



**LIQUOR LICENSE AUTHORITY**  
**REGULAR MEETING AGENDA**

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May 19, 2021  
6:00 PM  
9900 Park Avenue  
Firestone, CO 80504

**1. Access Information**

- a. Town of Firestone is inviting you to a scheduled Zoom meeting.

Topic: Local Liquor License Authority Meeting  
Time: May 19, 2021 06:00 PM Mountain Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/88205906946?pwd=czRGRmxpU1VGmNBRb2dXWEkwU25LQT09>

Meeting ID: 882 0590 6946

Passcode: 689953

One tap mobile

+12532158782,,88205906946#,,,,\*689953# US (Tacoma)

+13462487799,,88205906946#,,,,\*689953# US (Houston)

Dial by your location

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

+1 669 900 9128 US (San Jose)

+1 301 715 8592 US (Washington DC)

+1 312 626 6799 US (Chicago)

+1 646 558 8656 US (New York)

Meeting ID: 882 0590 6946

Passcode: 689953

Find your local number: <https://us02web.zoom.us/u/kbDRiiOL5z>

**2. Call to Order & Roll Call**

**3. Pledge of Allegiance**

**4. Approval of Agenda**

**5. Public Comment** \*(maximum time permitted for all Public Comment is 30 minutes)

**6. Consent Agenda**

- a. Approval of February 10, 2021 Meeting Minutes

**7. Liquor Hearing**

- a. **LIQUOR HEARING**: New Application for a Lodging & Entertainment License for Sterling Coffee Company, LLC located at 8110 Colorado Blvd, Suite S2, Firestone, Colorado.

**8. Adjournment**

**AGENDA INFORMATION  
MEMORANDUM**

**FIRESTONE  
LIQUOR LICENSE AUTHORITY**



**AIM#:** 6.a

**Consent Agenda**

**Meeting Date:** May 19, 2021

**Initiated By:** Jessica Koenig

**Dept:** Town Clerk

**AGENDA TITLE**

Approval of February 10, 2021 Meeting Minutes

**SUMMARY**

**HISTORY AND PREVIOUS ACTION**

**RECOMMENDATION**

Approval of February 10, 2021 Minutes.

**ALTERNATIVES**

**ATTACHMENTS**

1. February 10, 2021 LLA Minutes

**FINANCIAL CONSIDERATIONS**

TOWN OF FIRESTONE, COLORADO  
Liquor License Authority  
MINUTES  
February 10, 2021

**1. Access Information**

**1.a.** Town of Firestone is inviting you to a scheduled Zoom meeting.

Topic: 02-10-2021 Liquor License Authority Meeting  
Time: Feb 10, 2021 07:00 PM Mountain Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/83828898305?pwd=c2RqdVhEa0lvV0FiYTJxam5iQTFodz09>

Meeting ID: 838 2889 8305

Passcode: 625427

One tap mobile

+13462487799,,83828898305#,,,,\*625427# US (Houston)

+16699009128,,83828898305#,,,,\*625427# US (San Jose)

Dial by your location

+1 346 248 7799 US (Houston)

+1 669 900 9128 US (San Jose)

+1 253 215 8782 US (Tacoma)

+1 312 626 6799 US (Chicago)

+1 646 558 8656 US (New York)

+1 301 715 8592 US (Washington DC)

Meeting ID: 838 2889 8305

Passcode: 625427

Find your local number: <https://us02web.zoom.us/j/83828898305?pwd=c2RqdVhEa0lvV0FiYTJxam5iQTFodz09>

**2. Call to Order & Roll Call**

The Liquor License Authority of the Town of Firestone met for a Regular Meeting on February 10, 2021, at the Police Department, 9900 Park Avenue, Firestone, Colorado. Chair Sindelar called the meeting to order at 7:01 PM pm.

The following were present upon the call of the roll:

**Chair:** Bobbi Sindelar

**Commissioners:** Don Conyac

David Whelan

Samantha Meiring

Sean Doherty

Doug Sharp  
Frank A. Jimenez

### 3. Pledge of Allegiance

Chair Sindelar led the pledge of allegiance.

### 4. Approval of Agenda

**Motion** by Member Conyac, **second** by Member Sharp, to Approve the Agenda

**Roll Call Vote:**

**Yes:** Member Doherty, Member Whelan, Member Conyac, Member Jimenez, Member Meiring, Member Sharp, Chair Sindelar

**No:** None

**Abstain:** None

**Motion carried.**

### 5. Public Comment \*(maximum time permitted for all Public Comment is 30 minutes)

There was no one present that wished to give public comment.

### 6. Consent Agenda

**Motion** by Member Jimenez, **second** by Member Conyac, to Approve the Consent Agenda, All in Favor, **Motion carried.**

6.a. Approval of August 12, 2020 Meeting Minutes

### 7. Liquor Hearing

7.a. **LIQUOR HEARING:** Transfer of Ownership Application for a Retail Liquor Store License for Gurnam, Inc. dba Firestone Liquors located at 562 1st Street, Firestone, Colorado 80520

Chair Sindelar opened the liquor hearing at 7:04 PM.

Chair Sindelar swore in the applicant.

