



City *of*
Louisville

COLORADO • SINCE 1878

NEW
or TRANSFER
Liquor License
Application
Packet

**LIQUOR LICENSE NEW OR TRANSFER
APPLICATION PROCESS**

Step 1 Review this Application Packet and download the following forms from the State website <https://sbg.colorado.gov/liquor-forms-by-number>

DR 8404 and DR 8404I

***DR 8004 is also required for every Wholesaler used when transferring a license*

Step 2 Complete the Retail License Application using the included document checklist as well as the City of Louisville Fingerprinting Procedures (attached).

Step 3 Set a meeting with the City Clerk's Office to submit a completed application and payment for Louisville fees.

If an application is submitted without setting a meeting, the City Clerk's Office will reach out to schedule a meeting. The application will not be processed or reviewed until the scheduled meeting. The City Clerk's Office may request additional items/documentation from the applicant during this meeting.

Step 4 Once accepted, the City Clerk's Office processes the application and advises applicant of the hearing date (*not less than 30 days after application submission*).

Step 5 If doing concurrent review, the City Clerk's Office will upload the application to the State. When reviewed, the State will issue a pending liquor license number. This license number will be needed in order to pay State fees. Proof of payment must be submitted to City Clerk's Office.

State fees must be paid online at <https://sbg.colorado.gov/information-for-licensed-liquor-businesses> and using the "Online Payment" icon.

Step 6 The City Clerk's Office will arrange with the applicant to post Notice of Public Hearing on property proposed for liquor licensure (*not less than 15 days prior to Public Hearing Date provided by City Clerk's Office*).

City Clerk's Office publishes Notice of Public Hearing (*not less than 10 days prior to hearing*)

- Step 6 (cont.)** City Clerk's staff will inspect the premises to ensure compliance. For existing premises or transfers, this will occur prior to the public hearing. For those premises under construction, inspection will occur after completion of construction. Your liquor licenses will not be issued until a Certificate of Occupancy is released by the Louisville Building Safety Department.
- Step 7** The Louisville Local Licensing Authority considers the liquor license application at a Public Hearing and approves, denies, or continues consideration of the application. *Applicant and any witness(es) in favor of the application must be available for the public hearing. If the applicant and/or witness(es) are not present for the hearing, consideration will be continued to the next Licensing Authority meeting.*
- Step 8** Upon approval of application by the Local Licensing Authority, application will be forwarded to State Liquor Enforcement Division for consideration. Once it is in process, applicant will be notified to pay state fees via the State's payment portal (see Step 5 above).
- Step 9** Upon approval of application by the State, a State Liquor License and a City Liquor License will be issued by the City Clerk's Office upon determination that all applicable codes for proposed establishment have been met. The City Clerk's Office will also provide signage that must be posted in the establishment along with the licenses. All licenses and signage must be posted in plain view and be current at all times.



Office of the City Clerk

To: All Liquor License Applicants:

This contains general liquor licensing information.

All forms must be typed or printed, accurate, complete in all aspects and properly executed. All applications must be submitted along with City requirements and licensing fees.

The City Clerk's Office cannot process an incomplete application.

The following Departments/Divisions may provide additional information required as part of your liquor license application:

- Colorado Department of Revenue, Sales Tax Licensing (303) 238-7378
- City of Louisville Business/Sales Tax Licensing (303) 335-4514
- Louisville Fire Department (303) 333-6595
- Boulder County Health Department (303) 441-1100

The City of Louisville welcomes you and extends our best wishes for your success. We are pleased you have chosen Louisville as your business location. Should you have any questions or require additional assistance, please contact the City Clerk's Office at (303) 335-4574 or clerksoffice@louisvilleco.gov

**LOCAL LICENSING AUTHORITY
MEETING SCHEDULE**

The City of Louisville, Local Licensing Authority meets the fourth Monday of the month at 6:30 p.m. in the City Council Chambers on the second floor of the City Hall Building, 749 Main Street.

****Unless there is an emergency, all public hearings on new or transfer applications are held in person with a remote option for the public.**

While there is a remote option for meetings, applicants are highly encouraged to attend in person. Witnesses testifying in support of, or objecting to, an application may offer testimony remotely. However, the in-person meeting may continue even if technology issues prevent remote participation. The inability of the applicant or witness(es) to testify due to technology issues will result in the Authority continuing the Public Hearing to the next scheduled meeting date.

Due to possible holiday conflicts, please contact the City Clerk's Office to verify meeting dates.

The Public Hearing date will be set not less than 30 days from the date of submittal of the application, as provided by Section 44-3-311 of the Colorado Revised Statutes, the applicant must be present at the Public Hearing to offer testimony and answer any questions posed by the Louisville Local Licensing Authority. Please reference the "Procedural Order in Liquor and Beer Hearings" contained in this packet for details to be presented by the applicant.

Persons planning to attend the meeting who need sign language interpretation, translation services, assisted listening systems, Braille, or taped material, should contact the City Clerk's Office at 303-335-4574 or 303-335-4536 or clerksoffice@louisvilleco.gov. A forty-eight (48) hour notice is requested.

Si requiere una copia en español de esta publicación o necesita un intérprete durante la reunión, por favor llame a la Ciudad al 303-335-4536 o 303-335-4574.

