# AGENDA ITEM or FINAL CONTRACT REVIEW SUBMITTAL FORM

**Agenda Item:** Special Event Liquor License; Go Initiative

**Action Requested:** Board of County Commissioners' Signature

**Parties to the Agreement:** County Clerk, Kathy Simillion

**Term Begins:** **Term Ends:** **Grant Contract #:**

**Summary:**

Special Event License for Go Initiative October 5, 2019 7:00 am to 7:00 pm.

**Fiscal Impact:**

**Submitted by:** Kathy Simillion **Submitter's Email Address:** ksimillion@gunnisoncounty.org

**Finance Review:** ○ Required ◉ Not Required

Comments:

Reviewed by: Discharge Date:

**County Attorney Review:** ◉ Required ○ Not Required

Comments:
ok db 6/13/19

Reveiwed by: GUNCOUNTY1\dBaumgarten Discharge Date: 6/13/2019 Certificate of Insurance Required Yes ○ No ◉

**County Manager Review:**

Comments:

Reveiwed by: GUNCOUNTY1\mbirnie Discharge Date: 6/13/2019

◉ Consent Agenda ○ Regular Agenda ○ Worksession Time Allotted: 0

Agenda Date: 6/18/2019

*Revised April 2015*

Gunnison County
COLORADO

THIS LICENSE MUST BE POSTED IN PUBLIC VIEW

# COUNTY OF GUNNISON

GUNNISON COUNTY CLERK
221 N. WISCONSIN STREET
GUNNISON, COLORADO 81230

## SPECIAL EVENT LIQUOR PERMIT 2019

to sell/serve malt, vinous, and spirituous liquor for on-premises consumption at Hartmans Recreational Area Pavillion, Gunnison, Colorado.

GO INITIATIVE
PO BOX 1875
GUNNISON, COLORADO 81230

Fee $100.00

Effective: Day, 10.05.2019 from 7:00 a.m. to 7:00 p.m.

This license is issued subject to the laws of the State of Colorado and especially under the provisions of Title 44, Articles 4, 3, CRS 1973, as amended; and the Ordinances of the County of Gunnison as applicable.

Gunnison County Clerk Date
Kathy Simillion

Board of County Commissioners Date

DR 8439 (09/30/13)
COLORADO DEPARTMENT OF REVENUE
LIQUOR ENFORCEMENT DIVISION
(303) 205-2300

# Application for a Special Events Permit

Departmental Use Only
Jalene #773-294-1147

received 4-22-19

In order to qualify for a Special Events Permit, You **Must Be Nonprofit and One of the Following** (See back for details.)

- ☐ Social
- ☐ Fraternal
- ☐ Patriotic
- ☐ Political
- ☒ Athletic
- ☐ Chartered Branch, Lodge Or Chapter
- ☐ Of A National Organization Or Society
- ☐ Religious Institution
- ☐ Philanthropic Institution
- ☐ Political Candidate
- ☐ Municipality Owning Arts Facilities

| 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: gO Initiative
State Sales Tax Number (Required):

2. Mailing Address of Organization or Political Candidate (include street, city/town and ZIP)
PO Box 1875
Crested Butte, CO 81224
(physical address 433 6th Street in CB)

3. Address of Place to Have Special Event (include street, city/town and ZIP)
Harmtman Rocks Recreational Area Pavilion
Gunnison, CO 81230

| | Name | Date of Birth | Home Address (Street, City, State, ZIP) | Phone Number |
|---|---|---|---|---|
| 4. Pres./Sec'y of Org. or Political Candidate | Sarah Stubbe | 12/27/1974 | 72 Endner Place, Crested Butte, CO 8122 | 970-596-0026 |
| 5. Event Manager | Jalene Szuba | 1/6/1970 | A Riverbend Drive, Crested Butte, CO 812 | 773-294-1147 |

6. Has Applicant Organization or Political Candidate been issued a Special Event Permit this Calendar Year?
☒ NO ☐ YES HOW MANY DAYS? 0

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 |
|---|---|---|
| 10/5/2019 | 7:00 a.m. | 7:00 p.m. |
| | | |
| | | |
| | | |
| | | |

## 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 | Title | Date |
|---|---|---|
| Jalene | Exec. Producer | 4/26/19 |

## 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) | | Telephone Number of City/County Clerk |
|---|---|---|
| Gunnison County | ☐ City ☒ County | 970-641-7641 |

| Signature | Title | Date |
|---|---|---|
| Kathy Simillion | County Clerk | 4-22-19 |

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

**Liability Information**

| License Account Number | Liability Date | State | Total |
|---|---|---|---|
| | | -750 (999) | $ |

(Instructions on Reverse Side)

GO INITIATIVE, INC, PO BOX 1875, CRESTED BUTTE, CO 81224 HAS REQUESTED THE LICENSING OFFICIALS OF GUNNISON COUNTY, OF GUNNISON, COLORADO, TO GRANT A SPECIAL EVENT PERMIT AT THIS LOCATION, HARTMAN ROCKS RECREATIONAL AREA PAVILLION, GUNNISON, COLORADO 81230 TO SELL/SERVE MALT, VINOUS & SPIRITUOUS LIQUOR BY THE DRINK FOR ON-PREMISES CONSUMPTION. DATE OF EVENT: 10-05-19, 7:00 A.M. TO 7:00 P.M. WRITTEN COMMENTS ON THIS APPLICATION MAY BE SUBMITTED THROUGH 5:00 PM ON FRIDAY, JUNE 7, 2019 TO THE
GUNNISON COUNTY CLERK & RECORDERS OFFICE, KATHY SIMILLION, COUNTY CLERK, 221 N. WISCONSIN STREET., GUNNISON, COLORADO 81230.

