BOARD OF TRUSTEES
July 15, 2020
4:00 PM

Special Meeting

Leeper Center
3800 Wilson Avenue
Wellington, CO 80549

AGENDA

A. CALL TO ORDER

1. Pledge of Allegiance
2. Roll Call

B. OTHER BOARDS

1. Liquor License Review Board

   El Mezcal, Inc, d/b/a Sol de Jalisco Mexican Restaurant

C. ADJOURN

The Town of Wellington will make reasonable accommodations for access to Town services, programs, and activities and special communication arrangements Individuals needing special accommodation may request assistance by contacting at Town Hall or at 970-568-3380 ext. 110 at least 24 hours in advance.

Board of Trustees Meeting

Date: **July 15, 2020**

Submitted By:

Liquor License Review Board

Subject:

El Mezcal, Inc, d/b/a Sol de Jalisco Mexican Restaurant

EXECUTIVE SUMMARY

El Mezcal, Inc, d/b/a Sol de Jalisco has submitted an application for a temporary modification of their liquor licensed premise in response to Colorado Liquor Enforcement Bulletin 20-07. Bulletin 20-07 is a emergency regulation that permits on-premise licenses to temporarily expand their licensed premise into sidewalks, streets and parking lots to increase social distancing measures while being able to operate a productive and economically sustainable business.

BACKGROUND / DISCUSSION

Myrna Rodriguez, owner of Sol de Jalisco has submitted the required application, documentation and has paid the required fees to Colorado Liquor Enforcement.

STAFF RECOMMENDATION

Staff has reviewed the application packet and recommends approval of the temporary modification of premise.

ATTACHMENTS

1. Sol de Jalisco Temporary Modification of Premise

DR 8442 (03/22/19)
COLORADO DEPARTMENT OF REVENUE
Liquor Enforcement Division
(303)-205-2300

FOR DEPARTMENT USE ONLY

Permit Application and Report of Changes

Current License Number 03-06783
All Answers Must Be Printed in Black Ink or Typewritten
Local License Fee $ _____

1. Applicant is a	Present License Number
☒ Corporation ☐ Individual ☐ Partnership ☐ Limited Liability Company	03-06783

2. Name of Licensee	3. Trade Name
EL MEZCAL, INC	SOL DE JALISCO MEXICAN RESTAURANT

4.Location Address: 3748 - 3750 CLEVELAND AVE, CO

City	County	ZIP
WELLINGTON, CO	LARIMER	80549

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

Section A – Manager reg/change

• License Account No. _____

☐ Manager's Registration (Hotel & Restr.).....$75.00

☐ Manager's Registration (Tavern).....$75.00

☐ Manager's Registration (Lodging & Entertainment).....$75.00

☐ Change of Manager (Other Licenses pursuant to section 44-3-301(8), C.R.S.) NO FEE

Section B – Duplicate License

• Liquor License No. _____

☐ Duplicate License..... $50.00

Section C

☐ Retail Warehouse Storage Permit (ea).....$100.00

☐ Wholesale Branch House Permit (ea).....100.00

☐ Change Corp. or Trade Name Permit (ea).....50.00

☐ Change Location Permit (ea).....150.00

☒ Change, Alter or Modify Premises $150.00 x _____
Total Fee _____

☐ Addition of Optional Premises to Existing H/R $100.00 x _____
Total Fee _____

☐ Addition of Related Facility to an Existing Resort or Campus Liquor Complex $160.00 x _____ Total Fee _____

☐ Campus Liquor Complex Designation — No Fee

☐ Sidewalk Service Area — $75.00

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

Instruction Sheet

For All Sections, Complete Questions 1-4 Located on Page 1

☐ Section A

To Register or Change Managers, check the appropriate box in section A and complete question 8 on page 5. Proceed to the Oath of Applicant for signature. Submit to State Licensing Authority for approval.