**PROCEDURAL ORDER IN
LIQUOR LICENSE PUBLIC HEARINGS**

City Staff Presentation

The City Clerk's Office will provide the Liquor Application Packet to the Louisville Local Licensing Authority members.

These packets will include the completed application, proper notice of the public hearing, conformance with applicable city and state codes, proper legal possession of the premises and proper communication of investigative results.

The Licensing Authority Chair will open the public hearing proceeding. Staff will then respond to questions from the Authority relative to the documentation provided.

Applicant's Presentation (Sworn Testimony)

You (the applicant) or your manager or representative, will then be provided the opportunity to respond to any issues or concerns reported by City staff, to provide evidence of your past experience in the sale/service of alcohol beverages and that of your manager in the charge of day-to-day operations, financial backers of proposed establishment, description of the character of the neighborhood of proposed site, and evidence, including any petitions, regarding the reasonable requirements and the desires of the inhabitants of the neighborhood for the premise proposed.

In addition to the above information, you should also be prepared to discuss in detail the nature of the proposed business operations such as, days and hours of operation, entertainment, number of employees, security plans, if any, employee training and operating procedures that will comply with the safe and legal sale/service of alcohol beverages, and evidence relating to the likelihood that you will conduct this proposed operation in accordance to applicable laws and codes.

You should then remain available for questions from the Licensing Authority and/or City staff and rebuttal following any evidence from interested parties.

Evidence from Interested Parties (Sworn Testimony)

Interested parties are defined by law as residents of the neighborhood under consideration, owners or managers of businesses located in the neighborhood, and you, the applicant.

Licensing Authority Discussion and Decision

Motion approving, denying, or continuing consideration of your application.

FREQUENTLY ASKED QUESTIONS

- **My premises is complete and I am ready to open, can the Public Hearing be scheduled any sooner than 30 days?**

No, the 30 day timeframe is set by State Law (C.R.S. 44-3-311)

- **My name and home address appear on the posting for the liquor license hearing, can these be removed?**

No, per State law, the name(s) and address(es) of the applicant(s) are required to be on the notice posted on the premises, published in the newspaper (Daily Camera) and posted on the City of Louisville's website. (C.R.S. 44-3-311)

- **What options to I have to reduce the time for processing of my new license application?**

For an extra fee of \$100 (payable to the State) an application can be reviewed by the City and the State at the same time. Past experience has shown that this can cut 4-8 weeks off the processing time.

- **I'm applying for a transfer of a liquor license, do I have to stop selling alcohol while the application is being considered?**

No, the City Clerk's Office will issue you a temporary license to continue operations while the transfer application is being considered by the City and the State.

- **Is concurrent review available for transfer applications?**

Concurrent review is not available for transfer applications as a temporary license allows you to continue operating.

RESPONSIBLE VENDOR/SERVER TRAINING

The City of Louisville requires proof of server training for an Owner or Manager of Record when applying for a new liquor license or a transfer of a liquor license.

Proof of completed training must be forwarded to the City Clerk's Office prior to the public hearing for the application. If proof of training cannot be completed prior to the public hearing, the local and state liquor licenses may be withheld until proof is provided to the City Clerk's Office.

The State of Colorado does NOT accept online Responsible Vendor Training. Training must be done either in a "classroom" setting or via "live stream" where the student and instructor have live interaction.

At this time, the Louisville Police Department is not providing training.

Please visit the State's Approved Responsible Vendor Training site at <https://sbg.colorado.gov/approved-responsible-vendors-training> for approved programs.

**LICENSE RENEWAL PROCEDURES FOR FIRST
TIME LICENSEES**

- 1) Liquor licenses are valid for one year from the date of the approval by the Colorado Liquor Enforcement Division and must be renewed each year.
- 2) Approximately 90 days prior to expiration date, you should receive a three-page renewal application from the Colorado Liquor Enforcement Division. When received:
 - a) the license holder or authorized agent must complete and sign the application;
 - b) pay State fees through the payment portal at <https://sbg.colorado.gov/information-for-licensed-liquor-businesses> - click on the “Online Payment” icon;
 - c) provide proof of State payment with your renewal application submitted to the City Clerk’s Office;
 - d) remit Louisville fees either via check/money order (*payable to City of Louisville*) or by calling 303.335.4574 to pay by debit/credit card;
 - e) include proof of Server Training for at least one Owner or Manager of Record;
 - e) **submit to the Louisville City Clerk’s Office, 749 Main Street, Louisville, CO 80027, for processing by the Louisville Liquor Licensing Authority.**
- 3) If you have not already done so, approximately 60 days prior to expiration date, you must complete your renewal application from the State and submit it to the Louisville City Clerk’s Office for processing using steps listed in step 2. **DO NOT** submit directly to the State as this will delay your renewal.
- 4) Renewal applications and payment of fees must be submitted no later than 45 days before license expiration.
- 5) If you do not receive your renewal application from the State and your expiration date is within 60 days, contact the Colorado Liquor Enforcement Division at 303.205.2300 or the Louisville City Clerk’s Office at 303.335.4574 to obtain the required renewal forms. It is important that you do this as failure to renew prior to the expiration date will result in the expiration of your license and incurrence of late fees.
- 6) Any changes in the following must be reported to the Louisville City Clerk’s Office for consideration by both the Local and the State Licensing Authorities:
 - ✓ **Change in Operating Manager**
 - ✓ **Change in Corporate or Trade Name**
 - ✓ **Change in Corporate Partner, Director, or Stockholder**
 - ✓ **Change in Partnership**
 - ✓ **Change of Location**
 - ✓ **Change or Transfer of Ownership**
 - ✓ **Change in Limited Liability Company Member**
 - ✓ **Modification of Licensed Premises**
- 7) Licensee must maintain possession of the premises for entire licensed period by virtue of a lease, assignment of lease, or deed to the licensed premises.

