

<input checked="" type="checkbox"/> New License <input checked="" type="checkbox"/> New-Concurrent <input type="checkbox"/> Transfer of Ownership <input type="checkbox"/> State Property Only <input type="checkbox"/> 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: <a href="http://www.colorado.gov/enforcement/liquor">www.colorado.gov/enforcement/liquor</a>			
1. Applicant is applying as a/an <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Association or Other <input type="checkbox"/> Corporation <input type="checkbox"/> 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 <b>Mike's Famous Chicken LLC</b>			FEIN Number <b>85-3692153</b>
2a. Trade Name of Establishment (DBA) <b>Mike's Famous Chicken</b>		State Sales Tax Number <b>94809708</b>	Business Telephone <b>(970) 985-8003</b>
3. Address of Premises (specify exact location of premises, include suite/unit numbers) <b>233 E Aspen Ave</b> City: <b>Fruita</b> County: <b>Mesa</b> State: <b>CO</b> ZIP Code: <b>81521</b>			
4. Mailing Address (Number and Street) <b>233 E Aspen Ave.</b>		City or Town <b>Fruita</b>	State: <b>CO</b> ZIP Code: <b>81521</b>
5. Email Address <b>mikesfamouschicken@gmail.com</b>			
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
<b>Section A Nonrefundable Application Fees*</b>		<b>Section B (Cont.) Liquor License Fees*</b>	
<input 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 type="checkbox"/> Lodging & Entertainment - L&E (City) .....\$500.00 <input type="checkbox"/> Lodging & Entertainment - L&E (County) .....\$500.00 <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	
<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 checked="" 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			
* Note that the Division will not accept cash			
Questions? Visit: <a href="http://www.colorado.gov/enforcement/liquor">www.colorado.gov/enforcement/liquor</a> for more information			
Do not write in this space - For Department of Revenue use only			
<b>Liability Information</b>			
License Account Number	Liability Date	License Issued Through (Expiration Date)	Total \$

Name	Type of License	Account Number			
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>					
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): <div style="display: flex; justify-content: space-between;"> <div>           a. Been denied an alcohol beverage license? <input type="checkbox"/> <input checked="" type="checkbox"/>            b. Had an alcohol beverage license suspended or revoked? <input type="checkbox"/> <input checked="" type="checkbox"/>            c. Had interest in another entity that had an alcohol beverage license suspended or revoked? <input type="checkbox"/> <input checked="" type="checkbox"/> </div> <div style="text-align: right;"> <input type="checkbox"/> <input checked="" type="checkbox"/> </div> </div>					
If you answered yes to 8a, b or c, explain in detail on a separate sheet.					
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;">Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></span>					
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? <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> <input checked="" type="checkbox"/> </div> <div style="text-align: right;"> <input type="checkbox"/> <input checked="" type="checkbox"/> </div> </div>					
<div style="text-align: right;">             Waiver by local ordinance? <input type="checkbox"/> <input type="checkbox"/>              Other: _____           </div>					
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 (>) 10,000? NOTE: 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;">Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></span>					
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 (<) 10,000? NOTE: 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;">Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></span>					
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 type="checkbox"/></span>					
13 b. Are you a Colorado resident? <span style="float:right;"><input checked="" type="checkbox"/> <input type="checkbox"/></span>					
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;">Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></span>					
15. Does the applicant, as listed on line 2 of this application, have legal possession of the premises by ownership, lease or other arrangement? <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Ownership <input checked="" type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____         </div> <div style="text-align: right;"> <input checked="" type="checkbox"/> <input type="checkbox"/> </div> </div>					
a. If leased, list name of landlord and tenant, and date of expiration, exactly as they appear on the lease: <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width:40%;">Landlord <b>Dan Collins</b></td> <td style="width:40%;">Tenant <b>Mike &amp; Jamie Williams</b></td> <td style="width:20%;">Expires <b>1/2023</b></td> </tr> </table>			Landlord <b>Dan Collins</b>	Tenant <b>Mike &amp; Jamie Williams</b>	Expires <b>1/2023</b>
Landlord <b>Dan Collins</b>	Tenant <b>Mike &amp; Jamie Williams</b>	Expires <b>1/2023</b>			
b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question 16. <span style="float:right;">Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></span>					
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".					
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.					
Last Name	First Name	Date of Birth			
Last Name	First Name	Date of Birth			
		FEIN or SSN			
		FEIN or SSN			
		Interest/Percentage			
		Interest/Percentage			
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.					
17. Optional Premises or Hotel and Restaurant Licenses with Optional Premises: <div style="display: flex; justify-content: space-between;"> <div>           Has a local ordinance or resolution authorizing optional premises been adopted?         </div> <div style="text-align: right;"> <input type="checkbox"/> <input type="checkbox"/> </div> </div>					
<div style="text-align: right;">             Number of additional Optional Premise areas requested. (See license fee chart) _____           </div>					
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.					
19. Liquor Licensed Drugstore (LLDS) applicants, answer the following: <div style="display: flex; justify-content: space-between;"> <div>           a. Is there a pharmacy, licensed by the Colorado Board of Pharmacy, located within the applicant's LLDS premise?         </div> <div style="text-align: right;"> <input type="checkbox"/> <input type="checkbox"/> </div> </div>					
If "yes" a copy of license must be attached.					

