
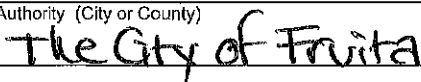


Departmental Use Only

In order to qualify for a Special Events Permit, You Must Be a Qualifying Organization Per 44-5-102 C.R.S. and One of the Following (See back for details.)

- | | | |
|------------------------------------|---|---|
| <input 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"/> National Organization or Society | <input type="checkbox"/> Municipality Owned Arts Facilities |
| <input type="checkbox"/> Political | <input type="checkbox"/> Religious Institution | |

| | | | |
|---|------------------------------------|---|--|
| LIAB Type of Special Event Applicant is Applying for: | | DO NOT WRITE IN THIS SPACE | |
| 2110 <input type="checkbox"/> | Malt, Vinous And Spirituous Liquor | \$25.00 Per Day | Liquor Permit Number |
| 2170 <input checked="" type="checkbox"/> | Fermented Malt Beverage | \$10.00 Per Day | |
| 1. Name of Applicant Organization or Political Candidate Fruita Area Chamber of Commerce | | | State Sales Tax Number (Required) 84-0978361 |
| 2. Mailing Address of Organization or Political Candidate (include street, city/town and ZIP) 432 E Aspen Street Fruita, CO 81521 | | 3. Address of Place to Have Special Event (include street, city/town and ZIP) 325 W Aspen Fruita, CO 81521 | |
| 4. Authorized Representative of Qualifying Organization or Political Candidate Hillary Daniels | | Date of Birth 10/7/1991 | Phone Number 719-352-5954 |
| Authorized Representative's Mailing Address (if different than address provided in Question 2.) 820 E Pabor Avenue, Fruita, CO 81521 | | | |
| 5. Event Manager | | Date of Birth | Phone Number |
| Event Manager Home Address (Street, City, State, ZIP) | | Email Address of Event Manager | |
| 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? 80 | | 7. Is the premises for which your event is to be held currently licensed under the Colorado Liquor or Beer codes? <input type="checkbox"/> No <input type="checkbox"/> Yes License Number | |
| 8. Does the Applicant Have Possession or Written Permission for the Use of The Premises to be Licensed? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| List Below the Exact Date(s) for Which Application is Being Made for Permit | | | |
| Date September 22, 2023 | Date | Date | Date |
| Hours From 5:00 p.m. To 10:00 p.m. | Hours From .m. To .m. | Hours From .m. To .m. | Hours From .m. To .m. |
| Date | Date | Date | Date |
| Hours From .m. To .m. | Hours From .m. To .m. | Hours From .m. To .m. | Hours From .m. To .m. |
| Date | Date | Date | Date |
| Hours From .m. To .m. | Hours From .m. To .m. | Hours From .m. To .m. | Hours From .m. To .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  | | Title Community Development Director | Date 7/19/2023 |
| 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 44, Article 5, C.R.S., as amended. | | | |
| THEREFORE, THIS APPLICATION IS APPROVED. | | | |
| Local Licensing Authority (City or County) The City of Fruita | | <input checked="" type="checkbox"/> City <input type="checkbox"/> County | Telephone Number of City/County Clerk (970) 639-4210 |
| Signature  | | Title JOEL KINCAID, MAYOR | Date |
| DO NOT WRITE IN THIS SPACE - FOR DEPARTMENT OF REVENUE USE ONLY | | | |
| Liability Information | | | |
| License Account Number | Liability Date | State | Total |
| | | | |
| | | -750 (999) | \$ |

