

**TOWN OF NEW CASTLE
Town Clerk**

To: Local Liquor Authority

From: Melody Harrison, Town Clerk

Date: 5/1/2018

Re: Roaring Fork Mountain Bike Association Special Event Liquor Permit for the August 4, 2018 New Castle Trails Summer Conference

Request: The Roaring Fork Mountain Bike Association through its representative Adam Cornely requests a special events liquor license for the New Castle Trails Summer Conference located at VIX Ranch Park, 627 N Wildhorse Drive on August 4, 2018.

Recommendation: If Council's consensus is to approve the attached application for a special event liquor permit for the Roaring Fork Mountain Bike Association, the Clerk's Office staff recommends that Council consider the following conditions:

That although the application requests a permit time until 6:00 pm on August 4, 2018, staff recommends alcohol be served only until 5:30 pm, and alcohol be allowed on premises until 6:00 pm. Staff also suggests that a 100% ID check be conducted, and that wristbands or handstamps be provided to guests over the legal drinking age of 21. Currently, none of the representatives or members of RFMBA are known to be SafeServ (TIPS) Certified, and staff's final recommendation is that council consider requiring SafeServ Certified volunteer to be on premises for the event. Snacks should be served as required by state liquor law.

The event is scheduled from 9:00 am to 5:30 pm. The licensing request is from 12:00 pm to 6:00 pm.

Additionally, the applicant has applied for rental of the park. The park will be fenced to delineate the liquor license area, ensuring that no alcoholic beverages leave the premises. Please see the map included with the application.

Policy Implications: The policy implication of Council's approval of this special event license is that Roaring Fork Mountain Bike Association shall have the authority to serve, sell or distribute malt, vinous and spirituous liquors for on-premises consumption at the August 4, 2018 New Castle Trails Summer Conference Event, from 12:00 pm to 6:00 p.m.

Budget Implications: Adopting staff's recommendation would increase sales tax revenues. Even though the applicant is a non-profit organization, it is required to collect and remit sales tax on alcohol sales.


Department Head (signature)

Background: Mr. Adam Cornely filed the application on behalf of Roaring Fork Mountain Bike Association Chairman on March 14, 2018. The public hearing has been properly noticed. The application is properly completed, and all fees have been paid.

APPLICATION INFORMATION AND CHECKLIST

THE FOLLOWING SUPPORTING DOCUMENTS MUST BE ATTACHED TO THIS APPLICATION FOR A PERMIT TO BE ISSUED:

- Appropriate fee
- Diagram of the area to be licensed (not larger than 8 1/2" X 11" reflecting bars, walls, partitions, ingress, egress and dimensions
Note: If the event is to be held outside, please submit evidence of intended control, i.e., fencing, ropes, barriers, etc
- Copy of deed, lease, or written permission of owner for use of the premises
- Certificate of good corporate standing (NONPROFIT) issued by Secretary of State within last two years, or
- If not incorporated, a NONPROFIT charter, or
- If a political Candidate, attach copies of reports and statements that were filed with the Secretary of State

- APPLICATION MUST FIRST BE SUBMITTED TO THE LOCAL LICENSING AUTHORITY (CITY OR COUNTY) AT LEAST THIRTY (30) DAYS PRIOR TO THE EVENT.
- THE PREMISES TO BE LICENSED MUST BE POSTED AT LEAST TEN (10) DAYS BEFORE A HEARING CAN BE HELD. (12-48-106 C.R.S.)
- AN APPROVED APPLICATION MUST BE RECEIVED BY THE LIQUOR ENFORCEMENT DIVISION AT LEAST TEN (10) DAYS PRIOR TO THE EVENT.
- CHECK PAYABLE TO THE COLORADO DEPARTMENT OF REVENUE

(12-48-102 C.R.S.)

A Special Event Permit issued under this article may be issued to an organization, whether or not presently licensed under Articles 46 and 47 of this title, which has been incorporated under the laws of this state for the purpose of a social, fraternal, patriotic, political or athletic nature, and not for pecuniary gain or which is a regularly chartered branch, lodge or chapter of a national organization or society organized for such purposes and being non profit in nature, or which is a regularly established religious or philanthropic institution, and to any political candidate who has filed the necessary reports and statements with the Secretary of State pursuant to Article 45 of Title 1, C.R.S. A Special Event permit may be issued to any municipality owning arts facilities at which productions or performances of an artistic or cultural nature are presented for use at such facilities.