☐ Section B

For a Duplicate license, be sure to include the liquor license number in section B on page 1 and proceed to page 5 for Oath of Applicant signature.

☒ Section C

Check the appropriate box in section C and proceed below.

1) ***For a Retail Warehouse Storage Permit,*** go to page 3 complete question 5 (be sure to check the appropriate box). Submit the necessary information and proceed to page 5 for Oath of Applicant signature. Submit to State Licensing Authority for approval.

2) ***For a Wholesale Branch House Permit,*** go to page 3 and complete question 5 (be sure to check the appropriate box). Submit the necessary information and proceed to page 5 for Oath of Applicant signature. Submit to State Licensing Authority for approval.

3) ***To Change Trade Name or Corporation Name,*** go to page 3 and complete question 6 (be sure to check the appropriate box). Submit the necessary information and proceed to page 5 for Oath of Applicant signature. Retail Liquor License submit to Local Liquor Licensing Authority (City or County). Manufacturer, Wholesaler and Importer's Liquor Licenses submit to State Liquor Licensing Authority.

4) ***To modify Premise, or add Sidewalk Service Area,*** go to page 4 and complete question 9. Submit the necessary information and proceed to page 5 for Oath of Applicant signature. Retail Liquor License submit to Local Liquor Licensing Authority (City or County). Manufacturer, Wholesaler and Importer's Liquor Licenses submit to State
Liquor Licensing Authority.

5) ***For Optional Premises*** go to page 4 and complete question 9. Submit the necessary information and proceed to page 5 for Oath of Applicant signature. Retail Liquor License submit to Local Liquor Licensing Authority (City or County).

6) ***To Change Location,*** go to page 3 and complete question 7. Submit the necessary information and proceed to page 5 for Oath of Applicant signature. Retail Liquor License submit to Local Liquor Licensing Authority (City or County). Manufacturer, Wholesaler and Importer's Liquor Licenses submit to State Liquor Licensing Authority.

7) ***Campus Liquor Complex Designation,*** go to page 4 and complete question 10. Submit the necessary information and proceed to page 5 for Oath of Applicant signature.

8) ***To add another Related Facility*** to an existing Resort or Campus Liquor Complex, go to page 4 and complete question 11.

Storage Permit

5. Retail Warehouse Storage Permit or a Wholesalers Branch House Permit

☐ **Retail Warehouse Permit for:**

☐ On–Premises Licensee (Taverns, Restaurants etc.)

☐ Off–Premises Licensee (Liquor stores)

☐ **Wholesalers Branch House Permit**

Address of storage premise: _____

City _____, County _____, Zip _____

Attach a deed/ lease or rental agreement for the storage premises.
Attach a detailed diagram of the storage premises.

Change Trade Name or Corporate Name

6. Change of Trade Name or Corporation Name

☐ Change of Trade name / DBA only

☐ Corporate Name Change (Attach the following supporting documents)

1. Certificate of Amendment filed with the Secretary of State, or
2. Statement of Change filed with the Secretary of State, and
3. Minutes of Corporate meeting, Limited Liability Members meeting, Partnership agreement.

Old Trade Name	New Trade Name
Old Corporate Name	New Corporate Name

Change of Location

7. Change of Location

NOTE TO RETAIL LICENSEES: An application to change location has a local application fee of $750 payable to your local licensing authority. You may only change location within the same jurisdiction as the original license that was issued. Pursuant to 44-3-311(1) C.R.S. Your application must be on file with the local authority thirty (30) days before a public hearing can be held.

Date filed with Local Authority _____ **Date of Hearing** _____

(a) Address of current premises _____

City_____County_____Zip_____

(b) Address of proposed New Premises (Attach copy of the deed or lease that establishes possession of the premises by the licensee)

Address _____

City_____County_____Zip_____

(c) New mailing address if applicable.

Address _____

City _____ County _____ State _____ Zip _____

(d) Attach detailed diagram of the premises showing where the alcohol beverages will be stored, served, possessed or consumed. Include kitchen area(s) for hotel and restaurants.

