DR 8404 (03/26/24)
COLORADO DEPARTMENT OF REVENUE
Liquor Enforcement Division
PO BOX 17087
Denver CO 80217-0087
(303) 205-2300

RECEIVED
JUL 29 2024

Colorado Liquor Retail License Application

* Note that the Division will not accept cash Paid by Check Date Uploaded to Movelt
Paid Online
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: <u>SBG.Colorado.gov/Liquor</u>
Applicant is applying as a/an Individual Limited Liability Company Association or Other
Corporation Partnership (includes Limited Liability and Husband and Wife Partnerships)
Applicant Name If an LLC, name of LLC; if partnership, at least 2 partner's names; if corporation, name of corporation
LA CUCION I laliana Dello chef Luil LLC
FEIN Number State Sales Tax Number
* *
Trade Name of Establishment (DBA) Business Telephone
La cucina ilaliana dello chet Meil
Address of Premises (specify exact location of premises, include suite/unit numbers)
920 GRALIO AUI
City County State ZIP Code
GRAND CO 80447
Mailing Address (Number and Street) City or Town State ZIP Code
Email Address
L'Hall Address
If the premises currently has a liquor or beer license, you must answer the following questions.
Present Trade Name of Establishment (DBA)
Frontier et Dacifico
Present State License Number Present Class of License Present Expiration Date
03 19462 Hotel: Rest-City 8.15.2024

Section A Nonrefundable application fees*

	Application Fee for New License	\$1,100.00
X	Application Fee for New License with Concurrent Review	\$1,200.00
1		
_	Section B Liquor License Fees*	
	Add Optional Premises to H & R\$100.00 X	Total
	Add Sidewalk Service Area	\$75.00
	Arts License (City)	\$308.75
	Arts License (County)	\$308.75
	Beer and Wine License (City)	\$351.25
	Beer and Wine License (County)	\$436.25
	Brew Pub License (City)	\$750.00
	Brew Pub License (County)	\$750.00
	Campus Liquor Complex (City)	\$500.00
	Campus Liquor Complex (County)	\$500.00
	Campus Liquor Complex (State)	\$500.00
	Club License (City)	\$308.75
	Club License (County)	
	Distillery Pub License (City)	
	Distillery Pub License (County)	\$750.00
	Hotel and Restaurant License (City)	\$500.00
	Hotel and Restaurant License (County)	\$500.00
	Hotel and Restaurant License with one optional premises (City)	
	Hotel and Restaurant License with one optional premises (County)	

Section B Liquor License Fees* (Continued)

Liquor–Licensed Drugstore (City)	\$227.50
Liquor-Licensed Drugstore (County)	\$312.50
Lodging & Entertainment - L&E (City)	\$500.00
Lodging & Entertainment - L&E (County)	\$500.00
Manager Registration - H & R	\$30.00
Manager Registration - Tavern	\$30.00
Manager Registration - Lodging & Entertainment	\$30.00
Manager Registration - Campus Liquor Complex	\$30.00
Optional Premises License (City)	\$500.00
Optional Premises License (County)	\$500.00
Racetrack License (City)	\$500.00
Racetrack License (County)	\$500.00
Resort Complex License (City)	\$500.00
Resort Complex License (County)	\$500.00
Related Facility - Campus Liquor Complex (City)	\$160.00
Related Facility - Campus Liquor Complex (County)	\$160.00
Related Facility - Campus Liquor Complex (State)	\$160.00
Retail Gaming Tavern License (City)	\$500.00
Retail Gaming Tavern License (County)	\$500.00
Retail Liquor Store License - Additional (City)	\$227.50
Retail Liquor Store License - Additional (County)	\$312.50
Retail Liquor Store (City)	\$227.50

Section B Liquor L	icense Fees* (Continued)
Retail Liquor Store (County)	\$312.50
Tavern License (City)	\$500.00
Tavern License (County)	\$500.00
Vintners Restaurant License (City)	\$750.00
Vintners Restaurant License (County)	\$750.00
Questions? Visit: SBG.Colora	ido.gov/Liquor for more information
Do not write in this space - Fe	or Department of Revenue use only
Liabilit	y 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: SBG.Colorado.gov/Liquor for more information

Items submitted, please check all appropriate boxes completed or documents submitted

l.	Applicant information
	Applicant/Licensee identified
	State sales tax license number listed or applied for at time of application
	License type or other transaction identified
	Return originals to local authority (additional items may be required by the local licensing authority)
	All sections of the application need to be completed
	Master file applicants must include the Application for Master File form DR 8415 and applicable fees to this Retail License Application
II.	Diagram of the premises
	No larger than 8½" X 11"
	Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.)
	Separate diagram for each floor (if multiple levels)
	Return originals to local authority (additional items may be required by the local licensing authority)
	Kitchen - identified if Hotel and Restaurant
	Bold/Outlined Licensed Premises
II.	Proof of property possession (One Year Needed)
	Deed in name of the applicant (or) (matching Applicant Name provided on page 1) date stamped / filed with County Clerk
	Lease in the name of the applicant (or) (matching Applicant Name provided on page 1)
	Lease assignment in the name of the applicant with proper consent from the landlord and acceptance by the applicant
	Other agreement if not deed or lease. (matching Applicant Name provided on page 1)

