

# Memo

**To:** Local Liquor Authority

**From:** Melody Harrison, Town Clerk

**Date:** 1.31.2019

**Re:** Roaring Fork Mountain Bike Association Special Event Liquor Permit for the New Castle Trails Registration Event in Ritter Plaza


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**Request:** The Roaring Fork Mountain Bike Authority (RFMBA) through its representative, Adam Cornely, requests that the Liquor Authority consider approving a special event liquor permit to serve malt, vinous and spirituous beverages for a New Castle Trails Registration Event in Ritter Plaza on the evening of August 9, 2019.

**Recommendation:** If the Authority's consensus is to approve the special event liquor permit for RFMBA, the Clerk's Office staff recommends that the Authority consider the following conditions: That although the application requests a permit time until 9:00 p.m. on August 9, 2019, staff recommends alcohol be served only until 8:30 p.m., and alcohol be allowed on premises until 8:00 p.m. 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.

**Policy Implications:** The policy implication of Council's approval of this special event license is that RFMBA shall have the authority to serve, sell or distribute malt, vinous and spirituous liquors for on-premises consumption at the August 9, 2019 event.

**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:** Adam Cornely filed the application on December 26, 2018, more than 30 days prior to the event date, within the application guidelines as required by the State Liquor Code. The public hearing has been properly noticed. The application is properly completed.

# APPLICATION FOR A SPECIAL EVENTS PERMIT

Department Use Only

IN ORDER TO QUALIFY FOR A SPECIAL EVENTS PERMIT YOU MUST BE NONPROFIT AND ONE OF THE FOLLOWING (See back for details.)

- SOCIAL       ATHLETIC       PHILANTHROPIC INSTITUTION  
 FRATERNAL     CHARTERED BRANCH, LODGE OR CHAPTER     POLITICAL CANDIDATE  
 PATRIOTIC       OF A NATIONAL ORGANIZATION OR SOCIETY     MUNICIPALITY OWNING ARTS FACILITIES  
 POLITICAL       RELIGIOUS INSTITUTION

LIAB TYPE OF SPECIAL EVENT APPLICANT IS APPLYING FOR:  
 2110  MALT, VINOUS AND SPIRITUOUS LIQUOR \$25.00 PER DAY  
 2170  FERMENTED MALT BEVERAGE (3.2 Beer) \$10.00 PER DAY

DO NOT WRITE IN THIS SPACE

LIQUOR PERMIT NUMBER

1. NAME OF APPLICANT ORGANIZATION OR POLITICAL CANDIDATE

ROARING FORK MOUNTAIN BIKE ASSOCIATION

State Sales Tax Number (Required)

2. MAILING ADDRESS OF ORGANIZATION OR POLITICAL CANDIDATE (include street, city/town and ZIP)

PO Box 2635  
 ASPEN, CO 81611

3. ADDRESS OF PLACE TO HAVE SPECIAL EVENT (include street, city/town and ZIP)

1) ~~YES~~  
 2) RITTER PLAZA MAIN ST.  
 NEW CASTLE, CO 81647

NAME

DATE OF BIRTH

HOME ADDRESS (Street, City, State, ZIP)

PHONE NUMBER

4. PRES./SEC'Y OF ORG or POLITICAL CANDIDATE

MIKE PRETCHARD

725 VINE ST. ASPEN, CO 81611

970-948-3480

5. EVENT MANAGER

ADAM CORNELLY

9-26-80

50 LITTLE BEAR PEAK  
 NEW CASTLE, CO 81647

402-250-1727

6. HAS APPLICANT ORGANIZATION OR POLITICAL CANDIDATE BEEN ISSUED A SPECIAL EVENT PERMIT THIS CALENDAR YEAR?

NO       YES      HOW MANY DAYS? \_\_\_\_\_

7. IS PREMISES NOW LICENSED UNDER STATE LIQUOR OR BEER CODE?

NO       YES      TO WHOM? \_\_\_\_\_

8. DOES THE APPLICANT HAVE POSSESSION OR WRITTEN PERMISSION FOR THE USE OF THE PREMISES TO BE LICENSED?  Yes  No

LIST BELOW THE EXACT DATE(S) FOR WHICH APPLICATION IS BEING MADE FOR PERMIT

Date	Hours	From	To	Date	Hours	From	To	Date	Hours	From	To	Date	Hours	From	To
8-9-19		5:00 P	9:00 P												

### OATH OF APPLICANT

I declare under penalty of perjury in the second degree that I have read the foregoing application and all attachments thereto, and that all information therein is true, correct, and complete to the best of my knowledge.

SIGNATURE

*[Signature]*

TITLE

CHAIRMAN

DATE

12-26-18

### REPORT AND APPROVAL OF LOCAL LICENSING AUTHORITY (CITY OR COUNTY)

The foregoing application has been examined and the premises, business conducted and character of the applicant is satisfactory, and we do report that such permit, if granted, will comply with the provisions of Title 12, Article 48, C.R.S., as amended.