Name	Type of License	Account Number		
<b>20. Club Liquor License applicants answer the following: Attach a copy of applicable documentation</b>				
a. Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>		
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
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?	<input type="checkbox"/>	<input type="checkbox"/>		
<b>21. Brew-Pub, Distillery Pub or Vintner's Restaurant applicants answer the following:</b>				
a. Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached)	<input type="checkbox"/>	<input type="checkbox"/>		
<b>22. Campus Liquor Complex applicants answer the following:</b>				
a. Is the applicant an institution of higher education?	<input type="checkbox"/>	<input type="checkbox"/>		
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.	<input type="checkbox"/>	<input type="checkbox"/>		
<b>23. For all on-premises applicants.</b>				
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 an Manager Permit Application - DR 8000 and fingerprints.				
Last Name of Manager	First Name of Manager			
<b>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.</b>				
		Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>25. Related Facility - Campus Liquor Complex applicants answer the following:</b>				
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.				
b. Designated Manager for Related Facility- Campus Liquor Complex				
Last Name of Manager	First Name of Manager			
<b>26. Tax Information.</b>				
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
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.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<b>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.</b>				
Name	Home Address, City & State	DOB	Position	%Owned
Michael Williams	975 Echo Canyon St.		Co-owner	50
Name	Home Address, City & State	DOB	Position	%Owned
	Fruta, Co			
Name	Home Address, City & State	DOB	Position	%Owned
	81521			
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
<b>** If applicant is owned 100% by a parent company, please list the designated principal officer on above.</b>				
<b>** Corporations - the President, Vice-President, Secretary and Treasurer must be accounted for above (Include ownership percentage if applicable)</b>				
<b>** If total ownership percentage disclosed here does not total 100%, applicant must check this box:</b>				
<input checked="" type="checkbox"/> 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.				

Name		Type of License	Account Number	
<b>Oath Of Applicant</b>				
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 <i>Jamie Williams</i>		Printed Name and Title <i>Jamie Williams</i>		Date <i>12/2/21</i>
<b>Report and Approval of Local Licensing Authority (City/County)</b>				
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:				
<input type="checkbox"/> Fingerprinted <input type="checkbox"/> 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)				
<input type="checkbox"/> Date of inspection or anticipated date _____ <input type="checkbox"/> 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 <i>The City of Fruita</i>		Telephone Number <i>(970) 858-3663</i>		<input checked="" type="checkbox"/> Town, City <input type="checkbox"/> County
Signature	Print <i>JOEL KINCAID</i>	Title <i>MAYOR</i>	Date	
Signature	Print <i>MARGARET SELL</i>	Title <i>CITY CLERIC</i>	Date	