Change of Manager

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).

(a) Change of Manager (attach Individual History DR 8404-I H/R, Tavern and Lodging & Entertainment only)

Former manager's name _____

New manager's name _____

(b) Date of Employment _____

Has manager ever managed a liquor licensed establishment? Yes ☐ No ☐

Does manager have a financial interest in any other liquor licensed establishment? Yes ☐ No ☐

If yes, give name and location of establishment _____

_____

Modify Premises or Addition of Optional Premises, Related Facility, or Sidewalk Service Area

9. Modification of Premises, Addition of an Optional Premises, Addition of Related Facility, or Addition of a Sidewalk Service Area

NOTE: Licensees may not modify or add to their licensed premises until approved by state and local authorities.

(a) Describe change proposed _____

_____

Addition of licensed sidewalk area as allowed by the town of Wellington

(b) **If the modification is temporary,** when will the proposed change:

Start immediate (mo/day/year) End of Pandemic (mo/day/year)

NOTE: THE TOTAL STATE FEE FOR TEMPORARY MODIFICATION IS $300.00

(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 ☐ No ☒

(d) Is the proposed change in compliance with local building and zoning laws? Yes ☒ No ☐

(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 ☐ No ☒

(f) Attach a diagram of the current licensed premises and a diagram of the proposed changes for the licensed premises.

(g) Attach any existing lease that is revised due to the modification.

(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.

Campus Liquor Complex Designation

10. Campus Liquor Complex Designation

An institution of higher education or a person who contracts with the institution to provide food services

(a) I wish to designate my existing _____ Liquor License # _____ to a Campus Liquor Complex Yes ☐ No ☐

Additional Related Facility

11. Additional Related Facility

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.

(a) Address of Related Facility _____

(b) Outlined diagram provided Yes ☐ No ☐

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	Date
Myrna Rodriguez	owner	7/2/20