If an event is cancelled, the application fees and the day(s) are forfeited.

VIX RANCH PARK



OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Roaring Fork Mountain Bike Association - RFMBA

is a

Nonprofit Corporation

formed or registered on 04/16/2014 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 20141242368 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 12/02/2016 that have been posted, and by documents delivered to this office electronically through 12/05/2016 @ 13:56:15 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 12/05/2016 @ 13:56:15 in accordance with applicable law. This certificate is assigned Confirmation Number 9958279



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 Validate a Certificate page of the Secretary of State's Web site. <http://www.sos.state.co.us/biz/certificateSearch/validate> 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 "Businesses, trademarks, trade names" and select "Frequently Asked Questions."



Colorado Secretary of State
 Date and Time: 04/16/2014 04:01 PM
 ID Number: 20141242368
 Document number: 20141242368
 Amount Paid: \$50.00

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

Articles of Incorporation for a Nonprofit Corporation
 filed pursuant to § 7-122-101 and § 7-122-102 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name for
 the nonprofit corporation is

Roaring Fork Mountain Bike Association - RFMBA

(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)

2. The principal office address of the nonprofit corporation's initial principal office is

Street address

PO Box 2635

(Street number and name)

Aspen

(City)

CO

(State)

81611

(ZIP Postal Code)

United States

(Country)

(Province if applicable)

Mailing address

(leave blank if same as street address)

P.O. Box 2635

(Street number and name or Post Office Box information)

Aspen

(City)

CO

(State)

81612

(ZIP Postal Code)

United States

(Country)

(Province if applicable)

3. The registered agent name and registered agent address of the nonprofit corporation's initial registered agent are

Name

(if an individual)

Pritchard

(Last)

Mike

(First)

(Middle)

(Suffix)

OR

(if an entity)

(Caution: Do not provide both an individual and an entity name.)

Street address

725 Vine St.

(Street number and name)

Aspen

(City)

CO

(State)

81611

(ZIP Code)

Mailing address
(leave blank if same as street address)

P.O. Box 2635

(Street number and name or Post Office Box information)

Aspen

(City)

CO

(State)

81612

(ZIP Code)

(The following statement is adapted by marking the box.)

- The person appointed as registered agent above has consented to being so appointed.

4. The true name and mailing address of the incorporator are:

Name

(if an individual)

Pritchard

Mike

(Last)

(First)

(Middle)

(Suffix)

OR

(if an entity)

(Caution: Do not provide both an individual and an entity name.)

Mailing address

P.O. Box 2635

(Street number and name or Post Office Box information)

Aspen

(City)

CO

(State)

81612

(ZIP Postal Code)

United States

(Province - if applicable)

(Country)

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

- The corporation has one or more additional incorporators and the name and mailing address of each additional incorporator are stated in an attachment.

5. (If the following statement applies, adapt the statement by marking the box.)

- The nonprofit corporation will have voting members.

6. Provisions regarding the distribution of assets on dissolution:

Upon the dissolution of the Corporation, the Board of Directors shall, after paying or making provision for the payment of all of the liabilities of the Corporation, dispose of the assets of the Corporation exclusively for the purposes of the Corporation in such manner, or to such organizations organized and operated exclusively for charitable, educational, literacy, or scientific purposes as shall at the time qualify as an exempt organization or organizations under Section 501 (c)(3) of the Internal Revenue Code of 1986 (or the corresponding provision of any future federal tax code), as the Board of Directors shall determine. Any assets not so disposed of shall be disposed of by the District Court of the county in which the principal office of the Corporation is located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

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 is/are _____
(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 the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the 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 named in the document as one who has caused it to be delivered.

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

Pritchard	Mike		
<small>(Last)</small>	<small>(First)</small>	<small>(Middle)</small>	<small>(Suffix)</small>
725 Vine St.			
<small>(Street number and name or Post Office Box information)</small>			
Aspen	CO	81611	
<small>(City)</small>	<small>(State)</small>	<small>(ZIP Postal Code)</small>	
<small>(Province - if applicable)</small>	United States		
	<small>(Country)</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).