DR 8439 (09/30/13) COLORADO DEPARTMENT OF REVENUE LIQUOR ENFORCEMENT DIVISION (303) 205-2300

## Application for a Special Events Permit

Departmental Use Only

In order to qualify for a Special Events Permit, You Must E and One of the Following (See back for details.)  Social Athletic Chartered Branch, Lodge Or Chapte Patriotic Of A National Organization Or Society Political Religious Institution	er	□ P	'hilanthrop 'olitical Ca funicipality (	ndidate							
LIAB Type of Special Event Applicant is A	oniving	ı for:			DO	NOT WRITE	IN T	HIS S	PACE		
2110 Malt, Vinous And Spirituous Liquor	v	Liquor Permit Number						_			
2170 Fermented Malt Beverage (3.2 Beer)	v										
		.00 Per Day					Ctata	Calaa	Fa N	.:	
1. Name of Applicant Organization or Political Candidate  State Sales Tax Numbe  Pruita Rotary Club  27-15995-0									15995-0000	iirea)	
2. Mailing Address of Organization or Political Candidate			3. Ad	dress of F	Place to Ha	ave Special Event		10 10 1			
(include street, city/town and ZIP) PO BOX 471			(include street, city/town and ZIP)								
FRUITA, CO 81521											
11101171, 00 01021			CIVIC CENTER PARK,								
			325 E	Aspen	Ave						
Name	Date of	Birth	Home Address (Street, City, State, ZIP)				Phone Number				
4. Pres./Sec'y of Org. or Political Candidate			460 N Mesa St, Fruita, CO 81			CO 81521				070 070 1107	
Karen Leonhart		5/1958	100 14 10				970-250-44	35			
5. Event Manager Lou Mudd	01	/16/55	126 S Maple St, Fruita, CO				31521 970-201-488 <sup>-</sup>				
Has Applicant Organization or Political Candidate been		7. Is premises now licensed under state liqu					.621				
Issued a Special Event Permit this Calendar Year?			7. 13	premises	now noon	sed under state liqu	01 01 0	cci cou	<b>.</b>		
NO YES HOW MANY DAYS?		_		<b>I</b> NO	O YES	TO WHOM?					
8. Does the Applicant Have Possession or Written Permission	for the U	se of The Pre	emises to	be Licens	ed?	es 🖸 No					
List Below the											
Date 4/20/2024 Date	D	ate			Date			Date			
Hours From 1:00 pm. Hours From	.m. H	ours From		.m.	Hours	From	.m.	Hours	From	.m.	
To 7:00 pm. To	.m.	То		.m.		То	.m.		То	.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 Jones Madd	Title event manager Date 3/20/2024										
1000	val of	Localli	concin	a Auth	ority (	City or Coun	h/\				
Report and Appro The foregoing application has been examined a								nnlicar	nt is satisfactor	nv.	
and we do report that such permit, if granted, will										у,	
		THIS API									
Local Licensing Authority (City or County)	-1	02	Ø ci	tv	Telepho	one Number of City/	County	Clerk	216		
The City of Fruita D county (970) 639-4210											
Signature			Title	THE	W BZ	EMAN, M	DY(	)i2	Date		
DO NOT WRITE IN THIS	SPAC	E - FOR	DEPA	RTME	NT OF	REVENUE U	SE C	NLY			
		Liability	Informa	tion							
License Account Number Liability D	Date		State					Total			
				-750	) (999)	\$					

## Lower Valley Firefighters Foundation Corn Hole tournament April 20, 2024 Special Event Permit Narrative

Lower Valley Firefighters Foundation is sponsoring a Corn Hole Tournament and Fruita Rotary Club has been asked to provide beer service during the event. Fruita Rotary has served beer at many events and festivals in Fruita with a good track record. The beer we serve will come from one of our local breweries and will be poured into plastic cups from kegs.

- 1) <u>Description</u>: This Cornhole Tournament is a fundraiser for the Foundation. There will be up to 40 2-person corn hole teams, for a total of 80 competitors, plus approximately 100 spectators.
- 2) Security: Rotary Club members will monitor entrances to the licensed area to make sure no alcohol enters or exits the area. Signs will be posted indicating that no alcohol can be brought into or exit the area.
- 3) <u>Crowd Control</u>: Rotarians will monitor patrons and the consumption of alcohol to prevent any patrons from becoming overly intoxicated, and stop serving anyone who is intoxicated. Fruita PD will be notified if any activity escalates beyond the control of Fruita Rotary Club.
- 4) <u>Fencing/Barriers</u>: The licensed area as marked on the attached map will be enclosed by fencing.
- 5) <u>Toilets</u>: If the Firefighters Foundation does not procure a room in the Civic Center for participants access to restrooms then Porta-Potties will be located near the north side of the fenced area.
- 6) <u>Signage</u>: Signs will be posted at each entrance/exit indicating no alcohol allowed into or out of the licensed premise.
- 7) <u>ID's</u>: ID's will be checked by Fruita Rotary members and a wristband issued indicating that their ID has been checked for legal consumption age. Only persons with a valid ID showing proof of age will be served.
- 8) Many Fruita Rotarians have been SMART server trained and will be present at this event.
- 9) <u>Trash</u>: Trash receptacles will be available throughout the park including within the licensed area.
- 10) <u>Food:</u> there will be a food available for purchase at this event. Fruita Rotary will have snacks available at the beer booth.



