

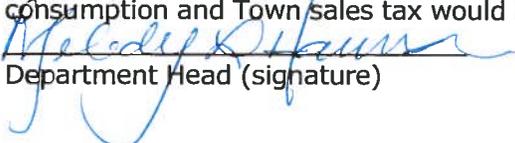
Memo

To: Tom Baker
From: Melody Harrison, Town Clerk
Date: May 17, 2013
Re: Rolling Fork Grill, LLC dba Lazy Bear Restaurant

Recommendation: Staff recommends that Council approve an application from Rolling Fork Grill, LLC dba Lazy Bear Restaurant for a Hotel and Restaurant Liquor License.

Policy Implications: Adopting this recommendation would be consistence with the requirements of the State Liquor Code.

Budget Implications: Adopting this recommendation would allow Rolling Fork Grill, LLC dba Lazy Bear Restaurant to serve malt, vinous, and spirituous liquors for on-premises consumption and Town sales tax would be collected on sales of these beverages.


Department Head (signature)

Finance Director (signature)

Town Administrator (signature)

no
Consultant needed at Council Meeting? Whom? Estimated meeting time cost, if known.

Background: Rolling Fork Grill, LLC dba Lazy Bear Restaurant has applied for a Hotel and Restaurant Liquor License for 285 W. Main Street.

Staff mailed in the fingerprint card to Colorado Bureau of Investigation on March 19, 2013. Staff has not received the results from the fingerprint investigation. Staff recommends approval based on the applicant's representations concerning the lack of criminal convictions in the application. If the CBI report shows otherwise then such could be grounds for a future notice of violation.

APPLICATION DOCUMENTS CHECKLIST AND WORKSHEET

Instructions: This check list 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.

ITEMS SUBMITTED, PLEASE CHECK ALL APPROPRIATE BOXES COMPLETED OR DOCUMENTS SUBMITTED

I. APPLICANT INFORMATION

- A. Applicant/Licensee identified.
- B. State sales tax license number listed or applied for at time of application.
- C. License type or other transaction identified.
- D. Return originals to local authority.
- E. Additional information may be required by the local licensing authority.

II. DIAGRAM OF THE PREMISES

- A. No larger than 8 1/2" X 11".
- B. Dimensions included (doesn't have to be to scale). Exterior areas should show control (fences, walls, etc.).
- C. Separate diagram for each floor (if multiple levels).
- D. Kitchen - identified if Hotel and Restaurant.

III. PROOF OF PROPERTY POSSESSION

- A. Deed in name of the Applicant ONLY (or)
- B. Lease in the name of the Applicant ONLY.
- C. Lease Assignment in the name of the Applicant (ONLY) with proper consent from the Landlord and acceptance by the Applicant.
- D. Other Agreement if not deed or lease.

IV. BACKGROUND INFORMATION AND FINANCIAL DOCUMENTS

- A. Individual History Record(s) (Form DR 8404-I).
- B. Fingerprints taken and submitted to local authority. (State authority for master file applicants.)
- C. Purchase agreement, stock transfer agreement, and or authorization to transfer license.
- D. List of all notes and loans.

V. CORPORATE APPLICANT INFORMATION (If Applicable)

- A. Certificate of Incorporation (and/or)
- B. Certificate of Good Standing if incorporated more than 2 years ago.
- C. Certificate of Authorization if foreign corporation.
- D. List of officers, directors and stockholders of parent corporation (designate 1 person as "principal officer").

VI. PARTNERSHIP APPLICANT INFORMATION (If Applicable)

- A. Partnership Agreement (general or limited). Not needed if husband and wife.

VII. LIMITED LIABILITY COMPANY APPLICANT INFORMATION (If Applicable)

- A. Copy of articles of organization (date stamped by Colorado Secretary of State's Office).
- B. Copy of operating agreement.
- C. Certificate of Authority (if foreign company).

VIII. MANAGER REGISTRATION FOR HOTEL AND RESTAURANT, TAVERN LICENSES WHEN INCLUDED WITH THIS APPLICATION

- A. \$75.00 fee.
- B. Individual History Record (DR 8404-I).

