** 20 sleeping rooms, and

_____That it provides at least **1 meal per day at no charge** other than for overnight lodging, and

_____That it **does not** sell alcohol beverages by the drink or in sealed containers, and

_____That it will not serve alcohol beverages for more than **4 hours in any one day**, as follows:

MONDAY HOURS	TUESDAY HOURS	WEDNESDAY HOURS	THURSDAY HOURS	FRIDAY HOURS	SATURDAY HOURS	SUNDAY HOURS
From: m.	From: m.	From: m.	From: m.	From: m.	From: m.	From: m.
To: m.	To: m.	To: m.	To: m.	To: m.	To: m.	To: m.

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

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 12, Articles 46 and 47, C.R.S., as amended.

THEREFORE, THIS APPLICATION IS APPROVED.

Local Licensing Authority (City or County)		**Date filed with Local Authority**
Signature	Title	Date

REPORT OF STATE LICENSING AUTHORITY

The foregoing has been examined and complies with the filing requirements of Title 12, Article 47, C.R.S., as amended.

Signature	Title	Date

Applicant Fingerprinting Procedures

Fingerprinting can be done at the Weld County North Jail Complex at 2110 O Street. *Fingerprint cards must be obtained directly from the Greeley City Clerk's Office and returned to the City Clerk's Office completed as part of your application packet.*

Take with you to the Weld County North Jail Complex:

- ✓ Cash or check in the amount of $10 per individual being printed payable to Weld County Sheriff's Office
- ✓ Valid photo identification such as a driver's license, ID card, etc.
- ✓ Fingerprint card(s), **making sure to note on your Fingerprint Card that this is being done for liquor licensing purposes**

Bring with you to the City Clerk's Office after being printed:

- ✓ Completed Fingerprint Card(s)
- ✓ Certified funds, money order, or business check in the amount of $38.50 per individual being printed, made out to the Colorado Bureau of Investigations (CBI)
- ✓ Completed Liquor Application and all attachments