Colorado Liquor Retail License Application

* **Note that the Division will not accept cash** Paid by check Paid online Uploaded to

Date

 Movelt on

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, Beer and Wine Code: SBG.Colorado.gov/Liquor**

1. Applicant is applying as a/an Individual Limited Liability Company Association or Other
 Corporation 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 FEIN Number

2a. Trade Name of Establishment (DBA) State Sales Tax Number Business Telephone

3. Address of Premises (specify exact location of premises, include suite/unit numbers)

City County State ZIP Code

4. Mailing Address (Number and Street) City or Town State ZIP Code

5. Email Address

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

Section A Nonrefundable Application Fees*	Section B (Cont.) Liquor License Fees*
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- | | |
|--|---|
| <input type="checkbox"/> Application Fee for New License.....\$1,100.00
<input type="checkbox"/> Application Fee for New License w/Concurrent Review.....\$1,200.00
<input type="checkbox"/> Application Fee for Transfer.....\$1,100.00 | <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 |
|--|---|

Section B Liquor License Fees*

- | | |
|--|---|
| <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 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 | <input type="checkbox"/> Manager Registration - H & R\$30.00
<input type="checkbox"/> Manager Registration - Tavern\$30.00
<input type="checkbox"/> Manager Registration - Lodging & Entertainment.....\$30.00
<input type="checkbox"/> Manager Registration - Campus Liquor Complex\$30.00
<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 |
|--|---|

Questions? Visit: SBG.Colorado.gov/Liquor for more information

Do not write in this space - For Department of Revenue use only

Liability 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	
I.	<p>Applicant information</p> <p><input type="checkbox"/> A. Applicant/Licensee identified</p> <p><input type="checkbox"/> B. State sales tax license number listed or applied for at time of application</p> <p><input type="checkbox"/> C. License type or other transaction identified</p> <p><input type="checkbox"/> D. Return originals to local authority (additional items may be required by the local licensing authority)</p> <p><input type="checkbox"/> E. All sections of the application need to be completed</p> <p><input type="checkbox"/> F. Master file applicants must include the Application for Master File form DR 8415 and applicable fees to this Retail License Application</p>
II.	<p>Diagram of the premises</p> <p><input type="checkbox"/> A. No larger than 8½" X 11"</p> <p><input type="checkbox"/> B. Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.)</p> <p><input type="checkbox"/> C. Separate diagram for each floor (if multiple levels)</p> <p><input type="checkbox"/> D. Kitchen - identified if Hotel and Restaurant</p> <p><input type="checkbox"/> E. Bold/Outlined Licensed Premises</p>
III.	<p>Proof of property possession (One Year Needed)</p> <p><input type="checkbox"/> A. Deed in name of the applicant (or) (matching question #2) date stamped / filed with County Clerk</p> <p><input type="checkbox"/> B. Lease in the name of the applicant (or) (matching question #2)</p> <p><input type="checkbox"/> C. Lease assignment in the name of the applicant with proper consent from the landlord and acceptance by the applicant</p> <p><input type="checkbox"/> D. Other agreement if not deed or lease. (matching question #2)</p>
IV.	<p>Background information (DR 8404-I) and financial documents</p> <p><input type="checkbox"/> A. Complete DR 8404-I for each principal (individuals with more than 10% ownership, officers, directors, partners, members)</p> <p><input type="checkbox"/> B. Fingerprints taken and submitted to the appropriate Local Licensing Authority through an approved State Vendor. Master File applicants submit results to the State using code 25YQHT with Identogo. Do not complete fingerprint cards prior to submitting your application. The Vendors are as follows: Identogo – https://uenroll.identogo.com/ Phone: 844-539-5539 (toll-free) Colorado Fingerprinting – http://www.coloradofingerprinting.com Appointment Scheduling Website: http://www.coloradofingerprinting.com/cabs/ Phone: 720-292-2722 Toll Free: 833-224-2227 Details about the vendors and fingerprinting in Colorado can be found on CBI's website here: https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/employment-and-background-checks</p> <p><input type="checkbox"/> C. Purchase agreement, stock transfer agreement, and/or authorization to transfer license</p> <p><input type="checkbox"/> D. List of all notes and loans (Copies to also be attached)</p>
V.	<p>Sole proprietor/husband and wife partnership (if applicable)</p> <p><input type="checkbox"/> A. Form DR 4679</p> <p><input type="checkbox"/> B. Copy of State issued Driver's License or Colorado Identification Card for each applicant</p>
VI.	<p>Corporate applicant information (if applicable)</p> <p><input type="checkbox"/> A. Certificate of Incorporation</p> <p><input type="checkbox"/> B. Certificate of Good Standing</p> <p><input type="checkbox"/> C. Certificate of Authorization if foreign corporation (out of state applicants only)</p>
VII.	<p>Partnership applicant information (if applicable)</p> <p><input type="checkbox"/> A. Partnership Agreement (general or limited).</p> <p><input type="checkbox"/> B. Certificate of Good Standing</p>
VIII.	<p>Limited Liability Company applicant information (if applicable)</p> <p><input type="checkbox"/> A. Copy of articles of organization</p> <p><input type="checkbox"/> B. Certificate of Good Standing</p> <p><input type="checkbox"/> C. Copy of Operating Agreement (if applicable)</p> <p><input type="checkbox"/> D. Certificate of Authority if foreign LLC (out of state applicants only)</p>
IX.	<p>Manager registration for Hotel and Restaurant, Tavern, Lodging & Entertainment, and Campus Liquor Complex licenses when included with this application</p> <p><input type="checkbox"/> A. \$30.00 fee</p> <p><input type="checkbox"/> B. If owner is managing, no fee required</p>