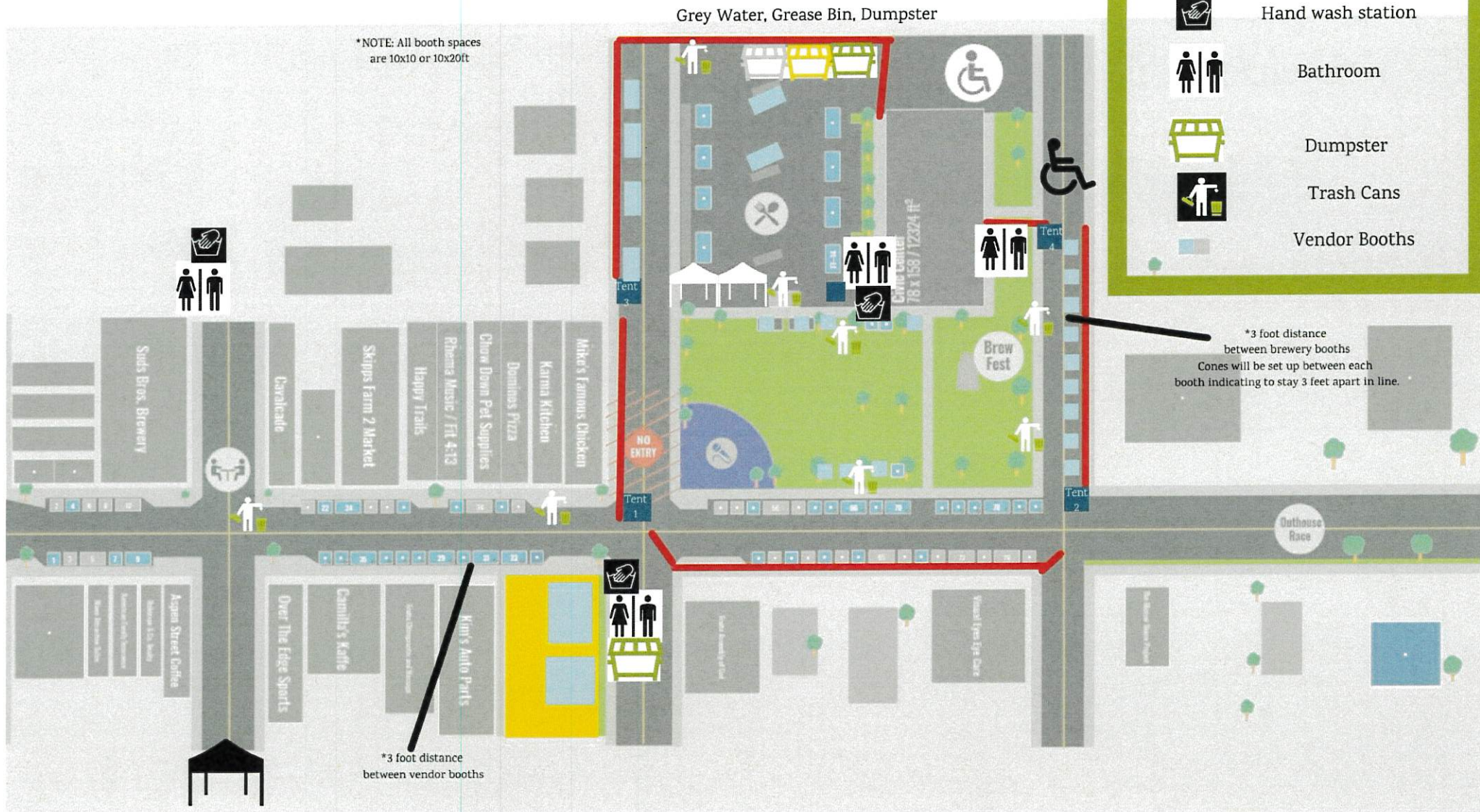
(Instructions on Reverse Side)

Fruita Area Chamber of Commerce
Liquor License Narrative for Brew Fest
Friday, September 22, 2023
Circle Park

The Fruita Chamber of Commerce requests to serve malt beverages at Civic Center Park during the Fruita Fall Festival. What the Fest Brew Fest takes place Friday September 22, 2023, 5:00 pm – 10:00 pm.