**Motion** by Member Doherty, **second** by Member Sharp, to Approve the Transfer of Ownership Application for a Retail Liquor Store License for Gurnam, Inc. dba Firestone Liquors located at 562 1st Street, Firestone, Colorado 80520

**Roll Call Vote:**

**Yes:** Member Doherty, Member Whelan, Member Conyac, Member Jimenez, Member Meiring, Member Sharp, Chair Sindelar

**No:** None

**Abstain:** None  
**Motion carried.**

**8. Adjournment**

**Motion** by Member Sharp, **second** by Member Conyac, to Adjourn, All in Favor, **Motion carried.**

Introduced and Approved the 19th of May, 2021

TOWN OF FIRESTONE, COLORADO

ATTEST

\_\_\_\_\_  
Bobbi Sindelar, Chair

\_\_\_\_\_  
Jessica Koenig, Town Clerk

DRAFT

**AGENDA INFORMATION  
MEMORANDUM**

**FIRESTONE  
LIQUOR LICENSE AUTHORITY**



**AIM#:** 7.a

**Liquor Hearing**

**Meeting Date:** May 19, 2021

**Initiated By:** Jessica Koenig

**Dept:** Town Clerk

**AGENDA TITLE**

**LIQUOR HEARING:** New Application for a Lodging & Entertainment License for Sterling Coffee Company, LLC located at 8110 Colorado Blvd, Suite S2, Firestone, Colorado.

**SUMMARY**

The Sterling Coffee Company, LLC, submitted an application for a new lodging & entertainment liquor license. All requirements have been met and the Town recommends approval.

**HISTORY AND PREVIOUS ACTION**

**RECOMMENDATION**

Staff recommends approval.

**ALTERNATIVES**

**ATTACHMENTS**

1. Retail Application Sterling Coffee Co. 03-04-2021\_Redacted
2. Certificate of Good Standing Sterling Coffee Co
3. Articles of Amdt Sterling Coffee Co\_Redacted
4. Articles of Organization Sterling Coffee Co\_Redacted
5. Liquor License Survey - Needs & Desires

**FINANCIAL CONSIDERATIONS**

# Colorado Liquor Retail License Application

New License   
  New-Concurrent   
  Transfer of Ownership   
  State Property Only   
  Master file

• All answers must be printed in black ink or typewritten  
 • Applicant must check the appropriate box(es)  
 • Applicant should obtain a copy of the Colorado Liquor and Beer Code: [www.colorado.gov/enforcement/liquor](http://www.colorado.gov/enforcement/liquor)

1. Applicant is applying as a/an   
 Individual   
 Limited Liability Company   
 Association or Other  
 Corporation   
 Partnership (includes Limited Liability and Husband and Wife Partnerships)

2. Applicant If an LLC, name of LLC; if partnership, at least 2 partner's names; if corporation, name of corporation    FEIN Number  
Sterling Coffee Company, LLC.

2a. Trade Name of Establishment (DBA)    State Sales Tax Number    Business Telephone  
Sterling Coffee Company

3. Address of Premises (specify exact location of premises, include suite/unit numbers)  
8110 Colorado Boulevard, Suite S2

City    Firestone    County    Weld    State    CO    ZIP Code    80504

4. Mailing Address (Number and Street)    City or Town    Erie    State    CO    ZIP Code    80516

5. Email Address

6. If the premises currently has a liquor or beer license, you **must** answer the following questions

Present Trade Name of Establishment (DBA)	Present State License Number	Present Class of License	Present Expiration Date
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<b>Section A                      Nonrefundable Application Fees*</b>	<b>Section B (Cont.)                      Liquor License Fees*</b>
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<input checked="" type="checkbox"/> Application Fee for New License.....\$1,550.00 <input type="checkbox"/> Application Fee for New License w/Concurrent Review .....\$1,650.00 <input type="checkbox"/> Application Fee for Transfer .....\$1,550.00	<input type="checkbox"/> Liquor-Licensed Drugstore (County) .....\$312.50 <input checked="" type="checkbox"/> Lodging & Entertainment - L&E (City) .....\$500.00 <input type="checkbox"/> Lodging & Entertainment - L&E (County) .....\$500.00
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<b>Section B                      Liquor License Fees*</b> <input type="checkbox"/> Add Optional Premises to H & R.....\$100.00 X _____ Total _____ <input type="checkbox"/> Add Related Facility to Resort Complex \$75.00 X _____ Total _____ <input type="checkbox"/> Add Sidewalk Service Area..... \$75.00 <input type="checkbox"/> Arts License (City) ..... \$308.75 <input type="checkbox"/> Arts License (County) ..... \$308.75 <input type="checkbox"/> Beer and Wine License (City)..... \$351.25 <input type="checkbox"/> Beer and Wine License (County) ..... \$436.25 <input type="checkbox"/> Brew Pub License (City) ..... \$750.00 <input type="checkbox"/> Brew Pub License (County)..... \$750.00 <input type="checkbox"/> Campus Liquor Complex (City)..... \$500.00 <input type="checkbox"/> Campus Liquor Complex (County) ..... \$500.00 <input type="checkbox"/> Campus Liquor Complex (State)..... \$500.00 <input type="checkbox"/> Club License (City)..... \$308.75 <input type="checkbox"/> Club License (County) ..... \$308.75 <input type="checkbox"/> Distillery Pub License (City)..... \$750.00 <input type="checkbox"/> Distillery Pub License (County) ..... \$750.00 <input type="checkbox"/> Hotel and Restaurant License (City)..... \$500.00 <input type="checkbox"/> Hotel and Restaurant License (County) ..... \$500.00 <input type="checkbox"/> Hotel and Restaurant License w/one opt premises (City) ..... \$600.00 <input type="checkbox"/> Hotel and Restaurant License w/one opt premises (County)..... \$600.00 <input type="checkbox"/> Liquor-Licensed Drugstore (City) ..... \$227.50	<input type="checkbox"/> Manager Registration - H & R .....\$75.00 <input type="checkbox"/> Manager Registration - Tavern .....\$75.00 <input type="checkbox"/> Manager Registration - Lodging & Entertainment..... \$75.00 <input type="checkbox"/> Manager Registration - Campus Liquor Complex ..... \$75.00 <input type="checkbox"/> Optional Premises License (City).....\$500.00 <input type="checkbox"/> Optional Premises License (County) .....\$500.00 <input type="checkbox"/> Racetrack License (City).....\$500.00 <input type="checkbox"/> Racetrack License (County).....\$500.00 <input type="checkbox"/> Resort Complex License (City).....\$500.00 <input type="checkbox"/> Resort Complex License (County).....\$500.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (City) ..... \$160.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (County) ..... \$160.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (State)..... \$160.00 <input type="checkbox"/> Retail Gaming Tavern License (City) .....\$500.00 <input type="checkbox"/> Retail Gaming Tavern License (County).....\$500.00 <input type="checkbox"/> Retail Liquor Store License-Additional (City).....\$227.50 <input type="checkbox"/> Retail Liquor Store License-Additional (County) .....\$312.50 <input type="checkbox"/> Retail Liquor Store (City).....\$227.50 <input type="checkbox"/> Retail Liquor Store (County) .....\$312.50 <input type="checkbox"/> Tavern License (City).....\$500.00 <input type="checkbox"/> Tavern License (County) .....\$500.00 <input type="checkbox"/> Vintners Restaurant License (City) .....\$750.00 <input type="checkbox"/> Vintners Restaurant License (County).....\$750.00
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\* Note that the Division will not accept cash

