



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 - MODIFICATION

Licensee Organization: Powdr-Copper Mountain LLC
Establishment Name (DBA): Copper Mountain Resort
Physical Address: 209 Ten Mile Circle Copper Mountain, CO 80443
Mailing Address: P.O. Box 3117 Frisco, CO 80443
Licensee Name/Representative/Agent: Greg Neumann
Date of Application: March 11, 2020
Type of License: Resort Complex
Type of Modification Sought: Manager Registration
Current Registered Manager: Jay Edwards
New Registered Manager: Greg Neumann

STAFF COMMENTS:

SHERIFF'S OFFICE COMMENTS:

See attached letter, no concerns.

CLERK & RECORDER COMMENTS:

Complete application and proper fees submitted.

BOCC INFORMATION:

LOCAL LICENSING AUTHORITY:

Summit County Board of Commissioners

MEETING AGENDA DATE:

Tuesday, April 14, 2020

Permit Application and Report of Changes

Current License Number 42-77540-0042
All Answers Must Be Printed in Black Ink or Typewritten
Local License Fee \$ 75.00

1. Applicant is a <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Limited Liability Company	Present License Number <u>42-77540-0042</u>
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2. Name of Licensee <u>POWDER-COPPER MOUNTAIN LLC</u>	3. Trade Name <u>COPPER MOUNTAIN RESORT</u>
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4. Location Address <u>209 TEN MILE CIRCLE</u>		
City <u>COPPER MOUNTAIN</u>	County <u>SUMMIT</u>	ZIP <u>80443</u>

SELECT THE APPROPRIATE SECTION BELOW AND PROCEED TO THE INSTRUCTIONS ON PAGE 2.

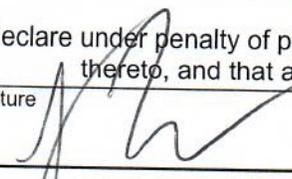
Section A – Manager reg/change	Section C
• License Account No. <u>42-77540-0042</u> <input type="checkbox"/> Manager's Registration (Hotel & Restr.).....\$75.00 <input type="checkbox"/> Manager's Registration (Tavern).....\$75.00 <input type="checkbox"/> Manager's Registration (Lodging & Entertainment).....\$75.00 <input checked="" type="checkbox"/> Change of Manager (Other Licenses pursuant to section 44-3-301(8), C.R.S.) NO FEE	<input type="checkbox"/> Retail Warehouse Storage Permit (ea).....\$100.00 <input type="checkbox"/> Wholesale Branch House Permit (ea) 100.00 <input type="checkbox"/> Change Corp. or Trade Name Permit (ea) 50.00 <input type="checkbox"/> Change Location Permit (ea)..... 150.00 <input type="checkbox"/> Change, Alter or Modify Premises \$150.00 x _____ Total Fee _____ <input type="checkbox"/> Addition of Optional Premises to Existing H/R \$100.00 x _____ Total Fee _____ <input type="checkbox"/> Addition of Related Facility to an Existing Resort or Campus Liquor Complex \$160.00 x _____ Total Fee _____ <input type="checkbox"/> Campus Liquor Complex Designation No Fee <input type="checkbox"/> Sidewalk Service Area \$75.00
Section B – Duplicate License	
• Liquor License No. _____ <input type="checkbox"/> Duplicate License \$50.00	

