



**LIQUOR LICENSE AUTHORITY**  
**Hearing Officer, Erik Johnson**  
**Wednesday, June 12, 2024**  
**Public Meeting Room / Eagle Town Hall**  
**200 Broadway, Eagle, CO**

*This agenda and the meetings can be viewed at [www.Townofeagle.org](http://www.Townofeagle.org).*

**PUBLIC WIFI – Eagle Guest**

**MEETING ACCESS AND PUBLIC PARTICIPATION** *This will be an in-person meeting using Teams. Please note: All participants must remain muted until they are requested to speak. This will reduce background noise disruptions to the meeting attendees. When it's your turn to speak, you will have three (3) minutes for public comment.*

1. **Microsoft Teams** [Need help?](#)

**[Join the meeting now](#)**

Meeting ID: 278 094 315 701

Passcode: AiZ6gW

**Dial-in by phone**

[+1 469-770-0416](tel:+14697700416),908504545# United States, Dallas

[Find a local number](#)

Phone conference ID: 908 504 545#

**CALL TO ORDER - 11:00 AM**

**PUBLIC HEARINGS**

1. Transfer of Ownership of a Beer & Wine License, Mimi's Foods Inc. dba Mauka Poke Bar - 700 Chambers Avenue
2. New Beer & Wine License, Canela Coffee and Pastry Shop LLC - 228 Broadway Street

**BUSINESS ITEM**

1. Approval of Minutes - May 16, 2024

**ADJOURN - 11:15 AM**

I hereby certify that the above Notice of Meeting was posted by me in the designated location at least 24 hours prior to said meeting.



Jenny Rakow, CMC  
Town Clerk

## Colorado Liquor Retail License Application

\* Note that the Division will not accept cash  Paid by check  Paid online

Uploaded to  Date   
 Moved on

<input type="checkbox"/> New License <input type="checkbox"/> New-Concurrent <input checked="" type="checkbox"/> Transfer of Ownership <input type="checkbox"/> State Property Only <input type="checkbox"/> Master file																																																									
• 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, Beer and Wine Code: <a href="http://SBG.Colorado.gov/Liquor">SBG.Colorado.gov/Liquor</a>																																																									
1. Applicant is applying as a/an <input type="checkbox"/> Individual <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Association or Other <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> 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 Mimis Foods INC <span style="float: right;">FEIN Number 99-0727885</span>																																																									
2a. Trade Name of Establishment (DBA) Mauka Poke Bar <span style="float: right;">State Sales Tax Number 96031132    Business Telephone 9702800209</span>																																																									
3. Address of Premises (specify exact location of premises, include suite/unit numbers) 700 chambers ave City <input type="text"/> County <input type="text"/> State <input type="text"/> ZIP Code <input type="text"/> Eagle                      Eagle                      CO                      81631																																																									
4. Mailing Address (Number and Street)    City or Town    State    ZIP Code 23 Legend Cir                      Dillon                      CO                      80435																																																									
5. Email Address steve@mimisfoods.com																																																									
6. If the premises currently has a liquor or beer license, you must answer the following questions Present Trade Name of Establishment (DBA)    Present State License Number    Present Class of License    Present Expiration Date Mauka Poke Bar LLC                      03-15623                      Beer + Wine                      10-26-24																																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Section A                      Nonrefundable Application Fees*</th> <th style="width: 50%;">Section B (Cont.)                      Liquor License Fees*</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Application Fee for New License .....\$1,100.00</td> <td><input type="checkbox"/> Liquor-Licensed Drugstore (County) .....\$312.50</td> </tr> <tr> <td><input type="checkbox"/> Application Fee for New License w/Concurrent Review .....\$1,200.00</td> <td><input type="checkbox"/> Lodging &amp; Entertainment - L&amp;E (City) .....\$500.00</td> </tr> <tr> <td><input checked="" type="checkbox"/> Application Fee for Transfer .....\$1,100.00</td> <td><input type="checkbox"/> Lodging &amp; Entertainment - L&amp;E (County) .....\$500.00</td> </tr> <tr> <td colspan="2"><b>Section B                      Liquor License Fees*</b></td> </tr> <tr> <td><input type="checkbox"/> Add Optional Premises to H &amp; R.....\$100.00 X _____ Total _____</td> <td><input type="checkbox"/> Manager Registration - 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Liability Information																																																									
License Account Number	Liability Date	License Issued Through (Expiration Date)	Total \$																																																						

## Application Documents Checklist and Worksheet

**Instructions:** This checklist should be utilized to assist applicants with filing all required documents for licensure. All documents must be properly signed and correspond with the name of the applicant exactly. All documents must be typed or legibly printed. Upon final State approval the license will be mailed to the local licensing authority. Application fees are nonrefundable. **Questions? Visit: [SBG.Colorado.gov/Liquor](http://SBG.Colorado.gov/Liquor) for more information**