Questions? Visit: [www.colorado.gov/enforcement/liquor](http://www.colorado.gov/enforcement/liquor) for more information

**Do not write in this space - For Department of Revenue use only**

Liability Information			
License Account Number	Liability Date	License Issued Through (Expiration Date)	Total \$

## Application Documents Checklist and Worksheet

**Instructions:** This checklist should be utilized to assist applicants with filing all required documents for licensure. All documents must be properly signed and correspond with the name of the applicant exactly. All documents must be typed or legibly printed. Upon final State approval the license will be mailed to the local licensing authority. Application fees are nonrefundable. **Questions? Visit: [www.colorado.gov/enforcement/liquor](http://www.colorado.gov/enforcement/liquor) for more information**

Items submitted, please check all appropriate boxes completed or documents submitted	
<b>I.</b>	<b>Applicant information</b> <input checked="" type="checkbox"/> A. Applicant/Licensee identified <input checked="" type="checkbox"/> B. State sales tax license number listed or applied for at time of application <input checked="" type="checkbox"/> C. License type or other transaction identified <input type="checkbox"/> D. Return originals to local authority (additional items may be required by the local licensing authority) <input checked="" type="checkbox"/> E. All sections of the application need to be completed <input type="checkbox"/> F. Master file applicants must include the Application for Master File form DR 8415 and applicable fees to this Retail License Application
<b>II.</b>	<b>Diagram of the premises</b> <input checked="" type="checkbox"/> A. No larger than 8 1/2" X 11" <input checked="" type="checkbox"/> B. Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.) <input type="checkbox"/> C. Separate diagram for each floor (if multiple levels) <input type="checkbox"/> D. Kitchen - identified if Hotel and Restaurant <input checked="" type="checkbox"/> E. Bold/Outlined Licensed Premises
<b>III.</b>	<b>Proof of property possession (One Year Needed)</b> <input type="checkbox"/> A. Deed in name of the applicant (or) (matching question #2) date stamped / filed with County Clerk <input checked="" type="checkbox"/> B. Lease in the name of the applicant (or) (matching question #2) <input checked="" type="checkbox"/> C. Lease assignment in the name of the applicant with proper consent from the landlord and acceptance by the applicant <input type="checkbox"/> D. Other agreement if not deed or lease. (matching question #2)
<b>IV.</b>	<b>Background information (DR 8404-I) and financial documents</b> <input checked="" type="checkbox"/> A. Complete DR 8404-I for each principal (individuals with more than 10% ownership, officers, directors, partners, members) <input type="checkbox"/> B. Fingerprints taken and submitted to the appropriate Local Licensing Authority through an approved state vendor. <b>Do not complete fingerprint cards prior to submitting your application.</b> The Vendors are as follows: <b>IdentoGO</b> – <a href="https://uenroll.identogo.com/">https://uenroll.identogo.com/</a> Phone: 844-539-5539 (toll-free) Identogo FAQs: <a href="https://www.colorado.gov/pacific/cbi/identification-faqs">https://www.colorado.gov/pacific/cbi/identification-faqs</a> <b>Colorado Fingerprinting</b> – <a href="http://www.coloradofingerprinting.com">http://www.coloradofingerprinting.com</a> Appointment Scheduling Website: <a href="http://www.coloradofingerprinting.com/cabs/">http://www.coloradofingerprinting.com/cabs/</a> Phone: 720-292-2722 Toll Free: 833-224-2227 <input type="checkbox"/> C. Purchase agreement, stock transfer agreement, and/or authorization to transfer license <input type="checkbox"/> D. List of all notes and loans (Copies to also be attached)
<b>V.</b>	<b>Sole proprietor/husband and wife partnership (if applicable)</b> <input type="checkbox"/> A. Form DR 4679 <input checked="" type="checkbox"/> B. Copy of State issued Driver's License or Colorado Identification Card for each applicant
<b>VI.</b>	<b>Corporate applicant information (if applicable)</b> <input type="checkbox"/> A. Certificate of Incorporation <input type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Certificate of Authorization if foreign corporation (out of state applicants only)
<b>VII.</b>	<b>Partnership applicant information (if applicable)</b> <input type="checkbox"/> A. Partnership Agreement (general or limited). <input type="checkbox"/> B. Certificate of Good Standing
<b>VIII.</b>	<b>Limited Liability Company applicant information (if applicable)</b> <input checked="" type="checkbox"/> A. Copy of articles of organization <input checked="" type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Copy of Operating Agreement (if applicable) <input type="checkbox"/> D. Certificate of Authority if foreign LLC (out of state applicants only)
<b>IX.</b>	<b>Manager registration for Hotel and Restaurant, Tavern, Lodging &amp; Entertainment, and Campus Liquor Complex licenses when included with this application</b> <input type="checkbox"/> A. \$75.00 fee <input checked="" type="checkbox"/> B. Individual History Record (DR 8404-I) <input checked="" type="checkbox"/> C. If owner is managing. no fee required

