



December 11, 2017

Mr. Jim Beimford, Attorney
Machete, LLC
Dba Machete
3570 E. Colfax Avenue
Denver, CO 80206

Dear Registered Neighborhood Organization:

Please be advised that an application for a transfer of ownership has been filed with this Department regarding a Hotel and Restaurant Liquor License with Standard Cabaret in your neighborhood. Please review the enclosed documents for information regarding this change.

This notification is informational only. As you know, under the Colorado Liquor Code, the preliminary consideration in transfers is not "needs and desires" but "character, record and reputation." The Department makes its decision on "character, record and reputation" based on information contained in the application and in our investigation -- prior revocations, any criminal convictions, prior liquor violations, prior licenses, a review of the transferees' criminal record and background, etc.

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

Sincerely,

Ashely Kilroy
Executive Director, Excise and Licenses

Councilman Wayne New, District 10
Denver City Attorneys-Excise and Licenses
ABC Streets Association
Bellevue-Hale Neighborhood Association
Bluebird Business Improvement District
Capitol Hill United Neighborhoods, Inc.
City Park Friends and Neighbors
Colfax on the Hill, Inc.
Congress Park Neighbors, Inc.
Denver Arts and Culture Initiative
Denver Neighborhood Association, Inc.
Fax Partnership
Greater Park Hill Community, Inc.
Informed and Concerned Community Gardeners (ICCG)
Inter-Neighborhood Cooperation (INC)
Opportunity Corridor Coalition of Untied Residents
South City Park Neighborhood Association
The Points Historical Redevelopment Corp.

DR 8404 (08/14/17)
 COLORADO DEPARTMENT OF REVENUE
 Liquor Enforcement Division
 (303) 205-2300

Colorado Liquor Retail License Application

New License
 New-Concurrent
 Transfer of Ownership
 State Property Only

• All answers must be printed in black ink or typewritten
 • Applicant must check the appropriate box(es)
 • Applicant should obtain a copy of the Colorado Liquor and Beer Code: www.colorado.gov/enforcement/liquor

1. Applicant is applying as a/an
 Individual
 Limited Liability Company
 Association or Other
 Corporation
 Partnership (includes Limited Liability and Husband and Wife Partnerships)

2. Applicant If an LLC, name of LLC; if partnership, at least 2 partner's names; if corporation, name of corporation
 FEIN Number
Machete, LLC
 35-2405221

2a. Trade Name of Establishment (DBA)
 State Sales Tax Number
 Business Telephone
Machete
 004292797-0000
 Temp 303 905-0398

3. Address of Premises (specify exact location of premises, include suite/unit numbers)
3570 E Colfax Avenue

City Denver	County Denver	State CO	ZIP Code 80206
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4. Mailing Address (Number and Street) 3570 E. Colfax Avenue	City or Town Denver	State CO	ZIP Code 80206
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5. Email Address