6. Is 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) or manager under the age of twenty-one years? Yes No

7. Has 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) or manager ever (in Colorado or any other state);
 (a) been denied an alcohol beverage license?
 (b) had an alcohol beverage license suspended or revoked?
 (c) had interest in another entity that had an alcohol beverage license suspended or revoked?
 If you answered yes to 7a, b or c, explain in detail on a separate sheet.

8. 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.

9. 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?

10. 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 or former financial interest in said business including any loans to or from a licensee.

11. Does the Applicant, as listed on line 2 of this application, have legal possession of the premises by virtue of ownership, lease or other arrangement?
 Ownership Lease 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 <u>Sam Garcia</u>	Tenant <u>Jason Hagens Rolling Fork Grill LLC</u>	Expires <u>12-15</u>
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Attach a diagram and outline or designate the area to be licensed (including dimensions) which shows the bars, brewery, walls, partitions, entrances, exits and what each room shall be utilized for in this business. This diagram should be no larger than 8 1/2" X 11". (Doesn't have to be to scale)

12. 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.

NAME	DATE OF BIRTH	FEIN OR SSN	INTEREST

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.

13. **Optional Premises or Hotel and Restaurant Licenses with Optional Premises**
 Has a local ordinance or resolution authorizing optional premises been adopted? Yes No

Number of separate Optional Premises areas requested. _____ (See License Fee Chart)

14. **Liquor Licensed Drug Store** applicants, answer the following:
 (a) Does the applicant for a Liquor Licensed Drug Store have a license issued by the Colorado Board of Pharmacy? COPY MUST BE ATTACHED. Yes No

15. **Club Liquor License** applicants answer the following and attach:
 (a) Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain? Yes No

 (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 that was operated solely for the reasons stated above?
 (Three years required)

16. **Brew-Pub License or Vintner Restaurant Applicants** answer the following:
 (a) Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached) Yes No

17a. Name of Manager (for all on-premises applicants) Jason Hagens (If this is an application for a Hotel, Restaurant or Tavern License, the manager must also submit an Individual History Record (DR 8404-1). Date of Birth
11-08-1976

17b. 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

18. **Tax Distraint Information.** Does the applicant or any other person listed on this application and including its partners, officers, directors, stockholders, members (LLC) or managing members (LLC) and any other persons with a 10% or greater financial interest in the applicant currently have an outstanding tax distraint issued to them by the Colorado Department of Revenue? If yes, provide an explanation and include copies of any payment agreements. Yes No

19. 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 8404-1 (Individual History record), and submit finger print cards to their local licensing authority.

NAME	HOME ADDRESS, CITY & STATE	DOB	POSITION	% OWNED*
Jason Hagens	357 DragonRoot NewCastle CO	11-08-1976	owner	100%

*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

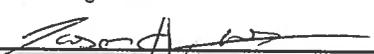
Additional Documents to be submitted by type of entity

- CORPORATION Cert. of Incorp. Cert. of Good Standing (if more than 2 yrs. old) Cert. of Auth. (if a foreign corp.)
 PARTNERSHIP Partnership Agreement (General or Limited) Husband and Wife partnership (no written agreement)
 LIMITED LIABILITY COMPANY Articles of Organization Cert. of Authority (if foreign company) Operating Agrmt.
 ASSOCIATION OR OTHER Attach copy of agreements creating association or relationship between the parties

Registered Agent (if applicable)	Address for Service
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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 	Title owner	Date 3-18-13 12-27-12 <i>JA</i>
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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 12-47-311 (1) C.R.S.)
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THE LOCAL LICENSING AUTHORITY HEREBY AFFIRMS:

- That each person required to file DR 8404-1 (Individual History Record) has:
- | | | |
|---|--------------------------|--------------------------|
| | Yes | No |
| <input type="checkbox"/> Been fingerprinted | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Been subject to background investigation, including NCIC/CCIC check for outstanding warrants | <input type="checkbox"/> | <input type="checkbox"/> |
- 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
- | | | |
|--|--------------------------|--------------------------|
| | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|
- (Check One)
- Date of Inspection or Anticipated Date _____
- Upon approval of state licensing authority.

