



All Attachments can be obtained at the Town Administration Building, 4800 Goodman Street

**TOWN OF TIMNATH
LIQUOR LICENSING BOARD
Tuesday, August 23, 2016, at 6:00 p.m.
Timnath Administration Building,
4800 Goodman Street, Timnath, Colorado**

1. CALL TO ORDER AND ROLL CALL

Chair	Jill Grossman-Belisle
Co-Chair	Bryan Voronin
Commissioner	Bill Neal
Commissioner	Aaron Pearson
Commissioner	Paul Steinway

2. BUSINESS:

a. DISCUSSION/POSSIBLE ACTION: Town of Timnath Special Event Liquor License Permit

3. ADJOURNMENT



TOWN OF TIMNATH LIQUOR BOARD

Meeting Date: August 23, 2016	Item: Liquor License for Town of Timnath	Ordinance <input type="checkbox"/> Action <input checked="" type="checkbox"/> Discussion <input type="checkbox"/> For Information <input type="checkbox"/>
Presented by: April D. Getchius, AICP Town Manager		
EXECUTIVE SUMMARY: Issuance of a Special Event liquor license for the Town of Timnath allows for the sale of Malt, Vinous and Spirituous liquor at the Town's Taste in Timnath.		
STAFF RECOMMENDATION: Staff recommends approval of this Special Event liquor license.		
KEY POINTS/SUPPORTING INFORMATION: <ul style="list-style-type: none"> • The Taste in Timnath will be held September 24, 2016 from 9:00 a.m. to 4:00 p.m. 		
ADVANTAGES: Allows for the growth of this event.		
DISADVANTAGES: None.		
FINANCIAL IMPACT: This event was budgeted for 2016.		
RECOMMENDED MOTION: I move approval of the Town of Timnath Special Event liquor license application attached.		
ATTACHMENTS: Liquor license application.		

APPLICATION FOR A SPECIAL EVENTS PERMIT

Department Use Only

IN ORDER TO QUALIFY FOR A SPECIAL EVENTS PERMIT, YOU MUST BE NONPROFIT AND ONE OF THE FOLLOWING (See back for details.)

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| <input checked="" type="checkbox"/> SOCIAL | <input type="checkbox"/> ATHLETIC | <input type="checkbox"/> PHILANTHROPIC INSTITUTION |
| <input type="checkbox"/> FRATERNAL | <input type="checkbox"/> CHARTERED BRANCH, LODGE OR CHAPTER | <input type="checkbox"/> POLITICAL CANDIDATE |
| <input type="checkbox"/> PATRIOTIC | <input type="checkbox"/> OF A NATIONAL ORGANIZATION OR SOCIETY | <input type="checkbox"/> MUNICIPALITY OWNING ARTS FACILITIES |
| <input type="checkbox"/> POLITICAL | <input type="checkbox"/> RELIGIOUS INSTITUTION | |

LIAB TYPE OF SPECIAL EVENT APPLICANT IS APPLYING FOR: 2110 <input checked="" type="checkbox"/> MALT, VINOUS AND SPIRITUOUS LIQUOR \$25.00 PER DAY 2170 <input type="checkbox"/> FERMENTED MALT BEVERAGE (3.2 Beer) \$10.00 PER DAY	DO NOT WRITE IN THIS SPACE LIQUOR PERMIT NUMBER
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1. NAME OF APPLICANT ORGANIZATION OR POLITICAL CANDIDATE Town of Timnath	State Sales Tax Number (Required)
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2. MAILING ADDRESS OF ORGANIZATION OR POLITICAL CANDIDATE (include street, city/town and ZIP) 4800 Goodman Street Timnath CO 80547	3. ADDRESS OF PLACE TO HAVE SPECIAL EVENT (include street, city/town and ZIP) Main Street between 3rd and 5th Avenue
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NAME	DATE OF BIRTH	HOME ADDRESS (Street, City, State, ZIP)	PHONE NUMBER
4. PRES./SEC'Y OF ORG. or POLITICAL CANDIDATE April Getchius			
5. EVENT MANAGER April Getchius			
6. HAS APPLICANT ORGANIZATION OR POLITICAL CANDIDATE BEEN ISSUED A SPECIAL EVENT PERMIT THIS CALENDAR YEAR? <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES HOW MANY DAYS? <u>2</u>		7. IS PREMISES NOW LICENSED UNDER STATE LIQUOR OR BEER CODE? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES TO WHOM? _____	

8. DOES THE APPLICANT HAVE POSSESSION OR WRITTEN PERMISSION FOR THE USE OF THE PREMISES TO BE LICENSED? Yes No

LIST BELOW THE EXACT DATE(S) FOR WHICH APPLICATION IS BEING MADE FOR PERMIT

Date	Hours	From	To	Date	Hours	From	To	Date	Hours	From	To	Date	Hours	From	To
9/24/16		9:00 a.m.	4:00 p.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 April Getchius	TITLE Town Manager	DATE 8/11/14
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REPORT AND APPROVAL OF LOCAL LICENSING AUTHORITY (CITY OR 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 provisions of Title 12, Article 48, C.R.S., as amended.

THEREFORE, THIS APPLICATION IS APPROVED.

LOCAL LICENSING AUTHORITY (CITY OR COUNTY)	<input type="checkbox"/> CITY <input type="checkbox"/> COUNTY	TELEPHONE NUMBER OF CITY/COUNTY CLERK
SIGNATURE	TITLE	DATE

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

LIABILITY INFORMATION			
License Account Number	Liability Date	State	TOTAL
		-750 (999)	\$