

## Colorado Liquor Retail License Application

FILED ON BEHALF OF THE APPLICANT  
BY FOSTER GRAHAM MILSTEIN CALISHER, LLP.  
(303) 333-9810

<input type="checkbox"/> New License <input checked="" type="checkbox"/> New-Concurrent <input type="checkbox"/> Transfer of Ownership			
<ul style="list-style-type: none"><li>• All answers must be printed in black ink or typewritten</li><li>• Applicant must check the appropriate box(es)</li><li>• Applicant should obtain a copy of the Colorado Liquor and Beer Code: <a href="http://www.colorado.gov/enforcement/liquor">www.colorado.gov/enforcement/liquor</a></li><li>• Local License Fee \$ _____</li></ul>			
1. Applicant is applying as a/an		<input type="checkbox"/> Individual	
<input type="checkbox"/> Corporation		<input checked="" type="checkbox"/> Limited Liability Company	
<input type="checkbox"/> Partnership (includes Limited Liability and Husband and Wife Partnerships)		<input type="checkbox"/> Association or Other	
2. Applicant If an LLC, name of LLC; if partnership, at least 2 partner's names; if corporation, name of corporation Highlands CYP Tenant, LLC		FEIN Number 47-5278053	
2a. Trade Name of Establishment (DBA) Courtyard by Marriott Denver Southwest/Littleton		State Sales Tax Number 31061541	Business Telephone (303) 791-3001
3. Address of Premises (specify exact location of premises, include suite/unit numbers) 3056 West County Line Road			
City Littleton	County Douglas	State CO	ZIP Code 80129
4. Mailing Address (Number and Street) c/o Propel Management; 425 Soledad Ste. 400	City or Town San Antonio	State TX	ZIP Code 78205
5. Email Address brian@fostergraham.com			
6. If the premises currently has a liquor or beer license, you must answer the following questions			
Present Trade Name of Establishment (DBA) N/A	Present State License Number N/A	Present Class of License N/A	Present Expiration Date N/A
<b>Section A                      Nonrefundable Application Fees</b>		<b>Section B (Cont.)                      Liquor License Fees</b>	
<input type="checkbox"/> Application Fee for New License ..... \$920.00		<input type="checkbox"/> Liquor Licensed Drugstore (City) ..... \$227.50	
<input checked="" type="checkbox"/> Application Fee for New License w/Concurrent Review ..... \$1020.00		<input type="checkbox"/> Liquor Licensed Drugstore (County) ..... \$312.50	
<input type="checkbox"/> Application Fee for Transfer ..... \$920.00		<input checked="" type="checkbox"/> Manager Registration - H & R ..... \$75.00	
		<input type="checkbox"/> Manager Registration - Tavern ..... \$75.00	
<b>Section B                      Liquor License Fees</b>			
<input type="checkbox"/> Add Optional Premises to H & R ..... \$100.00 X _____ Total _____		<input type="checkbox"/> Master File Location Fee ..... \$25.00 X _____ Total _____	
<input type="checkbox"/> Add Related Facility to Resort Complex \$75.00 X _____ Total _____		<input type="checkbox"/> Master File Background ..... \$250.00 X _____ Total _____	
<input type="checkbox"/> Arts License (City) ..... \$308.75		<input type="checkbox"/> Optional Premises License (City) ..... \$500.00	
<input type="checkbox"/> Arts License (County) ..... \$308.75		<input type="checkbox"/> Optional Premises License (County) ..... \$500.00	
<input type="checkbox"/> Beer and Wine License (City) ..... \$351.25		<input type="checkbox"/> Racetrack License (City) ..... \$500.00	
<input type="checkbox"/> Beer and Wine License (County) ..... \$436.25		<input type="checkbox"/> Racetrack License (County) ..... \$500.00	
<input type="checkbox"/> Brew Pub License (City) ..... \$750.00		<input type="checkbox"/> Resort Complex License (City) ..... \$500.00	
<input type="checkbox"/> Brew Pub License (County) ..... \$750.00		<input type="checkbox"/> Resort Complex License (County) ..... \$500.00	
<input type="checkbox"/> Club License (City) ..... \$308.75		<input type="checkbox"/> Retail Gaming Tavern License (City) ..... \$500.00	
<input type="checkbox"/> Club License (County) ..... \$308.75		<input type="checkbox"/> Retail Gaming Tavern License (County) ..... \$500.00	
<input type="checkbox"/> Distillery Pub License (City) ..... \$750.00		<input type="checkbox"/> Retail Liquor Store License (City) ..... \$227.50	
<input type="checkbox"/> Distillery Pub License (County) ..... \$750.00		<input type="checkbox"/> Retail Liquor Store License (County) ..... \$312.50	
<input checked="" type="checkbox"/> Hotel and Restaurant License (City) ..... \$500.00		<input type="checkbox"/> Tavern License (City) ..... \$500.00	
<input type="checkbox"/> Hotel and Restaurant License (County) ..... \$500.00		<input type="checkbox"/> Tavern License (County) ..... \$500.00	
<input type="checkbox"/> Hotel and Restaurant License w/one opt premises (City) ..... \$600.00		<input type="checkbox"/> Vintners Restaurant License (City) ..... \$750.00	
<input type="checkbox"/> Hotel and Restaurant License w/one opt premises (County) ..... \$600.00		<input type="checkbox"/> Vintners Restaurant License (County) ..... \$750.00	
<b>Questions? Visit: <a href="http://www.colorado.gov/enforcement/liquor">www.colorado.gov/enforcement/liquor</a> for more information</b>			
<b>Do not write in this space - For Department of Revenue use only</b>			
Liability Information			
License Account Number	Liability Date	License Issued Through (Expiration Date)	Total \$