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.**

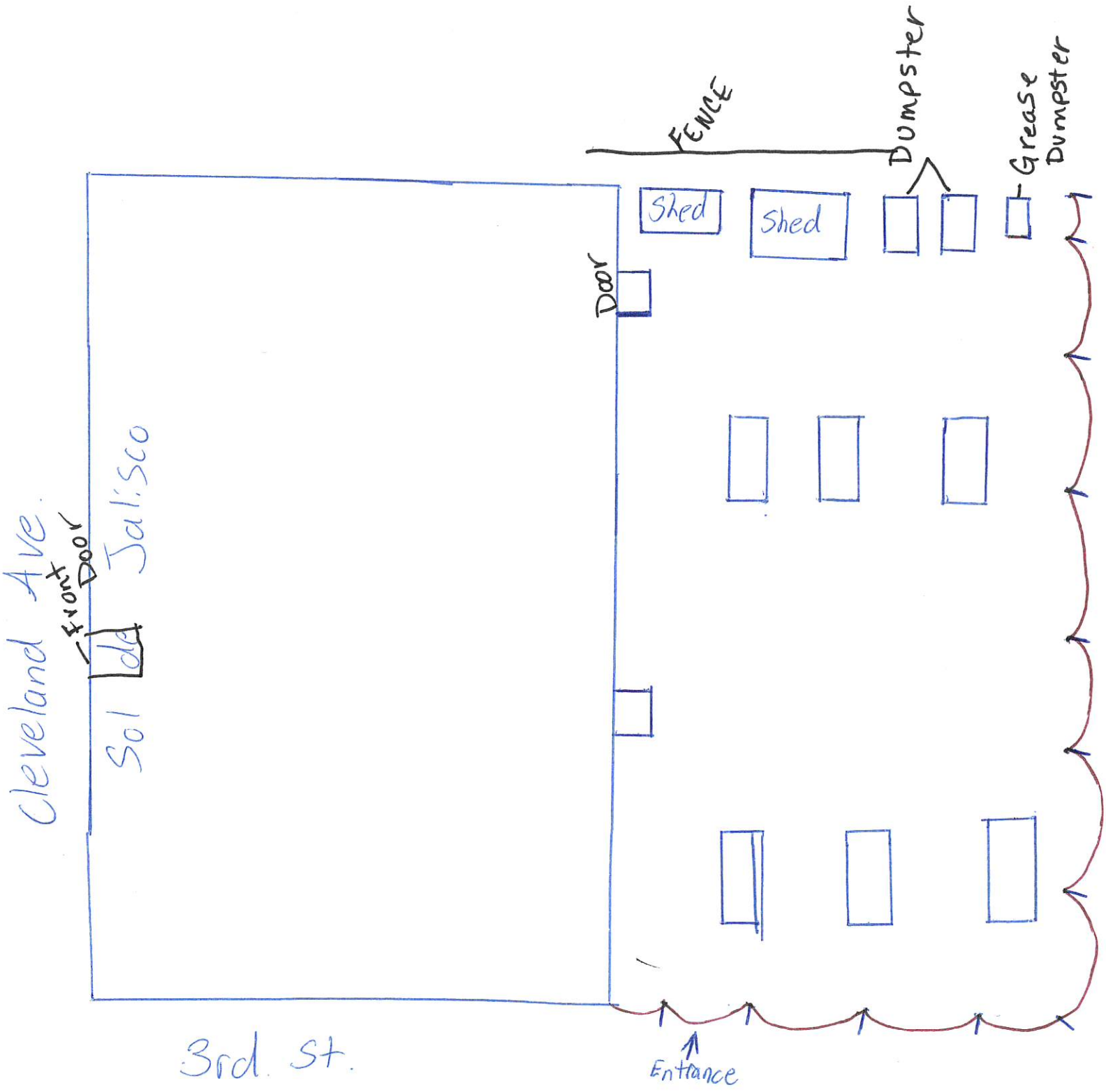
Local Licensing Authority (City or County)	Date filed with Local Authority