**THEREFORE, THIS APPLICATION IS APPROVED.**

LOCAL LICENSING AUTHORITY (CITY OR COUNTY)

- CITY  
 COUNTY

TELEPHONE NUMBER OF CITY/COUNTY CLERK

SIGNATURE

TITLE

DATE

DO NOT WRITE IN THIS SPACE - FOR DEPARTMENT OF REVENUE USE ONLY

### LIABILITY INFORMATION

License Account Number	Liability Date	State	TOTAL
		-750 (999)	\$

## 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.

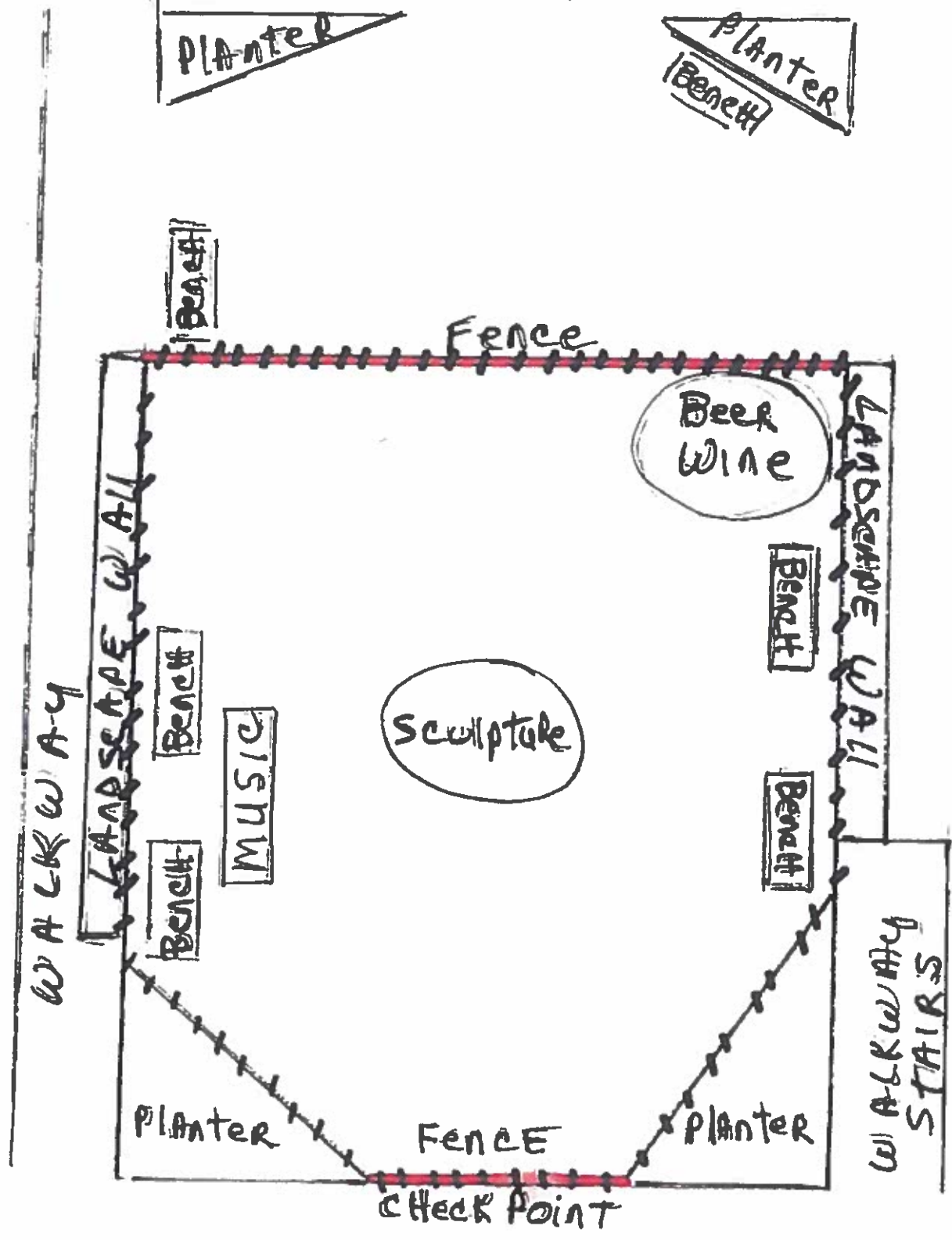
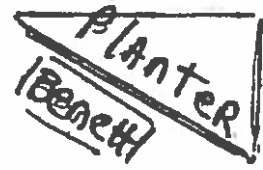
- APPLICATION MUST FIRST BE SUBMITTED TO THE LOCAL LICENSING AUTHORITY (CITY OR COUNTY) AT LEAST THIRTY (30) DAYS PRIOR TO THE EVENT.
- THE PREMISES TO BE LICENSED MUST BE POSTED AT LEAST TEN (10) DAYS BEFORE A HEARING CAN BE HELD. (12-48-106 C.R.S.)
- AN APPROVED APPLICATION MUST BE RECEIVED BY THE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

PARKING LOT



MAIN STREET

RITTER PLAZA

SPECIAL EVENTS

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/> after which 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"



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](http://www.sos.state.co.us).

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

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 CO 81612  
(City) (State) (ZIP Code)

(The following statement is adopted 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 CO 81612  
(City) (State) (ZIP Postal Code)  
United States  
(Province - if applicable) (Country)

(If the following statement applies, adopt 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, adopt 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  
(Last)                                      (First)                                      (Middle)                                      (Suffix)  
725 Vine St.  
(Street number and name or Post Office Box information)

Aspen    CO    81611  
(City)    (State)    (ZIP/Postal Code)  
United States  
(Province - if applicable)    (Country)

(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:**

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