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 12, Article 46 or 47, C.R.S. **THEREFORE, THIS APPLICATION IS APPROVED.**

Local Licensing Authority for	Telephone Number	<input type="checkbox"/> TOWN, CITY <input type="checkbox"/> COUNTY
Signature	Title	Date
Signature (attest)	Title	Date

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 or Tavern 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.**

1. Name of Business <p style="text-align: center; font-size: 1.2em;">Lazy Bear Restaurant</p>				
2. Your Full Name (last, first, middle) <p style="text-align: center; font-size: 1.2em;">Higens Jason Allen</p>			3. List any other names you have used.	
4. Mailing address (if different from residence) <p style="text-align: center; font-size: 1.2em;">285 W. Main St New Castle CO 81647</p>				
5. List current residence address. Include any previous addresses within the last five years (attach separate sheet if necessary).				
STREET AND NUMBER		CITY, STATE, ZIP	FROM	TO
Current 357 Dragon Root Dr.		New Castle CO 81647	10-2011	now
Previous 1300 Arabian Ave		Rifle CO 81650	5-2006	10-2011
6. 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
Rolling Fork Grill LLC.	205 8th St GWS CO 81601	owner	5-2004	now
7. 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	
8. 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? If yes, answer in detail. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<p style="font-size: 1.2em;">Hate Plate Bistro had a license in Colorado</p>				
9. 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? If yes, explain in detail. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				

10. 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? (If yes, explain in detail.)

Yes No

I plead guilty to distributing marijuana in 1999 I completed all requirements, closed the case and have not repeated any offences

11. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? (if yes, explain in detail.)

Yes No

12. Have you ever had any professional license suspended, revoked, or denied? (If yes, explain in detail.)

Yes No

PERSONAL AND FINANCIAL INFORMATION

Unless otherwise provided by law, the personal information required in question #13 will be treated as confidential. The personal information required in question #13 is solely for identification purposes.

13a. Date of Birth 11-08-1976		b. Social Security Number SSN [REDACTED]		c. Place of Birth Denver CO		d. U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
e. If Naturalized, State where			f. When		g. Name of District Court		
h. Naturalization Certificate Number		i. Date of Certification		j. If an Alien, Give Alien's Registration Card Number		k. Permanent Residence Card Number	
i. Height 5'10"	m. Weight 200	n. Hair Color brn	o. Eye Color blu	p. Sex m	q. Race Cauc	r. Do you have a current Driver's License? If so, give number and state <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No [REDACTED]	

14. Financial Information.

a. Total purchase price \$ _____ (if buying an existing business) or investment being made by the applying entity, corporation, partnership, limited liability company, other \$ _____

b. List the total amount of your investment in this business including any notes, loans, cash, services or equipment, operating capital, stock purchases or fees paid \$ 25,000.00

c. Provide details of the investment described in 14.b. You must account for all of the sources of this investment. Attach a separate sheet if needed.

Type: Cash, Services or Equipment	Source	Amount
Cash	Alpine Bank	25,000.00
	Haute Plate Bistro	

d. Loan Information (attach copies of all notes or loans)