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

I, JAMIE WILLIAMS am signing this Tax Check Authorization, Waiver and Request to Release Information (hereinafter "Waiver") on behalf of MICEL FARM CHICKEN (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 is 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) <u>Jamie Williams</u>		Social Security Number/Tax Identification Number <u>[REDACTED]</u>	
Address <u>975 Echo Canyon St.</u>			
City <u>Fruita Co</u>		State <u>CO</u>	Zip <u>81521</u>
Home Phone Number <u>(970) 639-8215</u>		Business/Work Phone Number <u>(970) 985-8003</u>	
Printed name of person signing on behalf of the Applicant/Licensee <u>JAMIE WILLIAMS</u>			
Applicant/Licensee's Signature (Signature authorizing the disclosure of confidential tax information) <u>Jamie Williams</u>			Date signed <u>12/6/21</u>

### 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).



**FRUITA**  
COLORADO

325 E Aspen  
Fruita, CO 81521  
(970) 858-3663

**CITY OF FRUITA LOCAL LICENSING AUTHORITY, MESA COUNTY COLORADO**

**PRELIMINARY FINDINGS AND REPORT UPON APPLICATION FOR A BEER AND WINE LIQUOR LICENSE**

**IN RE:** Mike's Famous Chicken, LLC dba Mike's Famous Chicken  
233 E. Aspen Avenue  
Fruita, CO 81521

**TO THE APPLICANT NAMED ABOVE AND OTHER INTERESTED PARTIES:**

You are hereby advised that with regard to your application for a Hotel and Restaurant Liquor License, an investigation has been made and based on the results thereof, the following has been determined:

1. That the application was filed on December 7, 2021.
2. That the Notices of Public Hearing on this matter were posted by the applicant on January 7, 2022 and publication was made in the Daily Sentinel on January 12, 2022 for the hearing date of February 1, 2022.
3. There has not been, within two years preceding the date of your application, a denial of an application by the County Commissioners of Mesa County, the State Licensing Authority, or the Local Licensing Authority of the City of Fruita for a Hotel & Restaurant Liquor License at the location for which you make application for the reason that the reasonable requirements of the neighborhood and the desires of the inhabitants have been satisfied by the existing outlets.
4. It appears from the evidence submitted by you that you will be entitled to possession of the premises where you propose to exercise the license applied for.
5. Employees serving alcohol shall attend an Approved Responsible Vendors Training Class. This is training on Colorado laws pertaining to but not limited to: serving alcohol, identifying intoxicated persons, and how to identify those of age to drink alcoholic beverages. All employees that serve alcohol should be trained either prior to beginning employment or within 30 days of employment. The Liquor Enforcement Division (LED) does NOT ACCEPT online Responsible Vendor Training; it must be either done in a "classroom setting" or "live streaming" where the student and the instructor have live interaction. The List of Approved Vendors who provide training may be found at <https://sbg.colorado.gov/approved-responsible-vendors-training>. Proof of attendance by employees selling alcohol must be submitted to the City Clerk's office and will be kept on file.

6. The proposed establishment is located in a Downtown Mixed Use District. Food Service, Restaurant (including alcohol) is an allowed use in this zone. A certificate of occupancy, a food establishment permit and any other applicable licenses and permits must be issued prior to commencement of operations including Planning Clearances from the City of Fruita Planning Department.
7. The building and grounds where you propose to exercise the privilege of serving alcohol do not appear to be within 500 feet from any public or parochial school or the principal campus of any college, university or seminary.
8. Within a one-mile radius from the building and grounds where you propose to sell malt vinous and spirituous liquors on the premises, there are the following Hotel & Restaurant License establishments:

Dragon Treasure Chinese Restaurant  
576 Kokopelli Blvd., Fruita, CO

El Tapatio  
402 Jurassic Ave., Fruita, CO

Rib City Grill  
455 Kokopelli Blvd., Fruita, CO

Strayhorn Grill  
456 Kokopelli Blvd., #10, Fruita, CO

Fiesta Guadalajara Fruita  
103 Highway 6 & 50, Fruita, CO

Mi Ranchito Taco Shop  
439 Highway 6 & 50, Fruita, CO

Karma Kitchen  
229 E. Aspen Ave., Fruita, CO

9. The following criminal history information has been brought to the attention of the authority:

Applicant (including partners, officers, directors over 10% shareholders)

Co-owner:	Michael Patrick Williams:	ALL CLEAR
Co-owner:	Jamie Lynn Williams:	ALL CLEAR

Source of information:

Colorado Bureau of Investigation (Exhibit A.1 and A.2)

Mesa County Sheriff's Office	(Exhibit B.1 and B.2)
Grand Junction Police Department	(Exhibit C)
Fruita Police Department	(Exhibit D)
Fulton County (OH) Sheriff's Office	(Exhibit E)
Lawrence Township (OH) Police Dept.	(Exhibit F)

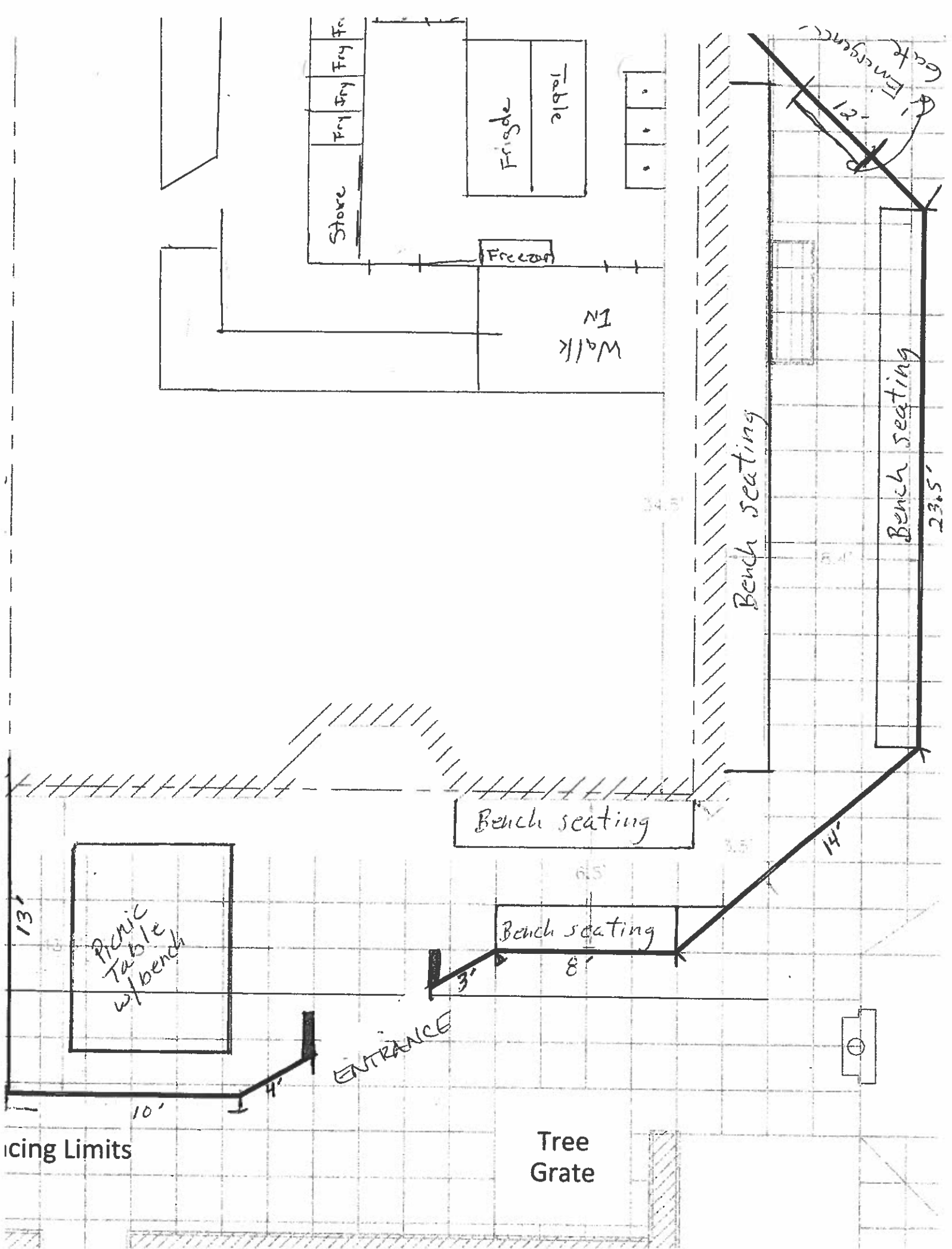
10. The public hearing on your application will be held on **February 1, 2022 at 7:00 p.m. in the Council Chambers at the Fruita City Hall, 325 E Aspen, Fruita, CO.** At said hearing, you shall have the opportunity to be heard regarding all matters related to your application, including all matters set forth herein.
11. At the public hearing, and pursuant to CRS 12-46-108, as amended, you have the burden of proving that you are qualified to hold the license applied for and that your character, record and reputation are satisfactory; that the neighborhood needs this license and that the residents of the neighborhood desire that this license be granted.
14. A copy of the "Order of Hearing" procedures used by the Local Licensing Authority of the City of Fruita for use and guidance in holding hearings on liquor license applications is attached for your information and review. (Exhibit G)

