



City of Boulder

Finance Department · Licensing Division

P.O. Box 791, Boulder, Colorado 80306 · 303 441-4192

OWNERSHIP/ OFFICER/ MEMBER CHANGES
CHANGES MUST BE REPORTED WITHIN 30 DAYS

CHECKLIST OF REQUIRED DOCUMENTS

- Report of Changes, Corporation, LLC and Partnership Application** (State form DR8177): completed fully, listing all current officers, members, managing members and partners and who they are replacing, listing all owners with over a 10% interest and who they are replacing, and signed in Oath of Applicant section by an authorized representative of the licensee.
- Certificate of Good Standing** from Secretary of State's website for licensee business entity.
- Articles of Incorporation, Organization, or Partnership** from Secretary of State's website for licensee business entity.
- Corporate, Limited Liability, or Partnership documents** explaining the reported change in ownership, officers, directors, members, managing members, and partners i.e. stock or share purchase agreements signed by both seller and buyer, corporate minutes signed by corporate secretary, signed letters of resignation, signed letters of appointment, signed amendments to bylaws, corporate articles, LLC operating agreements and exhibits, and partnership agreements.
- Individual History Record Form** (State form- DR8404-I) for each new owner, officer, member, managing member, and partner to describe the financial details of their involvement and for all remaining owners, officers, members, managing members, and partners if their originally submitted financial disclosures are amended due to this change. Form should also list all criminal arrests and convictions for new person.
- CABS receipt for digital prints** for all new owners, officers, members, managing members, and partners.
- Fees**
 - \$100.00 per each new person requiring city research payable to the "City of Boulder"

Application Process: Licensing Office will: i) IHR self check via CBI website conducted on all new owners, officers, members, managing members, and partners. ii) Fingerprint cards submitted to CBI for CBI/FBI check. iii) Licensing database updated to record changes to ownership and responsible persons. iv) Calendar tickler for 90 days to await CBI/FBI check results. v) IHR Addendum sent to new person at their home address for explanation on any undisclosed background results to check for dismissal. vi) At 90 days or sooner if results received, DR8177 state form, approved by City of Boulder, with attachments will be mailed to state liquor enforcement division. Licensing database should have change status updated to indicate form forwarded to state. If criminal background check results are found indicating the need for Beverage Licensing Authority (BLA) hearing, then applicant is informed in writing and BLA hearing is scheduled. If administratively approved or approved by BLA, when received back, state approved copy of state form should be mailed to licensee applicant's business mailing address for their records.

**Report of Changes
 Corporation, Limited Liability
 Company and Partnership
 Liquor and Fermented Malt
 Beverage Licenses**

LLC/Partnership

Corporation

See Instructions and Fee Schedule on Page 2

1. Corporate/LLC Partnership Name	2. State Tax Account Number	3. State Liquor License Number
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4. Trade Name	5. Telephone Number
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6. Address of Licensed Premises	City	State	ZIP
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7. Mailing Address if different than above	City	State	ZIP
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8. LIST ALL officers, directors (corporation) or Managing Members (LLC) or General Partner(s). Each officer, Director, Managing Member or Partner MUST FILL OUT a DR 8404-I (Individual History Record).

Position Held	Names	Home Address	DOB	Replaces

9. LIST ALL 10% (or more) Stockholders or 10% (or more) Members or 10% (or more) Limited Partners. Each person listed Must Fill out a DR 8404-I (Individual History Record)

Stockholders/Members/Partners owning 10% (or more) of business	% Owned	Home Address	DOB	Replaces

10. Registered Agent	Address For Service
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Oath of Application
 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.

11. Authorized Signature	Title	Date
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Report of Local Licensing Authority
 The foregoing changes have been received and examined by the Local Licensing Authority.

12. Local Licensing Authority For	<input type="checkbox"/> County <input type="checkbox"/> Town/City	
Signature	Title	Date
Attest	Date	

Do Not Write In This Space – For Department of Revenue Use Only
Liability Information

License Account Number	Period	Cash Fund	Total

Instructions

Corporation, Limited Liability Company or Partnership Report of Changes

NOTE: ENCLOSE A CHECK PAYABLE TO THE AUTHORITY WHERE THIS APPLICATION WILL BE FILED FOR \$100.00 FOR EACH PERSON LISTED IN SECTIONS 8 AND 9 ON THE APPLICATION. MASTERFILE APPLICANTS MUST INCLUDE A FEE OF \$250.00 FOR EACH PERSON LISTED PAYABLE TO THE COLORADO DEPARTMENT OF REVENUE. (Application filed directly to the state)

NOTE: Check the appropriate box at the top to indicate whether you are Limited Liability Company (LLC), Partnership or Corporation.