	Y Y
	Complete DR 8404-I for each principal (individuals with more than 10% ownership, officers, directors, partners, members)
	Fingerprints taken and submitted to the appropriate Local Licensing Authority through an approved State Vendor. Master File applicants submit results to the State Do not complete fingerprint cards prior to submitting your application. The Vendors are as follows: IdentoGO Appointment Scheduling Website: https://uenroll.identogo.com/workflows/25YQHT Phone: 844-539-5539 (toll-free) IdentoGO FAQs: https://www.colorado.gov/pacific/cbi/identification-faqs State Liquor Code for IdentoGO: 25YQHT Colorado Fingerprinting Appointment Scheduling Website: http://www.coloradofingerprinting.com/cabs/ Phone: 720-292-2722 833-224-2227 (toll free) State Liquor Code for Colorado Fingerprinting: C030LIQI
	Purchase agreement, stock transfer agreement, and/or authorization to transfer license
	List of all notes and loans (Copies to also be attached)
V.	Sole proprietor/husband and wife partnership (if applicable)
	Form DR 4679 Lawful Presence Affidavit
	Copy of State issued Driver's License or Colorado Identification Card for each applicant
VI.	Corporate applicant information (if applicable)
	Certificate of Incorporation
	Certificate of Good Standing
	Certificate of Authorization if foreign corporation (out of state applicants only)
VII.	Partnership applicant information (if applicable)
	Partnership Agreement (general or limited).
	Certificate of Good Standing
VIII.	Limited Liability Company applicant information (if applicable)
	Copy of articles of organization
	Certificate of Good Standing
	Copy of Operating Agreement (if applicable)
	Certificate of Authority if foreign LLC (out of state applicants only)
IX.	Manager registration for Hotel and Restaurant, Tavern, Lodging & Entertainment, and Campus Liquor Complex licenses when included with this application
	\$30.00 fee
	If owner is managing, no fee required

IV. Background information (DR 8404-I) and financial documents

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managers if a limited liability company; or officers, stoc corporation) or managers under the age of twenty-one	kholders or directors if a	O Yes	Ø No
2. Has the applicant (including any of the partners if a parliability company; or officers, stockholders or directors Colorado or any other state):			
a. Been denied an alcohol beverage license?		O Yes	Ø No
b. Had an alcohol beverage license suspended or re	evoked?	O Yes	⊗ No
c. Had interest in another entity that had an alcohol suspended or revoked?		O Yes	Ø No
If you answered yes to a, b or c above, explain in detai	l on a separate sheet.		
3. Has a liquor license application (same license class), that feet of the proposed premises, been denied within the pre-		O Yes	Ø No
If "yes", explain in detail.			
×			
4. Are the premises to be licensed within 500 feet, of any that meets compulsory education requirements of Colo campus of any college, university or seminary?	rado law, or the principal	O Yes	. ∕No
	Waiver by local ordinance?	O Yes	≫ No
	Other		
5. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor 1500 feet of another retail liquor license for off-premise with a population of greater than (>) 10,0000? NOTE: I determined by a radius measurement that begins at the LLDS/RLS premises for which the application is being principal doorway of the Licensed LLDS/RLS	s sales in a jurisdiction The distance shall be e principal doorway of the made and ends at the	O Yes	Ø No

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6. 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 (<) 10,0000? 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.	O Y	′ es	Ø No	o
For additional Retail Liquor Store only.				
a. Was your Retail Liquor Store License issued on or before January 1, 2016?	O Y	es	⊗ No)
b. Are you a Colorado resident?	Ø Y	es	O No)
7. 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 current financial interest in said business including any loans to or from a licensee.	O Y6	es	⊘ No)
8. Does the applicant, as listed on line 2 of this application, have legal possession of the premises by ownership, lease or other arrangement?	Ø Ye	es	O No)
Ownership Lease O Other (Explain in detail)				
a. If leased, list name of landlord and tenant, and date of expiration, exactly as the lease:	they	appe	ar on	
Landlord Tenant	Expires	s		
Jesus Vareta Joseph Britanha	6.	13.	20	199
b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question on page 9	O Ye	es <i>j</i>	Ø No	
c. Attach a diagram that designates the area to be licensed in black bold outline dimensions) which shows the bars, brewery, walls, partitions, entrances, exit room shall be utilized for in this business. This diagram should be no larger to	s and	what	each	ı

business; or who will receive mon	ey from this busine	ess? Attach a sepa	rate sheet if necessary.
Last Name		First Name	
Date of Birth (MM/DD/YY)	FEIN or SSN Numb	per /	Interest/Percentage
	1.0		
Last Name		First Name	
Date of Birth (MM/DD/YY)	FEIN or SSN Numb	er	Interest/Percentage
Last Name		First Name	
Date of Birth (MM/DD/YY)	FEIN or SSN Numb	er	Interest/Percentage
Attach copies of all notes and se	X 72		
volume, profit, sales, giving of a 10. Optional Premises or Hotel and Has a local ordinance or resoluti	Restaurant Licens	es with Optional P	
Number of additional Optional Premis	se areas requested	. (See license fee d	hart)
For the addition of a Sidewalk Serservice area and documentation residewalk. Documentation may included the legal permissions.	eceived from the lo	ocal governing bo	dy authorizing use of the
11. Liquor Licensed Drugstore (LL	DS) applicants, ar	nswer the followin	g:
 a. Is there a pharmacy, licens within the applicant's LLDS 			
f "yes" a copy of license must b	e attached.		`