ENCL (SHEETS)

Name	Type of License	Account Number															
<p>7. Is the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers under the age of twenty-one years? <span style="float:right">Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></span></p>																	
<p>8. Has the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers ever (in Colorado or any other state):</p> <p>a. Been denied an alcohol beverage license? <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p> <p>b. Had an alcohol beverage license suspended or revoked? <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p> <p>c. Had interest in another entity that had an alcohol beverage license suspended or revoked? <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p> <p>If you answered yes to 8a, b or c, explain in detail on a separate sheet.</p>																	
<p>9. Has a liquor license application (same license class), that was located within 500 feet of the proposed premises, been denied within the preceding two years? If "yes", explain in detail. <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p>																	
<p>10. Are the premises to be licensed 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? <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p> <p style="text-align:right">or</p> <p style="text-align:right">Waiver by local ordinance? <input type="checkbox"/> <input type="checkbox"/></p> <p style="text-align:right">Other: _____</p>																	
<p>11. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of greater than (&gt;) 10,000? <b>NOTE:</b> The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS. <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p>																	
<p>12. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 3000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of less than (&lt;) 10,000? <b>NOTE:</b> The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS. <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p>																	
<p>13 a. For additional Retail Liquor Store only. Was your Retail Liquor Store License issued on or before January 1, 2016? <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p>																	
<p>13 b. Are you a Colorado resident? <span style="float:right"><input checked="" type="checkbox"/> <input type="checkbox"/></span></p>																	
<p>14. Has a liquor or beer license ever been issued to the applicant (including any of the partners, if a partnership; members or manager if a Limited Liability Company; or officers, stockholders or directors if a corporation)? If yes, identify the name of the business and list any <u>current</u> financial interest in said business including any loans to or from a licensee. <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p>																	
<p>15. Does the applicant, as listed on line 2 of this application, have legal possession of the premises by ownership, lease or other arrangement? <span style="float:right"><input checked="" type="checkbox"/> <input type="checkbox"/></span></p> <p><input type="checkbox"/> Ownership <input checked="" type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____</p> <p>a. If leased, list name of landlord and tenant, and date of expiration, <b>exactly</b> as they appear on the lease:</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">Landlord JT Longmont Investment, LLC</td> <td style="width:40%;">Tenant Sterling Coffee Company, LLC.</td> <td style="width:20%;">Expires 6-30-26</td> </tr> </table>			Landlord JT Longmont Investment, LLC	Tenant Sterling Coffee Company, LLC.	Expires 6-30-26												
Landlord JT Longmont Investment, LLC	Tenant Sterling Coffee Company, LLC.	Expires 6-30-26															
<p>b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question 16. <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p>																	
<p>c. Attach a diagram that designates the area to be licensed in black bold outline (including dimensions) which shows the bars, brewery, walls, partitions, entrances, exits and what each room shall be utilized for in this business. This diagram should be no larger than 8 1/2" X 11".</p>																	
<p>16. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies) will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money from this business? Attach a separate sheet if necessary.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:33%;">Last Name</th> <th style="width:25%;">First Name</th> <th style="width:10%;">Date of Birth</th> <th style="width:15%;">FEIN or SSN</th> <th style="width:17%;">Interest/Percentage</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			Last Name	First Name	Date of Birth	FEIN or SSN	Interest/Percentage										
Last Name	First Name	Date of Birth	FEIN or SSN	Interest/Percentage													
<p><b>Attach copies of all notes and security instruments and any written agreement or details of any oral agreement, by which any person (including partnerships, corporations, limited liability companies, etc.) will share in the profit or gross proceeds of this establishment, and any agreement relating to the business which is contingent or conditional in any way by volume, profit, sales, giving of advice or consultation.</b></p>																	
<p>17. Optional Premises or Hotel and Restaurant Licenses with Optional Premises: Has a local ordinance or resolution authorizing optional premises been adopted? <span style="float:right"><input type="checkbox"/> <input type="checkbox"/></span></p> <p style="text-align:right">Number of additional Optional Premise areas requested. (See license fee chart) <input type="text"/></p>																	
<p>18. For the addition of a Sidewalk Service Area per Regulation 47-302(A)(4), include a diagram of the service area and documentation received from the local governing body authorizing use of the sidewalk. Documentation may include but is not limited to a statement of use, permit, easement, or other legal permissions.</p>																	
<p>19. Liquor Licensed Drugstore (LLDS) applicants, answer the following:</p> <p>a. Is there a pharmacy, licensed by the Colorado Board of Pharmacy, located within the applicant's LLDS premise? <span style="float:right"><input type="checkbox"/> <input checked="" type="checkbox"/></span></p> <p><b>If "yes" a copy of license must be attached.</b></p>																	

DR 8404-1 (REV. 12/10)

Name	Type of License	Account Number
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20. Club Liquor License applicants answer the following: **Attach a copy of applicable documentation**

a. Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain?  Yes  No

b. Is the applicant organization a regularly chartered branch, lodge or chapter of a national organization which is operated solely for the object of a patriotic or fraternal organization or society, but not for pecuniary gain?  Yes  No

c. How long has the club been incorporated?

d. Has applicant occupied an establishment for three years (three years required) that was operated solely for the reasons stated above?  Yes  No

21. Brew-Pub, Distillery Pub or Vintner's Restaurant applicants answer the following:

a. Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached)  Yes  No

22. Campus Liquor Complex applicants answer the following:

a. Is the applicant an institution of higher education?  Yes  No

b. Is the applicant a person who contracts with the institution of higher education to provide food services?  
If "yes" please provide a copy of the contract with the institution of higher education to provide food services.  Yes  No

23. For all on-premises applicants.

a. Hotel and Restaurant, Lodging and Entertainment, Tavern License and Campus Liquor Complex, the Registered Manager must also submit an Individual History Record  
- DR 8404-I and fingerprint submitted to approved State Vendor through the Vendor's website. See application checklist, Section IV, for details.

b. For all Liquor Licensed Drugstores (LLDS) the Permitted Manager must also submit a Manager Permit Application  
- DR 8000 and fingerprints.