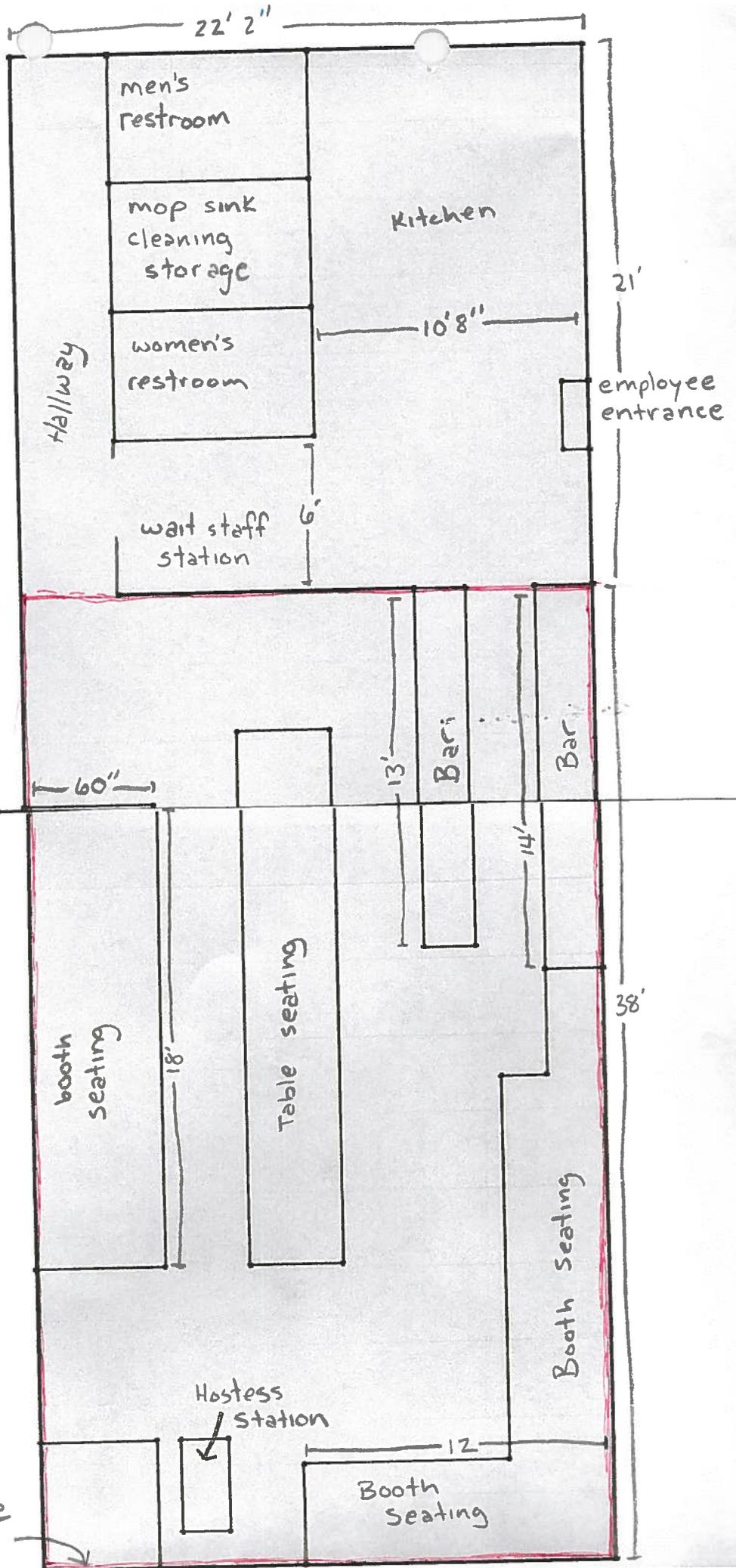
Name of Lender	Address	Term	Security	Amount

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 	Title owner	Date 3-18-2013
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Lazy Bear Restaurant



- Perimeter where alcohol is permitted

Entrance

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

ROLLING FORK GRILL, LLC

is a **Limited Liability Company** formed or registered on 12/29/2003 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20031407697.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 12/10/2012 that have been posted, and by documents delivered to this office electronically through 12/12/2012 @ 11:52:31.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 12/12/2012 @ 11:52:31 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8407647.



A handwritten signature in blue ink, appearing to read "Scott Gessler".

Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."



Colorado Secretary of State
 Date and Time: 12/27/2012 02:54 PM
 ID Number: 20121714621
 Document number: 20121714621
 Amount Paid: \$1.00

Document must be filed electronically.
 Paper documents are not accepted.
 Fees & forms are subject to change.
 For more information or to print copies
 of filed documents, visit www.sos.state.co.us.

ABOVE SPACE FOR OFFICE USE ONLY

Statement of Trade Name of a Non-Reporting Entity
 filed pursuant to §7-71-103 and §7-71-107 of the Colorado Revised Statutes (C.R.S)

- The person delivering this statement is an entity other than a reporting entity ("non-reporting entity").
- (Adopt the appropriate statement by marking the box and complete the field.)*
(Caution: Mark only one box.)
 Such non-reporting entity is a general partnership.

