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Colorado Beer and Wine License Application

This application only applies to Fermented Malt Beverage On-Premises, Fermented Malt Beverage On/Off-Premises, and Fermented Malt Beverage and Wine Retailer.

7. Is the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers under the age of twenty-one years?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>		
8. Has the applicant (including any of the partners if a partnership; members or managers if a limited liability company; or officers, stockholders or directors if a corporation) or managers ever (in Colorado or any other state): (a) been denied an alcohol beverage license? <input type="checkbox"/> <input checked="" type="checkbox"/> (b) had an alcohol beverage license suspended or revoked? <input checked="" type="checkbox"/> <input type="checkbox"/> (c) had interest in another entity that had an alcohol beverage license suspended or revoked? <input type="checkbox"/> <input checked="" type="checkbox"/>				
If you answered yes to 8a, b or c, explain in detail on a separate sheet <i>See attachment</i>				
9. Has the premises to be licensed been denied within the preceding one year? If "yes," explain in detail.	<input type="checkbox"/> <input checked="" type="checkbox"/>			
10. Is the proposed Fermented Malt Beverage and Wine Retailer license within 500 feet of any public or parochial school, the principal campus of any college, university, or seminary? NOTE: The distances are to be computed using the methods outlined under C.R.S. 44-3-313(1)(d)(II). Some limited exceptions apply under C.R.S. 44-3-313.	<input type="checkbox"/> <input checked="" type="checkbox"/>			
11. Is the proposed Fermented Malt Beverage and Wine Retailer license, or On/Off premises license, within 500 feet of a Retail Liquor Store licensed under section 44-3-409 C.R.S.? Distance should be determined using guidelines outlined in 44-3-301(12)(c) C.R.S.	<input type="checkbox"/> <input checked="" type="checkbox"/>			
12. Are you applying for a Fermented Malt Beverage On and Off Premises License? If yes, answer subparts a and b. If No, go to question 13. (a) The FMB On/Off is located in a county with a population of > 35,000. <i>N/A</i> <input type="checkbox"/> <input checked="" type="checkbox"/> (b) The FMB On/Off is located in an "underserved area" within a county with population of < 35,000 but lies outside of a municipal boundaries or is a city or town with population of > 75,500. <input type="checkbox"/> <input checked="" type="checkbox"/>				
Note - The population is determined from the recently available United States Census Bureau.				
13. Has a liquor or beer license ever been issued to the applicant (including any of the partners, if a partnership; members or manager if a limited liability company; or officers, stockholders or directors if a corporation)? If yes, identify the name of the business and list any current or former financial interest in said business including any loans to or from a licensee.	<i>See attachment</i> <input checked="" type="checkbox"/> <input type="checkbox"/>			
14. Does the applicant, as listed on line 2 of this application, have legal possession of the premises by virtue of ownership, lease or other arrangement? <input type="checkbox"/> Ownership <input checked="" type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____	<input type="checkbox"/> <input checked="" type="checkbox"/>			
a. If leased, list name of landlord and tenant, and date of expiration, EXACTLY as they appear on the lease:				
Landlord Cedar Lakewood LLC	Tenant Everyday Stores LLC	Expires 7/31/33		
b. Is a percentage of alcohol sales included as compensation to the landlord? If yes, complete question 13. <input type="checkbox"/> <input checked="" type="checkbox"/>				
c. Attach a diagram or designate the area to be licensed in black bold outline (including dimensions) which shows the bars, brewery, walls, partitions, entrances, exits and what each room shall be utilized for in this business. This diagram should be no larger than 8 1/2" X 11".				
15. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies) will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money from this business? Attach a separate sheet if necessary.				
Last Name N/A	First Name	Date of Birth	FEIN or SSN	Interest
Last Name	First Name	Date of Birth	FEIN or SSN	Interest
Attach copies of all notes and security instruments and any written agreement or details of any oral agreement, by which any person (including partnerships, corporations, limited liability companies, etc.) will share in the profit or gross proceeds of this establishment, and any agreement relating to the business which is contingent or conditional in any way by volume, profit, sales, giving of advice or consultation.				
16. Name of Manager(s) for all on premises applicants.				
Last Name Singh	First Name Avrinder	Date of Birth 10/16/86		
17. Does this manager act as the manager of, or have a financial interest in, any other liquor licensed establishment in the State of Colorado? If yes, provide name, type of license and account number. <input type="checkbox"/> <input checked="" type="checkbox"/>				

Application Documents Checklist and Worksheet

Instructions: This checklist should be utilized to assist applicants with filing all required documents for licensure. All documents must be properly signed and correspond with the name of the applicant **exactly**. All documents must be typed or legibly printed. Upon final State approval the license will be mailed to the local licensing authority. Application fees are nonrefundable.