1. Description: The Fruita Fall Festival is an annual event in Downtown Fruita. The What the Fest Brew Fest will consist of up to 10 local breweries serving beer and/or cider to attendees at the event.
2. Security: Board members, employees, and volunteers along with whoever the Fruita Chamber hires to work at the event will monitor the entrances to the licensed area to make sure no alcohol enters or exits the licensed area. Signs will be posted indicating no alcohol into or out of the licensed area. Citadel Security has been hired to monitor the event.
3. Crowd Control: Board members, employees, and volunteers along with whoever the Fruita Chamber hires to work the event will monitor the consumption of alcohol to prevent any patrons from becoming noticeably intoxicated and stop serving any patron showing effects of intoxication. Fruita Police Dept. will be notified if any activity escalates beyond control of said people.
4. Fencing/Barriers: A fence barricade will be placed around the perimeter of the beer garden. Entrance/Exit points will be monitored by staff/volunteers and hired event security.
5. Toilets: Portable restroom facilities will be available at Civic Center Park and throughout the event venue.
6. Signage: Signs will be posted at the entrance/exit points indicating no alcohol beyond this point and that ID's will be checked.
7. ID's: ID's will be checked by Board members, employees, and volunteers along with whoever the Fruita Chamber hires to serve alcohol and those entering will be issued a wristband indicating an ID has been checked for legal consumption age.
8. Training: Whoever the Fruita Chamber hires to work at the event (bartenders, servers) will be trained in the procedures concerning the sale and service of alcoholic beverages. Breweries will be responsible for bringing trained staff to help serve alcohol.
9. Trash: Board members, employees, volunteers and whoever the Fruita Chamber hires to work at the event will monitor the area and pick up empty beverage containers to keep premises clean and neat.
10. Food: Multiple food vendors will be present at the event.

September 22 & 23, 2023



Fruita Police Department

Chief David Krouse

157 S. Mesa St
Fruita, CO 81521

970-858-3008 Phone
970-858-3665 Fax
www.fruita.org



To: Debra Woods
From: Dave Krouse, Chief of Police
Date: August 3, 2023
Re: 2023 Fruita Fall Festival Special Event Liquor Permit – Brew Fest

The application and narrative have been reviewed. There is nothing which would prohibit the issuance of the license requested.

The licensee needs to be aware they are solely responsible for control of the licensed premises in regard to alcohol possession, consumption and adherence to state and municipal laws.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/31/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| | | | |
|---|--|---|--|
| PRODUCER Moody-Valley Insurance Agency, Inc. 760 Horizon Drive, Suite 302 Grand Junction CO 81506 | | CONTACT NAME: Moody-Valley Insurance Agency, Inc. PHONE (A/C, No, Ext): (970) 248-8300 FAX (A/C, No): (970) 242-1894 E-MAIL: certrequestgj@moodyins.com ADDRESS: | |
| INSURED Fruita Area Chamber of Commerce 432 East Aspen Ave Fruita CO 81521 | | INSURER(S) AFFORDING COVERAGE INSURER A: Acuity INSURER B: Philadelphia Indemnity Ins Co INSURER C: INSURER D: INSURER E: INSURER F: | |

COVERAGES

CERTIFICATE NUMBER: 23/24 Master

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | ADDL SUBR INSD WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|---|---------------------------------|---------------|-------------------------|-------------------------|--|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | Y | Z62717 | 02/01/2023 | 02/01/2024 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY | | | | | COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| A | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB DED <input checked="" type="checkbox"/> RETENTION \$ 0 OCCUR CLAIMS-MADE | | Z62717 | 02/01/2023 | 02/01/2024 | EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N <input type="checkbox"/> | N/A | | | PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |
| B | | | | | | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Re: Fruita Fall Festival & 5K

CERTIFICATE HOLDER

CANCELLATION

| | |
|--|---|
| City of Fruita 325 E Aspen Ave Fruita CO 81521 | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>Moody-Valley Insurance Agency</i> |
|--|---|