Items submitted, please check all appropriate boxes completed or documents submitted	
<b>I.</b>	<b>Applicant information</b> <input checked="" type="checkbox"/> A. Applicant/Licensee identified <input checked="" type="checkbox"/> B. State sales tax license number listed or applied for at time of application <input checked="" type="checkbox"/> C. License type or other transaction identified <input checked="" type="checkbox"/> D. Return originals to local authority (additional items may be required by the local licensing authority) <input checked="" type="checkbox"/> E. All sections of the application need to be completed <input type="checkbox"/> F. Master file applicants must include the Application for Master File form DR 8415 and applicable fees to this Retail License Application
<b>II.</b>	<b>Diagram of the premises</b> <input checked="" type="checkbox"/> A. No larger than 8½" X 11" <input checked="" type="checkbox"/> B. Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.) <input type="checkbox"/> C. Separate diagram for each floor (if multiple levels) <input type="checkbox"/> D. Kitchen - identified if Hotel and Restaurant <input type="checkbox"/> E. Bold/Outlined Licensed Premises
<b>III.</b>	<b>Proof of property possession (One Year Needed)</b> <input type="checkbox"/> A. Deed in name of the applicant (or) (matching question #2) date stamped / filed with County Clerk <input type="checkbox"/> B. Lease in the name of the applicant (or) (matching question #2) <input checked="" type="checkbox"/> C. Lease assignment in the name of the applicant with proper consent from the landlord and acceptance by the applicant <input type="checkbox"/> D. Other agreement if not deed or lease. (matching question #2)
<b>IV.</b>	<b>Background information (DR 8404-I) and financial documents</b> <input checked="" type="checkbox"/> A. Complete DR 8404-I for each principal (individuals with more than 10% ownership, officers, directors, partners, members) <input checked="" type="checkbox"/> B. Fingerprints taken and submitted to the appropriate Local Licensing Authority through an approved State Vendor. Master File applicants submit results to the State using code 25YQHT with IdentGO. <b>Do not complete fingerprint cards prior to submitting your application.</b> The Vendors are as follows: <b>IdentGO</b> – <a href="https://uenroll.identogo.com/">https://uenroll.identogo.com/</a> Phone: 844-539-5539 (toll-free) <b>Colorado Fingerprinting</b> – <a href="http://www.coloradofingerprinting.com">http://www.coloradofingerprinting.com</a> Appointment Scheduling Website: <a href="http://www.coloradofingerprinting.com/cabs/">http://www.coloradofingerprinting.com/cabs/</a> Phone: 720-292-2722 Toll Free: 833-224-2227 <b>Details about the vendors and fingerprinting in Colorado can be found on CBI's website here:</b> <a href="https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/employment-and-background-checks">https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/employment-and-background-checks</a> <input type="checkbox"/> C. Purchase agreement, stock transfer agreement, and/or authorization to transfer license <input type="checkbox"/> D. List of all notes and loans (Copies to also be attached)
<b>V.</b>	<b>Sole proprietor/husband and wife partnership (if applicable)</b> <input type="checkbox"/> A. Form DR 4679 <input type="checkbox"/> B. Copy of State issued Driver's License or Colorado Identification Card for each applicant
<b>VI.</b>	<b>Corporate applicant information (if applicable)</b> <input checked="" type="checkbox"/> A. Certificate of Incorporation <input checked="" type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Certificate of Authorization if foreign corporation (out of state applicants only)
<b>VII.</b>	<b>Partnership applicant information (if applicable)</b> <input type="checkbox"/> A. Partnership Agreement (general or limited). <input type="checkbox"/> B. Certificate of Good Standing
<b>VIII.</b>	<b>Limited Liability Company applicant information (if applicable)</b> <input type="checkbox"/> A. Copy of articles of organization <input type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Copy of Operating Agreement (if applicable) <input type="checkbox"/> D. Certificate of Authority if foreign LLC (out of state applicants only)
<b>IX.</b>	<b>Manager registration for Hotel and Restaurant, Tavern, Lodging &amp; Entertainment, and Campus Liquor Complex licenses when included with this application</b> <input type="checkbox"/> A. \$30.00 fee <input type="checkbox"/> B. If owner is managing, no fee required

Name <i>Mimis Foods Inc</i>	Type of License	Account Number
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7. Is the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers under the age of twenty-one years? Yes  No
8. Has the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers ever (in Colorado or any other state):
- a. Been denied an alcohol beverage license?
  - b. Had an alcohol beverage license suspended or revoked?
  - c. Had interest in another entity that had an alcohol beverage license suspended or revoked?
- If you answered yes to 8a, b or c, explain in detail on a separate sheet.
9. Has a liquor license application (same license class), that was located within 500 feet of the proposed premises, been denied within the preceding two years? If "yes", explain in detail.
10. Are the premises to be licensed within 500 feet, of any public or private school that meets compulsory education requirements of Colorado law, or the principal campus of any college, university or seminary?    
or  
 Waiver by local ordinance?    
 Other: \_\_\_\_\_
11. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of greater than (>) 10,000? **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.
12. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 3000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of less than (<) 10,000? **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.
13. a. For additional Retail Liquor Store only. Was your Retail Liquor Store License issued on or before January 1, 2016?    
 b. Are you a Colorado resident?
14. Has a liquor or beer license ever been issued to the applicant (including any of the partners, if a partnership; members or manager if a Limited Liability Company; or officers, stockholders or directors if a corporation)? If yes, identify the name of the business and list any current financial interest in said business including any loans to or from a licensee.
15. Does the applicant, as listed on line 2 of this application, have legal possession of the premises by ownership, lease or other arrangement?    
 Ownership  Lease  Other (Explain in Detail) \_\_\_\_\_  
 a. If leased, list name of landlord and tenant, and date of expiration, **exactly** as they appear on the lease:

Landlord <i>Crownco International LLC</i>	Tenant <i>Mimis Foods Inc</i>	Expires <i>7-30-24</i>
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- b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question 16.
- c. Attach a diagram that designates the area to be licensed in black bold outline (including dimensions) which shows the bars, brewery, walls, partitions, entrances, exits and what each room shall be utilized for in this business. This diagram should be no larger than 8½" X 11".
16. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies) will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money from this business? Attach a separate sheet if necessary.

Last Name	First Name	Date of Birth	FEIN or SSN	Interest/Percentage

**Attach copies of all notes and security instruments and any written agreement or details of any oral agreement, by which any person (including partnerships, corporations, limited liability companies, etc.) will share in the profit or gross proceeds of this establishment, and any agreement relating to the business which is contingent or conditional in any way by volume, profit, sales, giving of advice or consultation.**

17. Optional Premises or Hotel and Restaurant Licenses with Optional Premises:    
 Has a local ordinance or resolution authorizing optional premises been adopted?    
 Number of additional Optional Premise areas requested. (See license fee chart) \_\_\_\_\_

18. For the addition of a Sidewalk Service Area per Regulation 47-302(A)(4), include a diagram of the service area and documentation received from the local governing body authorizing use of the sidewalk. Documentation may include but is not limited to a statement of use, permit, easement, or other legal permissions.

Name <i>Mimis Foods Inc</i>	Type of License	Account Number
--------------------------------	-----------------	----------------

19. Liquor Licensed Drugstore (LLDS) applicants, answer the following:  
 a. Is there a pharmacy, licensed by the Colorado Board of Pharmacy, located within the applicant's LLDS premise?  Yes  No  
 If "yes" a copy of license must be attached.

20. Club Liquor License applicants answer the following: **Attach a copy of applicable documentation** Yes No  
 a. Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain?  Yes  No  
 b. Is the applicant organization a regularly chartered branch, lodge or chapter of a national organization which is operated solely for the object of a patriotic or fraternal organization or society, but not for pecuniary gain?  Yes  No  
 c. How long has the club been incorporated?  
 d. Has applicant occupied an establishment for three years (three years required) that was operated solely for the reasons stated above?  Yes  No

21. Brew-Pub, Distillery Pub or Vintner's Restaurant applicants answer the following:  
 a. Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached)  Yes  No

22. Campus Liquor Complex applicants answer the following:  
 a. Is the applicant an institution of higher education?  Yes  No  
 b. Is the applicant a person who contracts with the institution of higher education to provide food services?  Yes  No  
 If "yes" please provide a copy of the contract with the institution of higher education to provide food services.