## 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:** [www.colorado.gov/enforcement/liquor](http://www.colorado.gov/enforcement/liquor) for more information

Items submitted, please check all appropriate boxes completed or documents submitted	
<b>I.</b>	<b>Applicant information</b> <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 type="checkbox"/> D. Return originals to local authority <input type="checkbox"/> E. Additional information may be required by the local licensing authority
<b>II.</b>	<b>Diagram of the premises</b> <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 type of control (fences, walls, entry/exit points, etc.) <input checked="" type="checkbox"/> C. Separate diagram for each floor (if multiple levels) <input checked="" type="checkbox"/> D. Kitchen - identified if Hotel and Restaurant <input checked="" type="checkbox"/> E. Bold/Outlined Licensed Premises
<b>III.</b>	<b>Proof of property possession (One Year Needed)</b> <input type="checkbox"/> A. Deed in name of the Applicant (or) (matching question #2) date stamped / filed with County Clerk <input checked="" type="checkbox"/> B. Lease in the name of the Applicant (or) (matching question #2) <input type="checkbox"/> C. Lease Assignment in the name of the Applicant with proper consent from the Landlord and acceptance by the Applicant <input type="checkbox"/> D. Other Agreement if not deed or lease. (matching question #2) (Attach prior lease to show right to assumption)
<b>IV.</b>	<b>Background information and financial documents</b> <input checked="" type="checkbox"/> A. Individual History Records(s) (Form DR 8404-I) <input checked="" type="checkbox"/> B. Fingerprints taken and submitted to local authority (State Authority for Master File applicants) <input type="checkbox"/> C. Purchase agreement, stock transfer agreement, and or authorization to transfer license <input type="checkbox"/> D. List of all notes and loans (Copies to also be attached)
<b>V.</b>	<b>Sole proprietor / husband and wife partnership</b> N/A <input type="checkbox"/> A. Form DR4679 <input type="checkbox"/> B. Copy of State issued Driver's License or Colorado Identification Card for each applicant
<b>VI.</b>	<b>Corporate applicant information (if applicable)</b> <input type="checkbox"/> A. Certificate of Incorporation dated stamped by the Secretary of State <input type="checkbox"/> B. Certificate of Good Standing N/A <input type="checkbox"/> C. Certificate of Authorization if foreign corporation <input type="checkbox"/> D. List of officers, directors and stockholders of Applying Corporation (If wholly owned, designate a minimum of one person as Principal Officer of Parent)
<b>VII.</b>	<b>Partnership applicant information (if applicable)</b> N/A <input type="checkbox"/> A. Partnership Agreement (general or limited). Not needed if husband and wife <input type="checkbox"/> B. Certificate of Good Standing (If formed after 2009)
<b>VIII.</b>	<b>Limited Liability Company applicant information (if applicable)</b> <input checked="" type="checkbox"/> A. Copy of articles of organization (date stamped by Colorado Secretary of State's Office) <input checked="" type="checkbox"/> B. Certificate of Good Standing <input checked="" type="checkbox"/> C. Copy of operating agreement <input checked="" type="checkbox"/> D. Certificate of Authority if foreign company
<b>IX.</b>	<b>Manager registration for hotel and restaurant, tavern licenses when included with this application</b> <input checked="" type="checkbox"/> A. \$75.00 fee <input checked="" type="checkbox"/> B. Individual History Record (DR 8404-I) <input type="checkbox"/> C. If owner is managing, no fee required