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?		Yes <input type="checkbox"/> No <input type="checkbox"/>		
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):				
a. Been denied an alcohol beverage license?		<input type="checkbox"/> <input type="checkbox"/>		
b. Had an alcohol beverage license suspended or revoked?		<input type="checkbox"/> <input type="checkbox"/>		
c. Had interest in another entity that had an alcohol beverage license suspended or revoked?		<input type="checkbox"/> <input type="checkbox"/>		
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.		<input type="checkbox"/> <input type="checkbox"/>		
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?		<input type="checkbox"/> <input type="checkbox"/>		
Waiver by local ordinance? <input type="checkbox"/> <input type="checkbox"/>		or		
Other: _____		<input type="checkbox"/> <input type="checkbox"/>		
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 (>) 10,0000? 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.		<input type="checkbox"/> <input type="checkbox"/>		
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 (<) 10,0000? 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.		<input type="checkbox"/> <input type="checkbox"/>		
13. a. For additional Retail Liquor Store only. Was your Retail Liquor Store License issued on or before January 1, 2016?		<input type="checkbox"/> <input type="checkbox"/>		
b. Are you a Colorado resident?		<input type="checkbox"/> <input type="checkbox"/>		
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.		<input type="checkbox"/> <input type="checkbox"/>		
15. Does the applicant, as listed on line 2 of this application, have legal possession of the premises by ownership , lease or other arrangement?		<input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> Ownership <input type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____				
a. If leased, list name of landlord and tenant, and date of expiration, exactly as they appear on the lease:				
Landlord	Tenant	Expires		
b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question 16.		<input type="checkbox"/> <input type="checkbox"/>		
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 8½" 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	FEIN or SSN	Interest/Percentage
Last Name	First Name	Date of Birth	FEIN or SSN	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:				<input type="checkbox"/> <input type="checkbox"/>
Has a local ordinance or resolution authorizing optional premises been adopted?				<input type="checkbox"/> <input type="checkbox"/>
Number of additional Optional Premise areas requested. (See license fee chart)				
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.				

Name	Type of License	Account Number		
<p>19. Liquor Licensed Drugstore (LLDS) applicants, answer the following:</p> <p>a. Is there a pharmacy, licensed by the Colorado Board of Pharmacy, located within the applicant's LLDS premise? <input type="checkbox"/> <input type="checkbox"/> If "yes" a copy of license must be attached.</p>				
<p>20. Club Liquor License applicants answer the following: Attach a copy of applicable documentation Yes No</p> <p>a. Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain? <input type="checkbox"/> <input type="checkbox"/></p> <p>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 type="checkbox"/></p> <p>c. How long has the club been incorporated?</p> <p>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"/></p>				
<p>21. Brew-Pub, Distillery Pub or Vintner's Restaurant applicants answer the following:</p> <p>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"/></p>				
<p>22. Campus Liquor Complex applicants answer the following:</p> <p>a. Is the applicant an institution of higher education? <input type="checkbox"/> <input type="checkbox"/></p> <p>b. Is the applicant a person who contracts with the institution of higher education to provide food services? <input type="checkbox"/> <input type="checkbox"/> If "yes" please provide a copy of the contract with the institution of higher education to provide food services.</p>				
<p>23. For all on-premises applicants.</p> <p>a. For all Liquor Licensed Drugstores (LLDS) the Permitted Manager must also submit an Manager Permit Application - DR 8000 and fingerprints.</p>				
Last Name of Manager	First Name of Manager			
<p>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. Yes No <input type="checkbox"/> <input type="checkbox"/></p>				
<p>25. Related Facility - Campus Liquor Complex applicants answer the following: Yes No <input type="checkbox"/> <input type="checkbox"/></p> <p>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.</p> <p>b. Designated Manager for Related Facility- Campus Liquor Complex</p>				
Last Name of Manager	First Name of Manager			
<p>26. Tax Information. Yes No</p> <p>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 type="checkbox"/></p> <p>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 type="checkbox"/></p>				
<p>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.</p>				
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned

Name	Type of License	Account Number
<p>** 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: <input 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.</p>		
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 Code which affect my license.		
Authorized Signature	Printed Name and Title	Date
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)	
For Transfer Applications Only - Is the license being transferred valid?		Yes No <input type="checkbox"/> <input type="checkbox"/>
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 > 10,0000? <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 < 10,0000? 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. <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?		Yes No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <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	Telephone Number	<input type="checkbox"/> Town, City <input type="checkbox"/> County
Signature	Print	Title
Signature	Print	Title
		Date

Tax Check Authorization, Waiver, and Request to Release Information

I,

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

“Waiver”) on behalf of

(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 its 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)

Social Security Number/Tax Identification Number

Home Phone Number

Business/Work Phone Number

Street Address

City

State

ZIP Code

Printed name of person signing on behalf of the Applicant/Licensee

Applicant/Licensee's Signature (Signature authorizing the disclosure of confidential tax information) Date Signed

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).