23. For all on-premises applicants.  
 a. For all Liquor Licensed Drugstores (LLDS) the Permitted Manager must also submit an Manager Permit Application - DR 8000 and fingerprints.

Last Name of Manager <i>Hammer</i>	First Name of Manager <i>Steven</i>
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24. 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.  Yes  No

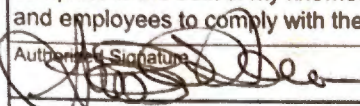
25. Related Facility - Campus Liquor Complex applicants answer the following:  Yes  No  
 a. Is the related facility located within the boundaries of the Campus Liquor Complex?  
 If yes, please provide a map of the geographical location within the Campus Liquor Complex.  
 If no, this license type is not available for issues outside the geographical location of the Campus Liquor Complex.  
 b. Designated Manager for Related Facility- Campus Liquor Complex

Last Name of Manager	First Name of Manager
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26. Tax Information.  Yes  No  
 a. Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant, been found in final order of a tax agency to be delinquent in the payment of any state or local taxes, penalties, or interest related to a business?  Yes  No  
 b. Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant failed to pay any fees or surcharges imposed pursuant to section 44-3-503, C.R.S.?

27. 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 make an appointment with an approved State Vendor through their website. See application checklist, Section IV, for details.

Name	Home Address, City & State	DOB	Position	%Owned
Steven Hammer	23 Legend Cir, Dillon, CO	10/19/72	President	49
Lauren Hammer	23 Legend Cir, Dillon, CO	04/30/74	chairwoman	51
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned

Name Mimis Foods Inc		Type of License	Account Number	
<p>** 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 Article 3 or 5, C.R.S.</p>				
<b>Oath Of Applicant</b>				
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.				
Authentic Signature 		Printed Name and Title Steven Hammer, President		Date 2/29/24
<b>Report and Approval of Local Licensing Authority (City/County)</b>				
Date application filed with local authority May 7, 2024		Date of local authority hearing (for new license applicants; cannot be less than 30 days from date of application)		
For Transfer Applications Only - Is the license being transferred valid?				Yes No <input type="checkbox"/> <input type="checkbox"/>
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 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 > 10,0000?				Yes No <input type="checkbox"/> <input type="checkbox"/>
<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 < 10,0000?				<input type="checkbox"/> <input type="checkbox"/>
<b>NOTE:</b> 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.				
<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?				<input type="checkbox"/> <input 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 44, Article 4 or 3, C.R.S., and Liquor Rules. <b>Therefore, this application is approved.</b>				
Local Licensing Authority for Town of Eagle		Telephone Number 9703289623		<input checked="" type="checkbox"/> Town, City <input type="checkbox"/> County
Signature	Print Erik Johnson	Title Hearing officer	Date	
Signature	Print Jenny Rakow	Title Town Clerk	Date	


## Tax Check Authorization, Waiver, and Request to Release Information

I, Steven Hammer am signing this Tax Check Authorization, Waiver and Request to Release Information (hereinafter "Waiver") on behalf of Mimi's Foods Inc (DBA Mauka Poke Bar) (the "Applicant/Licensee") to permit the Colorado Department of Revenue and any other state or local taxing authority to release information and documentation that may otherwise be confidential, as provided below. If I am signing this Waiver for someone other than myself, including on behalf of a business entity, I certify that I have the authority to execute this Waiver on behalf of the Applicant/Licensee.

The Executive Director of the Colorado Department of Revenue is the State Licensing Authority, and oversees the Colorado Liquor Enforcement Division as his or her agents, clerks, and employees. The information and documentation obtained pursuant to this Waiver may be used in connection with the Applicant/Licensee's liquor license application and ongoing licensure by the state and local licensing authorities. The Colorado Liquor Code, section 44-3-101, et seq. ("Liquor Code"), and the Colorado Liquor Rules, 1 CCR 203-2 ("Liquor Rules"), require compliance with certain tax obligations, and set forth the investigative, disciplinary, and licensure actions the state and local licensing authorities may take for violations of the Liquor Code and Liquor Rules, including failure to meet tax reporting and payment obligations.

The Waiver is made pursuant to section 39-21-113(4), C.R.S., and any other law, regulation, resolution or ordinance concerning the confidentiality of tax information, or any document, report or return filed in connection with state or local taxes. This Waiver shall be valid until the expiration or revocation of a license, or until both the state and local licensing authorities take final action to approve or deny any application(s) for the renewal of the license, whichever is later. Applicant/Licensee agrees to execute a new waiver for each subsequent licensing period in connection with the renewal of any license, if requested.

By signing below, Applicant/Licensee requests that the Colorado Department of Revenue and any other state or local taxing authority or agency in the possession of tax documents or information, release information and documentation to the Colorado Liquor Enforcement Division, and its duly authorized employees, to act as the Applicant's/Licensee's duly authorized representative under section 39-21-113(4), C.R.S., solely to allow the state and local licensing authorities, and their duly authorized employees, to investigate compliance with the Liquor Code and Liquor Rules. Applicant/Licensee authorizes the state and local licensing authorities, their duly authorized employees, and their legal representatives, to use the information and documentation obtained using this Waiver in any administrative or judicial action regarding the application or license.

Name (Individual/Business) <b>Mimi's Foods Inc (DBA Mauka Poke Bar)</b>		Social Security Number/Tax Identification Number <b>99-0727885</b>	
Address <b>700 Chambers Ave, Ste 4A</b>			
City <b>Eagle</b>		State <b>CO</b>	Zip <b>81631</b>
Home Phone Number <b>9723224571</b>		Business/Work Phone Number	
Printed name of person signing on behalf of the Applicant/Licensee <b>Steven hammer</b>			
Applicant/Licensee's Signature (Signature authorizing the disclosure of confidential tax information) 			Date signed <b>2/29/24</b>

### Privacy Act Statement

Providing your Social Security Number is voluntary and no right, benefit or privilege provided by law will be denied as a result of refusal to disclose it. § 7 of Privacy Act, 5 USCS § 552a (note).