Dated this 12<sup>th</sup> day of January, 2022.

  
\_\_\_\_\_

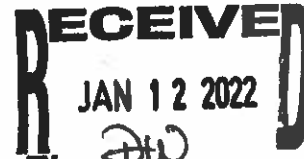
Debra Woods, Deputy City Clerk  
for the Local Licensing Authority







# FRUITA COLORADO SURVEY



An application has been filed with the City of Fruita for a liquor license. In its consideration of this application, the Fruita City Council must consider the reasonable requirements of the neighborhood and the desires of the inhabitants. An "inhabitant" is an individual who resides in a given neighborhood or community for more than six months each year. The "neighborhood" is defined generally as the area between L Road to the North and the Colorado National Monument to the South, and between 15 1/2 Road to the West and 20 Road to the East. A public hearing will be advertised and held on this application in the Council Chambers at the Fruita Civic Center, 325 E. Aspen, Fruita, Colorado on the first and third Tuesdays of the month at 7:00 pm.

**Do not sign this survey unless you are 21 years or older and reside within the area bounded on the north by L Road, on the south by Colorado National Monument, on the west by 15 1/2 Road, and on the 20 Road to the East.**

As an owner of property in the neighborhood, an employee or business lessee of property in the neighborhood and/or an inhabitant who resides in the neighborhood for more than six months each year:

**Question 1.** *I believe the reasonable requirements of the neighborhood are already being met by other existing outlets. (Yes or No)*

As an inhabitant who resides in the neighborhood for more than six month each year:

**Question 2.** *It is my desire that the license be issued. (Yes or No or Not Applicable (N/A))*

Name (signature)	Address	Business (B) Residence (R)	Question 1		Question 2		N/A	Date
			Yes	No	Yes	No		
Jessica Compton	108 LYNHURST AVE	R		X	X			1/6/22
Nate Anderson	736 Galena Dr	R		X	X			1/6/2022
Katie Anderson	736 Galena Dr.	R		X	X			1/6/22
Nicole Shires	506 S. MESA ST.	R		X	X			1-6-22
Art Shires	506 S. MESA ST	R		X	X			1/6/22
[Signature]	940 FENDCANYON ST	R		X	X			1/6/22
[Signature]	819 Galena White	R		X	X			1/6/22
[Signature]	301 TAMMONT ST	R		X	X			1/6/22
[Signature]	1143 E CAROLINA AVE UNIT 3	R		X	X			1/6/22
Morgan Krieger	1059 Cedarway	R		X	X			1/6/22
Eli Konrad	1059 Cedarway	R		X	X			1/6/22
Pam Maddy	815 Celestite Dr.	R		X	X			1/6/22
Nate Setzer	278 N. FLAM ST	R		X	X			020622
Samara Kuncel	401 Oakwood Ave	R		X	X			1/6/22

**Question 1.** I believe the reasonable requirements of the neighborhood are already being met by other existing outlets.  
(Yes or No)

As an inhabitant who resides in the neighborhood for more than six month each year:

**Question 2.** It is my desire that the license be issued. (Yes or No or Not Applicable (N/A))

Name (signature)	Address	Business (B) Residence (R)	Question 1		Question 2		N/A	Date
			Yes	No	Yes	No		
	762 Sabal Dr	R		X	X			1/6/22
	621 S Annabelle Ct	R		X	X			1/6/22
	798 Sabal	R		X	X			1/6/22
	1126 Kiefer	R		X	X			1/6/22
	261 N. Mulberry	R		X	X			1/6/22
	625 Maple St. #2	R		X	X			1/6/22
	1290 SANTA FE CIR	R		X	X			1/6/22
	205 Sunset	R		X	X			1-7-22
	1248 Inverness Way	R		X	X			1/6/22
	" "	R		X	X			1/6/22
	1131 Linden Ct	R		X	X			1/6/22
	1131 LINDEN CT	R		X	X			1-6-22
	501 Middlebury Ct	R		X	X			1-6-2022
	813 cedar ct	R		X	X			1-6/22
	1169 S Orchard St	R		X	X			1/6/22
	813 E. Carolina	R		X	X			1-6-22
	1074 Cedar way	R		X	X			1-6-22
	1074 Cedar way	R		X	X			1/10/22
	1291 Sag. Harvis	R		X	X			1/6/22
	923 Squire ct.	R		X	X			1/7/22
	156 N MESA st	R		X	X			1-7-22
	205 SUNSET CT	R		X	X			1/7/22

AFFIDAVIT OF  
CIRCULATOR

I, Michael Williams, who resides at 233 East Aspen  
(print name) (print address)

do hereby certify that:

I circulated the foregoing survey for a Hotel License  
(print type of license)

Liquor license application within the area described as the neighborhood, on the date(s) of  
1-6, 2022, and that;

I personally witnessed each signature appearing on the petition.

To the best of my knowledge and belief, each of the person signing was, at the time of signing, an owner of the property in the neighborhood, an employee or business lessee of property in the neighborhood for more than six (6) months each year, and;

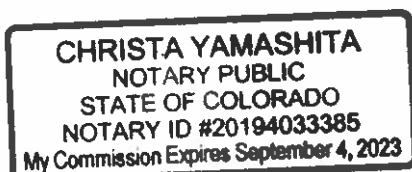
Each person who signed the petition represented him/herself to be 21 years of age or older and;

Each person who signed the petition were not paid and will not be paid, directly or indirectly, any money or other thing of value for the purpose of inducing or causing signature of this survey. I also hereby affirm that no promises, threats, or inducements were employed whatsoever in connection with the presentation of this petition and that every signature appearing hereon was completely free and voluntarily given.

Michael Williams  
Circulator

STATE OF COLORADO )  
COUNTY OF MESA ) SS.  
)

Subscribed and sworn to before me this 19 day of January, 2022.



Christa Yamashita  
Notary Public

Sept 4 September 4, 2023  
My commission expires