Individual History Record

To be completed by the following persons, as applicable: sole proprietors; general partners regardless of percentage ownership, and limited partners owning 10% or more of the partnership; all principal officers of a corporation, all directors of a corporation, and any stockholder of a corporation owning 10% or more of the outstanding stock; managing members or officers of a limited liability company, and members owning 10% or more of the company; and any intended registered manager of Hotel and Restaurant, Tavern and Lodging and Entertainment class of retail license

Notice: This individual history record requires information that is necessary for the licensing investigation or inquiry. All questions must be answered in their entirety or the license application may be delayed or denied. If a question is not applicable, please indicate so by "N/A". **Any deliberate misrepresentation or material omission may jeopardize the license application.** (Please attach a separate sheet if necessary to enable you to answer questions completely)

Name of Business

Home Phone Number

Cellular Number

Your Full Name (last, first, middle)

List any other names you have used

Mailing address (if different from residence)

Email Address

1. List current residence address. Include any previous addresses within the last five years. (Attach separate sheet if necessary)

Current Street and Number

Current City, State, ZIP

From:

To:

Previous Street and Number

Previous City, State, ZIP

From:

To:

Individual History Record (Continued)

2. List all employment within the last five years. Include any self-employment. (Attach separate sheet if necessary)

Name of Employer or Business

Address (Street, Number, City, State, ZIP)

Position Held

From:

To:

Name of Employer or Business

Address (Street, Number, City, State, ZIP)

Position Held

From:

To:

Name of Employer or Business

Address (Street, Number, City, State, ZIP)

Position Held

From:

To:

3. List the name(s) of relatives working in or holding a financial interest in the Colorado alcohol beverage industry.

Name of Relative

Relationship to You:

Position Held

Name of Licensee

Name of Relative

Relationship to You:

Position Held

Name of Licensee

Individual History Record (Continued)

Name of Relative

Relationship to You:

Position Held

Name of Licensee

Name of Relative

Relationship to You:

Position Held

Name of Licensee

4. Have you ever applied for, held, or had an interest in a Colorado Liquor or Beer License, or loaned money, furniture, fixtures, equipment or inventory to any licensee? Yes No

(If yes, answer in detail.)

5. Have you ever received a violation notice, suspension, or revocation for a liquor law violation, or have you applied for or been denied a liquor or beer license anywhere in the United States?..... Yes No

(If yes, answer in detail.)

6. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending?..... Yes No

(If yes, answer in detail.)

7. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence?..... Yes No

(If yes, answer in detail.)

Individual History Record (Continued)

8. Have you ever had any professional license suspended, revoked, or denied?..... Yes No

(If yes, answer in detail.)

Personal and Financial Information

Unless otherwise provided by law, the personal information required in this section will be treated as confidential. The personal information required in this section is solely for identification purposes.

Date of Birth	Social Security Number	Place of Birth
<input type="text"/>	<input type="text"/>	<input type="text"/>

U.S. Citizen <input type="radio"/> Yes <input type="radio"/> No	If Naturalized, state where	When
	<input type="text"/>	<input type="text"/>

Name of District Court	Naturalization Certificate Number	Date of Certification
<input type="text"/>	<input type="text"/>	<input type="text"/>

If an Alien, Give Alien's Registration Card Number	Permanent Residence Card Number
<input type="text"/>	<input type="text"/>

Height	Weight	Hair Color	Eye Color	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Do you have a current Driver's License/ID? If so, give number and state. Yes No

Driver's License Number	Driver's License State
<input type="text"/>	<input type="text"/>

Financial Information

9. Total purchase price or investment being made by the applying entity, corporation, partnership, limited liability company, other.....

10. List the total amount of the **personal** investment, made by the person listed on page 1 in this business including any notes, loans, cash, services or equipment, operating capital, stock purchases or fees paid.....

NOTE: If corporate investment only, please skip to and complete question 12

NOTE: Question 10 should reflect the total of questions 11 and 13

Personal and Financial Information (Continued)

11. Provide details of the personal investment described in question 10. You must account for all of the sources of this investment. (Attach a separate sheet if needed)

Type: Cash, Services or Equipment	Account Type
<input type="text"/>	<input type="text"/>
Bank Name	Amount
<input type="text"/>	<input type="text"/>
Type: Cash, Services or Equipment	Account Type
<input type="text"/>	<input type="text"/>
Bank Name	Amount
<input type="text"/>	<input type="text"/>
Type: Cash, Services or Equipment	Account Type
<input type="text"/>	<input type="text"/>
Bank Name	Amount
<input type="text"/>	<input type="text"/>
Type: Cash, Services or Equipment	Account Type
<input type="text"/>	<input type="text"/>
Bank Name	Amount
<input type="text"/>	<input type="text"/>