The true name of at least one general partner of such general partnership is

(if an individual) _____
(Last) (First) (Middle) (Suffix)

or

(if an entity) Rolling Fork Grill LLC.
(Caution: Do not provide both an individual and an entity name.)

or

The non-reporting entity is not a general partnership and the true name of such non-reporting entity is _____

- For such non-reporting entity delivering this statement, its form of entity and the jurisdiction under the law of which it is formed are

Form of entity General Partnership
 Jurisdiction Colorado

- The principal address of such non-reporting entity is

Street address 285 West Main Street
(Street number and name)
New Castle CO 81647
(City) (State) (Postal/Zip Code)
United States
(Province - if applicable) (Country - if not US)

Mailing address
 (leave blank if same as street address) _____
(Street number and name or Post Office Box information)

(City) (State) (Postal/Zip Code)

(Province - if applicable) (Country - if not US)

5. The trade name under which such non-reporting entity transacts business or conducts activities or contemplates transacting business or conducting activities in this state is

Lazy Bear Restaurant

6. A brief description of the kind of business transacted or activities conducted or contemplated to be transacted or conducted in this state under such trade name is

Restaurant

7. (If the following statement applies, adopt the statement by marking the box and include an attachment.)

This document contains additional information as provided by law.

8. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document are 01/01/2013 08:00 AM
(mm/dd/yyyy hour:minute am/pm)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

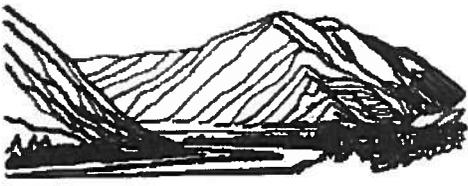
9. The true name and mailing address of the individual causing this document to be delivered for filing are

<u>Higens</u>	<u>Jason</u>		
<small>(Last)</small>	<small>(First)</small>	<small>(Middle)</small>	<small>(Suffix)</small>
<u>285 West Main Street</u>			
<small>(Street number and name or Post Office Box information)</small>			
<u>New Castle</u>		<u>CO</u>	<u>81647</u>
<small>(City)</small>	<small>(State)</small>	<small>(Postal/Zip Code)</small>	
<u>United States</u>			
<small>(Province -- if applicable)</small>		<small>(Country -- if not US)</small>	

- (If the following statement applies, adopt the statement by marking the box and include an attachment.)
- This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

Disclaimer:

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).



"Burning Mountain" - 1888

The New Castle Police Department

450 West Main - Post Office Box 90

New Castle, Colorado 81647

(970) 984-2302

04/15/13

To: Deputy Town Clerk Wendy Mead
From: Chief Chris Sadler
NCPD 601
Re: New Liquor License – Lazy Bear Restaurant

Dear Wendy,

I have reviewed the application submitted by Mr. Higen and it appears to be in order. The attached diagram depicting the licensed premise raises no issues at this time.

I have attached the standard requirement list provided to all establishments involved with the sales of liquor within the Town. I would like to request the Lazy Bear Restaurant be held to this standard and provide the Town Clerk, and this Department, yearly documentation of attendance in a certified TIPS training course for all employees involved in the service of alcohol.

1. Management, and all employees tasked with dispensing alcohol are to be TIPS trained/certified. The initial certification is to be provided to the police department as well as the Town Clerk - prior to the service of alcohol. TIPS classes are to then be repeated yearly with associated certification forwarded to the PD and Town Clerk- prior to the license renewal.
2. A notebook is to be kept behind the bar/service counter for the purpose of immediate employee documentation of any and all disturbances or incidents occurring on, or near the licensed premise. (names, description of subject, date, time, nature of incident, police called, etc.) This notebook is to be readily available to the police department upon request.
3. The applicant is responsible for the employment of security personnel to deter unruly criminal behavior in and around the premises. The number of personnel required should be determined by volume, at a rate of one per thirty patrons.
4. The applicant is responsible for the sidewalk in front of or adjacent to the establishment. All trash, cigarette butts or other waste should be cleaned from the sidewalk (and gutter) when necessary, and, at the end of each business day.
5. A telephone must be kept in working order at all times for employee use in case of emergency in an easily accessible location.
6. The occupancy load of the premise must be posted. The applicant will not allow the occupancy load to exceed the posted limit.
7. Doors should remain shut after sunset and at any time it is believed the noise level emanating from the interior of the establishment is, or is becoming, excessive. (such as live bands)