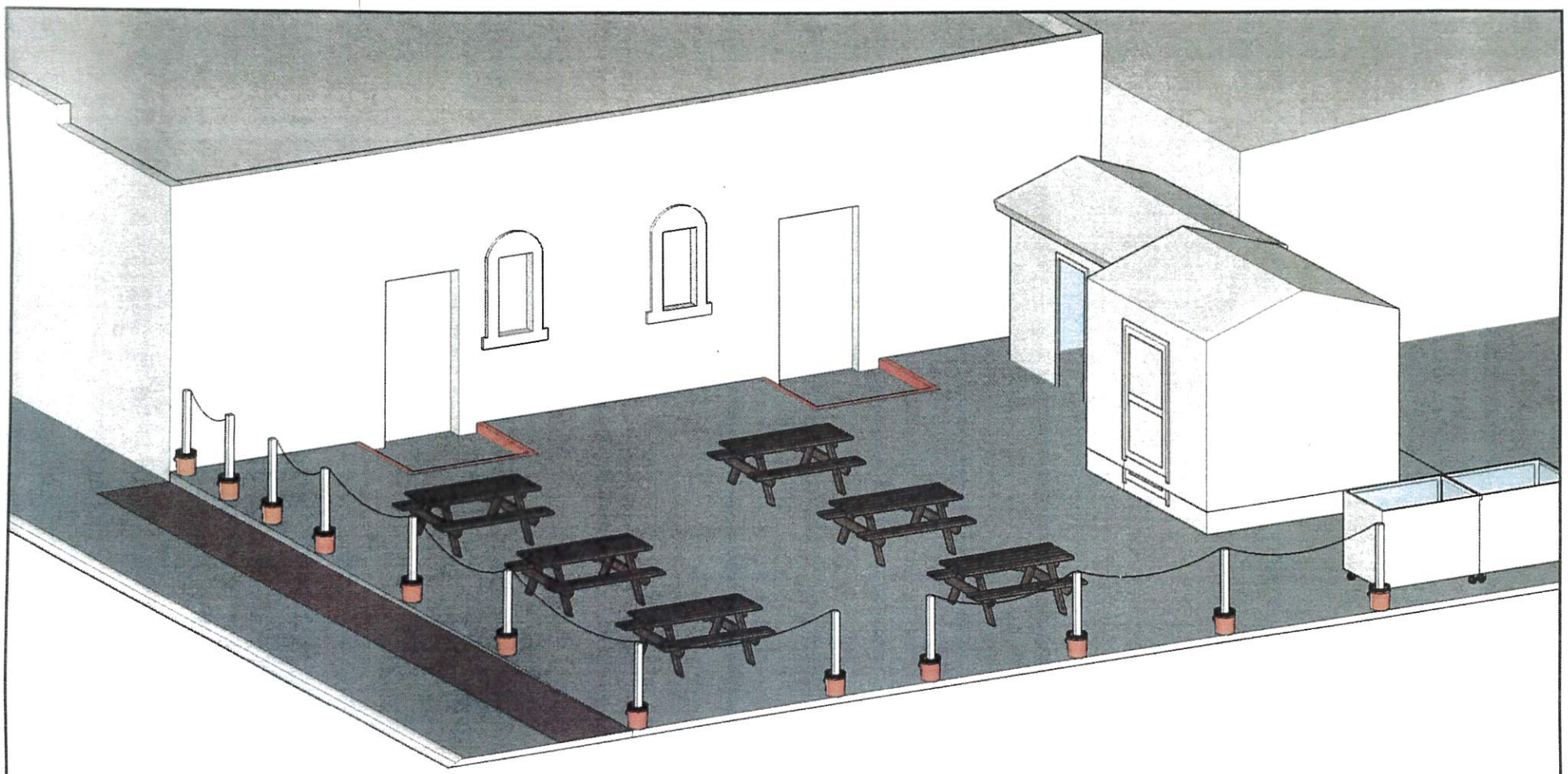
Signature	Title	Date

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


Cleveland Ave.
Front Door
Sol Jalisco
3rd. St.
Entrance
Door
Shed
Shed
Fence
Dumpster
Grease Dumpster



Preliminary Design
NTS

Arris Timber Works
970-286-0550
Tim@Arristimberworks.com

CLIENT
Emiliano and Myrna ?
3748-3750 Cleveland Ave
Wellington, CO 80549

PROJECT
Sol de Jalisco
Outdoor seating

PROJECT NO.

