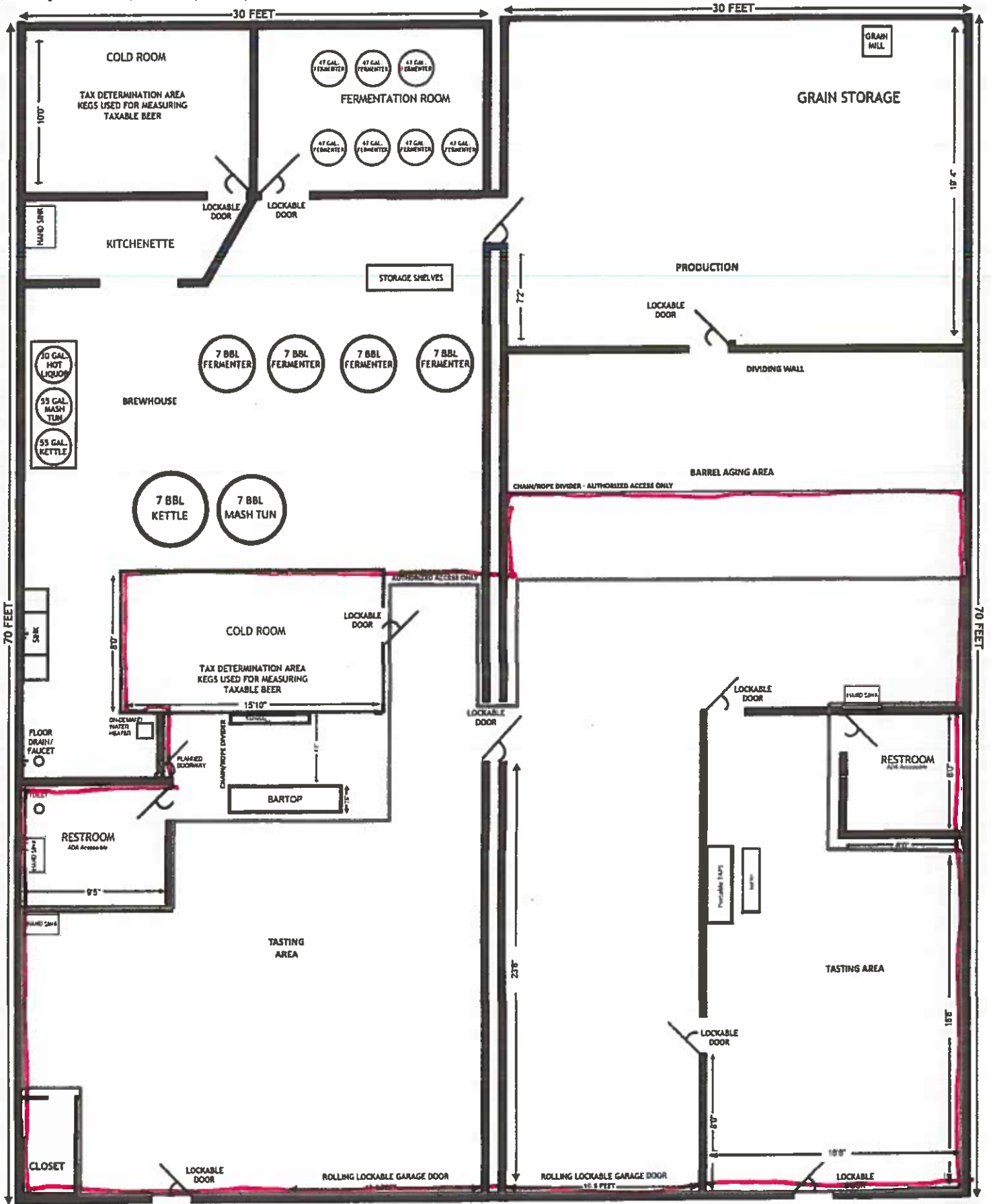


Application for Colorado Liquor Sales Room Regulation 47-428, 1 C.C.R. 203-2

<input checked="" type="checkbox"/> Malt Liquor <input type="checkbox"/> Limited Winery <input type="checkbox"/> Winery <input type="checkbox"/> Distillery		<input type="checkbox"/> Temporary (3 days or less)		<input checked="" type="checkbox"/> Permanent	
1. Name of Applicant exactly as it appears on your current Colorado Liquor License.					
Burns Family Artisan Ales, LLC					
2. Trade Name of Applicant					
Burns Family Artisan Ales					
3. State Sales Tax No.			Applicant Liquor License No.		
39634832			applied for		
4. Business Address of Applicant (Number and Street)		City	State	ZIP	
2505 W 2nd Avenue Units 12 & 13		Denver	CO	80219	
5. Mailing Address (Number and Street)		City	State	ZIP	
424 W 7th Ave		Denver	CO	80204	
6. Phone Number			7. Email Address		
248-224-2697			laura@burnsfamilyartisanales.com		
8. Sales Room Location (Full Address)			9. Dates of Events: From Date: _____ Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM		
2505 W 2nd Avenue Units 12 & 13, Denver, CO 80219			To Date: _____ Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM		
10. Rights to Premises Granted by: (attach a copy of the Premises Use Authorization letter or lease if not previously submitted)					
Master Lessor: Franken Company - Lease Attached					
11. Renting/Leasing % Basis		12. If Yes, List % and Interested Party. Use Additional Sheet if Necessary.			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
13. Alcohol will be sold (check all that apply)					
<input checked="" type="checkbox"/> For on-premises consumption (if selected, please file this application with the Local Licensing Authority and the State Licensing Authority)					
<input checked="" type="checkbox"/> For off-premises consumption					
14. The Sales Room Applicant affirms they have complied with local zoning restrictions?					
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
15. Additional Required Documents					
<input checked="" type="checkbox"/> Attach an outlined diagram of proposed premises					
<input checked="" type="checkbox"/> Attach a copy of the premises control plan describing how the premises will be controlled to ensure compliance with liquor code and rules. It must include restricting sales to minors and visibly intoxicated persons and insuring that customers cannot leave the premises with an open container of alcohol.					