7. Is 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) or manager under the age of twenty-one years?	Yes	No		
	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
8. Has 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) or manager 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 type="checkbox"/>	<input checked="" 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.				
9. Has a liquor license application (same license class), that was located within 500 feet of the proposed premises, been denied within the preceding two years? If "yes", explain in detail.	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
10. Are the premises to be licensed 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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
	or			
	Waiver by local ordinance? Other: _____			
	<input type="checkbox"/>	<input type="checkbox"/>		
11. 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 <u>current</u> financial interest in said business including any loans to or from a licensee.	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
12. 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 checked="" type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> Ownership <input checked="" type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____				
a. If leased, list name of landlord and tenant, and date of expiration, <b>exactly</b> as they appear on the lease:				
Landlord Highlands CYP, Ltd.	Tenant Highlands CYP Tenant LLC	Expires 3 years		
b. Is a percentage of alcohol sales included as compensation to the landlord? If yes complete question 13. <input checked="" type="checkbox"/> <input type="checkbox"/>				
c. Attach a diagram and outline or designate the area to be licensed (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".				
13. 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 Highlands CYP, Ltd.	First Name	Date of Birth N/A	FEIN or SSN 47-2373196	Interest/Percentage LL/Sec. 3.1(b)
Last Name Propel Management, LLC	First Name	Date of Birth N/A	FEIN or SSN 74-3253176	Interest/Percentage Mgmt/3%Gross
<b>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.</b>				
14. Optional Premises or Hotel and Restaurant Licenses with Optional Premises: Has a local ordinance or resolution authorizing optional premises been adopted? N/A <input type="checkbox"/> <input type="checkbox"/>				
Number of additional Optional Premise areas requested. (See license fee chart) _____				
15. Liquor Licensed Drug Store applicants, answer the following:				
(a) Does the applicant for a Liquor Licensed Drug Store have a license issued by the Colorado Board of Pharmacy? N/A <input type="checkbox"/> <input type="checkbox"/>				
If "yes" a copy of license must be attached.				
16. Club Liquor License applicants answer the following: <b>Attach a copy of applicable documentation</b>				
(a) Is the applicant organization operated solely for a national, social, fraternal, patriotic, political or athletic purpose and not for pecuniary gain? <input type="checkbox"/> <input type="checkbox"/>				
(b) Is the applicant organization a regularly chartered branch, lodge or chapter of a national organization which is operated solely for the object of a patriotic or fraternal organization or society, but not for pecuniary gain? <input type="checkbox"/> <input type="checkbox"/>				
(c) How long has the club been incorporated? N/A _____				
(d) Has applicant occupied an establishment for three years (three years required) that was operated solely for the reasons stated above? <input type="checkbox"/> <input type="checkbox"/>				
17. Brew-Pub License or Vintner Restaurant Applicants answer the following:				
(a) Has the applicant received or applied for a Federal Permit? (Copy of permit or application must be attached) N/A <input type="checkbox"/> <input type="checkbox"/>				
18a. For all on-premises applicants. (If this is an application for a Hotel, Restaurant or Tavern License, the manager must also submit an individual History Record - DR 8404-I)				
Last Name of Manager Bean		First Name of Manager Wes		
18b. 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"/>				
Name		Type of License		Account Number
19. Tax Distraint Information. Does the applicant or any other person listed on this application and including its partners, officers, directors, stockholders, members (LLC) or managing members (LLC) and any other persons with a 10% or greater financial interest in the applicant currently have an outstanding tax distraint issued to them by the Colorado Department of Revenue? <input type="checkbox"/> <input checked="" type="checkbox"/>				
If yes, provide an explanation and include copies of any payment agreements.				