**PUBLIC NOTICE  
TOWN OF EAGLE  
APPLICATION – TRANSFER OF OWNERSHIP**

Notice is hereby given that the Local Liquor Licensing Authority shall hold a public hearing on the application of **MIMI'S FOODS INC** dated May 7, 2024, requesting a Transfer of Ownership of a Beer and Wine License, located at 700 Chambers Avenue, Eagle, Colorado 81631. Said hearing will be held on Wednesday, June 12, 2024 at 11:00 a.m. held at the Eagle Town Hall, 200 Broadway. All persons interested in the aforementioned application may appear before the Town Council and present testimony or may submit written correspondence to the Eagle Town Clerk, at [clerk@townofeagle.org](mailto:clerk@townofeagle.org) or PO Box 609 Eagle CO 81631.

By: **Jenny Rakow**  
Town Clerk

Published: May 30, 2024 Vail Daily/Eagle Valley Enterprise



BEFORE THE TOWN OF EAGLE LIQUOR LICENSING AUTHORITY

200 BROADWAY  
PO BOX 609  
EAGLE CO 81631

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FINDINGS AND ORDER APPROVING TRANSFER OF OWNERSHIP

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IN THE MATTER OF

Transfer of Ownership  
Mimi's Foods Inc.  
Address: 700 Chambers Avenue

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Having considered the application of Steven and Lauren Hammer owners of Mimi's Foods Inc. dba Mauka Poke Bar for a Transfer of Ownership of a Beer & Wine License, and all attachments submitted therewith (the "Application"), having held a public hearing on the Application on June 12, 2024, following due and proper notice, all in accordance with the Colorado Liquor Code, 44-3-101 et seq., C.R.S., and having considered all relevant and competent evidence admitted at the said public hearing, the Local Licensing Authority FINDS AS FOLLOWS:

1. There has not been a denial of an application at the same location by either the State or Local Licensing Authority within two (2) years preceding the date of the application.
2. The Applicant has submitted evidence that they are entitled to possession of the premises where the license is proposed to be exercised.
3. The premises where the Applicant proposes to sell alcohol is not in violation of the 500-foot limitation from any public or parochial school or the principal campus of any college, university or seminary.
4. The premises are properly zoned for the activity which will occur therein. Approval has or will be provided by the Building Official and Planning Department prior to the issuance of State and Local Licenses.
5. The location has been previously decided by a preponderance of the evidence that the reasonable requirements of the neighborhood and the desires of the adult inhabitants of the neighborhood are not currently being met by existing outlets.
6. No undue concentration has been determined with the current class of license and does not require additional law enforcement resources as presented.

BASED UPON THE FOREGOING, THE LOCAL LICENSING AUTHORITY HEREBY ORDERS that the application of Steven and Lauren Hammer owners of Mimi's Foods Inc. dba Mauka Poke Bar for a Transfer of Ownership of a Beer & Wine License is hereby GRANTED.

DATED this JUNE 12, 2024

LOCAL LIQUOR LICENSING AUTHORITY  
TOWN OF EAGLE

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Erik Johnson, Hearing Officer

ATTEST:

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Jenny Rakow, Town Clerk

# Colorado Liquor Retail License Application

\* Note that the Division will not accept cash  Paid by check  Paid online

Uploaded to  MoveIt on  Date 4/14/2024

New License  New-Concurrent  Transfer of Ownership  State Property Only  Master file

• 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, Beer and Wine Code: [SBG.Colorado.gov/Liquor](http://SBG.Colorado.gov/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  
**CANELA COFFEE AND PASTRY SHOP L.L.C.** FEIN Number **93-3770827**

2a. Trade Name of Establishment (DBA) State Sales Tax Number Business Telephone  
 State Sales Tax Number **95941128** Business Telephone **9704715169**

3. Address of Premises (specify exact location of premises, include suite/unit numbers)  
**228 BROADWAY Street**

City Eagle County Eagle State ZIP Code 81631

4. Mailing Address (Number and Street) City or Town State ZIP Code  
**PO BOX 2974** Edwards CO 81632

5. Email Address  
**canela.eagle@gmail.com**

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

Present Trade Name of Establishment (DBA)	Present State License Number	Present Class of License	Present Expiration Date

Section A Nonrefundable Application Fees*	Section B (Cont.) Liquor License Fees*
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<input type="checkbox"/> Application Fee for New License.....\$1,100.00 <input checked="" type="checkbox"/> Application Fee for New License w/Concurrent Review.....\$1,200.00 <input type="checkbox"/> Application Fee for Transfer.....\$1,100.00	<input type="checkbox"/> Liquor-Licensed Drugstore (County).....\$312.50 <input type="checkbox"/> Lodging & Entertainment - L&E (City).....\$500.00 <input type="checkbox"/> Lodging & Entertainment - L&E (County).....\$500.00 <input type="checkbox"/> Manager Registration - H & R.....\$30.00 <input type="checkbox"/> Manager Registration - Tavern.....\$30.00 <input type="checkbox"/> Manager Registration - Lodging & Entertainment.....\$30.00 <input type="checkbox"/> Manager Registration - Campus Liquor Complex.....\$30.00 <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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**Section B Liquor License Fees\***

<input type="checkbox"/> Add Optional Premises to H & R.....\$100.00 X _____ Total _____ <input type="checkbox"/> Add Related Facility to Resort Complex \$75.00 X _____ Total _____ <input type="checkbox"/> Add Sidewalk Service Area.....\$75.00 <input type="checkbox"/> Arts License (City).....\$308.75 <input type="checkbox"/> Arts License (County).....\$308.75 <input checked="" 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 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).....\$600.00 <input type="checkbox"/> Hotel and Restaurant License w/one opt premises (County).....\$600.00 <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"/> Lodging & Entertainment - L&E (County).....\$500.00 <input type="checkbox"/> Manager Registration - H & R.....\$30.00 <input type="checkbox"/> Manager Registration - Tavern.....\$30.00 <input type="checkbox"/> Manager Registration - Lodging & Entertainment.....\$30.00 <input type="checkbox"/> Manager Registration - Campus Liquor Complex.....\$30.00 <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: [SBG.Colorado.gov/Liquor](http://SBG.Colorado.gov/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 \$

## Application Documents Checklist and Worksheet

**Instructions:** This checklist should be utilized to assist applicants with filing all required documents for licensure. **All** documents must be properly signed and correspond with the name of the applicant exactly. **All** documents must be typed or legibly printed. Upon final State approval the license will be mailed to the local licensing authority. Application fees are nonrefundable. **Questions? Visit: [SBG.Colorado.gov/Liquor](http://SBG.Colorado.gov/Liquor) for more information**