Respectfully submitted,

Chief Chris Sadler

COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT

RELEASE OF VOLUNTARY CLOSURE AGREEMENT

Firm Name : **The Lazy Bear Restaurant**

Site Address: **285 W Main ST**

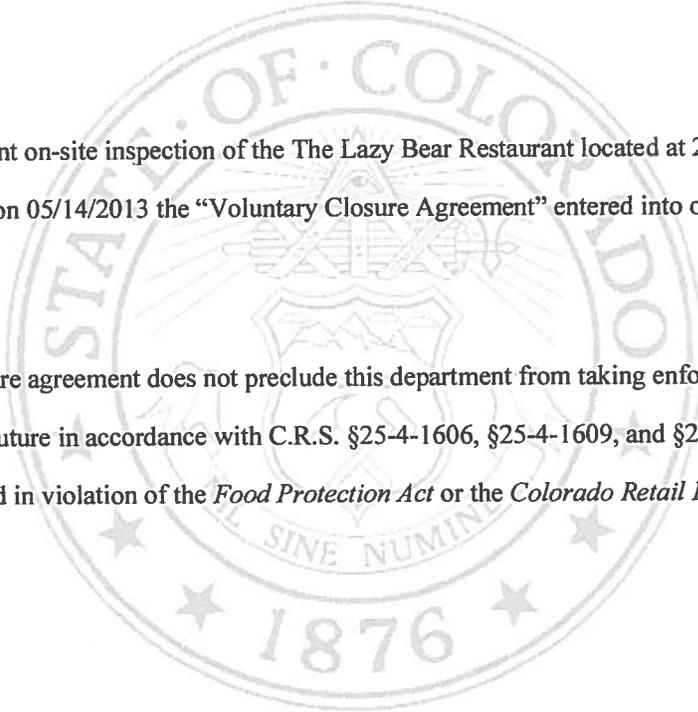
City: **NEW CASTLE**

CO

Zip: **81647**

Based on the compliant on-site inspection of the The Lazy Bear Restaurant located at 285 W Main ST, in NEW CASTLE, Colorado, on 05/14/2013 the "Voluntary Closure Agreement" entered into on 01/25/2013 has been removed.

Removal of this closure agreement does not preclude this department from taking enforcement action against the establishment in the future in accordance with C.R.S. §25-4-1606, §25-4-1609, and §25-4-1611, if the establishment is found in violation of the *Food Protection Act* or the *Colorado Retail Food Establishment Rules and Regulations*.





Owner/Operator

05/14/2013
Date



CDPH&E Representative

05/14/2013
Date

TO: Building Department

Date: 5/15/2013

LIQUOR LICENSING INSPECTION REQUEST

The Town Clerk's Office hereby requests an investigation/inspection in conjunction with the liquor license application described below.

Council Meeting Date: **May 7, 2013 Rescheduled: May 21, 2013**

NAME OF APPLICANT: **Jason Higen**

ESTABLISHMENT NAME: **Rolling Fork Grill, LLC dba Lazy Bear Restaurant**

LOCATION ADDRESS: **285 W. Main Street**

TYPE OF LICENSE: **New Hotel and Restaurant License**

TYPE OF ESTABLISHMENT: **Restaurant**

CONTACT PERSON: **Jason Higen-970-379-4156**

Are the premises in compliance with all applicable Building Code provisions?

On 4/16/13 the proposed restaurant was inspected by the Building Official and the Fire Marshall. The proposed restaurant is located in an older existing building. The structure of the building was not inspected for code compliance. A life safety inspection only was performed by the Building official and the Fire Marshall. Recommendations were made by the Building Official and the Fire Marshall to the applicant. The recommended corrections have been completed by the applicant. The proposed restaurant was re-inspected and approved by the Fire Marshall on 4/29/13 and the Building Official on 5/15/13.