<input type="checkbox"/> Attach a copy of any contracts and/or operating agreements pertaining to the sales room.					
Local Licensing Authority Name			Date Application Copy Submitted to Local Licensing Authority		
Denver Department of Excise and Licenses			05-08-18		
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, Beer Code and Liquor Rules which affects my permit.					
Applicant Signature		Title		Date	
		Managing Director		03/25/18	
Notice to Local Licensing Authority					
This application for a Sales Room will be granted to the above name applicant unless any of the below listed conditions apply. If any of these conditions apply please contact the State Licensing Authority immediately.					
<input type="checkbox"/> Issuance of this permit would impact traffic, noise, or other neighborhood concerns in a manner that is inconsistent with local regulations or ordinances.					
<input type="checkbox"/> If granted this permit would result in violations of the Colorado liquor code or the laws of the local government. (specify)					
<input type="checkbox"/> Issuance of this permit would violate local zoning laws.					
For events lasting <u>three consecutive days or less</u> , the Local Licensing Authority has ten (10) business days to submit its determination to the State Licensing Authority.					
For events lasting <u>four or more consecutive days</u> , the Local Licensing Authority has forty-five (45) days to submit its determination to the State Licensing Authority.					
Local Licensing Authorities can send the approval via mail or email to dor_led@state.co.us					
If the Local Licensing Authority does not submit a response or determination within the time specified, the State Licensing Authority shall deem that the Local Licensing Authority has determined that the proposed sales room will not impact traffic, noise, or other neighborhood concerns in a manner that is inconsistent with local regulations or ordinances or that the applicant will sufficiently mitigate any impacts identified by the Local Licensing Authority.					
Licensing Authority Signature			Local Licensing Authority Contact Name		Phone Number
<input type="checkbox"/> Object <input type="checkbox"/> Do Not Object					

If the Local Licensing Authority objects to the sales room, provide a separate page with details of the objection.

Burns Family Artisan Ales, LLC -- Taproom Space



2505 W 2ND Avenue., Unit 13
Denver, CO 80219

2505 W 2ND Avenue., Unit 12
Denver, CO 80219