Items submitted, please check all appropriate boxes completed or documents submitted	
<b>I.</b>	<b>Applicant information</b> <input checked="" type="checkbox"/> A. Applicant/Licensee identified <input checked="" type="checkbox"/> B. State sales tax license number listed or applied for at time of application <input checked="" type="checkbox"/> C. License type or other transaction identified <input checked="" type="checkbox"/> D. Return originals to local authority (additional items may be required by the local licensing authority) <input checked="" type="checkbox"/> E. All sections of the application need to be completed <input type="checkbox"/> F. Master file applicants must include the Application for Master File form DR 8415 and applicable fees to this Retail License Application
<b>II.</b>	<b>Diagram of the premises</b> <input type="checkbox"/> A. No larger than 8½" X 11" <input type="checkbox"/> B. Dimensions included (does not have to be to scale). Exterior areas should show type of control (fences, walls, entry/exit points, etc.) <input type="checkbox"/> C. Separate diagram for each floor (if multiple levels) <input type="checkbox"/> D. Kitchen - identified if Hotel and Restaurant <input type="checkbox"/> E. Bold/Outlined Licensed Premises
<b>III.</b>	<b>Proof of property possession (One Year Needed)</b> <input type="checkbox"/> A. Deed in name of the applicant (or) (matching question #2) date stamped / filed with County Clerk <input checked="" type="checkbox"/> B. Lease in the name of the applicant (or) (matching question #2) <input type="checkbox"/> C. Lease assignment in the name of the applicant with proper consent from the landlord and acceptance by the applicant <input type="checkbox"/> D. Other agreement if not deed or lease. (matching question #2)
<b>IV.</b>	<b>Background information (DR 8404-I) and financial documents</b> <input checked="" type="checkbox"/> A. Complete DR 8404-I for each principal (individuals with more than 10% ownership, officers, directors, partners, members) <input checked="" type="checkbox"/> B. Fingerprints taken and submitted to the appropriate Local Licensing Authority through an approved State Vendor. Master File applicants submit results to the State using code 25YQHT with Identogo. <b>Do not complete fingerprint cards prior to submitting your application.</b> The Vendors are as follows: <b>Identogo</b> – <a href="https://uenroll.identogo.com/">https://uenroll.identogo.com/</a> Phone: 844-539-5539 (toll-free) <b>Colorado Fingerprinting</b> – <a href="http://www.coloradofingerprinting.com">http://www.coloradofingerprinting.com</a> Appointment Scheduling Website: <a href="http://www.coloradofingerprinting.com/cabs/">http://www.coloradofingerprinting.com/cabs/</a> Phone: 720-292-2722 Toll Free: 833-224-2227 <b>Details about the vendors and fingerprinting in Colorado can be found on CBI's website here:</b> <a href="https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/employment-and-background-checks">https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/employment-and-background-checks</a> <input type="checkbox"/> C. Purchase agreement, stock transfer agreement, and/or authorization to transfer license <input type="checkbox"/> D. List of all notes and loans (Copies to also be attached)
<b>V.</b>	<b>Sole proprietor/husband and wife partnership (if applicable)</b> <input type="checkbox"/> A. Form DR 4679 <input type="checkbox"/> B. Copy of State issued Driver's License or Colorado Identification Card for each applicant
<b>VI.</b>	<b>Corporate applicant information (if applicable)</b> <input type="checkbox"/> A. Certificate of Incorporation <input type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Certificate of Authorization if foreign corporation (out of state applicants only)
<b>VII.</b>	<b>Partnership applicant information (if applicable)</b> <input type="checkbox"/> A. Partnership Agreement (general or limited). <input type="checkbox"/> B. Certificate of Good Standing
<b>VIII.</b>	<b>Limited Liability Company applicant information (if applicable)</b> <input checked="" type="checkbox"/> A. Copy of articles of organization <input checked="" type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Copy of Operating Agreement (if applicable) <input type="checkbox"/> D. Certificate of Authority if foreign LLC (out of state applicants only)
<b>IX.</b>	<b>Manager registration for Hotel and Restaurant, Tavern, Lodging &amp; Entertainment, and Campus Liquor Complex licenses when included with this application</b> <input type="checkbox"/> A. \$30.00 fee <input checked="" type="checkbox"/> B. If owner is managing, no fee required

Name	Type of License	Account Number		
7. Is the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers under the age of twenty-one years?		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
8. Has the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers ever (in Colorado or any other state):				
a. Been denied an alcohol beverage license?		<input type="checkbox"/> <input checked="" type="checkbox"/>		
b. Had an alcohol beverage license suspended or revoked?		<input type="checkbox"/> <input checked="" type="checkbox"/>		
c. Had interest in another entity that had an alcohol beverage license suspended or revoked?		<input type="checkbox"/> <input checked="" type="checkbox"/>		
If you answered yes to 8a, b or c, explain in detail on a separate sheet.				
9. Has a liquor license application (same license class), that was located within 500 feet of the proposed premises, been denied within the preceding two years? If "yes", explain in detail.		<input type="checkbox"/> <input checked="" type="checkbox"/>		
10. Are the premises to be licensed within 500 feet, of any public or private school that meets compulsory education requirements of Colorado law, or the principal campus of any college, university or seminary?		<input type="checkbox"/> <input checked="" type="checkbox"/>		
Waiver by local ordinance?		<input type="checkbox"/> <input type="checkbox"/>		
Other: _____				
11. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 1500 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of greater than (>) 10,000? <b>NOTE:</b> 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.		<input type="checkbox"/> <input type="checkbox"/>		
12. Is your Liquor Licensed Drugstore (LLDS) or Retail Liquor Store (RLS) within 3000 feet of another retail liquor license for off-premises sales in a jurisdiction with a population of less than (<) 10,000? <b>NOTE:</b> 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.		<input type="checkbox"/> <input type="checkbox"/>		
13. a. For additional Retail Liquor Store only. Was your Retail Liquor Store License issued on or before January 1, 2016?		<input type="checkbox"/> <input type="checkbox"/>		
b. Are you a Colorado resident?		<input type="checkbox"/> <input type="checkbox"/>		
14. Has a liquor or beer license ever been issued to the applicant (including any of the partners, if a partnership; members or manager if a Limited Liability Company; or officers, stockholders or directors if a corporation)? If yes, identify the name of the business and list any <u>current</u> financial interest in said business including any loans to or from a licensee.		<input type="checkbox"/> <input checked="" type="checkbox"/>		
15. Does the applicant, as listed on line 2 of this application, <b>have legal possession of the premises by ownership</b> , lease or other arrangement?		<input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> Ownership <input checked="" type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____				
a. If leased, list name of landlord and tenant, and date of expiration, <b>exactly</b> as they appear on the lease:				
Landlord	Tenant	Expires		
228 BROADWAY , LLC,	Canela Coffee and Pastry , LLC,	10/1/2025		
b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question 16.		<input type="checkbox"/> <input checked="" type="checkbox"/>		
c. Attach a diagram that designates the area to be licensed in black bold outline (including dimensions) which shows the bars, brewery, walls, partitions, entrances, exits and what each room shall be utilized for in this business. This diagram should be no larger than 8½" X 11".				
16. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies) will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money from this business? Attach a separate sheet if necessary.				
Last Name	First Name	Date of Birth	FEIN or SSN	Interest/Percentage
Last Name	First Name	Date of Birth	FEIN or SSN	Interest/Percentage
<b>Attach copies of all notes and security instruments and any written agreement or details of any oral agreement, by which any person (including partnerships, corporations, limited liability companies, etc.) will share in the profit or gross proceeds of this establishment, and any agreement relating to the business which is contingent or conditional in any way by volume, profit, sales, giving of advice or consultation.</b>				
17. Optional Premises or Hotel and Restaurant Licenses with Optional Premises:		<input type="checkbox"/> <input type="checkbox"/>		
Has a local ordinance or resolution authorizing optional premises been adopted?				
Number of additional Optional Premise areas requested. (See license fee chart)		<input type="text"/>		
18. For the addition of a Sidewalk Service Area per Regulation 47-302(A)(4), include a diagram of the service area and documentation received from the local governing body authorizing use of the sidewalk. Documentation may include but is not limited to a statement of use, permit, easement, or other legal permissions.				