Questions? Visit: SBG.Colorado.gov/Liquor for more information.

Items Submitted, Please Check all Appropriate Boxes Completed or Documents Submitted	
I.	Applicant Information <ul style="list-style-type: none"> <input checked="" type="checkbox"/> A. Applicant/Licensee identified <input checked="" type="checkbox"/> B. State sales tax license number listed or applied for at time of application <input checked="" type="checkbox"/> C. License type or other transaction identified <input checked="" type="checkbox"/> D. Submit originals to local authority <input checked="" type="checkbox"/> E. Additional information required by the local licensing authority
II.	Diagram of the Premises <ul style="list-style-type: none"> <input checked="" type="checkbox"/> A. No larger than 8 1/2" X 11" <input checked="" type="checkbox"/> B. Dimensions included (does not have to be to scale). Exterior areas should show control (fences, walls, etc.) <input checked="" type="checkbox"/> C. Separate diagram for each floor (if multiple levels) <input checked="" type="checkbox"/> D. Bold/Outlined licensed premises
III.	Proof of Property Possession (One Year Needed) <ul style="list-style-type: none"> <input type="checkbox"/> A. Deed in name of the applicant ONLY (or) (matching question #2) date stamped/filed with County Clerk <input checked="" type="checkbox"/> B. Lease in the name of the applicant ONLY (matching question #2) <input type="checkbox"/> C. Lease Assignment in the name of the applicant (ONLY) with proper consent from the Landlord and acceptance by the applicant <input type="checkbox"/> D. Other agreement if not deed or lease
IV.	Background Information (DR 8404-I) and Financial Documents <ul style="list-style-type: none"> <input checked="" type="checkbox"/> A. Individual History Record(s) (Form DR 8404-I) Complete DR 8404-I for each principal (individuals with more than 10% ownership, officers, directors, partners, members) <input checked="" type="checkbox"/> B. Fingerprints taken and submitted to the appropriate Local Licensing Authority through an approved state vendor. Master File applicants submit results to the State. Do not complete fingerprint cards prior to submitting your application. The Vendors are as follows: IdentGo – https://uenroll.identogo.com/ Phone: (844) 539-5539 (toll-free) Colorado Fingerprinting – http://www.coloradofingerprinting.com Appointment Scheduling Website: http://www.coloradofingerprinting.com/cabs/ Phone: (720) 292-2722 Toll Free: (833) 224-2227 Details about the vendors and fingerprinting in Colorado can be found on CBI's website here: https://cbi.colorado.gov/sections/biometric-identification-and-records-unit/employment-and-background-checks
V.	Sole Proprietor/Husband and Wife Partnership (if applicable) <ul style="list-style-type: none"> <input type="checkbox"/> A. Form DR 4679 <input type="checkbox"/> B. Copy of State Issued Driver's License or Identification Card for each Applicant
VI.	Corporate Applicant Information (If Applicable) <ul style="list-style-type: none"> <input type="checkbox"/> A. Certificate of Incorporation <input checked="" type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Certificate of Authorization if foreign corporation (out of state applicants only)
VII.	Partnership Applicant Information (If Applicable) <ul style="list-style-type: none"> <input type="checkbox"/> A. Partnership Agreement (general or limited). <input type="checkbox"/> B. Certificate of Good Standing
VIII.	Limited Liability Company Applicant Information (If Applicable) <ul style="list-style-type: none"> <input type="checkbox"/> A. Copy of Articles of Organization <input checked="" type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Copy of Operating Agreement (if applicable) <input type="checkbox"/> D. Certificate of Authorization if foreign LLC (out of state applicants only)

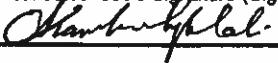
Tax Check Authorization, Waiver, and Request to Release Information

I, Harbans S. Lali am signing this Tax Check Authorization, Waiver and Request to Release Information (hereinafter "Waiver") on behalf of Everyday Stores 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) Everyday Stores LLC	Social Security Number/Tax Identification Number 81-4677220		
Address 4065 Ute Highway			
City Lyons	State CO	Zip 80540	
Home Phone Number	Business/Work Phone Number (303) 961-7306		
Printed name of person signing on behalf of the Applicant/Licensee Harbans S. Lali			
Applicant/Licensee's Signature (Signature authorizing the disclosure of confidential tax information) 		Date signed 9/14/23	

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).