20. If applicant is a corporation, partnership, association or limited liability company, applicant must list all **Officers, Directors, General Partners, and Managing Members**. In addition, applicant must list any stockholders, partners, or members with **ownership of 10% or more in the Applicant**. All persons listed below must also attach form DR 8404-I (Individual History Record), and submit fingerprint cards to the local licensing authority.

Name See Attached	Home Address, City & State	DOB	Position	% Owned
Name	Home Address, City & State	DOB	Position	% Owned
Name	Home Address, City & State	DOB	Position	% Owned
Name	Home Address, City & State	DOB	Position	% Owned
Name	Home Address, City & State	DOB	Position	% Owned

\*\* If Applicant is owned 100% by a parent company, please list the designated principal officer on question #20

\*\* Corporations - The President, Vice-President, Secretary and Treasurer must be accounted for on question #20 (Include ownership percentage if applicable)

\*\* If total ownership percentage disclosed here does not total 100%, applicant must check this box:

☐ Applicant affirms that no individual other than these disclosed herein, owns 10% or more of the applicant, and does not have ownership in a prohibited liquor license pursuant to Title 47 or 48, C.R.S.

#### 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. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Colorado Liquor or Beer Code which affect my license.

Authorized Signature <i>HR S</i>	Printed Name and Title <i>HANS LINDBERGH, Manager</i>	Date <i>8-2-16</i>
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#### Report and Approval of Local Licensing Authority (City/County)

Date application filed with local authority <i>8-9-2016</i>	Date of local authority hearing (for new license applicants; cannot be less than 30 days from date of application 12-47-311 (1) C.R.S.) <i>9-14-2016</i>
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The Local Licensing Authority Hereby Affirms that each person required to file DR 8404-I (Individual History Record) has:

☒ Been fingerprinted

☒ Been subject to background investigation, including NCIC/CCIC check for outstanding warrants

That the local authority has conducted, or intends to conduct, an inspection of the proposed premises to ensure that the applicant is in compliance with, and aware of, liquor code provisions affecting their class of license

(Check One)

☐ Date of inspection or anticipated date \_\_\_\_\_

☒ Will conduct inspection upon approval of state licensing authority

The foregoing application has been examined; and the premises, business to be conducted, and character of the applicant are satisfactory. We do report that such license, if granted, will meet the reasonable requirements of the neighborhood and the desires of the adult inhabitants, and will comply with the provisions of Title 12, Article 46 or 47, C.R.S.

