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DR 8439 (06/28/06)
COLORADO DEPARTMENT OF REVENUE
LIQUOR ENFORCEMENT DIVISION

APPLICATION FOR A SPECIAL

Department Use Only

DENVER CO 80261 (303) 205-2300	EVE	ENTS F	PERMIT	-OIAL				
	Pack for details.) BRANCH, LODGE OR CHAPT AL ORGANIZATION OR SOCI	PI TER PO IETY M	NONPROFIT HILANTHROPIC IF OLITICAL CANDIE UNICIPALITY OW ACILITIES	DATE				
2110 MALT, VINOUS AND SPIF 2170 FERMENTED MALT BEVE	AY AY	LIQUOR PERMIT NUMBER						
1. NAME OF APPLICANT ORGANIZATION COMMUNITY TOSPITA	1-Colorado We	st Hea	theure	Sysh	'm		257665	
2. MAILING ADDRESS OF ORGANIZATION (Include street, chylown and ZIP) 1 2373 & ROUGH Grand function	3. ADDRESS OF PLACE TO HAVE SPECIAL EVENT (Include street, city/lown and ZIP) 250 South Flm Street							
Grand juricity	Fruita CO 81521 (Read Birth							
NAME		OF BIRTH	HOME ADDRESS	State, ZIP)		PHONE NUMBER		
4. PRESISECT OF ORG. OF POLITICAL CHIS THOMAS		4-les	2373 G	load.	Grand	hunchly	242-1	0920
5, EVENT MANAGER WAYAA CEX SHOTOM	lenger 104-15	5-74	337 Arc	chas B	rive, In	uita	970-445	08/6
6. HAS APPLICANT ORGANIZATION OR POLITICAL CANDIDATE BEEN ISSUED A SPECIAL EVENT PERMIT THIS CALENDAR YEAR? NO YES HOW MANY DAYS? 7. IS PREMISES NOW LICENSED UNDER STATE LIQUOR OR BEER CODE? NO YES HOW MANY DAYS?								
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 10-08-2022 Date Hours From 1:30 p.m. Hours To 8:00 p.m.	_	ate ours From To	.m.:	Date Hours Fro		m Hours	-	.m.
I declare under penalty of perjury that all information therein is true	Oi in the second degree	ATH OF A	APPLICANT read the foreg	oing applic				and
SIGNITURE	1/17 DV-			rupist	Coord		S 23 6	+2-
The foregoing application has be and we do report that such permi	t, if granted, will comply THEREFORE, 1	remises, bu y with the p	usiness condu- provisions of Ti	cted and ci tle 12, Artic IPPROVE	naracter of thate 48, C.R.S).	ne applica 3., as ame	int is satisfact anded.	tory,
LOCAL LICENSING AUTHORITY (CITY O	H COUNTY)		COUNTY	TELEPHON	E NUMBER OF	CITY/COU	NIYCLERK	
SIGNATURE				TITLE			DATE	
DO NOT W	RITE IN THIS SPACI	E - FOR D	EPARTMEN	IT OF RE	VENUE US	E ONLY		
	u	IABILITY IN	FORMATION					
License Account Number	Liability Date		State	6		TOTAL		
			-750	(999) \$			•	













Joanne Virgilio, DO Jonathan King, MD

Kristina Goutsouliak, MD Jonathan Frandsen, MD

J. Ryan Bagley, MD Andrea Liggett, FNP

Grand Valley Oncology – Community Hospital 2373 G Road, Suite 140 Grand Junction, CO 81521

May 23, 2022

City of Fruita

Re: Radiation Oncology Fundraising Event / Special Event Permit

The radiation oncology department of Community Hospital is planning to hold a fundraising event at Reed Park on October 8, 2022. Tickets will be sold prior to the event and we are hoping around 150 to 200 will attend "Corn Hole for Cancer" and the beer garden. Set-up will be at 1:30 p.m. and the park will cleaned up by 8:00 p.m. Our plan is to set-up 15 corn hole boards/sets on the south end of Reed Park between the horseshoe pits and the pickle ball courts. The beer garden will be set up under the gazebo. We will be using the fencing that is provided by the Parks and Recreation Department from the City of Fruita to enclose the entire event. There will be one entrance/exit as well as two emergency exits and these will be marked as such. There will always be a volunteer, who is 21 years-of-age, present to ID and wrist-band those who are 21-years-of-age. This person/s will also ensure no alcohol will leave the designated area upon exiting and a sign will be posted at the exit stating "No Alcohol Past this Point". Alcohol percent greater than 3.2 will be served. Only cans (no glass containers) will be served to those with wrist-bands. Tickets will be sold and those serving the alcohol will not be exchanging any money.

Prior to the event there will be meeting/training with all volunteers to go over the event duties and responsibilities each will have.