EVERYDAY STORES LLC
dba Everyday Store
4065 Ute Highway
Lyons, CO 80540

Attachment to Form DR 8403

Question 8(b) suspensions:

Everyday Store, 17840 Cottonwood Drive, Parker, CO 80134, State license no. 18-26348-0017 had the following violations:

Sale of alcohol to a minor on July 12, 2005—received a warning.

Sale of alcohol to a minor on June 1, 2007—active suspension for 5 days and 5 days in abeyance

Sale of alcohol to a minor on May 31, 2008—active suspension for 10 days and 20 days in abeyance for 2 years

Sale of alcohol to a minor on November 18, 2011—active suspension for 7 days; none in abeyance

Everyday Store, 10610 Longs Way, Parker, CO 80138, State license no. 18-26348-0016 had the following violations:

Sale of alcohol to a minor on May 31, 2008—received a warning

Sale of alcohol to a minor on November 18, 2011—active suspension for 3 days; 4 days held in abeyance for one year

Sale of alcohol to a minor on February 22, 2014—active suspension for 5 days; 10 days held in abeyance for one year. Fine in lieu of suspension was granted.

Sale of alcohol to a minor on December 11, 2019—active suspension for 14 days; all paid by fine in lieu of suspension.

Everyday Store, 7990 N. Federal Blvd., Westminster, CO 80030, State license no. 18-26348-0019 had a sale of alcohol to minor violation in June 2016—5 days held in abeyance and 5 days fine in lieu of suspension.

Everyday Store, 1275 13th St., Boulder, CO 80302 had the following violations:

Sale to minor in 2015—22 days suspended with 8 served and 14 days in abeyance.

Sale to minor in 2016—44 days suspension, all served.

Everyday Store 5710, Greeley, Colorado: Sale to minor in 2015—10 days suspended with 3 served and 7 days in abeyance.

Everyday Store, 799 E. College Dr., Durango, CO 81301 had sale to minor on September 10, 2015—10 days suspended with 5 served and 5 days held in abeyance.

Everyday Store 5709, Garden City, Colorado had a sale to minor in July 2018—10 days suspended with 5 days served and 5 days held in abeyance.

Everyday Store 5705, 4595 Pecos St., Denver, CO had a sale to minor on January 29, 2021 and sale to minor on December 16, 2022 (5 day suspension).

NOTE: Of the foregoing, only 3 violations occurred in the past 5 years.

EVERYDAY STORES, LLC

STORE #	MANAGER	STORE NO.	MANAGER CELL	ADDRESS
5700	Padam	303-473-9735	303-913-6895	1275 13 th St. Boulder, CO 80302
5703	Singh	719-634-6331	720-288-8359	1823 N Circle Dr. Colorado Springs, CO 80909
5705	Gandip	303-433-1815	720-695-2884	4595 Pecos St. Denver, CO 80211
5707	Natasha	970-247-0988	970-764-8866	799 E College Dr. Durango, CO 81301
5709	Himala	970-352-8823	720-625-9879	2603 8 th Ave. Greeley, CO 80631
5723	Renayn.	303-651-3694	720-505-1525	900 KEN. Pratt Bl. Longmont Co
5711	Nirankar	970-352-8968	720-625-9879	504 11 th Ave. Greeley, CO 80631
5713	Joyce	303-989-3863	720-394-5490	1090 S Union Blvd. Lakewood, CO 80228
5714	Dilbag	303-989-7040	720-240-3858	12015 W Cedar Dr. Lakewood, CO 80226
5715	Jim Garcia	970-264-5907	Jim: 970-946-8286 Pat: 970-749-1492	300 E Pagosa St. Pagosa Springs, CO 81147
5716	Jan	303-841-0602	720-381-8589	10610 S Longs Way Parker, CO 80134
5717	Prabesh	303-680-6901	720-862-8955	17840 Cottonwood Dr. Parker, CO 80134
5718	Frank	970-785-6173	720-589-1484	300 Justin Ave. PO Box 368 Platteville, CO 80651
5719	Shanti	303-430-0058	720-250-6801	7990 N Federal Blvd. Westminster, CO 80030
572.	Bijay	970-522-0404	303-396-2223	303 N. 3 ST. STERLING, Co
5720	Sylvia	970-264-9507		450 Grand Ave., Del Norte, CO 81132
5722		303-857-4408		104 Denver Ave. Fort Lupton, CO 80621