



John Hickenlooper
Mayor

CITY AND COUNTY OF DENVER

DEPARTMENT OF EXCISE AND LICENSES

OFFICE OF DIRECTOR
200 WEST 14TH
AVENUE

February 18, 2009

Shikerim, LLC
Dbas The Recovery Room
819 Colorado Blvd
Denver, CO 80206

Dear Neighborhood Organization:

Please be advised that an application for transfer of ownership has been filed with this department regarding a liquor licensed establishment in your neighborhood. Please review the attached document for information regarding this change.

Objections to this change must be based only on the character, record and reputation of the applicant. Secondly, all objections to this application must be registered within twenty (20) calendar days from the date of this letter with the Director of Excise and Licenses, 201 West Colfax Avenue, Denver, Colorado 80204.

To review the application for transfer of ownership please telephone Excise and Licenses at 720-865-2764.

Sincerely,

A handwritten signature in cursive script, appearing to read "P. Garcia", written over a horizontal line.

Priscilla Garcia,
Administrative Assistant

cc: Councilwoman Jeanne Robb
Division Chief of Patrol Mary Beth Klee
7th Avenue Neighborhood Asso
Bellvue-Hale Neighborhood
Capitol Hill United Neighborhoods
Cherry Creek Chamber of Commerce
Community Renaissance Neighbors
Congress Park Neighbors
Cranmer Park Hilltop Civic Asso

**COLORADO LIQUOR
RETAIL LICENSE APPLICATION**

#1038841
2-11-09
DJ

<input type="checkbox"/> NEW LICENSE <input checked="" type="checkbox"/> TRANSFER OF OWNERSHIP <input type="checkbox"/> LICENSE RENEWAL			
• ALL ANSWERS MUST BE PRINTED IN BLACK INK OR TYPEWRITTEN • APPLICANT MUST CHECK THE APPROPRIATE BOX(ES) • LOCAL LICENSE FEE \$ _____ • APPLICANT SHOULD OBTAIN A COPY OF THE COLORADO LIQUOR AND BEER CODE (Call 303-370-2165)			
1. Applicant is applying as a <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership (includes Limited Liability and Husband and Wife Partnerships)		<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Association or Other	
2. Applicant If an LLC, name of LLC; if partnership, at least 2 partner's names; if corporation, name of corporation Shikerim, LLC		Fein Number 26-4187560	
2a. Trade Name of Establishment (DBA) The Recovery Room		State Sales Tax No. 42-68516	Business Telephone 303-564-5929
3. Address of Premises (specify exact location of premises) 819 Colorado Blvd			
City Denver	County Denver	State CO	ZIP Code 80206-4037
4. Mailing Address (Number and Street) 910 16th St., #500		City or Town Denver	State CO ZIP Code 80202
5. If the premises currently have a liquor or beer license, you MUST answer the following questions:			
Present Trade Name of Establishment (DBA) The Recovery Room		Present State License No. 41-95048-0000	Present Class of License Tavern Present Expiration Date 02/15/09
LIAB SECTION A NONREFUNDABLE APPLICATION FEES		LIAB SECTION B (CONT.) LIQUOR LICENSE FEES	
2300 <input type="checkbox"/> Application Fee for New License \$1,025.00 2302 <input type="checkbox"/> Application Fee for New License - w/Concurrent Review \$1,125.00 2310 <input checked="" type="checkbox"/> Application Fee for Transfer \$1,025.00 2312 <input type="checkbox"/> Application Fee for Transfer - w/Concurrent Review \$1,125.00		1985 <input type="checkbox"/> Resort Complex License (City) \$500.00 1986 <input type="checkbox"/> Resort Complex License (County) \$500.00 1888 <input type="checkbox"/> Add Related Facility to Resort Complex ... \$ 75.00 X Total 1990 <input type="checkbox"/> Club License (City) \$308.75 1991 <input type="checkbox"/> Club License (County) \$308.75 2010 <input checked="" type="checkbox"/> Tavern License (City) \$500.00 2011 <input type="checkbox"/> Tavern License (County) \$500.00 2012 <input type="checkbox"/> Manager Registration - Tavern \$ 75.00 2020 <input type="checkbox"/> Arts License (City) \$308.75 2021 <input type="checkbox"/> Arts License (County) \$308.75 2030 <input type="checkbox"/> Racetrack License (City) \$500.00 2031 <input type="checkbox"/> Racetrack License (County) \$500.00 2040 <input type="checkbox"/> Optional Premises License (City) \$500.00 2041 <input type="checkbox"/> Optional Premises License (County) \$500.00 2045 <input type="checkbox"/> Vintners Restaurant License (City) \$750.00 2048 <input type="checkbox"/> Vintners Restaurant License (County) \$750.00 2220 <input type="checkbox"/> Add Optional Premises to H & R \$100.00 X Total 2370 <input type="checkbox"/> Master File Location Fee \$ 25.00 X Total 2375 <input type="checkbox"/> Master File Background \$250.00 X Total	
LIAB SECTION B LIQUOR LICENSE FEES			
1905 <input type="checkbox"/> Retail Gaming Tavern License (City) \$500.00 1906 <input type="checkbox"/> Retail Gaming Tavern License (County) \$500.00 1940 <input type="checkbox"/> Retail Liquor Store License (City) \$227.50 1941 <input type="checkbox"/> Retail Liquor Store License (County) \$312.50 1950 <input type="checkbox"/> Liquor Licensed Drugstore (City) \$227.50 1951 <input type="checkbox"/> Liquor Licensed Drugstore (County) \$312.50 1960 <input type="checkbox"/> Beer and Wine License (City) \$351.25 1961 <input type="checkbox"/> Beer and Wine License (County) \$436.25 1970 <input type="checkbox"/> Hotel and Restaurant License (City) \$500.00 1971 <input type="checkbox"/> Hotel and Restaurant License (County) \$500.00 1975 <input type="checkbox"/> Brew Pub License (City) \$750.00 1976 <input type="checkbox"/> Brew Pub License (County) \$750.00 1980 <input type="checkbox"/> Hotel and Restaurant License w/opt premises (City) .. \$500.00 1981 <input type="checkbox"/> Hotel and Restaurant License w/opt premises (County) \$500.00 1983 <input type="checkbox"/> Manager Registration - H & R \$ 75.00			
DO NOT WRITE IN THIS SPACE - FOR DEPARTMENT OF REVENUE USE ONLY			
LIABILITY INFORMATION			
County State _____-750 (999)	City 2180-100 (999)	Industry Type County 2190-100 (999)	License Account Number Managers Reg _____-750 (999)
		Liability Date FROM TO	
		License Issued Through (Expiration Date) TO	
Cash Fund New License 2300-100 (999)		Cash Fund Transfer License 2310-100 (999)	
		TOTAL	
		\$.	

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

NAME	HOME ADDRESS, CITY & STATE	DOB	POSITION	% OWNED
Robert L. Naiman	3535 Belcaro Drive, Denver, CO 80209	08/08/58	Manager/Member	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

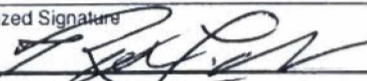
Additional Documents to be submitted by type of entity

- 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) **Robert A. Dill** Address for Service **455 Sherman St, Ste 300, Denver, CO 80203**

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 Manager/Member	Date 7/6/09
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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-I (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