Do Not Write in This Space – For Department of Revenue Use Only

Date License Issued	License Account Number	Period

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 of Revenue may collect the payment amount directly from your bank account electronically.	TOTAL AMOUNT DUE \$ _____ .00
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Change of Manager	<p>8. Change of Manager or to Register the Manager of a Tavern, Hotel and Restaurant, Lodging & Entertainment liquor license or licenses pursuant to section 44-3-301(8).</p> <p>(a) Change of Manager (attach Individual History DR 8404-I H/R, Tavern and Lodging & Entertainment only) Former manager's name <u>JAY EDWARDS</u> New manager's name <u>GREG NEUMANN</u></p> <p>(b) Date of Employment <u>10/31/2011</u> Has manager ever managed a liquor licensed establishment? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Does manager have a financial interest in any other liquor licensed establishment? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, give name and location of establishment _____</p>
Modify Premises or Addition of Optional Premises, Related Facility, or Sidewalk Service Area	<p>9. Modification of Premises, Addition of an Optional Premises, Addition of Related Facility, or Addition of a Sidewalk Service Area</p> <p>NOTE: Licensees may not modify or add to their licensed premises until approved by state and local authorities.</p> <p>(a) Describe change proposed _____ _____ _____</p> <p>(b) If the modification is temporary, when will the proposed change: Start _____ (mo/day/year) End _____ (mo/day/year) NOTE: THE TOTAL STATE FEE FOR TEMPORARY MODIFICATION IS \$300.00</p> <p>(c) Will the proposed change result in the licensed premises now being located 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? (If yes, explain in detail and describe any exemptions that apply) Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>(d) Is the proposed change in compliance with local building and zoning laws? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>(e) If this modification is for an additional Hotel and Restaurant Optional Premises has the local authority authorized by resolution or ordinance the issuance of optional premises? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>(f) Attach a diagram of the current licensed premises and a diagram of the proposed changes for the licensed premises.</p> <p>(g) Attach any existing lease that is revised due to the modification.</p> <p>(h) For the addition of a Sidewalk Service Area per Regulation 47-302(A)(4), include 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.</p>
Campus Liquor Complex Designation	<p>10. Campus Liquor Complex Designation</p> <p>An institution of higher education or a person who contracts with the institution to provide food services</p> <p>(a) I wish to designate my existing _____ Liquor License # _____ to a Campus Liquor Complex Yes <input type="checkbox"/> No <input type="checkbox"/></p>
Additional Related Facility	<p>11. Additional Related Facility</p> <p>To add a Related Facility to an existing Resort or Campus Liquor Complex, include the name of the Related Facility and include the address and an outlined drawing of the Related Facility Premises.</p> <p>(a) Address of Related Facility _____</p> <p>(b) Outlined diagram provided Yes <input type="checkbox"/> No <input type="checkbox"/></p>

Oath of Applicant		
I declare under penalty of perjury in the second degree that I have read the foregoing application and all attachments thereto, and that all information therein is true, correct, and complete to the best of my knowledge		
Signature 	Title FOOD AND BEVERAGE DIRECTOR	Date 3/6/20
Report and Approval of LOCAL Licensing Authority (CITY / COUNTY)		
The foregoing application has been examined and the premises, business conducted and character of the applicant is satisfactory, and we do report that such permit, if granted, will comply with the applicable provisions of Title 44, Articles 4 and 3, C.R.S., as amended. Therefore, This Application is Approved.		
Local Licensing Authority (City or County)		Date filed with Local Authority
Signature	Title	Date
Report of STATE Licensing Authority		
The foregoing has been examined and complies with the filing requirements of Title 44, Article 3, C.R.S., as amended.		
Signature	Title	Date



Clerk & Recorder

AFFIDAVIT REGARDING SOURCE OF FUNDS

I, GREG NEUMANN, HEREBY CERTIFY THAT I HAVE INVESTED
\$ [REDACTED], IN THE BUSINESS OF COPPER MOUNTAIN RESORT.
THE SOURCE OF MY INVESTMENT IS FROM N/A.

(attach a copy of any notes, loans, bank statements or personal documents to document and verify the above information.)

Signature: [Handwritten Signature]
Date: 3/6/20

State of Colorado)
)
County of Summit)

Subscribed and sworn to before me this 13th day of march, 20 20.

My commission expires: 11/16/2020

[Handwritten Signature]
Notary Public

KELLY RENOUX
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 20004013909
COMMISSION EXPIRES NOV. 16, 2020



Kathleen Neel, Clerk & Recorder
LIQUOR LICENSING

208 East Lincoln Ave. | PO Box 1538
Breckenridge, CO 80424

AUTHORIZATION TO RELEASE INFORMATION

As an applicant for a Liquor License in Summit County, Colorado, I am required to furnish information regarding my background and general character. In this regard, I hereby authorize the Summit County Colorado Board of County Commissioners or their representatives to make appropriate inquiries of the Summit County Sheriff's Office, pursuant to C.R.S. 44-3-307 regarding my "good moral character" and specifically, my criminal justice history (if any) in their records. I also authorize the Sheriff's Office to release to the County representative any and all information that they may have concerning me, including information of a confidential or privileged nature, in connection with my liquor license application. I hereby release Summit County, its officers and employees from any liability or damage which may result from obtaining and/or furnishing this information in connection with my liquor license application. I declare, under penalty of perjury in the second degree, that the attached Liquor License application and all attachments are true, correct, and complete to the best of my knowledge.