# Notice

## Pursuant to the Liquor Laws of Colorado

GO INITIATIVE, INC, PO BOX 1875, CRESTED BUTTE, CO 81224 HAS REQUESTED THE LICENSING OFFICIALS OF GUNNISON COUNTY, OF GUNNISON, COLORADO, TO GRANT A SPECIAL EVENT PERMIT AT THIS LOCATION, HARTMAN ROCKS RECREATIONAL AREA PAVILLION, GUNNISON, COLORADO 81230 TO SELL/SERVE MALT, VINOUS & SPIRITUOUS LIQUOR BY THE DRINK FOR ON-PREMISES CONSUMPTION. DATE OF EVENT: 10-05-19, 7:00 A.M. TO 7:00 P.M. WRITTEN COMMENTS ON THIS APPLICATION MAY BE SUBMITTED THROUGH 5:00 PM ON FRIDAY, JUNE 7, 2019 TO THE

GUNNISON COUNTY CLERK & RECORDERS OFFICE, KATHY SIMILLION, COUNTY CLERK, 221 N. WISCONSIN STREET., GUNNISON, COLORADO 81230.

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

# CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

The gO Initiative

is a

Nonprofit Corporation

formed or registered on 11/10/2016 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 20161766392 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 04/16/2019 that have been posted, and by documents delivered to this office electronically through 04/17/2019 @ 13:47:41 .

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 04/17/2019 @ 13:47:41 in accordance with applicable law. This certificate is assigned Confirmation Number 11520037 .

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/bi:/CertificateSearchCriteria.do 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."*

GRIGORT-01 LMOUA

ACORD

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/7/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Mountain West In & Fin Serv LLC
100 E Victory Way
Craig, CO 81625

CONTACT NAME: Lisa Moua
PHONE (A/C, No, Ext): (970) 824-8185 FAX (A/C, No): (970) 824-8188
E-MAIL ADDRESS:

| INSURER(S) AFFORDING COVERAGE | NAIC # |
|---|---|
| INSURER A : Secura Insurance Company | |
| INSURER B : | |
| INSURER C : | |
| INSURER D : | |
| INSURER E : | |
| INSURER F : | |

INSURED
The Go Initiative
104 W Ruby Ave
Gunnison, CO 81230

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
|---|---|---|---|---|---|---|---|---|
| A | X COMMERCIAL GENERAL LIABILITY | | | | | | EACH OCCURRENCE | $ 1,000,000 |
| | CLAIMS-MADE X OCCUR | X | | CP003263704 | 2/8/2019 | 2/8/2020 | DAMAGE TO RENTED PREMISES (Ea occurrence) | $ 100,000 |
| | | | | | | | MED EXP (Any one person) | $ Excluded |
| | | | | | | | PERSONAL & ADV INJURY | $ 1,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | GENERAL AGGREGATE | $ 2,000,000 |
| | X POLICY PRO-JECT LOC | | | | | | PRODUCTS - COMP/OP AGG | $ 2,000,000 |
| | OTHER: | | | | | | LIQ. LIAB./Occ | $ 1,000,000 |
| | AUTOMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Ea accident) | $ |
| | ANY AUTO | | | | | | BODILY INJURY (Per person) | $ |
| | OWNED AUTOS ONLY / SCHEDULED AUTOS | | | | | | BODILY INJURY (Per accident) | $ |
| | HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY | | | | | | PROPERTY DAMAGE (Per accident) | $ |
| | | | | | | | | $ |
| | UMBRELLA LIAB / OCCUR | | | | | | EACH OCCURRENCE | $ |
| | EXCESS LIAB / CLAIMS-MADE | | | | | | AGGREGATE | $ |
| | DED / RETENTION $ | | | | | | | $ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | | | | | PER STATUTE / OTH-ER | |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y/N (Mandatory in NH) | N/A | | | | | E.L. EACH ACCIDENT | $ |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - EA EMPLOYEE | $ |
| | | | | | | | E.L. DISEASE - POLICY LIMIT | $ |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate holder is included as an additional insured as per written contract.

CERTIFICATE HOLDER
City of Gunnison
PO BOX 239
Gunnison, CO 81230

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Lisa Moua


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# CITY OF GUNNISON
# PARKS AND RECREATION

200 E. Spencer St • Gunnison, CO 81230 • (970)641-8060 • Fax: (970)641-8011

April 26, 2019

To Whom It May Concern:

Jalene Szuba with The gO Initiative has permission from the City of Gunnison Parks and Recreation Department to use the Hartman rocks Pavilion and Trails for their event on October 5, 2019.

Jalene has submitted the special events permit and park rental application required by us for this rental, and it has been approved for the above date.

If you have any questions or concerns regarding this reservation or require further confirmation of Ms. Szuba's approval for this park/pavilion rental, please do not hesitate to contact me.

Regards,

Trish White
Facility Manager
Gunnison Parks and Recreation
970.641.8420
pwhite@gunnisonco.gov

RECEIVED
APR 26 2019
GUNNISON COUNTY
ELECTIONS DIVISION

# GUNNISON COUNTY

## MISCELLANEOUS GENERAL LEDGER RECEIPT

Receipt Date: 4/26/2019 Trans #: 83080324433259 Print Date: 04/26/2019 

Reference: Comments: LIQUOR LICENSE

| Information | Tender | Tender # | Doc # | Routing # | Amount Paid |
|---|---|---|---|---|---|
| *the gO Initiative* | CHECK | 1 | 1485 | | $100.00 |
| | | TOTAL RECEIVED | | | $100.00 |

| TEMPLATE ID | TEMPLATE Description | Amount |
|---|---|---|
| GL Account | GL Description | |
| Template ID | Template Description | |
| 0121100044100 | MR Liquor License 4100 001 211 | $100.00 |