Attach the following supporting documents to the Report of Changes Application:

- Certificate of Incorporation (or) Date stamped Articles or, Partnership Agreement (Limited and General Partnerships)
- Certificate of Good Standing dated within the last two years
- Certificate of Authority (only if a foreign corporation)
- Copies of minutes of meetings by the Corporation, Limited Liability Company or Partnership supporting the changes reflected on the front of this application. This includes letters of resignation, or appointment of any officers, or directors of a Corporation, or any managing member or members of a Limited Liability Company, or any general or limited partner in a Partnership (including husband and wife partnerships).
- NOTE: If the Licensee as listed on Line 1 has a sole stockholder that is a Corporation, or LLC, or Partnership, attach a letter designating one officer, or managing member or the general partner to be the "principal person" for the applicant. This person MUST ALSO fill out a DR8404-I (Individual History Record) and submit fingerprints by making an appointment with an approved State Vendor through the Vendor's website:

The vendors are as follows:

IdentoGO - <https://uenroll.identogo.com/>

Phone: (844) 539-5539 (toll-free)

IdentoGO FAQs: <https://www.colorado.gov/pacific/cbi/identification-faqs>

Colorado Fingerprinting by American Bioidentity – Details to be announced

This application and all supporting documents must FIRST BE FILED WITH, AND APPROVED BY, THE LOCAL LICENSING AUTHORITY (CITY, TOWN, COUNTY). Applications will not be accepted unless all applicable questions are fully answered, all supporting documents correspond exactly with the name of the applicant.

1. List the name of the Corporation or Limited Liability Company or Partnership
2. List the State Sales Tax Number.
3. List the Applicant's State Liquor License Number.
4. List the Trade name of the business.
5. List the area code and telephone number of the business.
6. List the complete address, City, State and Zip Code, of the licensed premises.
7. List your mailing address if different than number 6 above.
8. List all officers, directors of a corporation, or all managing members of the LLC, or General Partners of Limited or General Partnerships. List the person's Position, Home Address, Date of Birth and the name of the person being replaced (if applicable).
9. List all 10% (or more) stockholders or members or Partners, and indicate ownership percentage, Home Address, Date of Birth, and the name of the person they purchased ownership interest from (if applicable).
10. List the name and address for service of the Registered Agent.
11. A person authorized to sign on behalf of the Applicant must sign the application, list their title, and the date the application was signed.
- 12. To be filled out by the local licensing authority only. List the name of the authority and indicate if the authority is a county, town/city. Then sign the application, list your title and attest the city/county officials signature and date the application.**

Liquor and Marijuana Licensing Fingerprinting

The City of Boulder Licensing Division has changed their fingerprinting procedures in response to Senate Bill 17-189.

The Colorado Bureau of Investigations (CBI) has implemented a new process beginning September 24, 2018: Colorado Applicant Background Services (CABS).

To use this service, you will need to go online to one of the state approved vendors to register, schedule your appointment, and pay for your own fingerprinting.

These vendors are selected and trained specifically by the CBI and will be the only locations where civil fingerprinting services will now be available.

The vendor services will be located throughout the state, which is intended to increase applicants' ability to obtain fingerprints in a timely manner. Fingerprints will be submitted electronically, which will allow results to take only hours for processing instead of days or weeks.

In order to receive your City of Boulder specific code to register/schedule with CABS, you must first book your application intake appointment with city licensing staff by calling 303-441-4192.

Once confirmed, we will email you your unique code for the CABS vendor.

Please make sure you retain your receipt or confirmation of fingerprinting as this will replace the print card proof you will need to submit with your city application at your appointment.

The City of Boulder has chosen the following CABS vendor:

IDEMIA - IdentoGO
<https://www.idemia.com>

Please direct further questions about registration, services, and locations to your CABS vendor.



COLORADO
Bureau of Investigation
Department of Public Safety

Identification Unit
690 Kipling Street, Suite 3000
Denver, CO 80215
303-239-4208

NOTICE TO APPLICANTS

As an applicant for a position requiring fingerprints to be submitted to the Colorado Bureau of Investigation (“CBI”) and the Federal Bureau of Investigation (“FBI”), your fingerprints will be submitted to these agencies to check state and FBI records.

Discrepancies on your Colorado record can be challenged and corrected by contacting the Colorado Bureau of Investigation at 690 Kipling St., Suite 3000, Denver, CO 80215, or by calling the Identification Unit at (303) 239-4208. Additional information is available from CBI's website at www.colorado.gov/cbi.

Discrepancies on records from the FBI or relating to another state can be challenged through the FBI. Information, including that listed below, can be found at their website at www.fbi.gov.