12. Provide details of the corporate investment described in question 9. You must account for all of the sources of this investment. (Attach a separate sheet if needed)

Type: Cash, Services or Equipment	Loans	Account Type
<input type="text"/>	<input type="text"/>	<input type="text"/>
Bank Name	Amount	
<input type="text"/>	<input type="text"/>	
Type: Cash, Services or Equipment	Loans	Account Type
<input type="text"/>	<input type="text"/>	<input type="text"/>
Bank Name	Amount	
<input type="text"/>	<input type="text"/>	
Type: Cash, Services or Equipment	Loans	Account Type
<input type="text"/>	<input type="text"/>	<input type="text"/>
Bank Name	Amount	
<input type="text"/>	<input type="text"/>	

13. Loan Information (Attach copies of all notes or loans)

Name of Lender	Address
<input type="text"/>	<input type="text"/>
Term	Security
<input type="text"/>	<input type="text"/>
	Amount
	<input type="text"/>

Personal and Financial Information (Continued)

Name of Lender

Address

Term

Security

Amount

Name of Lender

Address

Term

Security

Amount

Name of Lender

Address

Term

Security

Amount

Oath of Applicant

I declare under penalty of perjury that this application and all attachments are true, correct, and complete to the best of my knowledge.

Authorized Signature

Print Signature

Title

Date (MM/DD/YY)

PRIVACY STATEMENT – NOTICE TO APPLICANTS

The City of Louisville (“City”) is authorized to collect Criminal History Record Information (“CHRI”) to investigate the qualifications of liquor license applicants and liquor licensees under Colorado Revised Statute (C.R.S.) Section 44-3-307. The City will use, retain and share CHRI in accordance with the City of Louisville Policy Regarding Criminal History Record Information (CHRI) for Non-Criminal Justice Purposes Related to Liquor and Marijuana Licensing.

The City is required to notify you that your fingerprints will be used to check the criminal history records of the Federal Bureau of Investigations (FBI). In addition, you must be provided with, and acknowledge receipt of, a Privacy Act Statement when you submit your fingerprints and associated personal information.

If you have a CHRI record, the City may not deny your liquor license application based on your record until you have been given thirty (30) days to correct or complete your record, or until you have declined to do so. Consistent with the foregoing, if your fingerprint background check reveals a CHRI record, you may seek a change, correction or update of your record in accordance with the City’s CHRI Policy.

A record challenge can be done through the CBI (please see attached and the link below for more information:

<https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/identity-theft-and-mis-identification>

A challenge may also be made to the FBI using the address below:

Federal Bureau of Investigation
Criminal Justice Information Services (CJIS) Division
ATTN: SCU, Mod. D-2
1000 Custer Hollow Road
Clarksburg, WV 26306

For more information, please read the following documents attached hereto and also available at the links below:

- Privacy Act Statement <https://www.colorado.gov/pacific/sites/default/files/2018%20PRIVACY%20ACT%20STATEMENT.pdf>
- Privacy Act Applicant Rights <https://www.colorado.gov/pacific/sites/default/files/2018%20PRIVACY%20ACT%20APPLICANTS%20RIGHTS%20012418.pdf>

- Colorado Bureau of Investigation Notice to Applicants
- City's CHRI Policy

OBTAINING FINGERPRINTS FOR BACKGROUND CHECKS

In 2018, the State of Colorado implemented Colorado Applicant Background Services (CABS). The City of Louisville does not offer fingerprinting services. This service is not part of your liquor license application and you will be charged a fee for fingerprinting and the background check. These fees are paid to the company you choose for fingerprinting.

There are two companies authorized by the State of Colorado to do fingerprints: Identogo or Colorado Fingerprinting

IDENTOGO

- Please use this link: <https://uenroll.identogo.com/workflows/25YQ6K>
- The 25YQ6K in the address below should take you directly to scheduling for any liquor license related matters.
- When asked for an identification code (CONCJ****), enter **CONCJ0017** and make sure it reflects City of Louisville.

COLORADO FINGERPRINTING

- Please register through the online Enrollment Center at <https://www.coloradofingerprinting.com/cabs/>
- During the enrollment process you will choose a convenient location, day and time for your appointment.
- Provide the following reason for fingerprinting and CBI Unique Code for your organization:
 - **CBI Unique Code: 0017LLQH**
 - **Reason Fingerprinted: Liquor Licensure – Local**
- You will receive an appointment confirmation with your Order Number by text and by email.
- Go to the fingerprint location at your scheduled time. Provide the Order Number to the enrollment agent along with your government issued photo ID (driver's license, state issued ID, US passport or foreign-issued passport). Your livescan fingerprints, digital photo and digital signature are then captured and submitted to CBI.
- The results will be returned to the City of Louisville.
- You can login to the Enrollment Center at any time to see the status of your fingerprint submission to CBI.
- Please contact us 720-292-2722, toll free 833-224-2227 or email info@coloradofingerprinting.com if you have any questions or need assistance

Privacy Act Statement

This privacy act statement is located on the back of the [FD-258 fingerprint card](#).

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification¹ that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.²
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.³

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.⁴

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)

¹ Written notification includes electronic notification, but excludes oral notification.