**Therefore, this application is approved.**

Local Licensing Authority for <i>City of Littleton</i>	Telephone Number <i>314953780</i>	<input checked="" type="checkbox"/> Town, City <input type="checkbox"/> County
Signature <i>[Signature]</i>	Print _____	Title _____
Signature (attest)	Print _____	Title _____
		Date _____

**Supplemental Response to Question #11:**

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Mr. Hans R. Lindberg, through the entity Propel Management, LLC, holds the following licenses:

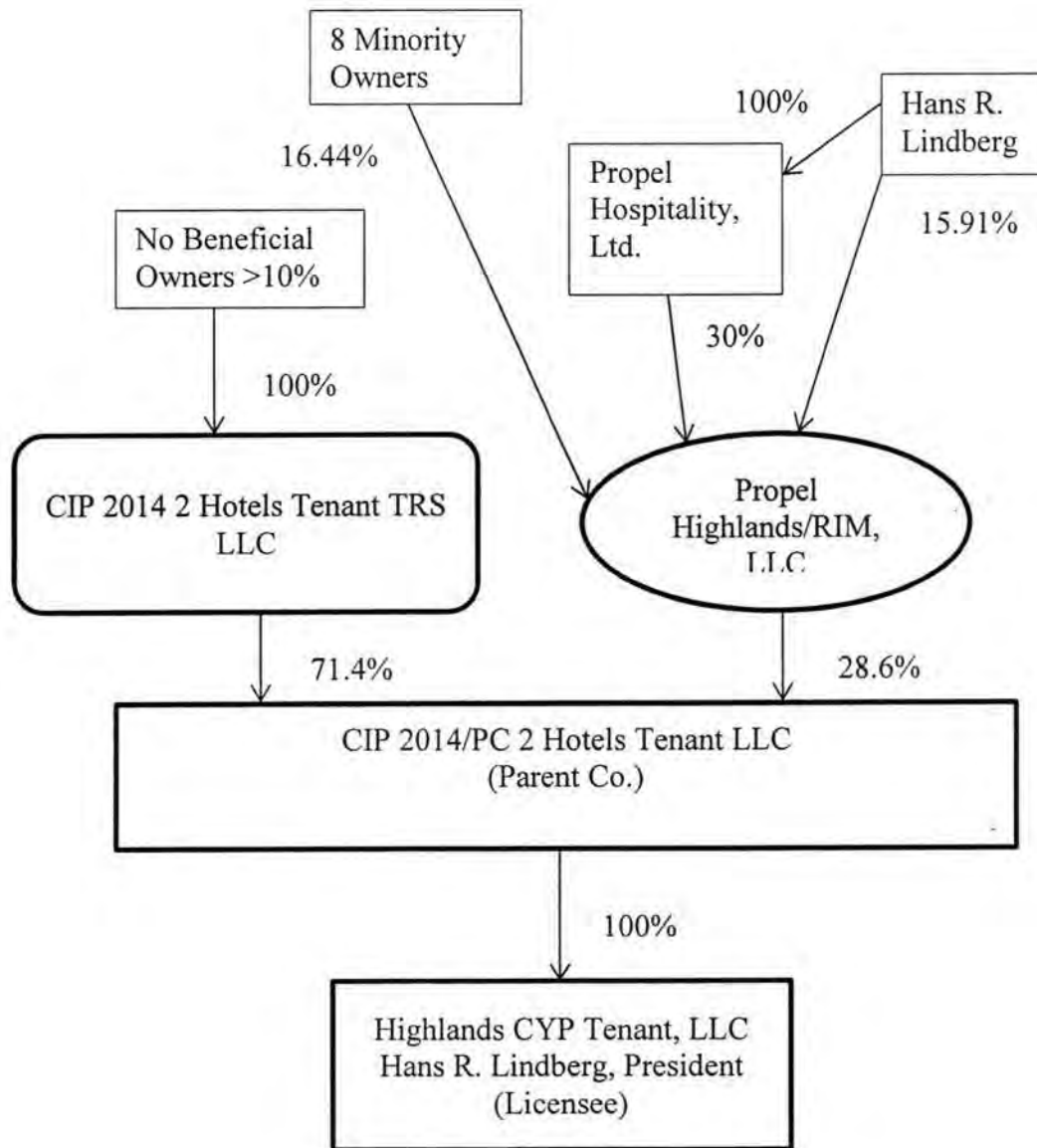
Courtyard by Marriott Galveston TX  
License # MB833046

