

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

## TOWN OF TIMNATH LIQUOR LICENSING BOARD

Tuesday, May 13, 2014, 6:00 p.m.

Meeting will be held at <u>Timnath Administration Building</u>, 4800 Goodman Street, Timnath, Colorado

#### 1. CALL TO ORDER AND ROLL CALL

Chair Jill Grossman-Belisle

Commissioner Bill Neal

Commissioner Aaron Pearson
Commissioner Paul Steinway
Commissioner Bryan Voronin

#### 2. BUSINESS:

a. DISCUSSION/POSSIBLE ACTION: Review of the Murphy Oil 3.2 Beer License Renewal

#### 3. ADJOURNMENT

DR 8400 (Revised 09/01/12)
COLORADO DEPARTMENT OF REVENUE
LIQUOR ENFORCEMENT DIVISION
SUBMIT TO LOCAL LICENSING AUTHORITY

# LIQUOR OR 3.2 BEER LICENSE RENEWAL APPLICATION

MURPHY USA #7494 PO BOX 7000 EL DORADO AR 71731-7000

Amount Due/Paid	
Related Resort \$75 x	
Optional Premise \$100 x	
Storage Permit \$100 x	
Renewal Fee	\$96.25
Fees Due	

Make check payable to. Colorado Department of Revenue The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State if converted, your check will not be returned if your check is rejected due to insufficient or uncollected funds, the Department may collect the payment amount directly from your banking account electronically

PLEASE VERIFY & UPDATE ALL INFORMATION BELOW					RETURN TO CITY OR COUNTY LICENSING AUTHORITY BY DUE DATE				
Licensee Name					DBA				
MURPHY OIL USAINC Liquor License # License Type					MURPHY USA #7494  Sales Tax License # Expiration Date Due Date				
80029830002 3.2% Beer Off Premises (city)				s (city)	80029830002	Expiration Date 6/26/2014	Due Date 5/12/2014		
Street Address							Phone Number		
4551 WEITZEL ST TIMNATH CO 80547-4417 (870) 862 6411  Mailing Address									
PO BOX 7000 EL DORADO AR 71731-7000									
Operating Manager Date of Birth Home Address							Phone Number		
1.	Do you have legal possession of the premises at the street address above? YES NO Is the premises owned or rented? Owned Rented* *If rented, expiration date of lease								
2.	Since the date of filing of the last annual application, has there been any change in financial interest (new notes, loans, owners, etc.) or organizational structure (addition or deletion of officers, directors, managing members or general partners)? If yes, explain in detail and attach a listing of all liquor businesses in which these new lenders, owners (other than licensed financial institutions), officers, directors, managing members, or general partners are materially interested. YES NO  NOTE TO CORPORATION, LIMITED LIABILITY COMPANY AND PARTNERSHIP APPLICANTS: If you have added or deleted any officers, directors, managing members, general partners or persons with 10% or more interest in your business, you must complete and return immediately to your Local Licensing Authority, Form DR 8177: Corporation, Limited Liability Company or Partnership Report of Changes, along with all supporting documentation and fees.								
3.	Since the date of filing of the last annual application, has the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) been convicted of a crime? If yes, attach a detailed explanation.								
4.	Since the date of filing of the last annual application, has the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) been denied an alcohol beverage license, had an alcohol beverage license suspended or revoked, or had interest in any entity that had an alcohol beverage license denied, suspended or revoked? If yes, attach a detailed explanation.   YES NO								
5.	Does the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) have a direct or indirect interest in any other Colorado liquor license, including loans to or from any licensee or interest in a loan to any licensee? If yes, attach a detailed explanation.								
6.	SOLE PROPRIETORSHIPS, HUSBAND-WIFE PARTNERSHIPS AND PARTNERS IN GENERAL PARTNERSHIPS: Each person must complete and sign the DR 4679: Affidavit — Restriction on Public Benefits (available online or by calling 303-205-2300) and attach a copy of their driver's license, state-issued ID or valid passport.								
AFFIRMATION & CONSENT									
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.									
Type or Print Name of Applicant/Authorized Agent of Business  Jeff Goodwing					Title / P				
Signature						Date 3 - 11 - 14			
REPORT & APPROVAL OF CITY OR COUNTY LICENSING AUTHORITY									
The foregoing application has been examined and the premises, business conducted and character of the applicant are satisfactory, and we do hereby report that such license, if granted, will comply with the provisions of Title 12, Articles 46 and 47, C.R.S. THEREFORE THIS APPLICATION IS APPROVED.									
Loca	Local Licensing Authority For					Date			
Signature Title				Title		Attest			