Applicant Signature

GREG NEUMANN

Applicant Printed Name

3/6/20

Date

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

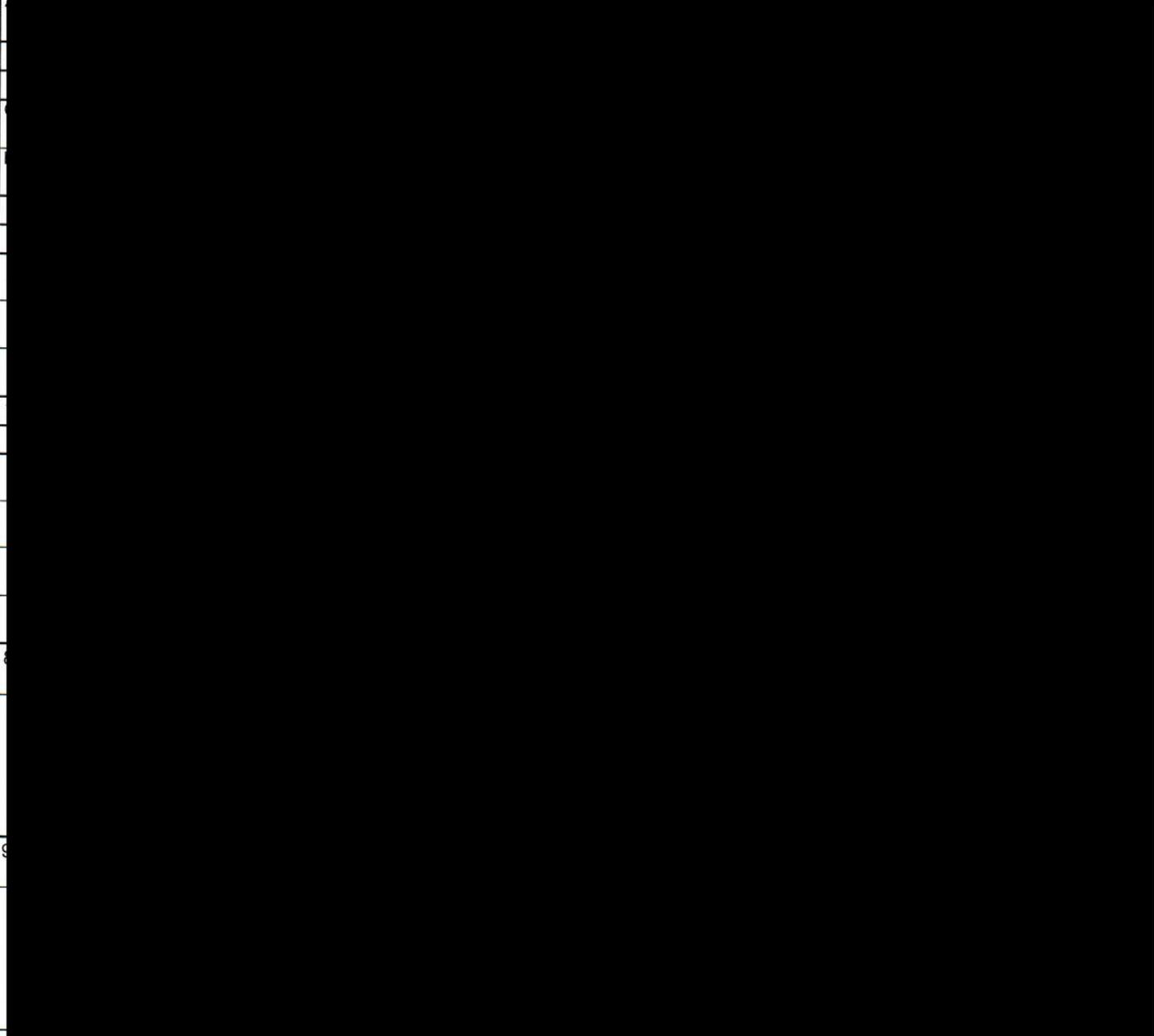
Notice: This individual history record requires information that is necessary for the licensing investigation or inquiry. All questions must be answered in their entirety or the license application may be delayed or denied. If a question is not applicable, please indicate so by "N/A". **Any deliberate misrepresentation or material omission may jeopardize the license application.** (Please attach a separate sheet if necessary to enable you to answer questions completely)