SpringHill Suites San Antonio Northwest at the RIM  
License # MB942663

SpringHill Suites San Antonio Northwest at the Rim  
License # BG944018

**Supplemental Response to Question #20:**

Name	Address	DOB	Position	% Owned
CIP 2014/PC 2 Hotels Tenant LLC	425 Soledad Rd., 4 <sup>th</sup> Fl. San Antonio, TX 78205	N/A	Parent Co./Manager	100%
Hans R. Lindberg	4242 Broadway #704 San Antonio, TX 78209	8/30/74	President, Beneficial Owner	13.13% (Beneficially)





## 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 or Tavern class of retail license

**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 <i>Courtland by Marriott Denver Southwest/Littleton</i>	Home Phone Number N/A	Cellular Number 2108724691
2. Your Full Name (last, first, middle) Lindberg, Hans, Ian	3. List any other names you have used <i>None</i>	
4. Mailing address (if different from residence) 425 Soledad, Suite 400, San Antonio, TX 78205	Email Address hl@hilindberg.com	

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 4242 Broadway #704	San Antonio, TX 78209	03/14	Current
Previous 712 W. El Prado	San Antonio, TX 78212	09/05	03/14

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	To
The Propel Companies	425 Soledad, Suite 400, San Antonio, TX 78205	CEO	01/11	Current

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
N/A			

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 checked="" type="checkbox"/> No
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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 checked="" 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.

### 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

*Hans Lindberg*

Print Signature

Hans Lindberg

Title

President

Date

04/26/16



## 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 or Tavern class of retail license

**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 <i>Courtyard by Marriott Littleton/Highlands Ranch</i>		Home Phone Number <i>N/A</i>	Cellular Number <i>303-808-1796</i>	
2. Your Full Name (last, first, middle) <i>Bean, Wesley Arthur</i>		3. List any other names you have used <i>None</i>		
4. Mailing address (if different from residence) <i>Same</i>		Email Address <i>wesbean@msn.com</i>		
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 <i>801 Oakwood Drive</i>		<i>Castle Rock, CO, 80104</i>		<i>7/1997 current</i>
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 To
<i>Courtyard by Marriott Littleton</i>	<i>3056 W County Line Rd Littleton, CO 80129</i>		<i>General Manager</i>	<i>3/7/16 current</i>
<i>Denver Marriott South</i>	<i>10345 Park Meadows Dr Greenwood, CO 80121</i>		<i>Driver</i>	<i>6/2015 3/2016</i>
<i>Financial Education Services</i>	<i>9650 S Adelaide Circ Littleton, CO 80130</i>		<i>Spec VP of Sales</i>	<i>5/2015 3/2016</i>
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	
<i>None</i>				
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<i>I have been the registered manager for the Residence Inn and Courtyard by Marriott in Greenwood Village.</i>				
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 checked="" type="checkbox"/> No				

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

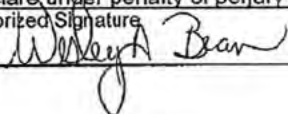
11. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? (If yes, explain in detail.) ☐ Yes ☒ No

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.