ISSUE
6.14.20

Re ISSUE
7.7.20

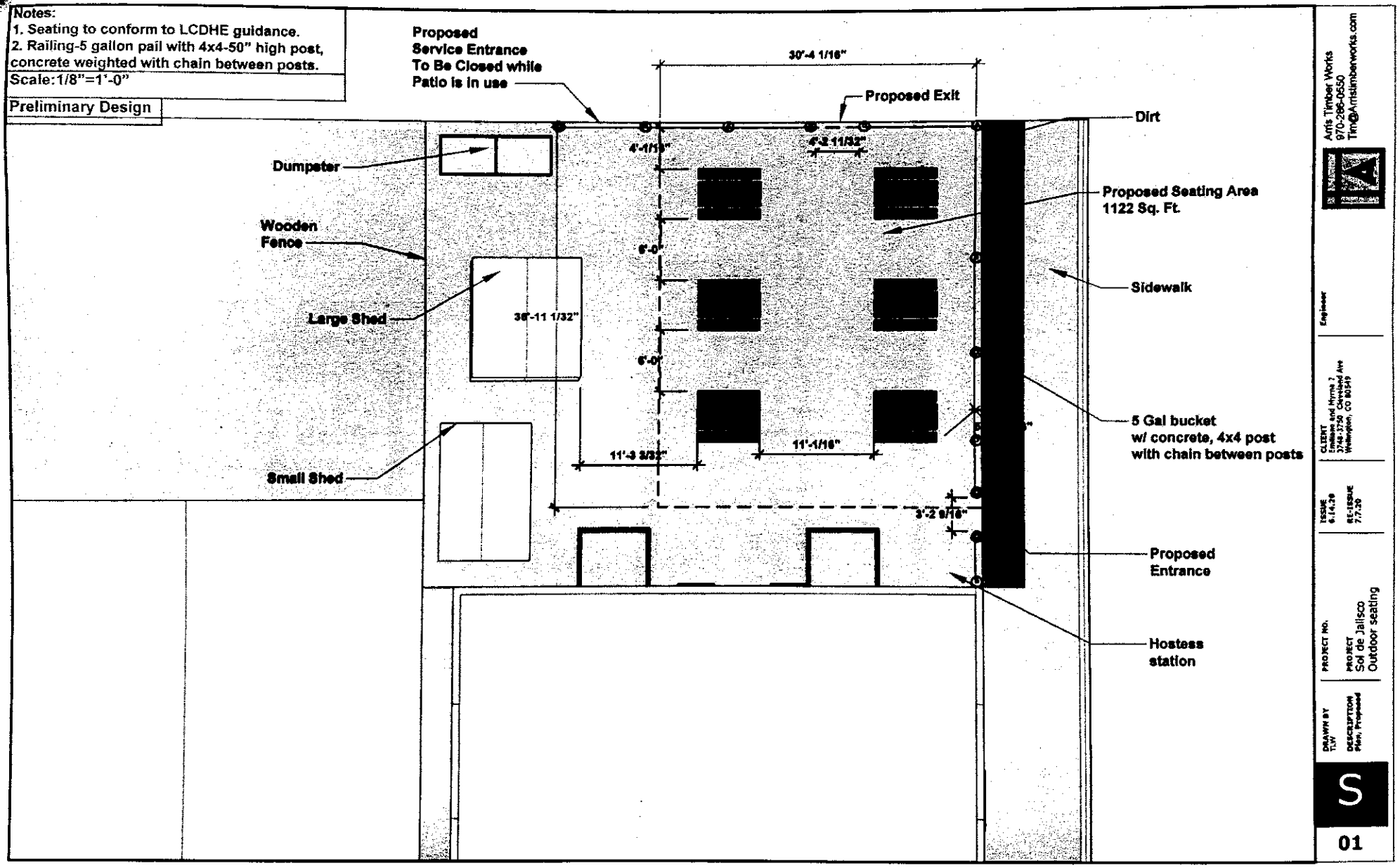
DRAWN BY
TLW

DESCRIPTION
Back Patio,
proposed

Notes:
1. Seating to conform to LCDHE guidance.
2. Railing-5 gallon pail with 4x4-50" high post, concrete weighted with chain between posts.

Scale:1/8"=1'-0"

Preliminary Design



Arris Timber Works
970-286-0550
Tim@Arristimberworks.com

Engineer

CLIENT
Emiliano and Hyrma J
3744-3750 Cleveland Ave
Wellington, CO 80549

ISSUE
6.14.20
RE-ISSUE
7.7.20

PROJECT NO.

PROJECT
Sol de Jalisco
Outdoor seating

DRAWN BY
TJW

DESCRIPTION
Plan, Proposed

S

01

To whom it may concern:

We are requesting permission to extend seating outdoors using back space for extra seating, enclosed by posts and ropes or links. There will be servers attending outside and asking for ID's for alcohol orders and warning posters for illegal underage drinkers. Please let me know if you have any questions. Thank you.