CIVIC CENTER PARK

Lower Valley Firefighters Foundation Beer Garden Map

## **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:** April 5, 2024

**Re:** 2024 LV Firefighter Fundraiser 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.



## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 03/18/2024

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).

	SUBROGATION IS WAIVED, subject ( is certificate does not confer rights to							equire an endorsement.	A sta	tement on			
	DUCER	tile	CCIQ	noate noider in hea or st	CONTACT Crystal Gleason								
Hylant Group Inc						NAME: Orystal Globson PHONE (A/C, No, Ext): 419-259-2710 (A/C, No): 419-255-7557							
811 Madison Ave Toledo OH 43604					[A/C, No, Ext): 419-255-7557 E-MAIL ADDRESS:								
IU	edo O(143004				ADDRES		NAIC#						
						INSURER(S) AFFORDING COVERAGE INSURER A: Westchester Surplus Lines Insurance Company							
Insured						INSURER B:							
All Active US Rotary Clubs & Districts					INSURE								
Fruita Rotary Club													
Attn: Risk Management Dept.					INSURER D: INSURER E:								
1560 Sherman Avenue Evanston, IL 60201-3698						INSURER F:							
		NUMBER:	REVISION NUMBER:										
C	IIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY REC ERTIFICATE MAY BE ISSUED OR MAY P	QUIR ERT	EMEN AIN, 1	NT, TERM OR CONDITION THE INSURANCE AFFORDI	OF ANY	CONTRACT	OR OTHER DESCRIBED	OCUMENT WITH RESPEC	T TO V	VHICH THIS			
	CCLUSIONS AND CONDITIONS OF SUCH F				BEEN R				<del></del>				
INSR LTR			SUBR WVD			POLICY EFF (MM/DD/YYYY)		LIMITS					
Α			.	G73578917002	Ì	7/1/2023	7/1/2024	DAMAGE TO RENTED	\$ 2,000,				
	CLAIMS-MADE X OCCUR							PREMISES (Ea occurrence)	\$ 500,000				
	X Liquor Liability Included							· · · · · · · · · · · · · · · · · · ·	\$				
									\$ 2,000,				
	X POLICY PROJECT LOC								\$4,000,				
									\$ 4,000,000 \$				
Α	OTHER: AUTOMOBILE LIABILITY	Y		G73578917002		7/1/2023	7/1/2024	COMBINED SINGLE LIMIT	\$2,000,000				
•	ANY AUTO	•		010070017002		17 172020	17112024	(Ea accident) BODILY INJURY (Per person)	\$				
	OWNED SCHEDULED												
	X HIRED X NON-OWNED							PROPERTY DAMAGE	\$				
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$				
	UMBRELLA LIAB OCCUR			Not applicable				EACH OCCURRENCE	\$				
	EXCESS LIAB CLAIMS-MADE			то аррисаме	Ì			AGGREGATE	\$				
	DED RETENTION\$							7100HEOTHE	\$				
	WORKERS COMPENSATION Not applicable							PER OTH- STATUTE ER	· <del>··········</del>				
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE   N/								E.L. EACH ACCIDENT	\$				
	(Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE	\$				
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$				
The	cription of operations / Locations / Vehicles Certificate Holder is included as an add fillity policy, but only to the extent bodily in	ition	al ins	ured where required by wr	itten co	ntract or perm	nit subject to	the terms and conditions o	of the ge	eneral			
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<u>~</u>	DTIFICATE HOLDED				C 0 N/	OFI LATION							
	RTIFICATE HOLDER				LANG	CELLATION			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>				
City of Fruita, 325 E Aspen Ave, Frutia CO 81521						OULD ANY OF	THE ABOVE D	DESCRIBED POLICIES BE C	ANCELI	ED BEFORE			
Fruita Rotary Club						THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN							
Event: LVFF Cornhole Tournament						ACCORDANCE WITH THE POLICY PROVISIONS.							
	Civic Center Park				AUTHORIZED REPRESENTATIVE								

Date: April 20, 2024