



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

**TOWN OF TIMNATH
LIQUOR LICENSING BOARD
Tuesday, May 26, 2015, 6:00 p.m.
Meeting will be held at *Timnath Administration Building,*
*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

**LIQUOR OR 3.2 BEER LICENSE
 RENEWAL APPLICATION**

gm - 3/24/15 - # 3054859

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

RECEIVED

MAR 24 2015

LIQUOR ENF. DIVISION

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

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 MURPHY OIL USAINC		DBA MURPHY USA #7494		
Liquor License # 80029830002	License Type 3.2% Beer Off Premises (city)	Sales Tax License # 80029830002	Expiration Date 6/26/2015	Due Date 5/12/2015
Street Address 4551 WEITZEL ST TIMNATH CO 80547-4417				Phone Number (870) 862 6411
Mailing Address <i>7300</i> PO BOX 7000 EL DORADO AR 71731-7000				
Operating Manager	Date of Birth	Home Address		Phone Number

- 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 _____
- 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.
- 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. YES NO
- 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
- 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. YES NO
- 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 <i>Maria Cheng</i>	Title <i>SVP</i>
Signature <i>[Signature]</i>	Date <i>3/18/15</i>

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.

Local Licensing Authority For		Date
Signature	Title	Attest