Last Name of Manager Walter	First Name of Manager Michael
--------------------------------	----------------------------------

24. Does this manager act as the manager of, or have a financial interest in, any other liquor licensed establishment in the State of Colorado? If yes, provide name, type of license and account number.  Yes  No

25. Related Facility - Campus Liquor Complex applicants answer the following:

a. Is the related facility located within the boundaries of the Campus Liquor Complex?  
If yes, please provide a map of the geographical location within the Campus Liquor Complex.  
If no, this license type is not available for issues outside the geographical location of the Campus Liquor Complex.  Yes  No

b. Designated Manager for Related Facility- Campus Liquor Complex

Last Name of Manager	First Name of Manager
----------------------	-----------------------

26. Tax Information.

a. Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant, been found in final order of a tax agency to be delinquent in the payment of any state or local taxes, penalties, or interest related to a business?  Yes  No

b. Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant failed to pay any fees or surcharges imposed pursuant to section 44-3-503, C.R.S.?  Yes  No

27. If applicant is a corporation, partnership, association or limited liability company, applicant must list all **Officers, Directors, General Partners, and Managing Members**. In addition, applicant must list any stockholders, partners, or members with **ownership of 10% or more in the applicant**. All persons listed below must also attach form DR 8404-I (Individual History Record), and make an appointment with an approved State Vendor through their website. See application checklist, Section IV, for details.

Name Michael Walter	Position Co-owner	%Owned 50		
Name Evan Kaufman	Position Co-owner	%Owned 50		
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned

\*\* If applicant is owned 100% by a parent company, please list the designated principal officer on above.  
\*\* Corporations - the President, Vice-President, Secretary and Treasurer must be accounted for above (Include ownership percentage if applicable)  
\*\* If total ownership percentage disclosed here does not total 100%, applicant must check this box:  
 Applicant affirms that no individual other than these disclosed herein owns 10% or more of the applicant and does not have financial interest in a prohibited liquor license pursuant to Article 3 or 5, C.R.S.

DR 8000 (2/2015)

Name	Type of License	Account Number
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**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 or Beer Code which affect my license.

Authorized Signature	Printed Name and Title Michael Walter, member of Sterling Coffee Co., LLC.	Date 2-25-21
----------------------	---	-----------------

**Report and Approval of Local Licensing Authority (City/County)**

Date application filed with local authority	Date of local authority hearing (for new license applicants; cannot be less than 30 days from date of application)
---	--

The Local Licensing Authority Hereby Affirms that each person required to file DR 8404-I (Individual History Record) or a DR 8000 (Manager Permit) has been:

- Fingerprinted
- Subject to background investigation, including NCIC/CCIC check for outstanding warrants

That the local authority has conducted, or intends to conduct, an inspection of the proposed premises to ensure that the applicant is in compliance with and aware of, liquor code provisions affecting their class of license

(Check One)

- Date of inspection or anticipated date \_\_\_\_\_
- Will conduct inspection upon approval of state licensing authority

- |   |                          |                          |
|---|--------------------------|--------------------------|
| <input type="checkbox"/> Is the Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1,500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of > 10,000?                | Yes                      | No                       |
|   | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Is the Liquor Licensed Drugstore(LLDS) or Retail Liquor Store (RLS) within 3,000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of < 10,000?                 |                          |                          |
|   | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>NOTE:</b> The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS. |                          |                          |
| <input type="checkbox"/> Does the Liquor-Licensed Drugstore (LLDS) have at least twenty percent (20%) of the applicant's gross annual income derived from the sale of food, during the prior twelve (12) month period?                  |                          |                          |
|   | <input type="checkbox"/> | <input type="checkbox"/> |

The foregoing application has been examined; and the premises, business to be conducted, and character of the applicant are satisfactory. We do report that such license, if granted, will meet the reasonable requirements of the neighborhood and the desires of the adult inhabitants, and will comply with the provisions of Title 44, Article 4 or 3, C.R.S., and Liquor Rules. **Therefore, this application is approved.**

Local Licensing Authority for	Telephone Number	<input type="checkbox"/> Town, City <input type="checkbox"/> County
-------------------------------	------------------	--

Signature	Print	Title	Date
Signature	Print	Title	Date

## Tax Check Authorization, Waiver, and Request to Release Information

I, Michael Walter am signing this Tax Check Authorization, Waiver and Request to Release Information (hereinafter "Waiver") on behalf of Sterling Coffee Company, LLC. (the "Applicant/Licensee") to permit the Colorado Department of Revenue and any other state or local taxing authority to release information and documentation that may otherwise be confidential, as provided below. If I am signing this Waiver for someone other than myself, including on behalf of a business entity, I certify that I have the authority to execute this Waiver on behalf of the Applicant/Licensee.

