



**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 - RENEWAL**

**Licensee Organization:** The Pour House Dillon LLC  
**Establishment Name (DBA):** The Pour House Dillon  
**Physical Address:** 40 Cove Boulevard Unit #B4 Dillon, CO 80435  
**Mailing Address:** 2505 Willow Lane Lakewood, CO 80215  
**Licensee Name/Representative/Agent:** Linda Schmehl  
**Date of Application:** June 24, 2020  
**Type of License:** Tavern  
**Registered Manager:** Linda Schmehl

**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, July 14, 2020

**Submit to Local Licensing Authority**

Fees Due	
Renewal Fee	\$ 500
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	\$ -
<b>Amount Due/Paid</b>	<b>\$ 500</b>

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 <i>The Pour House Dillon LLC</i>		Doing Business As Name (DBA) <i>The Pour House Dillon</i>	
Liquor License # <i>0312314</i>	License Type <i>Tavern</i>	Sales Tax License # <i>30307520</i>	Expiration Date <i>9/11/2020</i>
Business Address <i>40 Cove Blvd # BT, Dillon CO 80435</i>			Due Date <i>7/28/2020</i>
Mailing Address <i>2505 Willow Lane, Lakewood, CO 80215</i>		Email <i>thepourhouseco@gmail.com</i>	
Operating Manager <i>LINDA Schmehl</i>	Date of Birth	Home Address	Phone Number
1. Do you have legal possession of the premises at the street address above? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Are the premises owned or rented? <input type="checkbox"/> Owned <input checked="" type="checkbox"/> Rented* *If rented, expiration date of lease <i>6/30/2025</i>			
2. 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

<b>Affirmation &amp; Consent</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.		
Type or Print Name of Applicant/Authorized Agent of Business	Title	
LINDA Schmeil	owner	
Signature	Date	
<i>Linda Schmeil</i>	6/19/2020	
<b>Report &amp; Approval of City or County Licensing Authority</b>		
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.		
<b>Therefore this application is approved.</b>		
Local Licensing Authority For	Date	
Signature	Title	Attest

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

I, LINDA Schmehl am signing this Tax Check Authorization, Waiver and Request to Release Information (hereinafter "Waiver") on behalf of The Pour House Dillon, LLC (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) <u>LINDA Schmehl / The Pour House Dillon, LLC</u>		Social Security Number/Tax Identification Number [REDACTED]
Address [REDACTED]		
Home Phone Number [REDACTED]	Business/Work Phone Number <u>970-368-6416</u>	
Printed name of person signing on behalf of the Applicant/Licensee <u>Linda Schmehl</u>		
Applicant/Licensee's Signature (Signature authorizing the disclosure of confidential tax information) <u>Linda Schmehl</u>		Date signed <u>6/19/2020</u>

### 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).



# 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 Furll  
Erin Opsahl

**CIVIL**  
Kenneth Wu

**RECORDS**  
Mary White  
Cassie Klausner

**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: June 25, 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: The Pour House Dillon LLC  
DBA: The Pour House Dillon  
License Type: Tavern  
40 Cove Boulevard Unit #B4  
[Unincorporated] Dillon, 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  
Cassie Klausner  
Records Clerk

Joel Cochran  
Joel Cochran  
Undersheriff