Name CANELA COFFEE AND PASTRY SHOP L.L.C.	Type of License	Account Number		
<b>19.</b> Liquor Licensed Drugstore (LLDS) applicants, answer the following: <b>a.</b> Is there a pharmacy, licensed by the Colorado Board of Pharmacy, located within the applicant's LLDS premise? <input type="checkbox"/> <input type="checkbox"/> <b>If "yes" a copy of license must be attached.</b>				
<b>20.</b> Club Liquor License applicants answer the following: <b>Attach a copy of applicable documentation</b> <span style="float:right">Yes No</span> <b>a.</b> Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain? <input type="checkbox"/> <input type="checkbox"/> <b>b.</b> Is the applicant organization a regularly chartered branch, lodge or chapter of a national organization which is operated solely for the object of a patriotic or fraternal organization or society, but not for pecuniary gain? <input type="checkbox"/> <input type="checkbox"/> <b>c.</b> How long has the club been incorporated? <b>d.</b> Has applicant occupied an establishment for three years (three years required) that was operated solely for the reasons stated above? <input type="checkbox"/> <input type="checkbox"/>				
<b>21.</b> Brew-Pub, Distillery Pub or Vintner's Restaurant applicants answer the following: <b>a.</b> Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached) <input type="checkbox"/> <input type="checkbox"/>				
<b>22.</b> Campus Liquor Complex applicants answer the following: <b>a.</b> Is the applicant an institution of higher education? <input type="checkbox"/> <input type="checkbox"/> <b>b.</b> Is the applicant a person who contracts with the institution of higher education to provide food services? <input type="checkbox"/> <input type="checkbox"/> <b>If "yes" please provide a copy of the contract with the institution of higher education to provide food services.</b>				
<b>23.</b> For all on-premises applicants. <b>a.</b> For all Liquor Licensed Drugstores (LLDS) the Permitted Manager must also submit an Manager Permit Application - DR 8000 and fingerprints.				
Last Name of Manager Gonzalez Abarca	First Name of Manager Rosa Maria			
<b>24.</b> 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. <span style="float:right">Yes No</span> <input type="checkbox"/> <input checked="" type="checkbox"/>				
<b>25.</b> Related Facility - Campus Liquor Complex applicants answer the following: <span style="float:right">Yes No</span> <b>a.</b> 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. <input type="checkbox"/> <input type="checkbox"/> <b>b.</b> Designated Manager for Related Facility- Campus Liquor Complex				
Last Name of Manager	First Name of Manager			
<b>26.</b> Tax Information. <span style="float:right">Yes No</span> <b>a.</b> Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant, been found in final order of a tax agency to be delinquent in the payment of any state or local taxes, penalties, or interest related to a business? <input type="checkbox"/> <input checked="" type="checkbox"/> <b>b.</b> Has the applicant, including its manager, partners, officer, directors, stockholders, members (LLC), managing members (LLC), or any other person with a 10% or greater financial interest in the applicant failed to pay any fees or surcharges imposed pursuant to section 44-3-503, C.R.S.? <input type="checkbox"/> <input checked="" type="checkbox"/>				
<b>27.</b> If applicant is a corporation, partnership, association or limited liability company, applicant must list all <b>Officers, Directors, General Partners, and Managing Members</b> . In addition, applicant must list any stockholders, partners, or members with <b>ownership of 10% or more in the applicant</b> . <b>All persons listed below</b> must also attach form DR 8404-I (Individual History Record), and make an appointment with an approved State Vendor through their website. See application checklist, Section IV, for details.				
Name Rosa Maria Gonzalez Abarca	Home Address, City & State 120 Gopher road , unit 9A, Avon,CO	DOB 9/17/1963	Position Manager	%Owned 100
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned
Name	Home Address, City & State	DOB	Position	%Owned

Name CANELA COFFEE AND PASTRY SHOP L.L.C.	Type of License	Account Number
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\*\* 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:  
 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 Article 3 or 5, C.R.S.

**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 Rosa Maria Gonzalez Abarca / Manager /	Date 7/15/2024
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**Report and Approval of Local Licensing Authority (City/County)**

Date application filed with local authority May 10, 2024	Date of local authority hearing (for new license applicants; cannot be less than 30 days from date of application) June 12, 2024
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**For Transfer Applications Only** - Is the license being transferred valid? Yes No

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:

- Fingerprinted
- 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)

- Date of inspection or anticipated date \_\_\_\_\_
- Will conduct inspection upon approval of state licensing authority

- 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 > 10,0000? Yes No
  - 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 < 10,0000?
- 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.
- 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?