The Executive Director of the Colorado Department of Revenue is the State Licensing Authority, and oversees the Colorado Liquor Enforcement Division as his or her agents, clerks, and employees. The information and documentation obtained pursuant to this Waiver may be used in connection with the Applicant/Licensee's liquor license application and ongoing licensure by the state and local licensing authorities. The Colorado Liquor Code, section 44-3-101. et seq. ("Liquor Code"), and the Colorado Liquor Rules, 1 CCR 203-2 ("Liquor Rules"), require compliance with certain tax obligations, and set forth the investigative, disciplinary and licensure actions the state and local licensing authorities may take for violations of the Liquor Code and Liquor Rules, including failure to meet tax reporting and payment obligations.

The Waiver is made pursuant to section 39-21-113(4), C.R.S., and any other law, regulation, resolution or ordinance concerning the confidentiality of tax information, or any document, report or return filed in connection with state or local taxes. This Waiver shall be valid until the expiration or revocation of a license, or until both the state and local licensing authorities take final action to approve or deny any application(s) for the renewal of the license, whichever is later. Applicant/Licensee agrees to execute a new waiver for each subsequent licensing period in connection with the renewal of any license, if requested.

By signing below, Applicant/Licensee requests that the Colorado Department of Revenue and any other state or local taxing authority or agency in the possession of tax documents or information, release information and documentation to the Colorado Liquor Enforcement Division, and its duly authorized employees, to act as the Applicant's/Licensee's duly authorized representative under section 39-21-113(4), C.R.S., solely to allow the state and local licensing authorities, and their duly authorized employees, to investigate compliance with the Liquor Code and Liquor Rules. Applicant/Licensee authorizes the state and local licensing authorities, their duly authorized employees, and their legal representatives, to use the information and documentation obtained using this Waiver in any administrative or judicial action regarding the application or license.

Name (Individual/Business) <p style="text-align: center;">Sterling Coffee Company, LLC.</p>		Social Security Number/Tax Identification Number	
Address <p style="text-align: center;">8134 Colorado Blvd., Suite S2</p>			
City <p style="text-align: center;">Firestone</p>		State <p style="text-align: center;">CO</p>	Zip <p style="text-align: center;">80504</p>
Home Phone Number		Business/Work Phone Number	
Printed name of person signing on behalf of the Applicant/Licensee <p style="text-align: center;">Michael Walter</p>			
Applicant/Licensee's Signature (Signature authorizing the disclosure of confidential tax information)			Date signed <p style="text-align: center;">2-12-21</p>

### Privacy Act Statement

Providing your Social Security Number is voluntary and no right, benefit or privilege provided by law will be denied as a result of refusal to disclose it. § 7 of Privacy Act, 5 USCS § 552a (note).



OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF FACT OF GOOD STANDING**

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Sterling Coffee Company LLC

is a

Limited Liability Company

formed or registered on 10/28/2020 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20201933231 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/03/2021 that have been posted, and by documents delivered to this office electronically through 03/04/2021 @ 15:07:55 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 03/04/2021 @ 15:07:55 in accordance with applicable law. This certificate is assigned Confirmation Number 12993696 .



*Jena Griswold*

Secretary of State of the State of Colorado

\*\*\*\*\*End of Certificate\*\*\*\*\*  
*Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."*



Colorado Secretary of State  
 Date and Time: 12/10/2020 04:08 PM  
 ID Number: 20201933231  
 Document number: 20208069836  
 Amount Paid: \$25.00

Document must be filed electronically.  
 Paper documents are not accepted.  
 Fees & forms are subject to change.  
 For more information or to print copies  
 of filed documents, visit [www.sos.state.co.us](http://www.sos.state.co.us).

ABOVE SPACE FOR OFFICE USE ONLY

**Articles of Amendment**

filed pursuant to §7-90-301, et seq. and §7-80-209 of the Colorado Revised Statutes (C.R.S.)

1. For the entity, its ID number and entity name are

ID number \_\_\_\_\_  
*(Colorado Secretary of State ID number)*  
 Entity name Sterling Coffee Company LLC

2. The new entity name (if applicable) is \_\_\_\_\_

3. *(If the following statement applies, adopt the statement by marking the box and include an attachment.)*

This document contains additional amendments or other information.

4. *(Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)*

*(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)*

The delayed effective date and, if applicable, time of this document is/are \_\_\_\_\_  
*(mm/dd/yyyy hour:minute am/pm)*

**Notice:**

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

5. The true name and mailing address of the individual causing the document to be delivered for filing are

Walter Michael Richard  
*(Last) (First) (Middle) (Suffix)*  
 \_\_\_\_\_  
*(Street name and number or Post Office Box information)*  
 Erie CO 80516  
*(City) (State) (Postal/Zip Code)*  
 \_\_\_\_\_  
*(Province - if applicable) (Country - if not US)*

*(If the following statement applies, adopt the statement by marking the box and include an attachment.)*

This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

**Disclaimer:**

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).

Attachment for Amendment

Name of the entity: Sterling Coffee Company LLC

Entity ID number: 20201933231

Please, add the following member on the Articles of Organization on the following article:

Evan T Kaufman - 1001 Sumner Ct, Erie, CO 80516

Article 4:

The true name and mailing address of the person forming the limited liability company are:

Michael Richard Walter - 1001 Sumner Ct, Erie, CO 80516

Evan T Kaufman - 1001 Sumner Ct, Erie, CO 80516



Colorado Secretary of State  
 Date and Time: 10/28/2020 10:52 AM  
 ID Number: 20201933231  
 Document number: 20201933231  
 Amount Paid: \$50.00

Document must be filed electronically.  
 Paper documents are not accepted.  
 Fees & forms are subject to change.  
 For more information or to print copies  
 of filed documents, visit [www.sos.state.co.us](http://www.sos.state.co.us).