The occupancy load for the building is: Seating Area - 43 Restaurant total - 47

Is the occupancy load for the building posted? Yes: X

Are the premises, to the best of your knowledge, in compliance with the Colorado Department of Public Health and Environment regulations?

Yes: X See attached Release of Voluntary Closure Agreement with the Colorado Department of Public Health and Environment



Building Department

5/15/13

Date

TO: Planning Department

Date: 3/19/2013

LIQUOR LICENSING INSPECTION REQUEST

The Town Clerk's Office hereby requests an investigation/inspection in conjunction with the liquor license application described below.

Council Meeting Date: **May 7, 2013**

NAME OF APPLICANT: **Jason Higen**s

ESTABLISHMENT NAME: **Rolling Fork Grill, LLC dba Lazy Bear Restaurant**

LOCATION ADDRESS: **285 W. Main Street, New Castle, CO**

TYPE OF LICENSE: **New Hotel and Restaurant**

TYPE OF ESTABLISHMENT: **Restaurant**

CONTACT PERSON: **Jason Higen-970-379-4156**

Are the premises within 500 feet of the property of any public or parochial school, or the principal campus of any college, university, or seminary? (Distance to be computed by direct measurement from nearest property line of the land used for school purposes to the nearest portion of the building in which liquor is to be sold, using a route of direct pedestrian access, measured as a person would walk safely and properly, without trespassing, with right angles at crossings and with the observance of traffic regulations and lights.) Yes: _____ No: _____
If answer is yes, give details and attach a vicinity map.

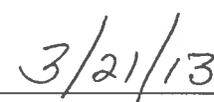
Is this license an appropriate use for the zone in which it is located?

Yes: No: _____

Comments:



Planning Department



Date

Burning Mountains Fire Protection District

Silt: Station 61
 (970) 876-0758 • Fax: (970) 876-2774
 P.O. Box 2 • 611 Main Street
 Silt, CO 81652

0011

New Castle: Station 64
 (970) 984-3175 • Fax: (970) 984-3922
 775 Castle Valley Blvd.
 New Castle, CO 81647

SAFETY SURVEY FORM

Business Name: LAZY BEAR RESTAURANT Phone: 984-2327 Date: 4/16/2013

Address: 285 W Main St City: New Castle Zip: 81647

Name of Contact: Jason Hagens Phone: 319-4156

Emergency Phone / Contact: RASA Hagens 970-319-6534

BLD OWNER SAM GARCIA 319-8378

IFC:	G	D	NA	G	D	NA
Fire Department Access						
1. Fire Lanes / Access	X					
2. Proper Addressing	X					
3. Knox Box (proper keys / placement)			X			
Building Services						
4. Electrical	X	X				
5. Extension cords / multi face adaptors		X				
6. Breaker Panel accessible / labeled	X					
7. Main electrical shutoff accessible	X					
8. Emergency Generator Last Tested:			X			
9. Heating Appliance / Portable	X					
10. Combustible air source			X			
11. Water heater obstructed	X					
12. Gas Shutoff accessible	X					
13. Elevators Inspection Forms			X			
Fire Protection Systems						
14. Fire Alarm System / Current test and inspection records			X			
15. Special Extinguishing system / type		X				
16. Hood / Duct system clean	X					
17. Sprinkler System / Current test and inspection records		X	X			
18. Standpipes / Current test and inspection records			X			
19. FDC			X			
Fire Extinguishers						
Date Last Inspected:		X				
20. Proper type & size	X					
21. Mounted properly		X				
Means of Egress						
22. Clear & Unobstructed	X					
23. Emergency Lighting	X					
24. Stairways in Order			X			
Housekeeping						
26. Areas free of excessive combustibles		X				
27. 18" Clearance below sprinklers / 24" Clearance all other ceilings						X
28. 30" Clearance in front of mechanical / Electrical Equipment		X				
29. Storage room(s) / Utility rooms accessibility, cleanliness		X				
Hazardous Areas / Storage						
30. Hazardous liquids / paints / acids — areas / cabinets labeled						X
31. Hazardous Gases						X
32. Explosives						X
33. Dust / Fumes						X
34. MSDS paperwork available						X
Fire Resistive / Rated Construction						
35. Stairway(s)						X
36. Corridors						X
37. Elevator Shaft						X
38. Floor / Ceiling / Walls						X
39. Major Structure members						X