6. If the premises currently has a liquor or beer license, you must answer the following questions

Present Trade Name of Establishment (DBA) Chow	Present State License Number 4705135	Present Class of License Hotel & Restaurant	Present Expiration Date 10/06/2018
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Section A Nonrefundable Application Fees	Section B (Cont.) Liquor License Fees
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<input type="checkbox"/> Application Fee for New License \$1550.00 <input type="checkbox"/> Application Fee for New License w/Concurrent Review \$1750.00 <input checked="" type="checkbox"/> Application Fee for Transfer \$1550.00	<input type="checkbox"/> Lodging & Entertainment - L&E (County) \$500.00 <input checked="" type="checkbox"/> Manager Registration - H & R \$75.00 <input type="checkbox"/> Manager Registration - Tavern \$75.00 <input type="checkbox"/> Manager Registration - Lodging & Entertainment \$75.00 <input type="checkbox"/> Manager Registration - Campus Liquor Complex \$75.00
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Section B Liquor License Fees	
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<input type="checkbox"/> Add Optional Premises to H & R.....\$200.00 X _____ Total _____ <input type="checkbox"/> Add Related Facility to Resort Complex\$75.00 X _____ Total _____ <input type="checkbox"/> Arts License (City) \$308.75 <input type="checkbox"/> Arts License (County) \$308.75 <input type="checkbox"/> Beer and Wine License (City)..... \$351.25 <input type="checkbox"/> Beer and Wine License (County)..... \$436.25 <input type="checkbox"/> Brew Pub License (City) \$750.00 <input type="checkbox"/> Brew Pub License (County)..... \$750.00 <input type="checkbox"/> Campus Liquor Complex (City) \$500.00 <input type="checkbox"/> Campus Liquor Complex (County) \$500.00 <input type="checkbox"/> Campus Liquor Complex (State) \$500.00 <input type="checkbox"/> Club License (City)..... \$308.75 <input type="checkbox"/> Club License (County) \$308.75 <input type="checkbox"/> Distillery Pub License (City)..... \$750.00 <input type="checkbox"/> Distillery Pub License (County) \$750.00 <input checked="" type="checkbox"/> Hotel and Restaurant License (City) \$500.00 <input type="checkbox"/> Hotel and Restaurant License (County) \$500.00 <input type="checkbox"/> Hotel and Restaurant License w/one opt premises (City) \$700.00 <input type="checkbox"/> Hotel and Restaurant License w/one opt premises (County)..... \$700.00 <input type="checkbox"/> Liquor-Licensed Drugstore (City) \$227.50 <input type="checkbox"/> Liquor-Licensed Drugstore (County) \$312.50 <input type="checkbox"/> Lodging & Entertainment - L&E (City) \$500.00	<input type="checkbox"/> Master File Location Fee \$50.00 X _____ Total _____ <input type="checkbox"/> Master File Background \$500.00 X _____ Total _____ <input type="checkbox"/> Optional Premises License (City)..... \$500.00 <input type="checkbox"/> Optional Premises License (County) \$500.00 <input type="checkbox"/> Racetrack License (City)..... \$500.00 <input type="checkbox"/> Racetrack License (County)..... \$500.00 <input type="checkbox"/> Resort Complex License (City)..... \$500.00 <input type="checkbox"/> Resort Complex License (County)..... \$500.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (City)..... \$160.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (County) \$160.00 <input type="checkbox"/> Related Facility - Campus Liquor Complex (State)..... \$160.00 <input type="checkbox"/> Retail Gaming Tavern License (City) \$500.00 <input type="checkbox"/> Retail Gaming Tavern License (County)..... \$500.00 <input type="checkbox"/> Retail Liquor Store License-Additional (City)..... \$227.50 <input type="checkbox"/> Retail Liquor Store License-Additional (County)..... \$312.50 <input type="checkbox"/> Retail Liquor Store (City)..... \$227.50 <input type="checkbox"/> Retail Liquor Store (County)..... \$312.50 <input type="checkbox"/> Tavern License (City)..... \$500.00 <input type="checkbox"/> Tavern License (County)..... \$500.00 <input type="checkbox"/> Vintners Restaurant License (City) \$750.00 <input type="checkbox"/> Vintners Restaurant License (County)..... \$750.00
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Questions? Visit: www.colorado.gov/enforcement/liquor for more information