ABOVE SPACE FOR OFFICE USE ONLY

**Articles of Organization**

filed pursuant to § 7-90-301 and § 7-80-204 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name of the limited liability company is

Sterling Coffee Company LLC

*(The name of a limited liability company must contain the term or abbreviation "limited liability company", "ltd. liability company", "limited liability co.", "ltd. liability co.", "limited", "l.l.c.", "llc", or "ltd.". See §7-90-601, C.R.S.)*

*(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)*

2. The principal office address of the limited liability company's initial principal office is

Street address

\_\_\_\_\_  
*(Street name)*  
 \_\_\_\_\_  
 Longmont CO 80504  
*(City) (State) (ZIP/Postal Code)*  
 \_\_\_\_\_  
 United States  
*(Province – if applicable) (Country)*

Mailing address

(leave blank if same as street address)

\_\_\_\_\_  
*(Street number and name or Post Office Box information)*  
 \_\_\_\_\_  
 \_\_\_\_\_  
*(City) (State) (ZIP/Postal Code)*  
 \_\_\_\_\_  
*(Province – if applicable) (Country)*

3. The registered agent name and registered agent address of the limited liability company's initial registered agent are

Name  
 (if an individual)

\_\_\_\_\_  
*(Last) (First) (Middle) (Suffix)*

or

(if an entity)

Registered Agents Inc.

*(Caution: Do not provide both an individual and an entity name.)*

Street address

\_\_\_\_\_  
*(Street number and name)*  
 \_\_\_\_\_  
 Boulder CO 80302  
*(City) (State) (ZIP Code)*

Mailing address

(leave blank if same as street address)

\_\_\_\_\_  
*(Street number and name or Post Office Box information)*  
 \_\_\_\_\_

\_\_\_\_\_  
(City) CO \_\_\_\_\_  
(State) (ZIP Code)

(The following statement is adopted by marking the box.)

The person appointed as registered agent has consented to being so appointed.

4. The true name and mailing address of the person forming the limited liability company are

Name  
(if an individual) Walter Michael Richard  
(Last) (First) (Middle) (Suffix)

or

(if an entity) \_\_\_\_\_  
(Caution: Do not provide both an individual and an entity name.)

Mailing address \_\_\_\_\_  
(Street number and name or Post Office Box information)

Erie CO 80516  
(City) (State) (ZIP/Postal Code)  
United States  
(Province – if applicable) (Country)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

The limited liability company has one or more additional persons forming the limited liability company and the name and mailing address of each such person are stated in an attachment.

5. The management of the limited liability company is vested in  
(Mark the applicable box.)

one or more managers.

or

the members.

6. (The following statement is adopted by marking the box.)

There is at least one member of the limited liability company.

7. (If the following statement applies, adopt the statement by marking the box and include an attachment.)

This document contains additional information as provided by law.

8. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document is/are \_\_\_\_\_  
(mm/dd/yyyy hour:minute am/pm)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is named in the document as one who has caused it to be delivered.

9. The true name and mailing address of the individual causing the document to be delivered for filing are

<u>Perez</u> <i>(Last)</i>	<u>Ayleen</u> <i>(First)</i>	<u></u> <i>(Middle)</i>	<u></u> <i>(Suffix)</i>
<hr/>			
<i>and name or Post Office Box information)</i>			
<hr/>			
<u>Austin</u> <i>(City)</i>	<u>TX</u> <i>(State)</i>	<u>78731</u> <i>(ZIP/Postal Code)</i>	
<u></u> <i>(Province – if applicable)</i>	<u>United States</u> <i>(Country)</i>		

*(If the following statement applies, adopt the statement by marking the box and include an attachment.)*

This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

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May 11, 2021

RESULTS OF THE LIQUOR LICENSE SURVEY REGARDING: **Sterling Coffee Company**  
 8110 Colorado Boulevard, Suite S2  
 Firestone, CO 80504

Applicant: Sterling Coffee Company, LLC.  
 Purpose: Application for a NEW Lodging and Entertainment Liquor License

**ISSUE:** A petition was circulated to determine if the needs of the neighborhood and desires of the inhabitants were or were not being presently met by existing similar alcoholic beverage outlets. Those in favor of Sterling Coffee Company being granted a NEW Lodging and Entertainment Liquor License indicated by checking the "Favor – YES" column of the signature sheet and those opposed checked the "Oppose - NO" column. The results were as follows:

Favor "YES"		Oppose "NO"		<u>TOTAL SIGNATURES</u>
98%	91	2%	2	93

**SURVEY STATISTICS**

	Favor "YES"		Oppose "NO"		TOTAL
Business Survey Results	100%	23	—	0	23
Residential Survey Results	97%	68	3%	2	70

*Percentages in this report have been rounded to the nearest whole number.*

	BUSINESS	RESIDENTIAL	TOTAL
No Response	10	180	190
Declined to Participate	2	22	24
Not Qualified to Sign	2	7	9
Disqualified	0	0	0
"No" Signatures	0	2	2
"Yes" Signatures	23	68	91
TOTAL CONTACTS & ATTEMPTS	37	279	316

**SURVEY STATISTICS**

- >Number of Businesses and Residents Contacted: 316 Attempts – 190 No Response = 126
- >Business Survey Participation Rate: 23 Signatures/ 25 Qualified Contacts = 92%
- >Residential Survey Participation Rate: 70 Signatures/ 92 Qualified Contacts = 76%
- >Percentage of Residents Home During Survey: 99 Contacts/ 279 Attempts = 35%

<b>REASONS FOR OPPOSITION SIGNATURES</b>		<b>REASONS FOR DECLINING TO PARTICIPATE</b>	
No Reason	2	Too Busy	8
<b>Total</b>	<b>2</b>	Don't Sign Any Petitions / Surveys	8
		Not Interested	6
		Against Company Policy	2
		<b>Total</b>	<b>24</b>
		<b>NOT QUALIFIED CONTACTS</b>	
		Under 21	4
		Non-Resident	3
		Owner / Manager Unavailable	2
		<b>Total</b>	<b>9</b>

