



DISTRICT ONE OFFICE

Alcohol and Tobacco Enforcement

144 N. Mason Suite 1, Fort Collins. CO 80524

PHONE 970-416-2940

MEMORANDUM

DATE: December 19th, 2015

TO: Liquor License Applicant

FROM: Fort Collins Police Services - Alcohol/Tobacco Enforcement

RE: **Disclosure of Criminal History in "Individual History Record"**

The following memorandum is in reference to the Individual History Record section of your application, specifically Questions 9 – 12. Please read the memorandum carefully and in its entirety.

Fort Collins Police Services conducts background investigations on behalf of the Fort Collins City Clerk's Office and the City of Fort Collins Liquor Licensing Authority. These background investigations are conducted in conjunction with the submittal of your fingerprints to the Colorado Bureau of Investigation. You have agreed to undergo a background investigation of your criminal history by applying for a Liquor License within the Fort Collins city limits.

You will be subject to the inquiry of several law enforcement agencies, law enforcement databases, national and local criminal history reports, in addition to other pertinent records. As a result of the background investigation, Fort Collins Police Services will complete a memorandum to the Liquor Licensing Authority regarding their findings. The purpose of the background investigation and the memorandum is solely to determine if you are of good moral character, record and reputation to obtain a Liquor License, or be listed on a Liquor License, in the City of Fort Collins as defined in Colorado Liquor Rules, Regulation 47-310(E).

Even though Question 10 states to disclose convictions, suspended sentences, deferred sentences, or pending charges, Fort Collins Police Services asks you to include additional information to aide in the background investigation process. To expedite the application process and minimize unnecessary delays, Fort Collins Police Services requests that applicants disclose the following information:

- Arrests (regardless of court disposition)
- Municipal, County, Misdemeanor, or Felony level offenses where you received a ticket, citation or were arrested
- Receiving a ticket for any of the following Traffic Offenses:
 - Reckless Driving
 - DUI or DWAI or any of the preceding involving drugs
 - DUI Per Se
 - Vehicular Assault
 - Vehicular Homicide
 - Vehicular Eluding
 - Driving Under Suspension/Revocation/Cancelled/Denied
 - Ever being considered a "Habitual Traffic Offender"
 - Failed to Remain at the Scene of an Accident (Hit-and-Run)

The background investigation Fort Collins Police Services conducts will yield all of the above listed information, regardless of the court disposition. You are encouraged to divulge the above information *regardless of whether or not the court sealed, dismissed, or amended the original charge*. If the original charge was amended, please indicate what the original and final charges were on your Individual History Record. Although an application cannot be denied solely upon findings of a sealed court record, Fort Collins Police can discover and present sealed court records to the Liquor Licensing Authority for its consideration pursuant to Colorado Revised Statute 24-72-703(4). . It is strongly suggested you include sealed court documents in the Individual History Record portion of the application, because Fort Collins Police can generally not determine the outcome of a court disposition, or whether a record has been sealed from completion of the background investigation alone. **By withholding information from your application, you will cause unnecessary delays in the processing of your application. You may be asked to provide an explanation to the Liquor Licensing Authority for omitting information in your Individual History Record.**

Fort Collins Police Services and the Liquor Licensing Authority look favorably upon an applicant being as forthright as possible and disclosing as much pertinent information as possible in the Individual History Record. Please consider this as you complete your application.

All background information, the information you submitted in your Individual History Record, and the fingerprint cards being submitted to the Colorado Bureau of Investigation will be cross referenced against one another for consistency.

If you have questions about what to include in an Individual History Record or questions about the background investigation, please contact Aimee Jensen with the City of Fort Collins Clerk's Office at ajensen@fcgov.com or the Alcohol/Tobacco Enforcement Officer at alcoholenforcement@fcgov.com

Officer David Lindsay / FC260
Alcohol / Tobacco Enforcement Officer
Fort Collins Police Services

District One Office
144 N Mason St Suite 1
Fort Collins, Co 80522
ph 970-416-2634
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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

