

**DOCUMENT CHECKLIST  
LIMITED LIABILITY COMPANY  
AND  
CORPORATE REPORT OF CHANGES**

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**APPLICATION**

- \_\_\_\_\_ Limited Liability Company and Corporate Report of Changes (DR 8177).
- Attach Certificate of Incorporation or Certificate of Good Standing dated within the last two years.
  - Date Stamped Articles of Incorporation dated within the last two years.
  - Attach Certificate of Authority (if foreign corporation).
  - Complete all appropriate sections.
  - Sign application.
  - Attach separate sheets, if necessary.
  - Attach documents showing changes (i.e. corporate minutes, updated operating agreement).

**BACKGROUND INFORMATION**

Background information must be submitted for all stockholders with a 10% (or greater) ownership interest, as well as all officers, directors, and managing members.

- \_\_\_\_\_ Individual History Record (DR8404-I)
- Complete all sections plus attachment.
  - Attach copies of all notes or loans used in or for this business.
- \_\_\_\_\_ Fingerprints (one card per individual-see Fingerprinting Instructions).
- \_\_\_\_\_ Business check or money order payable to the "Colorado Bureau of Investigation" (see Fingerprinting Instructions).

**OR**

- \_\_\_\_\_ "Master File Letter" issued by the Colorado Liquor Enforcement Division.

**FEE SCHEDULE**

- \_\_\_\_\_ Check or money order in the amount of \$100 per individual (requiring background investigation) payable to the "City of Fort Collins".

**These applications are approved administratively.**

Aimee Jensen, Deputy City Clerk  
City Clerk's Office  
300 LaPorte Avenue  
P.O. Box 580  
Fort Collins CO 80522  
Voice (970) 221-6315  
Fax (970) 221-6295  
[ajensen@fcgov.com](mailto:ajensen@fcgov.com)

**PLEASE SCHEDULE  
AN APPOINTMENT  
TO SUBMIT YOUR  
APPLICATION**

**LIMITED LIABILITY COMPANY AND  
 CORPORATE REPORT OF CHANGES  
 Liquor and 3.2 Beer Licenses**

Submit to Local Authority (Local Authority will submit to State)

(2355)  LLC

\$100 PER MEMBER FOR BACKGROUND INV.

(2350)  CORPORATION

\$100 PER PRINCIPLE FOR BACKGROUND INV.

DO NOT WRITE IN THIS SPACE

1. Corporate/L.L.C. Name		2. State Tax Account Number		3. State Liquor License Number	
4. Trade Name				5. Telephone Number	
6. Address of Licensed Premises		City	State	ZIP Code	
7. Mailing Address if different than above		City	State	ZIP Code	

8. LIST ALL officers, directors (corporation) or Managing Members (L.L.C.). Attach a certificate of designation (good standing) and each officer, director or manager MUST FILL OUT a DR 8404-I (Individual History Record).

Position Held	Names of ALL Officers, Directors or Managing Members	Home Address	DOB	Replaces

9. LIST ALL 10% (or more) Stockholders or 10% (or more) Members. All 10% (or more) stockholders and members MUST also fill out DR 8404-I (Individual History Record).

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

10. Registered Agent	Address For Service

**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.*

11. Authorized Signature	Title	Date

**REPORT OF LOCAL LICENSING AUTHORITY**  
 The foregoing changes have been received and examined by the Local Licensing Authority.

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

**DO NOT WRITE IN THIS SPACE – FOR DEPARTMENT OF REVENUE USE ONLY**

LIABILITY INFORMATION			
License Account Number	Period	Cash Fund	TOTAL
		-100 (999)	