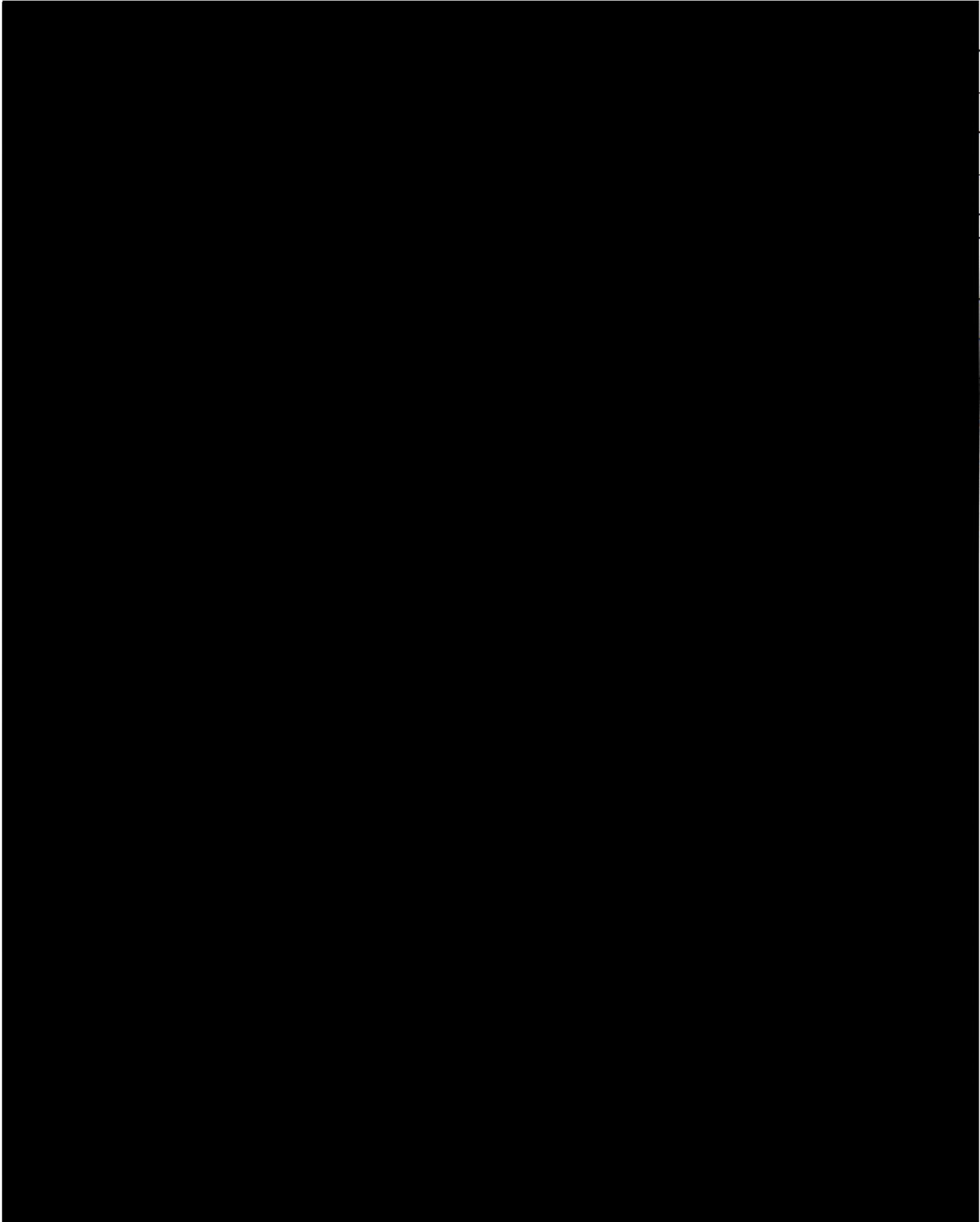
1. Name of Business

COPPER MOUNTAIN R.