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|--|---|----------------------|-------------------------|
| 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 | Home Phone Number | Cellular Number | |
| 2. Your Full Name (last, first, middle) | 3. List any other names you have used | | |
| 4. Mailing address (if different from residence) | Email Address | | |
| 5. List current residence address. Include any previous addresses within the last five years. (Attach separate sheet if necessary) | | | |
| | | | |
| Street and Number | City, State, Zip | From | To |
| Current | | | |
| Previous | | | |
| 6. List all employment within the last five years. Include any self-employment. (Attach separate sheet if necessary) | | | |
| | | | |
| Name of Employer or Business | Address (Street, Number, City, State, Zip) | Position Held | From |
| | | | |
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| | | | |
| 7. List the name(s) of relatives working in or holding a financial interest in the Colorado alcohol beverage industry. | | | |
| | | | |
| Name of Relative | Relationship to You | Position Held | Name of Licensee |
| | | | |
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| | | | |
| 8. Have you ever applied for, held, or had an interest in a Colorado Liquor or Beer License, or loaned money, furniture, fixtures, equipment or inventory to any licensee? (If yes, answer in detail.) <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| | | | |
| | | | |
| 9. Have you ever received a violation notice, suspension, or revocation for a liquor law violation, or have you applied for or been denied a liquor or beer license anywhere in the United States? (If yes, explain in detail.) <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
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10. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending? (If yes, explain in detail.) Yes No

11. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? (If yes, explain in detail.) Yes No

12. Have you ever had any professional license suspended, revoked, or denied? (If yes, explain in detail.) Yes No

Personal and Financial Information

Unless otherwise provided by law, the personal information required in question #13 will be treated as confidential. The personal information required in question #13 is solely for identification purposes.

13a. Date of Birth b. Social Security Number c. Place of Birth d. U.S. Citizen Yes No

e. If Naturalized, state where f. When g. Name of District Court

h. Naturalization Certificate Number i. Date of Certification j. If an Alien, Give Alien's Registration Card Number k. Permanent Residence Card Number

l. Height m. Weight n. Hair Color o. Eye Color p. Gender q. Do you have a current Driver's License/ID? If so, give number and state.
 Yes No # _____ State _____

14. Financial Information.
 a. Total purchase price or investment being made by the applying entity, corporation, partnership, limited liability company, other.
 \$ _____

b. List the total amount of the **personal** investment, made by the person listed on question #2, in this business including any notes, loans, cash, services or equipment, operating capital, stock purchases or fees paid. \$ _____
*** If corporate investment only please skip to and complete section (d)**
**** Section b should reflect the total of sections c and e**

c. Provide details of the personal investment described in 14b. You must account for all of the sources of this investment. (Attach a separate sheet if needed)

| Type: Cash, Services or Equipment | Account Type | Bank Name | Amount |
|-----------------------------------|--------------|-----------|--------|
| | | | |
| | | | |
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| | | | |

d. Provide details of the corporate investment described in 14 (a). You must account for all of the sources of this investment. (Attach a separate sheet if needed)

| Type: Cash, Services or Equipment | Loans | Account Type | Bank Name | Amount |
|-----------------------------------|-------|--------------|-----------|--------|
| | | | | |
| | | | | |
| | | | | |

e. Loan Information (Attach copies of all notes or loans)

| Name of Lender | Address | Term | Security | Amount |
|----------------|---------|------|----------|--------|
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| | | | | |

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 Title Date

AUTHORIZATION AND CONSENT TO RELEASE INFORMATION

Name: _____ Date of Birth: _____
 (Last) (First) (Middle)

I do hereby authorize a review and full disclosure of all records specified below, or any part thereof, concerning myself, by and to ANY duly authorized employee of the City of Fort Collins Police Services Department, whether the said records are of public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of a) the records of financial or credit institutions, including records of deposit, withdrawals, balances, loans, and also records of commercial or retail credit agencies; b) real and personal property tax statements and records, and other financial statements and records wherever filed; c) records of complaint, arrest, trial, and/or convictions for alleged or actual violations of the law, including criminal, civil and/or traffic records wheresoever located.

I understand that all information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for licensing by the Police Services Department and by the Fort Collins Local Licensing Authority. I further authorize the City of Fort Collins and its Local Licensing Authority to discuss, in a public forum, any and all findings regarding my financial, moral, educational, and character qualifications. I understand that any information or records obtained by the City may become public records available upon request by the public.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents, employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request.

A photocopy of this signed authorization form will be considered valid as an original hereof.

MUST BE SIGNED IN THE PRESENCE OF A NOTARY

Signature Date

State of _____)
)ss.
 County of _____)

Subscribed and sworn to before me this ___ day of _____, _____.

Notary Public

My Commission Expires