Do not write in this space - For Department of Revenue use only

Liability Information

License Account Number	Liability Date	License Issued Through (Expiration Date)	Total \$
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Name <i>N/A</i>	Type of License	Account Number		
21. Campus Liquor Complex applicants answer the following: <i>N/A</i> (a) Is the applicant an institution of higher education? Yes No <input type="checkbox"/> <input type="checkbox"/> (b) Is the applicant a person who contracts with the institution of higher education to provide food services? If "yes" please provide a copy of the contract with the institution of higher education to provide food services. <input type="checkbox"/> <input type="checkbox"/>				
22. For all on-premises applicants. a. Hotel and Restaurant, Lodging and Entertainment, Tavern License and Campus Liquor Complex, the Registered Manager must also submit an Individual History Record - DR 8404-I and fingerprints. b. For all Liquor Licensed Drugstores (LLDS) the Permitted Manager must also submit a Manager Permit Application - DR 8000 and fingerprints.				
Last Name of Manager Olson	First Name of Manager Paul			
23. Does this manager act as the manager of, or have a financial interest in, any other liquor licensed establishment in the State of Colorado? If yes, provide name, type of license and account number. <input type="checkbox"/> <input checked="" type="checkbox"/>				
24. Related Facility - Campus Liquor Complex applicants answer the following: a. Is the related facility located within the boundaries of the Campus Liquor Complex? If yes, please provide a map of the geographical location within the Campus Liquor Complex. If no, this license type is not available for issues outside the geographical location of the Campus Liquor Complex. Yes No <input type="checkbox"/> <input type="checkbox"/> b. Designated Manager for Related Facility- Campus Liquor Complex <i>N/A</i>				
Last Name of Manager <i>N/A</i>	First Name of Manager			
25. Tax Distraint Information. Does the applicant or any other person listed on this application including its partners, officers, directors, stockholders, members (LLC) or managing members (LLC) and any other persons with a 10% or greater financial interest in the applicant currently have an outstanding tax distraint issued to them by the Colorado Department of Revenue? If yes, provide an explanation and include copies of any payment agreements. <input type="checkbox"/> <input checked="" type="checkbox"/>				
26. 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 fingerprint cards to the local licensing authority.				
Name Dan Ohlson	Home Address, City & State	DOB	Position Member/Manager	%Owned 50%
Name John Wallrath	Home Address, City & State	DOB	Position Member	%Owned 50%
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
** If applicant is owned 100% by a parent company, please list the designated principal officer on above. ** Corporations - the President, Vice-President, Secretary and Treasurer must be accounted for above (Include ownership percentage if applicable) ** If total ownership percentage disclosed here does not total 100%, applicant must check this box: <input checked="" type="checkbox"/> Applicant affirms that no individual other than these disclosed herein owns 10% or more of the applicant and does not have financial interest in a prohibited liquor license pursuant to Title 47 or 48, C.R.S.				

Name		Type of License	Account Number	
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		Printed Name and Title		Date
		Dan Ohlson Manager		11/30/17
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)		
12/1/17		None		
The Local Licensing Authority Hereby Affirms that each person required to file DR 8404-I (Individual History Record) or a DR 8000 (Manager Permit) has been:				
<input checked="" type="checkbox"/> Fingerprinted <input checked="" type="checkbox"/> Subject to background investigation, including NCIC/CCIC check for outstanding warrants				
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				
(Check One)				
<input type="checkbox"/> Date of inspection or anticipated date _____ <input checked="" type="checkbox"/> Will conduct inspection upon approval of state licensing authority				
<input type="checkbox"/> Is the Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1,500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of > 10,00000? <input type="checkbox"/> Is the Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 3,000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of < 10,00000? <small>NOTE: The distance shall be determined by a radius measurement that begins at the principal doorway of the LLDS/RLS premises for which the application is being made and ends at the principal doorway of the Licensed LLDS/RLS.</small> <input type="checkbox"/> Does the Liquor-Licensed Drugstore (LLDS) have at least twenty percent (20%) of the applicant's gross annual income derived from the sale of food, during the prior twelve (12) month period?				Yes No <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
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 of 47, C.R.S., and Liquor Rules. Therefore, this application is approved.				
Local Licensing Authority for		Telephone Number	<input checked="" type="checkbox"/> Town, City <input type="checkbox"/> County	
Denver				
Signature	Print	Signature	Print	Date
	Ashley Kilroy		Sharon King	12/7/17
Signature	Print	Signature	Print	Date
	Sharon King		Sharon King	12/7/17