2. Your Full Name (last, first, middle)

NEUMANN, GREGORY





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

GREG NEUMANN

Title

F+B DIRECTOR

Date

3/10/20



Biometric Identification and Records Unit
690 Kipling Street, Suite 4000
Lakewood, CO 80215

DATE 03/12/2020

SUMMIT COUNTY CLERK & RECORDER
208 E LINCOLN AVE PO BOX 1538
BRECKENRIDGE, CO 80424

RE: NEUMANN, GREGORY [REDACTED]

DATE OF BIRTH: [REDACTED]

No Colorado record of arrest has been located based on above name and date of birth or through a search of our fingerprint files.

The Colorado Bureau of Investigation's database contains detailed information of arrest records based upon fingerprints provided by Colorado law enforcement agencies. Arrests which are not supported by fingerprints will not be included in this database. On occasion the Colorado criminal history will contain disposition information provided by the Colorado Judicial system. Additionally, warrant information, sealed records, and juvenile records are not available to the public.

Since a record may be established after the time a report was requested, the data is only valid as of the date issued. Therefore, if there is a subsequent need for the record, it is recommended another check be made.

Falsifying or altering this document with the intent to misrepresent the contents of the record is prohibited by law and may be punishable as a felony when done with intent to injure or defraud any person.

Sincerely,
John Camper, Director
Colorado Bureau of Investigation



CIVIL APPLICANT RESPONSE

ICN E2020072000000131301 [REDACTED] A CONCJ4367

[REDACTED]
[REDACTED] COLORADO B OF I
DENVER CO 2020/03/12
A SEARCH OF THE FINGERPRINTS ON THE ABOVE
INDIVIDUAL HAS REVEALED NO PRIOR ARREST
DATA. CJIS DIVISION
2020/03/12 FEDERAL BUREAU OF INVESTIGATION

COCBI0000
CO BUREAU OF INVEST
COLORADO CRIME INFO CTR
STE 3000
690 KIPLING ST
DENVER, CO 80215-8001



OFFICE OF THE SUMMIT COUNTY SHERIFF

SHERIFF

Jaime FitzSimons

UNDERSHERIFF

Joel Cochran

DIVISION COMMANDERS

Commander Peter Haynes –
Operations
Commander David Bertling –
Detentions
Director Lesley Hall-
Animal Control & Shelter

ADMINISTRATION

Cristina Cevallos
Teri Furl
Erin Opsahl

CIVIL**RECORDS**

Mary White
Cassie Klausner
Carol Rafferty

PATROL SUPERVISORS

Lieutenant Tom Whelan
Sr. Sgt. Dave Martinez
Sgt. Mark Gafari
Sgt. Jake Straw

JAIL SUPERVISORS

Lieutenant Cynthia Gilbert
Lieutenant Sylvia Simms
Sr. Sgt. Ron Hochmuth
Sgt. John Velasquez
Sgt. Dustin Roth
Sgt. Robin Kintz

INVESTIGATIONS

Sgt. Robert Pearce

SPECIAL OPERATIONS

Sgt. Mark Watson

**ANIMAL CONTROL and
SHELTER**

Meg Leroux
Jesslyn Swirka

*‘Professionally
Serving Our
Community Since
1861’*

DATE: March 26, 2020

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: Powdr-Copper Mountain LLC

DBA: Copper Mountain Resort

License Type: Resort Complex

New manager Name: Gregory [REDACTED] Neumann
[REDACTED]

209 Ten Mile Circle

Copper Mountain, CO 80443

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

Cassie Klausner
Records Clerk

Joel Cochran

Joel Cochran
Undersheriff