

**RETAIL 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**

Licensee Name <b>SAMUEL HAVENGA JR VFW POST #4265</b>		DBA <b>SAMUEL HAVENGA JR POST 4265</b>		
Liquor License # <b>12022820001</b>	License Type <b>Tavern (city)</b>	Sales Tax License # <b>12022820001</b>	Expiration Date <b>12/31/2018</b>	Due Date <b>11/16/2018</b>
Operating Manager <b>Johnny T Garcia</b>	Date of Birth <b>4-8-1949</b>	Home Address <b>1235 Barclay</b>		
Manager Phone Number <b>970-629-3345</b>		Email Address <b></b>		
Street Address <b>419 E VICTORY WY CRAIG CO 81625-1825</b>				Phone Number <b>9708247145</b>
Mailing Address <b>419 E VICTORY WY CRAIG CO 81625-1825</b>				

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 \_\_\_\_\_
19. Since the date of filing of the last 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 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 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

**AFFIRMATION & CONSENT**

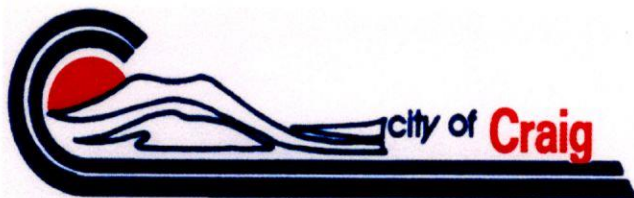
I declare under penalty of perjury in the second degree that this application and all attachments are true, correct and complete to the best of my knowledge.

Type or Print Name of Applicant/Authorized Agent of Business <b>Johnny T Garcia</b>	Title <b>Commander</b>
Signature <b>Johnny T Garcia</b>	Date <b>11-20-2018</b>

**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 4<sup>th</sup> 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:** Samuel Havenga Jr VFW Post 4265  
**Phone Number:** 970-824-3049  
**Location of Premises:** 419 E. Victory Way  
**Type of License:** Tavern  
**Action Date:** 12/11/18  
**Meeting Time:** 6:30 p.m.

The required inspection of the above named premises was performed on the 4 day of January, 2019.

The premises meets all requirements: Yes X No       

**Comments:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Michael E. Hall  
Building Official

1-4-19  
Date





300 West 4<sup>th</sup> 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:** Samuel Havenga Jr. VFW Post #4265  
**Phone Number:** 824-3049  
**Location of Premises:** 419 E. Victory Way  
**Type of License:** Tavern  
**Action Date:** 12/11/2018  
**Meeting Time:** 06:30 p.m.

**Liquor Code Violations-past year:** 0

**Comments:** NO REASONS FOR DENIAL

WV Hand  
Investigator

12-04-18  
Date