G: Good D: Deficient NA: Not Applicable

Remarks / Recommendations / Requirements

Hrs of operation: 7A-10P 7 Days a Week A-3 occupancy Occupant Load 47 Total
Mail Address: PO Box 42 Occupant Load 43 Seating Area
New Castle CO

- 2 50 Power strip & electrical cords on ceiling North wall. Remove electrical cords going into ceiling tiles.
- 13 130 Hood Extinguishing system Needs inspection.
- 19.5 Extinguishers Need Inspection (ABC) Front Seating Area
- 21 Extinguishers Need mounted on wall in kitchen and seating area
- 40 Cover Plate Needs installed on electric box in kitchen.

Pre-Plan Updated: Yes No Officer's Review: _____

Inspected By: [Signature] ORRIN D MOON Date: 4/16/2013
 (Print & Sign)

Received By: [Signature] Jason Hagens Date: 4-16-13
 (Print & Sign)

Re-Inspection Date: 4/18/2013 PM Inspection Completion Date: 4/29/2013

Initials Fire Department: [Signature] Occupant / Owner: [Signature]

**TOWN OF NEW CASTLE
RESOLUTION NO. TC-2013-11**

A Resolution of the Town Council of the Town of New Castle Regarding an Application from Rolling Fork Grill, LLC dba Lazy Bear Restaurant for a Hotel and Restaurant Liquor License.

WHEREAS, Rolling Fork Grill, LLC dba Lazy Bear Restaurant (Applicant) has applied for a hotel and restaurant liquor license at 285 West Main Street, New Castle, Colorado; and

WHEREAS, the Town Council of the Town of New Castle opened a duly noticed public hearing on May 21, 2013, to consider the application; and

WHEREAS, the Town Council listened to testimony from staff, the Applicant, and members of the public concerning the application and also considered the written staff report from Police Chief Sadler; and

WHEREAS, based on the contents of the application and the evidence presented during the public hearing, the Town Council makes the findings and decisions set forth below.

WHEREAS, the Town Council finds:

1. Within the previous 2 years, the Town Council has not denied an application for the same class of license at this location or within 500 feet of this location for the reason that the reasonable requirements of the neighborhood and the desires of the adult inhabitants were satisfied by the existing outlets;
2. The Applicant is entitled to possession of the premises to be licensed by ownership, lease, rental, or other arrangement;
3. The sale of alcohol beverages at the premises is permitted under the zoning regulations applicable to the premises;
4. The building in which the alcohol beverages are to be sold is not located within 500 feet of any public or parochial school or the principal campus of any college, university, or seminary;
5. The Applicant's officers, and members holding 10 percent or more interest in the Applicant, are of good moral character;
6. The reasonable requirements of the neighborhood for the type of license for which application has been made; the desires of the adult inhabitants; and the number, type, and availability of alcohol beverage outlets located in or near the neighborhood under consideration justify the granting of the license; and

WHEREAS, based on the application and the testimony, the Town Council desires to approve the application.

NOW, THEREFORE, BE IT RESOLVED by the Town Council of the Town of New Castle, Colorado:

1. Recitals. The Town Council adopts the foregoing recitals as findings of fact and determinations of the Council.
2. Definition of the Application. The Application consists of the documents and information identified by the Town Clerk on Exhibit A, plus all representations of the Applicant reflected in the minutes of the Town Council public hearing on May 21,

2013.

3. Approval. The Town Council approves the Application.

Introduced, Read and Adopted at a regularly scheduled meeting of the Town Council of the Town of New Castle, Colorado, on May 21, 2013.

TOWN OF NEW CASTLE

Frank Breslin, Mayor

ATTEST:

Melody Harrison, Town Clerk