9. 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

12. 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? 				
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?				
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				
13. 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)				
14. Campus Liquor Complex applicants answer the following:				
a. Is the applicant an institution of higher education?				
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.				
15. For all on-premises applicants.				
a. 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				
16. 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.				
Name				
Type of License Account Number				
7 GOOGHE NUMBER				

17. Related Facility - Campus Liquor Complex app	olicants answer the following:
a. Is the related facility located within the background Liquor Complex?	ooundaries of the Campus O Yes 💢 No
If yes, please provide a map of the geograp	ohical location within the Campus Liquor Complex. sues outside the geographical location of the
b. Designated Manager for Related Facility -	Campus Liquor Complex
Last Name of Manager	First Name of Manager
18. Tax Information.	
a. Has the applicant, including its manager, p stockholders, members (LLC), managing n person with a 10% or greater financial inter in final order of a tax agency to be delinque local taxes, penalties, or interest related to	nembers (LLC), or any other rest in the applicant, been found ent in the payment of any state or
b. Has the applicant, including its manager, p stockholders, members (LLC), managing n person with a 10% or greater financial inter any fees or surcharges imposed pursuant to	nembers (LLC), or any other rest in the applicant failed to pay

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			Date of Birth (MM/D	D/YY)
	1 0	/		
Street Address				
	41			
City	State	ZIP Code	Position	%Owned
Name			Date of Birth (MM/D)	D/YY)
Street Address				
City	State	ZIP Code	Position	%Owned
Name			Date of Birth (MM/DI	D/YY)
		/		
Street Address				
City	State	ZIP Code	Position	%Owned
Name			Date of Birth (MM/DI	D(YY)
				,
Street Address				
City	State	ZIP Code	Position	%Owned
l Name		J L	Date of Birth (MM/DE	
rano	<u> </u>		Date of Birth (MINN/DE	711)
Street Address				
Cit.	0	710.0	Desilie	
City	State	ZIP Code	Position	%Owned
	11	11 11		

** 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.
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 and Wine Code which affect my license.
Printed Name / Title
Authorized Signature Date (MM/DD/YY)
Josh france. 7.29.2027
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) Available 2024
For Transfer Applications Only - Is the license being transferred valid? Yes O No
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)
O Date of inspection or anticipated date Will conduct inspection upon approval of state licensing authority

Is the Liquor Licensed Drugstore (LLDS within 1,500 feet of another retail liquor in a jurisdiction with a population of > 10	license for off-premises sales	O Yes	Q/No
Is the Liquor Licensed Drugstore (LLDS within 3,000 feet of another retail liquor in a jurisdiction with a population of < 10	license for off-premises sales	O Yes	 No
NOTE: The distance shall be determined by a radio doorway of the LLDS/RLS premises for which the a doorway of the Licensed LLDS/RLS.			
Does the Liquor-Licensed Drugstore (LLD percent (20%) of the applicant's gross and sale of food, during the prior twelve (12) n	nual income derived from the	O Yes	Ø No
The foregoing application has been examined; an character of the applicant are satisfactory. We do easonable requirements of the neighborhood and comply with the provisions of Title 44, Article 4 or application is approved.	report that such license, if grant I the desires of the adult inhabit	ted, will n ants, and	neet the
ocal Licensing Authority for	Telephone Number	_ 0 ·	Town, City
			County
Printed Name	Title		
ignature	Date (MM/DD/YY)		
rinted Name	Title		
ignature	Date (MM/DD/YY)		

DR 8495 (02/16/24)
COLORADO DEPARTMENT OF REVENUE
Liquor Enforcement Division
PO BOX 17087
Denver CO 80217-0087
(303) 205-2300

Tax Check Authorization, Waiver, and Request to Release Information

i. [10 Seph	Barraale.	
,	/		

am signing this Tax Check Authorization, Waiver and Request to Release Information (hereinafter

"Waiver") on behalf of

(the "Applicant/Licensee")		/	/			
Joseph	Barrand-/	<	A Cuciun	0/	liaux	Dell.chefx

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)
Joseph BANUALA //h (ucina ilaliana dello chet Neil
Social Security Number/Tax Identification Number Home Phone Number Business/Work Phone Number
Street Address
920 GRAND AN
City State ZIP Code
GRAND Lake
Printed name of person signing on behalf of the Applicant/Licensee
Joseph Barranda - Applicant.
Applicant/Licensee's Signature (Signature authorizing the disclosure of confidential tax information) Date Signed
Farm 1.29.24

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).