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 44, Article 4 or 3, C.R.S., and Liquor Rules. **Therefore, this application is approved.**

Local Licensing Authority for Town of Eagle	Telephone Number 970.328.6354	<input checked="" type="checkbox"/> Town, City <input type="checkbox"/> County
Signature 	Print Erik Johnson	Title Hearing officer
Signature 	Print Jenny Rawlow	Title Town Clerk

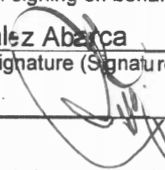
## Tax Check Authorization, Waiver, and Request to Release Information

I, Rosa Maria Gonzalez Abarca am signing this Tax Check Authorization, Waiver and Request to Release Information (hereinafter "Waiver") on behalf of CANELA COFFEE AND PASTRY SHOP (the "Applicant/Licensee") to permit the Colorado Department of Revenue and any other state or local taxing authority to release information and documentation that may otherwise be confidential, as provided below. If I am signing this Waiver for someone other than myself, including on behalf of a business entity, I certify that I have the authority to execute this Waiver on behalf of the Applicant/Licensee.

The Executive Director of the Colorado Department of Revenue is the State Licensing Authority, and oversees the Colorado Liquor Enforcement Division as his or her agents, clerks, and employees. The information and documentation obtained pursuant to this Waiver may be used in connection with the Applicant/Licensee's liquor license application and ongoing licensure by the state and local licensing authorities. The Colorado Liquor Code, section 44-3-101. et seq. ("Liquor Code"), and the Colorado Liquor Rules, 1 CCR 203-2 ("Liquor Rules"), require compliance with certain tax obligations, and set forth the investigative, disciplinary and licensure actions the state and local licensing authorities may take for violations of the Liquor Code and Liquor Rules, including failure to meet tax reporting and payment obligations.

The Waiver is made pursuant to section 39-21-113(4), C.R.S., and any other law, regulation, resolution or ordinance concerning the confidentiality of tax information, or any document, report or return filed in connection with state or local taxes. This Waiver shall be valid until the expiration or revocation of a license, or until both the state and local licensing authorities take final action to approve or deny any application(s) for the renewal of the license, whichever is later. Applicant/Licensee agrees to execute a new waiver for each subsequent licensing period in connection with the renewal of any license, if requested.

By signing below, Applicant/Licensee requests that the Colorado Department of Revenue and any other state or local taxing authority or agency in the possession of tax documents or information, release information and documentation to the Colorado Liquor Enforcement Division, and is duly authorized employees, to act as the Applicant's/Licensee's duly authorized representative under section 39-21-113(4), C.R.S., solely to allow the state and local licensing authorities, and their duly authorized employees, to investigate compliance with the Liquor Code and Liquor Rules. Applicant/Licensee authorizes the state and local licensing authorities, their duly authorized employees, and their legal representatives, to use the information and documentation obtained using this Waiver in any administrative or judicial action regarding the application or license.


Name (Individual/Business)		Social Security Number/Tax Identification Number	
Rosa Maria Gonzalez Abarca/CANELA COFFEE AND PASTRY SHOP		6 [REDACTED] 27	
Address			
228 BROADWAY STREET			
City		State	Zip
EAGLE		CO	81631
Home Phone Number		Business/Work Phone Number	
9704715169		9704715169	
Printed name of person signing on behalf of the Applicant/Licensee			
Rosa Maria Gonzalez Abarca			
Applicant/Licensee's Signature (Signature authorizing the disclosure of confidential tax information)			Date signed
			4/15/2024

### Privacy Act Statement

Providing your Social Security Number is voluntary and no right, benefit or privilege provided by law will be denied as a result of refusal to disclose it. § 7 of Privacy Act, 5 USCS § 552a (note).

Fees Due	
Initial Application Fee	\$11.00
Renewal Fee	\$11.00

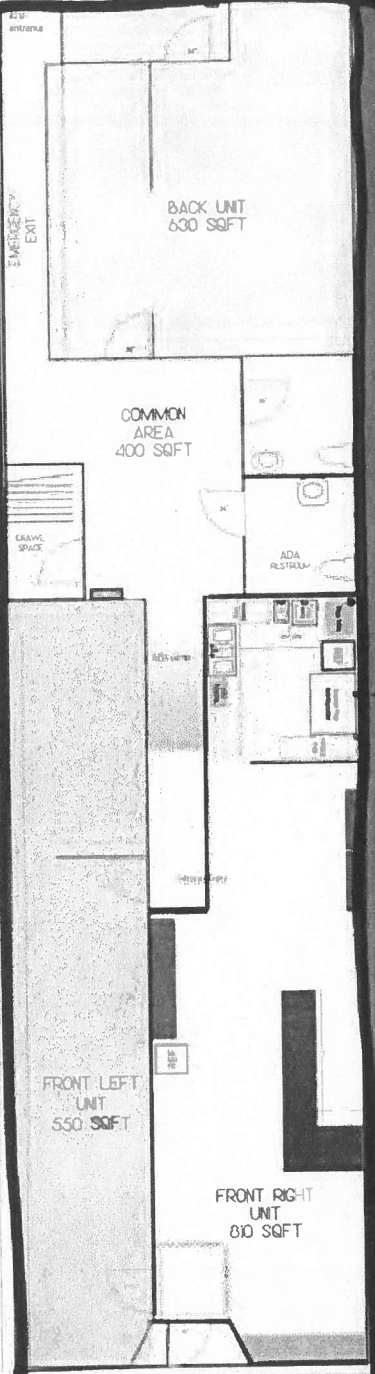
## Takeout and Delivery Permit Application & Renewal (On-Premises Applicants Only)