² <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

³ See 28 CFR 50.12(b).

⁴ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).



COLORADO
Bureau of Investigation
Department of Public Safety

Identification Unit
690 Kipling Street, Suite 3000
Denver, CO 80215
303-239-4208

NOTICE TO APPLICANTS

As an applicant for a position requiring fingerprints to be submitted to the Colorado Bureau of Investigation and the Federal Bureau of Investigation, YOUR FINGERPRINTS WILL BE SUBMITTED TO THESE AGENCIES TO CHECK STATE AND FBI RECORDS.

Discrepancies on your Colorado record can be challenged and corrected by contacting the Colorado Bureau of Investigation at 690 Kipling St., Suite 3000, Denver, CO 80215, or by calling the Identification Unit at (303) 239-4208. Additional information is available from CBI's website at www.colorado.gov/cbi.

Discrepancies on records from the FBI or relating to another state can be challenged through the FBI. Information, including that listed below, can be found at their website at www.fbi.gov.

The [U.S. Department of Justice Order 556-73](#) establishes rules and regulations for the subject of an FBI Identification Record to obtain a copy of his or her own record for review. The FBI's Criminal Justice Information Services (CJIS) Division processes these requests.

Who May Request a Copy of a Record (or Proof That a Record Does Not Exist)
Only you can request a copy of your own Identification Record.

How to Request a Copy of Your Record

The FBI offers two methods for requesting your FBI Identification Record or proof that a record does not exist.

Option 1: [Submit your request directly to the FBI](#).

Option 2: Submit to an [FBI-approved Channeler](#), which is a private business that has contracted with the FBI to receive the fingerprint submission and relevant data, collect the associated fee(s), electronically forward the fingerprint submission with the necessary information to the FBICJIS Division for a national criminal history record check, and receive the electronic record check result for dissemination to the individual. Contact each Channeler for processing times.

AGENCY INSTRUCTIONS: To comply with federal law, provide a copy of this document to each applicant fingerprinted.



POLICY REGARDING CRIMINAL HISTORY RECORD INFORMATION (CHRI) FOR NON-CRIMINAL JUSTICE PURPOSES RELATED TO LIQUOR AND MARIJUANA LICENSING

I. Purpose

The City of Louisville (the “City”) is authorized to access Criminal History Record Information (“CHRI”) to investigate the qualifications as follows:

- Liquor License applicants and licensees under Colorado Revised Statute (C.R.S.) Section 44-3-307
- Marijuana License applicants and licensees under Colorado Revised Statute (C.R.S.) Section 44-10-307

The purpose of this Policy is to address the use, maintenance, dissemination, confidentiality and security of CHRI for this non-criminal justice purpose by the City.

II. Scope

This Policy shall apply to systems, processes or workflows that involve the request, access, storage, sharing and/or destruction of CHRI obtained from the Colorado Bureau of Investigations – Criminal Justice Information Services (“CBI-CJIS”) Systems in response to a fingerprint-based background check for investigating the qualifications of:

- Liquor license applicants or liquor licensees (“Liquor Licensing Purposes”)
- Marijuana license applicants or marijuana licensees (“Marijuana Licensing Purposes”)

The City accesses CHRI for Liquor Licensing Purposes and Marijuana Licensing Purposes through the CBI-provided system referred to as the Secure Document Delivery System (“SDDS”).

This Policy sets forth the following policies required by the CBI for access to the CBI-CJIS Systems: Acceptable Use, Media Protection, Physical Protection, Retention & Destruction, Incident Response & Disciplinary Action and Media Sanitation & Disposal.

III. Policies

a. Authorized Personnel

- i. CHRI for Liquor and Marijuana Licensing Purposes shall be accessed by and provided to authorized personnel only.
- ii. Authorized personnel shall be reviewed and updated by the Terminal Agency Coordinator (“TAC”) as needed.
- iii. Authorized personnel shall complete and pass the CJIS Online Security Awareness Training within six (6) months of hire or handling of CHRI.
- iv. Training shall be updated through CJIS Online Security Training as required thereafter. Security awareness training will cover areas specified in the CJIS Security Policy at a minimum.
- v. Authorized personnel for CHRI for Liquor and Marijuana Purposes are:
 1. City Clerk
 2. Deputy City Clerk
 - a. The Deputy City Clerk shall serve as the TAC, the Local Agency Security Officer, the SDDS Administrator, and the Billing Contact, if applicable, for CHRI for Liquor and Marijuana Licensing Purposes.

b. Acceptable Use

- i. This Policy supplements the City of Louisville’s Electronic Media Access and Acceptable Use Policy, as the same may be amended from time to time. In the event of conflict or ambiguity, the City Clerk will determine the appropriate application of the policies for Liquor and Marijuana Licensing Purposes.
- ii. Applicants are referred to the Colorado Bureau of Investigation – Employment and Background Checks website for information on submission of background check fingerprints.