Sincerely,

Sol de Jalisco Mexican Rest. In Wellington, CO
Myrna Rodriguez
970-581-0995

To Whom it may concern, July 7, 2020

My name is Mary Gray, I am one of the owners at Soul Squared Brewing and Leave It To Cleaver. I am writing this letter today as a recommendation for the owners of Sol Jalisco. I understand that they are working towards expanding their liquor license in order to include their newly added patio space to the North side of their building as an area where people can enjoy libations. Not only do I think the expanded space will be a hugely positive asset for the Town of Wellington, but I have known the owners and staff of Sol Jalisco to be very responsible and thoughtful business owners and neighbors. I would highly recommend that the Liquor Control Board vote in favor of allowing Sol Jalisco to expand their liquor license to include the back patio sooner than later.

Thank you for your consideration. If you have any questions or concerns, feel free to contact me by email at mary@soulsquaredbrewing.com

Kind regards,

Mary Gray


NOTICE
PURSUANT TO THE LIQUOR LAWS OF THE STATE OF COLORADO
SOL DE JALISCO MEXICAN RESTAURANT
HAS REQUESTED THE LICENSING OFFICIALS OF THE LIQUOR LICENSE REVIEW BOARD TO GRANT:
Temporary Modification of Premise
LICENSE AT: 3748-3750 Cleveland Ave. Wellington, CO 80549
HEARING ON APPLICATION TO BE HELD AT:
Via Zoom Meeting
https://zoom.us/j/92115216052
OR Call in at 1-346-248-7799 - Meeting ID: 921 1521 6052
TIME AND DATE:
July 14, 2020 at 6:30 p.m.
DATE OF APPLICATION: July 2, 2020
BY ORDER OF THE TOWN OF WELLINGTON
ADDRESS/CONTACT INFORMATION AT WHICH PETITIONS OF REMONSTRANCES MAY BE FILED
Town Clerk,3735 Cleveland Ave. Wellington, Co 80549 / 970-568-3361
WHAT YOU EAT, & DO
DISCOVER
VISA
Contactless Accepted

Krystal Eucker

From: Myrna Contreras <mcontreras2074@yahoo.com>
Sent: Tuesday, July 7, 2020 12:42 PM
To: Krystal Eucker
Subject: Fw: DOR Liquor Enforcement Division Payment Receipt

Myrna Rodriguez
Begin forwarded message:

On Monday, July 6, 2020, 9:10 PM, support@www.colorado.gov wrote:

Payment Receipt Confirmation

Your payment was successfully processed.

Your payment was successfully processed.

Contact Name Liquor Enforcement Division
Contact Email DOR_LIQLICENSING@state.co.us
Contact Phone 303-205-2300
Contact Url //www.colorado.gov/enforcement/contact-us-liquor-tobacco-enforcement-division
Contact Address 1697 Cole Blvd, Suite 200
Lakewood, CO 80401

Transaction Summary

Description	Amoun
DOR Liquor Enforcement Division Payment	$150.0(
Service Fee	$4.1⁴
TOTAL	$154.1⁴

This online service is provided by a 3rd party working in partnership with the state of Colorado. The price of items purchased through this service includes revenue used to develop, maintain, and enhance the state's official web portal, Colorado.gov.

Customer Information

Customer Name Myrna Rodriguez
Company Name El Mezcal, Inc d/b/a Sol de Jalisco Mexican Rest.
Local Reference ID D6DB54D4AEBF40EDD7C332F6D0A76F8C

Receipt Date	7/6/2020
Receipt Time	09:10:20 PM MDT

Payment Information

Payment Type	Credit Card
Credit Card Type	VISA
Credit Card Number	******1254
Order ID	142729994
Billing Name	El Mezcal, Inc

Billing Information

Billing Address	3750 Cleveland Ave P.O. Box 38
Billing City, State	Wellington, CO
ZIP/Postal Code	80549
Country	US
Phone Number	970-568-3082

This receipt has been emailed to the address below.

Email Address	Mcontreras2074@yahoo.com