<input checked="" type="checkbox"/> Initial Application		<input type="checkbox"/> Renewal	
Corporate Business Name <b>CANELA COFFEE AND PASTRY SHOP L.L.C</b>		Trade Name (DBA)	Liquor License Number
Physical Address of Premises <b>228 BROADWAY STREET</b>			Suite/Unit Number
City <b>EAGLE</b>	County <b>EAGLE</b>	State <b>CO</b>	ZIP Code <b>81631</b>
Mailing Address (if different than Physical Address) <b>PO BOX 2974</b>			Suite/Unit Number
City <b>EDWARDS</b>		State <b>CO</b>	ZIP Code <b>81632</b>
Business Phone Number <b>9704715169</b>		Business Email Address <b>canela.eagle@gmail.com</b>	
1. Are you applying/renewing: <input type="checkbox"/> Delivery <input checked="" type="checkbox"/> Takeout <input type="checkbox"/> Both Takeout and Delivery			
2. You certify that the delivery of alcohol beverages shall only be made to a person TWENTY-ONE (21) years of age or older at the address specified in the order.			<input type="checkbox"/> Yes <input type="checkbox"/> No
3. You certify that the delivery must be made by the licensee or the licensee's employee who is at least TWENTY-ONE (21) years of age and is using a vehicle owned or leased by the licensee to make the delivery.			<input type="checkbox"/> Yes <input type="checkbox"/> No
4. You certify that the licensee's employee who delivers the alcohol beverages shall note and log at the time of delivery, the name and date of birth of the person the alcohol beverages are delivered to. Under no circumstances shall a person under TWENTY-ONE (21) years of age be permitted to receive a delivery of alcohol beverages.			<input type="checkbox"/> Yes <input type="checkbox"/> No
5. You understand that a licensee must derive no more than FIFTY (50) percent of its gross annual revenues from sales of alcohol beverages that the licensee delivers.			<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Are you using a third party's ordering software to take orders?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered "Yes" to question number six (6) above, upload all documents concerning the agreement between the ordering service and the licensee. <b>Note - While a third party's ordering software may be used, physical delivery can only be accomplished by the licensee or the licensee's employee using a vehicle owned or leased by the licensee.</b>			
7. Have you verified with your local licensing authority that no local permits are required for takeout and delivery?			<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Are you the applicant or an authorized agent of the business?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of the applicant or an authorized agent of the business <b>ROSA MARIA GONZALEZ ABARCA</b>		Title of the applicant or an authorized agent of the business <b>Manager</b>	
Signature 		Date <b>4/15/2024</b>	

**Payment** (Please submit Payment in one of the following ways):

<b>Via mail with your application</b> P.O. Box 17087 Denver, CO 80217-0087	<b>Via email to:</b> DOR_liqlicensing@state.co.us An email will be sent to you with directions on how to make a payment via our online payment portal.
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ALLEY 22 FEET FROM  
BACK OF THE BUILDING  
TO PARKING SPACE



Police  
Department

Alley - Property of Town

Eye Glass  
Store

BROADWAY STREET FRONT ENTRANCE

Sidewalk to be  
licensed for  
servie

Cross Walk

Broadway St



**PUBLIC NOTICE  
TOWN OF EAGLE  
NEW RETAIL LIQUOR LICENSE APPLICATION**

Notice is hereby given that the Local Liquor Licensing Authority, shall hold a public hearing on the application of **CANELA COFFEE AND PASTRY SHOP LLC** dated May 10, 2024, requesting a **BEER AND WINE LICENSE**, located at **228 Broadway** Eagle, Colorado 81631. Said hearing will be held on Tuesday, June 12, 2024 at 10:00 a.m. at the **Eagle Town Hall, located at 200 Broadway**. All persons interested in the aforementioned application may appear before the Town Council and present testimony or may submit written correspondence to the Eagle Town Clerk, at [clerk@townofeagle.org](mailto:clerk@townofeagle.org) or PO Box 609 Eagle CO 81631.

By: **Jenny Rakow**  
Town Clerk

Published: May 23, 2024 Vail Daily/Eagle Valley Enterprise



**BEFORE THE TOWN OF EAGLE LIQUOR LICENSING AUTHORITY**

200 BROADWAY  
PO BOX 609  
EAGLE CO 81631

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**FINDINGS AND ORDER APPROVING A BEER AND WINE LICENSE**

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IN THE MATTER OF

Canela Coffee and Pastry Shop LLC  
228 Broadway Street, Eagle CO

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Having considered the application of Canela Coffee and Pastry Shop LLC for a new Beer and Wine License, and all attachments submitted therewith (the "Application"), having held a public hearing on the Application on June 12, 2024, following due and proper notice, all in accordance with the Colorado Liquor Code, 44-3-101 et seq., C.R.S., and having considered all relevant and competent evidence admitted at the said public hearing, the Local Licensing Authority FINDS AS FOLLOWS:

1. There has not been a denial of an application at the same location by either the State or Local Licensing Authority within two (2) years preceding the date of the application.
2. The Applicant has submitted evidence that they are entitled to possession of the premises where the license is proposed to be exercised.
3. The premises where the Applicant proposes to sell alcohol is not in violation of the 500-foot limitation from any public or parochial school or the principal campus of any college, university, or seminary.
4. The premises are properly zoned for the activity which will occur therein. Approval has or will be provided by the Building Official and Planning Department prior to the issuance of State and Local Licenses.
5. No undue concentration has been determined with the current class of license and does not require additional law enforcement resources as presented.

BASED UPON THE FOREGOING, THE LOCAL LICENSING AUTHORITY HEREBY ORDERS that the application of Canela Coffee and Pastry Shop LLC for a new Beer and Wine License is hereby GRANTED.

DATED this JUNE 12, 2024

LOCAL LIQUOR LICENSING AUTHORITY  
TOWN OF EAGLE

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Erik Johnson, Hearing Officer

ATTEST:

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Jenny Rakow, Town Clerk



**MEETING MINUTES**  
**Liquor License Authority**  
**Thursday, May 16, 2024**  
**Public Meeting Room / Eagle Town Hall**  
**200 Broadway Eagle, CO**

*This agenda and the meetings can be viewed at [www.Townofeagle.org](http://www.Townofeagle.org).*

*Times listed are approximate and are subject to change.*

1. *This was an in-person meeting using Teams. Please note: All participants must remain muted until they are requested to speak. This will reduce background noise disruptions to the meeting attendees. When it's your turn to speak, you will have three (3) minutes for public comment.*

**CALL TO ORDER - 11:00 AM**

The Liquor License Authority, presided by Erik Johnson, as the Administrative Hearing Officer, was called to order at 11:00 a.m.

1. Request for Modification of Premises, Capitol Public House LLC dba Capitol Public House CUT Meat + Seafood  
Erik Johnson opened the Public Hearing and requested public comment.

There was no public comment and no written public comments were submitted.

Applicant Casey Glowacki was present and provided a brief overview of the modification and its intended purpose.

The application was Approved.

2. Report of Changes Application, Change of Trade Name - Kum & Go 978  
Erik Johnson opened the Public Hearing and requested public comment.

There was no public comment and no written public comments were submitted.

The applicant was not requested to be present.

The application was Approved.

**REGULAR BUSINESS**

1. Approval of Minutes from April 2, 2024  
The minutes from the April 2, 2024 Liquor License Authority were approved.

**ADJOURN - 11:15 AM**

The meeting was adjourned at 11:15 a.m.

Date:

\_\_\_\_\_  
Erik Johnson, Hearing Officer

\_\_\_\_\_  
Jenny Rakow, CMC Town Clerk