- iii. As part of the fingerprint process, the City must provide applicants with a Privacy Statement outlining the City's authority for collecting the applicant's information, that the applicant's fingerprints will be used to check the national criminal history records of the Federal Bureau of Investigations ("FBI") and how the information will be used, retained and shared. The City must obtain a signed acknowledgement from each applicant documenting the applicant's receipt of the foregoing documents ("Applicant's Acknowledgement").
- iv. CHRI may only be used for the following:
 - 1. Liquor Licensing Purposes as set forth in C.R.S. Section 44-3-307
 - 2. Marijuana Licensing Purposes as set forth in C.R.S. Section 44-10-307
- v. The Deputy City Clerk shall inform the Louisville Licensing Authority of the results of the CHRI but they will not have access to the full report itself.
- vi. CHRI may not be disseminated to non-City organizations or agencies (such as the state licensing authority) for Liquor or Marijuana Licensing Purposes without an Information Exchange Agreement.
- vii. CHRI may not be forwarded to other organizations/agencies for use in separate, unrelated applications.
- viii. If an applicant's fingerprint background check reveals a CHRI record, authorized personnel will promptly notify the applicant in writing that a record exists by sending notice to the applicant's mailing address or email address provided in the liquor or marijuana license application ("Notice"). The applicant may be given a copy of his/her/their CHRI only after the identity of the applicant has been verified. The applicant will be given thirty (30) days from the date of Notice to obtain a change, correction or update of his/her/their CHRI or decline to do so. The applicant's liquor or marijuana license application may not be denied based on the CHRI until the expiration of the 30-day period.
- ix. Existence of CHRI shall not be confirmed or denied to anyone and CHRI shall not be made available except in accordance with applicable law, including applicable provisions of the Colorado Criminal Justice Records Act ("CCJRA") and the Colorado Open Records Act ("CORA").

- c. Media and Physical Protection
- i. Authorized personnel with access to the SDDS shall have unique credentials.
 - ii. SDDS results shall be reviewed within 2 business days of notification of new records.
 - iii. CHRI received from the SDDS erroneously shall not be opened. Authorized personnel shall immediately contact CBI to report any erroneously delivered CHRI.
 - iv. CHRI shall only be accessed on City-owned computers secured from the public.
 - v. The Deputy City Clerk shall be primarily responsible for obtaining CHRI for Liquor and Marijuana Licensing Purposes from the SDDS. However, in the Deputy Clerk's absence, the City Clerk may obtain CHRI for Liquor and Marijuana Licensing Purposes from the SDDS.
 - vi. Upon receipt of an email from the SDDS website indicating that a CHRI record is available, authorized personnel in the City Clerk's Office shall:
 1. Download CHRI from the SDDS using his/her/their city issued desktop/laptop and save the records to the City Clerk's external hard drive.
 2. The file shall not be saved to a network shared drive or a "cloud" drive or printed out from the website.
 - vii. The external hard drive with CHRI shall be stored in a locked cabinet with access limited to authorized personnel only.
 - viii. CHRI shall be viewed only by authorized personnel. CHRI shall not be left on computer screens, on printers or on desks where unauthorized personnel or other persons might view it.
 - ix. The City-owned computer assigned to the Deputy City Clerk and the City Clerk shall be programmed to auto-delete the desktop recycle bin every twenty-four (24) hours to ensure CHRI records downloaded to the external hard drive are permanently deleted.
 - x. Computers that have been used to download and save CHRI shall not be released from the City's control until the equipment has been sanitized and all stored information has been cleared.
 - xi. The following activities are prohibited:
 1. Unauthorized access, copying or dissemination of CHRI from SDDS.
 2. Revealing of SDDS account passwords by authorized personnel to others.
 3. Allowing an unauthorized person to use an authorized person's SDDS account.

4. Disclosure of data in a way that violates applicable policy, procedures or relevant regulations or law – including C.R.S. § 44-3-307, C.R.S. § 44-10-307, CCJRA and CORA.

d. Retention and Destruction

- i. The CHRI and the Applicant's Acknowledgement shall be retained in the file in accordance with Colorado Municipal Records Retention Schedule § 75.20.A.1 (Liquor) – *“Two years after establishment ceases operation or after final denial, expiration, revocation, termination or transfer of license or permit, **except** that any background materials that will also apply to the transferred license should be retained from original license file”* and Schedule § 75.20.D.1 (Marijuana) – *“Two years after establishment ceases operation or after final denial, expiration, revocation, termination or transfer of license, **except** that any background material that will also apply to transferred license should be retained from original license file”*
- ii. When the appropriate Colorado Municipal Record Retention requirements have been met, the CHRI and the Applicant's Acknowledgement will be destroyed/deleted by authorized personnel.

e. Incident Response and Disciplinary Action

- i. Incidents involving misuse or allegations of misuse of CHRI shall be immediately communicated to the CBI.
- ii. Authorized personnel must report any media or physical security incidents to the TAC.
- iii. Any violation of a policy set forth herein may result in network removal, access revocation, corrective or disciplinary action, civil or criminal prosecution and termination of employment.

f. Media Sanitation and Disposal

- i. If the method of CHRI storage and retention is changed, or the external device becomes damaged/obsolete, the data on the hard drive will be sanitized either by destruction of the device or by being overwritten or degaussed.



ACKNOWLEDGEMENT OF APPLICANT

By signing below, the applicant acknowledges receipt of this document, the Privacy Act Statement, the Privacy Act Applicant Rights Statement, the CBI Notice to Applicants and the City of Louisville’s CHRI Policy.

Signature

Printed Name

Date

Received by the Louisville City Clerk’s Office by _____

on _____.