

LIQUOR OR 3.2 BEER LICENSE RENEWAL APPLICATION

SAMUEL HAVENGA JR POST 4265
 419 E VICTORY WY
 CRAIG CO 81625-1825

Fees Due	
Renewal Fee	\$500.00
Storage Permit \$100 x _____	_____
Optional Premise \$100 x _____	_____
Related Resort \$75 x _____	_____
Amount Due/Paid	

Make check payable to: Colorado Department of Revenue. The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department may collect the payment amount directly from your banking account electronically.

PLEASE VERIFY & UPDATE ALL INFORMATION BELOW

RETURN TO CITY OR COUNTY LICENSING AUTHORITY BY DUE DATE

Licensee Name SAMUEL HAVENGA JR VFW POST #4265		DBA SAMUEL HAVENGA JR POST 4265		
Liquor License # 12022820001	License Type Tavern (city)	Sales Tax License # 12022820001	Expiration Date 12/31/2015	Due Date 11/16/2015
Street Address 419 E VICTORY WY CRAIG CO 81625-1825				Phone Number
Mailing Address 419 E VICTORY WY CRAIG CO 81625-1825				
Operating Manager BRIAN BAXTER	Date of Birth JUN 35	Home Address 885 SCHOOL CRAIG CO 81625	Phone Number 970 824 3049	

1. Do you have legal possession of the premises at the street address above? YES NO
 Is the premises owned or rented? Owned Rented* *If rented, expiration date of lease _____
2. Since the date of filing of the last annual application, has there been any change in financial interest (new notes, loans, owners, etc.) or organizational structure (addition or deletion of officers, directors, managing members or general partners)? If yes, explain in detail and attach a listing of all liquor businesses in which these new lenders, owners (other than licensed financial institutions), officers, directors, managing members, or general partners are materially interested. YES NO
NOTE TO CORPORATION, LIMITED LIABILITY COMPANY AND PARTNERSHIP APPLICANTS: If you have added or deleted any officers, directors, managing members, general partners or persons with 10% or more interest in your business, you must complete and return immediately to your Local Licensing Authority, Form DR 8177: Corporation, Limited Liability Company or Partnership Report of Changes, along with all supporting documentation and fees.
3. Since the date of filing of the last annual application, has the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) been convicted of a crime? If yes, attach a detailed explanation. YES NO
4. Since the date of filing of the last annual application, has the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) been denied an alcohol beverage license, had an alcohol beverage license suspended or revoked, or had interest in any entity that had an alcohol beverage license denied, suspended or revoked? If yes, attach a detailed explanation. YES NO
5. Does the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) have a direct or indirect interest in any other Colorado liquor license, including loans to or from any licensee or interest in a loan to any licensee? If yes, attach a detailed explanation. YES NO
6. **SOLE PROPRIETORSHIPS, HUSBAND-WIFE PARTNERSHIPS AND PARTNERS IN GENERAL PARTNERSHIPS:** Each person must complete and sign the DR 4679: Affidavit – Restriction on Public Benefits (available online or by calling 303-205-2300) and **attach a copy of their driver's license, state-issued ID or valid passport.**

AFFIRMATION & CONSENT

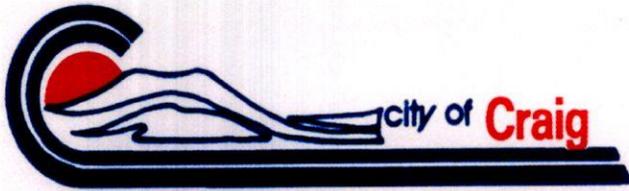
I declare under penalty of perjury in the second degree that this application and all attachments are true, correct and complete to the best of my knowledge.

Type or Print Name of Applicant/Authorized Agent of Business BRIAN D BAXTER	Title QUARTERMASTER
Signature <i>Brian D Baxter</i>	Date 10 NOV 2015

REPORT & APPROVAL OF CITY OR COUNTY LICENSING AUTHORITY

The foregoing application has been examined and the premises, business conducted and character of the applicant are satisfactory, and we do hereby report that such license, if granted, will comply with the provisions of Title 12, Articles 46 and 47, C.R.S. **THEREFORE THIS APPLICATION IS APPROVED.**

Local Licensing Authority For	Date
Signature	Title
	Attest



300 West 4th Street, Craig, CO 81625 (970) 826-2000

BUILDING INSPECTOR APPROVAL

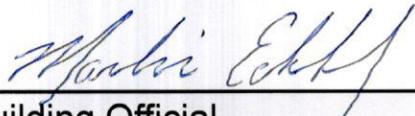
LIQUOR LICENSE APPLICATION & RENEWAL

Name of Applicant: Samuel Havenga Jr VFW Post 4265
Address: 419 E. Victory Way
Craig, CO 81625
Trade Name: VFW Post 4265
Phone Number: 970-824-3049
Location of Premises: 419 E. Victory Way
Type of License: Tavern
Action Date: 12/8/15
Meeting Time: 6:00 p.m.

The required inspection of the above named premises was performed on the 16 day of December, 2015.

The premises meets all requirements: Yes No

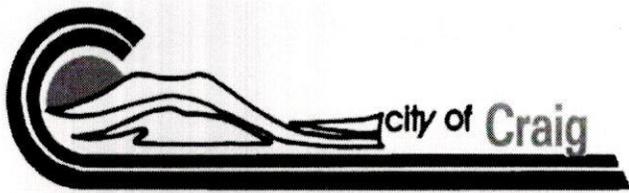
Comments:



Building Official

12-16-15

Date



300 West 4th Street, Craig, CO 81625 (970) 826-2000

POLICE INVESTIGATION REPORT

LIQUOR LICENSE APPLICATION & RENEWAL

Name of Applicant: Samuel Havenga Jr. VFW Post #4265
Address: 419 E. Victory Way
Craig, CO 81625
Trade Name: VFW Post #4265
Phone Number: 824-3049
Location of Premises: 419 E. Victory Way
Type of License: Tavern
Action Date: 01/12/2016

Criminal History

D.L. Check

Background

Liquor Code Violations-past year: _____

Comments: NO CAUSE FOR DENIAL

Walt VFW

Investigator
Chief's Initials: _____

12/30/15

Date