

CITY AND COUNTY OF DENVER

DEPARTMENT OF EXCISE AND LICENSE

OFFICE OF DIRECTOR 201 West Colfax Avenue, Dept. 206 Denver, Colorado 80202 720-865-2760

September 24, 2009

Re: Tavern Congress Park, Inc.

D/b/a: Tavern Congress Park

2510 E. Colfax Ave Denver, CO 80206

Dear Neighborhood Organization:

Please be advised that an application for a transfer of ownership has been filed with this department regarding a hotel restaurant liquor license and standard cabaret in your neighborhood. Please review the attached documents for information regarding this change.

Objections to this transfer must be based only on the character and reputation of the applicant. Secondly, all objections to this application must be registered with the Director of Excise and Licenses at 201 West Colfax Avenue, Department 206, Denver, Colorado 80202 by the close of business fifteen (15) calendar days from the date of this letter.

To review this application for a transfer of ownership, please visit Excise & Licenses at 201 West Colfax Avenue (2nd Floor) between the hours of 8:00a.m. and 4:00p.m.

Sincerely,

Charlotte Martinez

Business/Liquor Licensing

Licensing Technician

720-865-2760 Fax: 720-865-2881

cc: Councilwoman Jeanne Robb District 10

Division Chief of Patrol Mary Beth Klee Capitol Hill United Neighborhoods, Inc.

Colfax on the Hill, Inc.

Colfax Business Improvement District

Community Renaissance Neighbors (CO.R.N)

Congress Park Neighbors, Inc.

Northeast Community Congress for Education

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DEPARTMENT USE ONLY

COLORADO LIQUOR RETAIL LICENSE APPLICATION

☐ NEW LIC	ENSE TRA	NSFER OF OW	VNERSHIP	LICENSE	RENEW	'AL			
 APPLICANT MI LOCAL LICENS 	S MUST BE PRINTE UST CHECK THE A SE FEE \$ ULD OBTAIN A COPY	370-2165)							
1. Applicant is apply	ying as a					Indiv	/idual	**************************************	
Corporation Partnership	n p (includes Limited	Liability and Hu	usband and Wi	ife Partnershi	ps)	ATT. 12	ted Liability (ociation or Of		
	LC, name of LLC; if pa				•	of corporation	Fein Number		
2a. Trade Name of Es Tavern Congre	ess Park				State Sal	es Tax No.	Business Tel		
3. Address of Premis 2510 E. Colfax	ses (specify exact loc Avenue	ation of premises	3)		1		1000	- 300 /	
City Denver	**************************************		County Denver			State CO	ZIP Code 80206		
4. Mailing Address (538 E. 17th Av			City or Town Denver			State CO	ZIP Code 80203		
5. If the premises cu	rrently have a liquor o		ou MUST answe		questions:		<u></u>		
Present Trade Name on Neighborhood F	of Establishment (DB/	,	Present State L 42-36068-0		Present C	Class of License	Present Expi 11/21/09		
LIAB SECTION		NDABLE APPLIC			CTION B (C	CONT.)	1	OR LICENSE FEES	
2302 Application w/Concurre 2310 Application LIAB SECTION 1905 Retail Gam	ning Tavern License (LIQUOR L	\$1,125 00 \$1,025.00 LICENSE FEES \$500.00	1986	ort Comple Related Fa License (Continue) License (Continue) Ern License License License License License License	City)	nty)		
1906 Retail Gaming Tavern License (County) 1940 Retail Liquor Store License (City) 1941 Retail Liquor Store License (County) 1950 Liquor Licensed Drugstore (City) 1951 Liquor Licensed Drugstore (County) 1960 Beer and Wine License (City) 1961 Beer and Wine License (County) 1970 Hotel and Restaurant License (City) 1971 Hotel and Restaurant License (County) 1975 Brew Pub License (City) 1976 Brew Pub License (County) 1980 Hotel and Restaurant License w/opt premises (City) 1981 Hotel and Restaurant License w/opt premises (City) 1983 Manager Registration - H & R			\$500.00 \$227.50 \$312.50 \$227.50 \$312.50 \$351.25 \$436.25 \$500.00 \$750.00 \$750.00 \$0unty) \$500.00 \$75.00	2020 ☐ Arts License (City)					
				NFORMATION					
County	City	Industry Type	! Licer	nse Account Nu			ty Date	License Issued Through (Expiration Date)	
State 750 (999)	2180-100 (99		County 0-100 (999)	Manager -7	rs Reg (50 (999)				
Cash Fund New License 2300-100 (999)			Cash Fund Transfer License 2310-100 (999)			\$	TOTAL .		

19. If applicant is a corporation, p. GENERAL PARTNERS, AND SHIP OF 10% OR MORE IN 1 and submit finger print cards t	MANAGING M THE APPLICAN	MEMBERS. In add NT. ALL PERSON	lition applicant must list any s	tockholders, partners	s, or members w	with OWNER-		
NAME			S, CITY & STATE	DOB	POSITION	% OWNED*		
Francis Schultz	8992 E. W	/esley Ave., De	en, CO 80231	3/19/71	Pres./Dir.	33.4%		
Terry Papay	1801 Wyn	koop St. #704,	Den, CO 80202	4/14/53	Treas/Dir	33.3%		
Albert Papay	1801 Wyn	koop St. #704,	, Den, CO 80202	7/4/46	Secy/Dir	33.3%		
Additional Documents to be s CORPORATION PARTNERSHIP ARTNERSHIP LIMITED LIABILITY COMPA ASSOCIATION OR OTHER Registered Agent (if applicable) Francis Schultz I declare under penalty of perju	submitted by rt. of Incorp. tnership Agreer NY Arti Attach copy of	r type of entity Cert. of Gooment (General or Licles of Organization of agreements created agreements COATH Coord degree that	d Standing (if more than 2 yrs. Limited) Husband ar on Cert. of Authority (ating association or relationship dress for Service 538 E. 17th Ave., Denver DF APPLICANT at this application and all a	old) Cert. on the cond Wife partnership (red) (if foreign company) probable between the parties conditions. CO 80203	Operating	ment) ig Agrmt.		
to the best of my knowledge. I to comply with the provisions of Authorized Signature	esponsionity of my cense.	Date 9/14/09						
REPORT AND Date application filed with local aut		AL OF LOCA	Date of local authority hear than 30 days from date of a	ing (for new license	applicants; can	nnot be less		
THE LOCAL LICENSING AUTHOR That each person required to file DR Been fingerprinted Been subject to background invention That the local authority has conduct compliance with, and aware of, liquol (Check One) Date of Inspection or Anticipated Upon approval of state licensing	estigation, incluited, or intends to code provision	dual History Recor	check for outstanding warrants	es to ensure that the	applicant is in			
The foregoing application has been We do report that such license, if go and will comply with the provision Local Licensing Authority for	en examined; a granted, will me	eet the reasonable	e requirements of the neighbo C.R.S. THEREFORE, THIS	orhood and the desire	es of the adult in APPROVED.			
		-	Telephone Number		TOWN, CITY COUNTY			
Signature		Title		Date				
Signature (attest) Title				Date	Date			