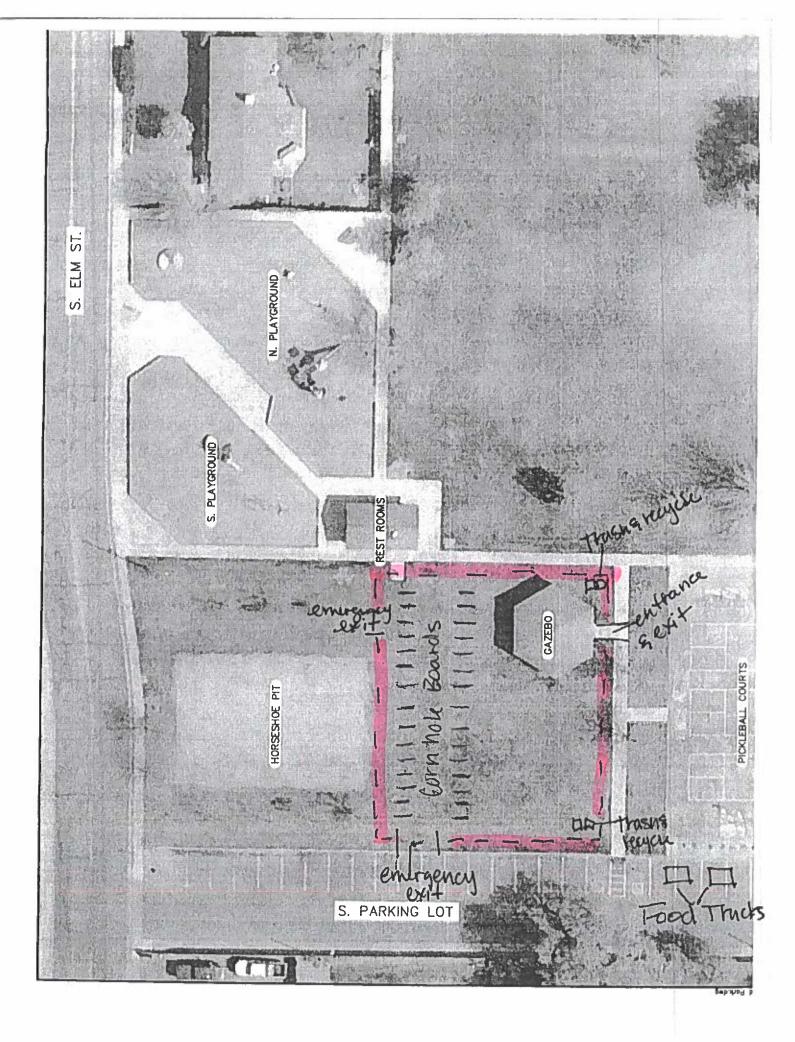
As per my previous meeting with the parks and recreation personnel for the same event over the past years, we will not be needing any additional paid security and there will be no other police presence due to the fact that the event will be entirely contained within Reed Park.

There will be many volunteers present at the event and will always be cleaning within and outside of the designated event area. There will be trash receptacles and recycle bins throughout the event area, as seen on the map.

There will be two food trucks during the event and will be parked on the south end of the park just south of the pickle ball courts. The trucks will have the proper licensing to work within the City of Fruita.

If there any further questions or concerns, please let me know so I am able to remedy the situation as soon as possible. Thank you for this opportunity to raise money for those in and outside our community that need extra help with transportation to receive their cancer care.

Sincerely, Margaret H. Strommenger R.T. (R)(T)



Fruita Police Department



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: June 17, 2022

Re: 2022 Community Hospital Cornhole Special Event Liquor Permit

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.



CITY OF FRUITA SPECIAL EVENTS PERMIT

(To be posted at the Event)

Event Name: Community Hospital Cornhole Tournament
Date(s): October 8, 2022
Event Location: Reed Park
Event Coordinator: Maggie Strommenger
Approved by: City of Fruita Parks and Recreation Director

SARAM

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MINIDDAYYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS 4/26/2022 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(les) 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). CONTACT Sara Mendenhall Home Loan & Investment Company 205 North 4th Street PHONE (A/C, No, Em): (970) 254-0846 E-MAIL ADDRESS: Saram@hlic.com FAX (A/C, No): (970) 243-3914 Grand Junction, CO 81501 INSURER(S) AFFORDING COVERAGE INSURER A : COPIC Insurance 11860 INSURED INSURER 6: Alimerica Financial Benefit 10212 Colorado West Healthcare System INSURER C: Pinnacol Assurance 41190 2021 N 12th St INSURER D: Grand Junction, CO 81501 INSURER E: INSURER F: COVERAGES CERTIFICATE NUMBER: 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 POLICY EFF POLICY EXP TYPE OF INSURANCE **POLICY NUMBER Ц**ШТS X COMMERCIAL GENERAL LIABILITY 1,000,000 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) CLAIMS-MADE X OCCUR HCC0011404 5/1/2022 5/1/2023 10,000 MED EXP (Any one person) 1,000,000 PERSONAL & ADVINJURY GENT AGGREGATE UNIT APPUES PER 3,000,000 GENERAL AGGREGATE POLICY PRO. 3,000,000 PRODUCTS - COMPIOP AGG OTHER: 3 AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (En accident) 1,000,000 X ANY AUTO AW49536174-10 5/1/2022 5/1/2023 **BOOKLY INJURY (Per person)** AUTOS ONLY SCHEDULED AUTOS BODILY INJURY (Per scident)
PROPERTY DAMAGE
(Per scident) HIRED ONLY NSHS/SMED X UMBRELLA LIAB OCCUR 20,000,000 EACH OCCURRENCE **EXCESS LIAB** UCC0011405 CLAIMS-MADE 5/1/2022 5/1/2023 20,000,000 AGGREGATE 10.000 DED X RETENTIONS X PER STATUTE WORKERS COMPENSATION AND EMPLOYERS' LIABILITY 4139147 1/1/2022 1/1/2023 1,000,000 ANY PROPRIETOR PARTNER EXECUTIVE OFFICER MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT 1,000,000 F.L. DISEASE - EA EMPLOYEE S If yes, describe under DESCRIPTION OF OPERATIONS below 1,000,000 E.L. DISEASE - POLICY LIMIT DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The City of Fruita is named as additional insureds for special events **CERTIFICATE HOLDER** CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. City of Fruita 325 E Aspen Fruita, CO 81521 AUTHORIZED REPRESENTATIVE Ames D. Hackton

ACORD 25 (2016/03)