



KATHLEEN NEEL, CLERK & RECORDER

LIQUOR LICENSING

(970) 453-3472

Summit County Government

208 East Lincoln Ave. | P.O. Box 1538

Breckenridge, CO 80424

liquorlicensing@summitcountyco.gov

LIQUOR LICENSE REVIEW

Licensee Organization: Spoon Café LLC
Establishment Name (DBA): Spoon Café
Physical Address: 195 River Run Road Keystone, CO 80435
Mailing Address: P.O. Box 877 Dillon, CO 80435
Licensee Name/Representative/Agent: Meir Zuchman
New Registered Manager Applicant: Meir Zuchman
Date of Application: December 27, 2019

INDIVIDUAL	PARTNERSHIP	CORPORATION	LLC
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RENEWAL	NEW	TRANSFER	MODIFICATION
TASTINGS PERMIT	MANAGER REGISTRATION	ADDITION OF RELATED FACILITY	TRADE NAME CHANGE

HOTEL AND RESTAURANT	FERMENTED MALT BEVERAGE - OFF
TAVERN	RESORT COMPLEX
BEER AND WINE	LIQUOR STORE

STAFF COMMENTS:

SHERIFF'S OFFICE COMMENTS:

See attached approval letter.

CLERK & RECORDER COMMENTS:

Complete application and proper fees submitted.

BOCC INFORMATION:

LOCAL LICENSING AUTHORITY:

Summit County Board of Commissioners

MEETING AGENDA DATE:

Tuesday, January 14, 2020

Submit to Local Licensing Authority

Fees Due		
Renewal Fee		
Storage Permit	\$100 X _____	\$
Sidewalk Service Area	\$75.00	\$
Additional Optional Premise Hotel & Restaurant	\$100 X _____	\$
Related Facility - Campus Liquor Complex	\$160.00 per facility	\$
Amount Due/Paid		\$

Make check payable to: Colorado Department of Revenue. The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department may collect the payment amount directly from your banking account electronically.

Retail Liquor or Fermented Malt Beverage License Renewal Application

Please verify & update all information below

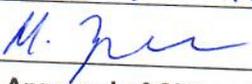
Return to city or county licensing authority by due date

Licensee Name SPOON CAFE LLC		Doing Business As Name (DBA) SPOON CAFE		
Liquor License # 42-58440-0000	License Type H + R	Sales Tax License # 0A258440-0000	Expiration Date 2/12/20	Due Date 12/29/19
Business Address 195 RIVER RUN ROAD, KEYSTONE, COLORADO 80435			Phone Number 970-468-9394	
Mailing Address P.O. BOX 877, DILLON, CO 80435				
Operating Manager MEIR ZUCHMAN				

- Do you have legal possession of the premises at the street address above? Yes No
 Are the premises owned or rented? Owned Rented* *If rented, expiration date of lease **1/30/21**
- Are you renewing a storage permit, additional optional premises, sidewalk service area, or related facility? If yes, please see the table in upper right hand corner and include all fees due. Yes No
- 3a. Since the date of filing of the last application, 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
- 3b. Since the date of filing of the last application, 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.? Yes No
4. Since the date of filing of the last application, has there been any change in financial interest (new notes, loans, owners, etc.) or organizational structure (addition or deletion of officers, directors, managing members or general partners)? If yes, explain in detail and attach a listing of all liquor businesses in which these new lenders, owners (other than licensed financial institutions), officers, directors, managing members, or general partners are materially interested. Yes No
5. Since the date of filing of the last application, has the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) been convicted of a crime? If yes, attach a detailed explanation. Yes No
6. Since the date of filing of the last application, has the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) been denied an alcohol beverage license, had an alcohol beverage license suspended or revoked, or had interest in any entity that had an alcohol beverage license denied, suspended or revoked? If yes, attach a detailed explanation. Yes No
7. Does the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) have a direct or indirect interest in any other Colorado liquor license, including loans to or from any licensee or interest in a loan to any licensee? If yes, attach a detailed explanation. Yes No

Affirmation & Consent

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.

Type or Print Name of Applicant/Authorized Agent of Business	Title
NEIL ZUCHMAN	PRESIDENT
Signature	Date
	10/20/19

Report & Approval of City or County Licensing Authority

The foregoing application has been examined and the premises, business conducted and character of the applicant are satisfactory, and we do hereby report that such license, if granted, will comply with the provisions of Title 44, Articles 4 and 3, C.R.S., and Liquor Rules. **Therefore this application is approved.**

Local Licensing Authority For	Date
Signature	Title
	Attest



OFFICE OF THE SUMMIT COUNTY SHERIFF

SHERIFF

Jaime FitzSimons

UNDERSHERIFF

Joel Cochran

DIVISION COMMANDERS

Commander Mike Schilling –
Operations
Commander David Bertling –
Detentions
Director Brian Bovaird-
Emergency Manager
Director Lesley Hall-
Animal Control & Shelter

ADMINISTRATION

Cristina Cevallos
Teri Furl
Erin Opsahl

CIVIL

Diana Tilley
David Wiegand

RECORDS

Mary White
Cassie Klausner
Carol Rafferty

PATROL SUPERVISORS

Lieutenant Tom Whelan
Sr. Sgt. Dave Martinez
Sgt. Daric Gutzwiller
Sgt. Mark Gafari

JAIL SUPERVISORS

Lieutenant Cynthia Gilbert
Lieutenant Sylvia Simms
Sr. Sgt. Ron Hochmuth
Sgt. Brian Hyde
Sgt. John Velasquez

INVESTIGATIONS

Sgt. Robert Pearce

SPECIAL OPERATIONS

Sgt. Mark Watson

**ANIMAL CONTROL and
SHELTER**

Meg Leroux
Jesslyn Swirka

*'Professionally Serving Our
Community Since 1861''*

DATE: December 30, 2019

TO: Office of the Clerk & Recorder

RE: Establishment Application for Liquor License

The Summit County Sheriff's Office has completed a background check on:

Applicant: Spoon Café LLC

DBA: Spoon Cafe

License Type: Hotel & Restaurant

195 River Run Road

Keystone, CO 80435

We have no record of negative information on the above establishment.

The Summit County Sheriff's Office recommendation is:

No reason found to disapprove this establishment at this time.

Disapproval

Area of Concern

Cassie Klausner
Records Clerk

Joel Cochran
UnderSheriff