**PETITION METHODOLOGY**

- Survey Date and Times:

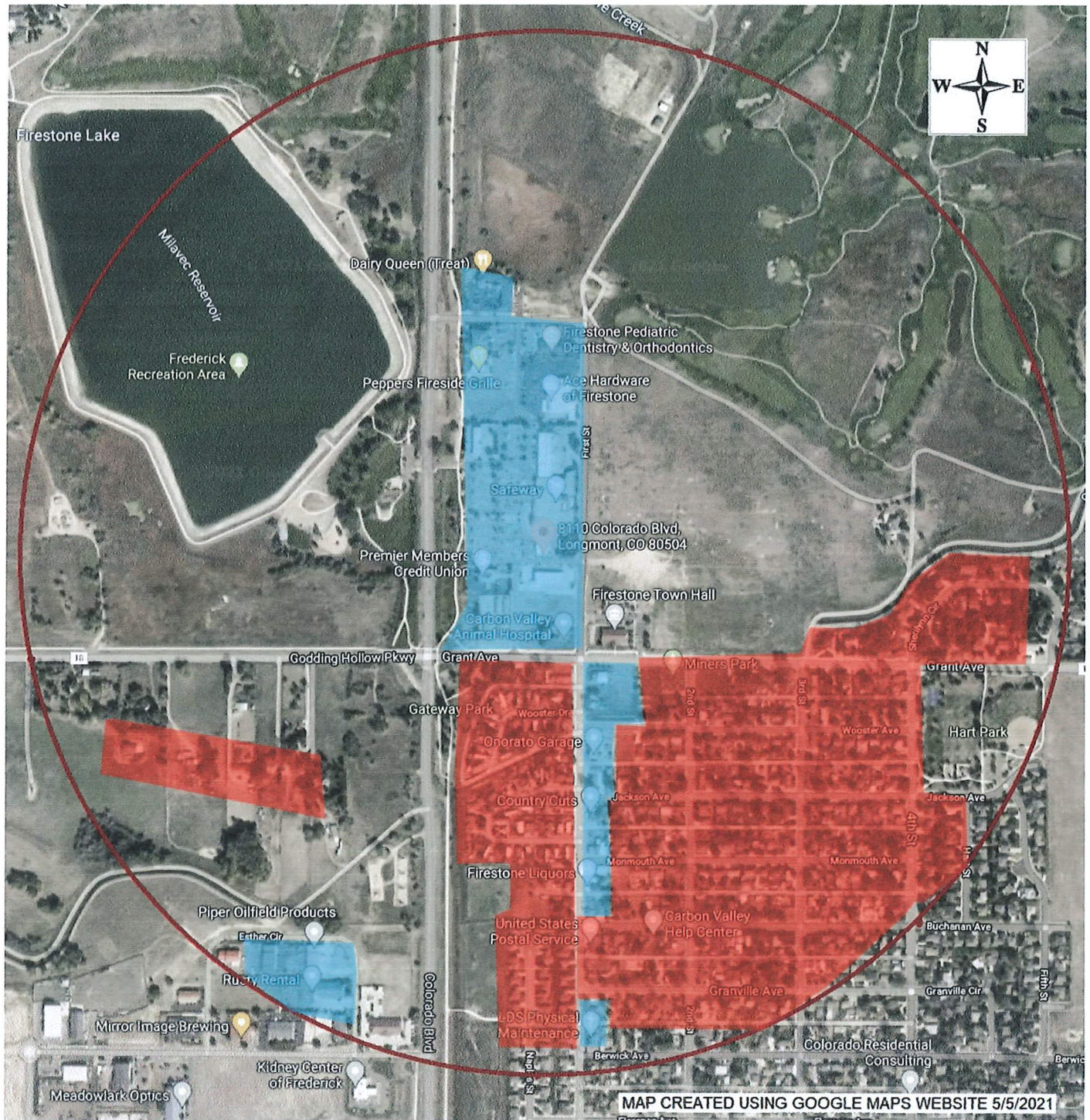
Residential:	Saturday	May 8, 2021	11:00 am – 5:30 pm
Residential:	Sunday	May 9, 2021	12:00 pm – 2:00 pm
Business:	Monday	May 10, 2021	11:00 am – 1:30 pm

- Survey Area: Circulators started in areas closest to the proposed licensed site and obtained samples throughout the boundary area. Please see attached map.
- Circulators of the Survey: There was one circulator for this survey. Prior to the start of the survey, the circulator was briefed on the type of liquor license application, the areas to be surveyed and reminded to remain unbiased in their approach to residents and businesspeople. The circulator had with him a face sheet with the applicant business name, location and hearing information, instructions, and the petition/survey issue along with signature sheets and a map of the proposed location. The circulator used tally sheets to record all contacts, attempts and reasons for opposition signatures and refusals. Upon conclusion of the survey, the circulator signed a notarized affidavit of circulation. The original survey packets were pre-filed with the Town of Firestone Licensing Clerk.

Report prepared and respectfully submitted by,



Eva L. Garretson  
Liquor Licensing Professionals, LLC



**Sterling Coffee Company**  
 8110 Colorado Boulevard, Suite S2  
 Firestone, CO 80504

**APPLICATION FOR A  
 LODGING & ENTERTAINMENT  
 LIQUOR LICENSE**



**SURVEY RESULTS:**

**BUSINESS  
 AREAS  
 COVERED  
 IN SURVEY**

**RESIDENTIAL  
 AREAS  
 COVERED  
 IN SURVEY**

**SURVEY DATES:  
 MAY 8, 9, & 10, 2021**