The U.S. Department of Justice Order 556-73 establishes rules and regulations for the subject of an FBI Identification Record to obtain a copy of his or her own record for review. The FBI's Criminal Justice Information Services (“CJIS”) Division processes these requests.

Who May Request a Copy of a Record? (or proof that a record does not exist)
Only you can request a copy of your own Identification Record.

How to Request a Copy of Your Record?

The FBI offers two methods for requesting your FBI Identification Record or proof that a record does not exist:

Option 1: Submit your request directly to the FBI.

Option 2: Submit your request to an FBI-approved Channeler, which is a private business that has contracted with the FBI to receive the fingerprint submission and relevant data, collect the associated fee(s), electronically forward the fingerprint submission with the necessary information to the FBICJIS Division for a national criminal history record check, and receive the electronic record check result for dissemination to the individual. Contact each Channeler for processing times.

AGENCY INSTRUCTIONS: To comply with federal law, provide a copy of this document to each applicant fingerprinted.



Individual History Record

To be completed by the following persons, as applicable: sole proprietors; general partners regardless of percentage ownership, and limited partners owning 10% or more of the partnership; all principal officers of a corporation, all directors of a corporation, and any stockholder of a corporation owning 10% or more of the outstanding stock; managing members or officers of a limited liability company, and members owning 10% or more of the company; and any intended registered manager of Hotel and Restaurant, Tavern and Lodging and Entertainment class of retail license

Notice: This individual history record requires information that is necessary for the licensing investigation or inquiry. All questions must be answered in their entirety or the license application may be delayed or denied. If a question is not applicable, please indicate so by "N/A". Any deliberate misrepresentation or material omission may jeopardize the license application. (Please attach a separate sheet if necessary to enable you to answer questions completely)				
1. Name of Business		Home Phone Number	Cellular Number	
2. Your Full Name (last, first, middle)		3. List any other names you have used		
4. Mailing address (if different from residence)		Email Address		
5. List current residence address. Include any previous addresses within the last five years. (Attach separate sheet if necessary)				
Street and Number		City, State, Zip		From
To				
Current				
Previous				
6. List all employment within the last five years. Include any self-employment. (Attach separate sheet if necessary)				
Name of Employer or Business		Address (Street, Number, City, State, Zip)		Position Held
From		To		
7. List the name(s) of relatives working in or holding a financial interest in the Colorado alcohol beverage industry.				
Name of Relative		Relationship to You		Position Held
Name of Licensee				
8. Have you ever applied for, held, or had an interest in a Colorado Liquor or Beer License, or loaned money, furniture, fixtures, equipment or inventory to any licensee? (If yes, answer in detail.) <input type="checkbox"/> Yes <input type="checkbox"/> No				
9. Have you ever received a violation notice, suspension, or revocation for a liquor law violation, or have you applied for or been denied a liquor or beer license anywhere in the United States? (If yes, explain in detail.) <input type="checkbox"/> Yes <input type="checkbox"/> No				

10. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending? (If yes, explain in detail.) Yes No

11. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? (If yes, explain in detail.) Yes No

12. Have you ever had any professional license suspended, revoked, or denied? (If yes, explain in detail.) Yes No

Personal and Financial Information

Unless otherwise provided by law, the personal information required in question #13 will be treated as confidential. The personal information required in question #13 is solely for identification purposes.

13a. Date of Birth b. Social Security Number c. Place of Birth d. U.S. Citizen Yes No

e. If Naturalized, state where f. When g. Name of District Court

h. Naturalization Certificate Number i. Date of Certification j. If an Alien, Give Alien's Registration Card Number k. Permanent Residence Card Number

l. Height m. Weight n. Hair Color o. Eye Color p. Gender q. Race r. Do you have a current Driver's License/ID? If so, give number and state.
 Yes No # _____ State _____

14. Financial Information.

a. Total purchase price or investment being made by the applying entity, corporation, partnership, limited liability company, other.
 \$ _____

b. List the total amount of the **personal** investment, made by the person listed on question #2, in this business including any notes, loans, cash, services or equipment, operating capital, stock purchases or fees paid. \$ _____

* If corporate investment only please skip to and complete section (d)

** Section b should reflect the total of sections c and e

c. Provide details of the personal investment described in 14b. You must account for all of the sources of this investment. (Attach a separate sheet if needed)

Type: Cash, Services or Equipment	Account Type	Bank Name	Amount

d. Provide details of the corporate investment described in 14 (a). You must account for all of the sources of this investment. (Attach a separate sheet if needed)

Type: Cash, Services or Equipment	Loans	Account Type	Bank Name	Amount

e. Loan Information (Attach copies of all notes or loans)

Name of Lender	Address	Term	Security	Amount

Oath of Applicant

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

Authorized Signature Print Signature Title Date