**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  
Wesley A. Bean

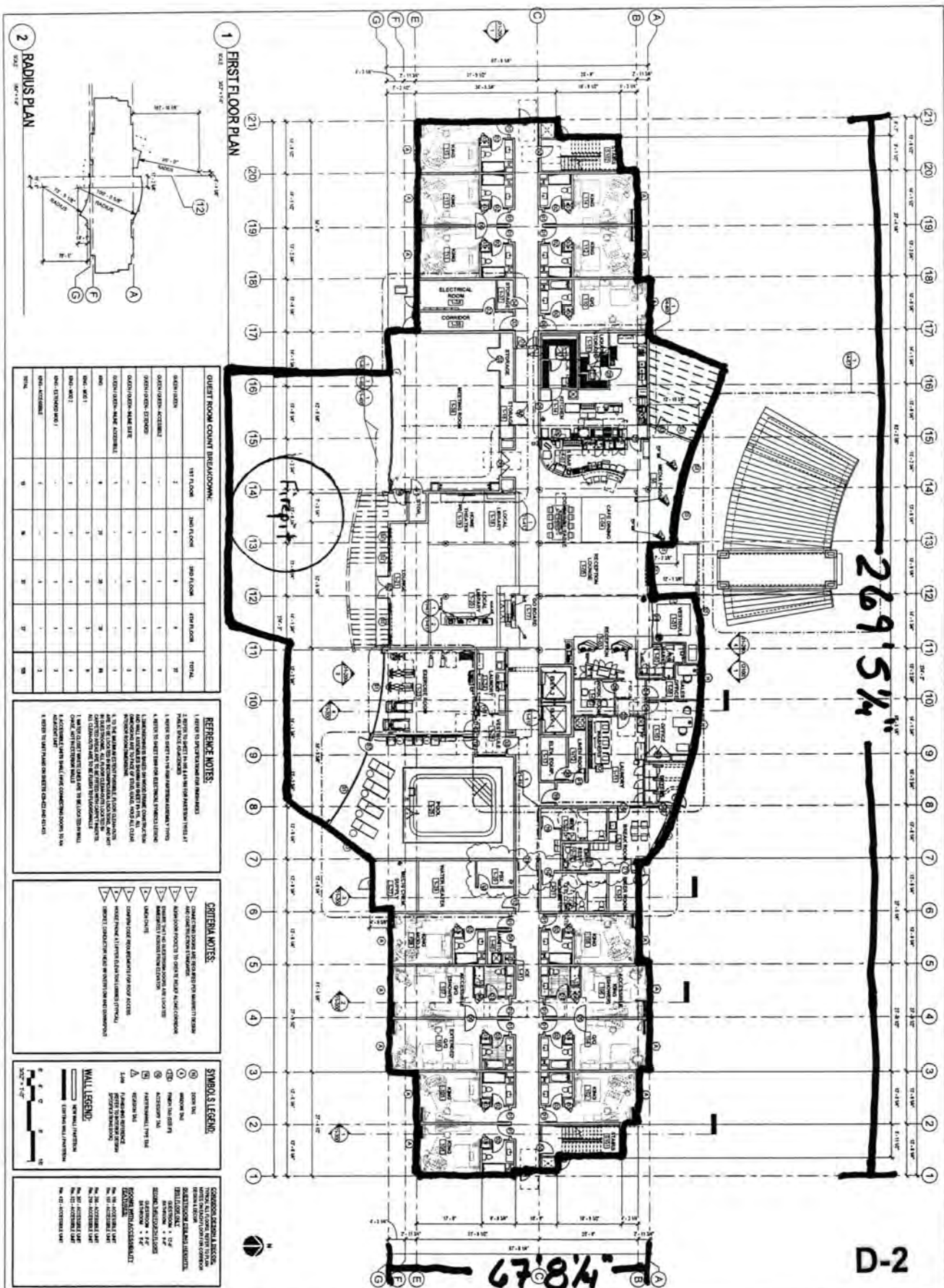
Title  
General Manager

Date  
04/13/2016











[www.operastudio-usa.com](http://www.operastudio-usa.com)



Number	Category	Year
1	City Council	2010
2	City Council	2011

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3056 W. COUNTY LINE ROAD  
LITTLETON, CO, 80129

PROJECT #:	14.277
DATE:	06.09.2015
DESIGN BY:	Adina
CHECKED BY:	Denise
DRAWING TIME:	

**SECOND FLOOR PLAN**

Drawing number:

01-101



QUEST ROOM COUNT PER ROOM/NO.					
	1ST FLOOR	2ND FLOOR	3RD FLOOR	4TH FLOOR	TOTAL
DAWN ROOM	1	0	0	0	1
DAWN ROOM ACCOMMOD	1	0	0	0	1
DAWN ROOM ACCOMMOD	1	1	0	0	2
DAWN ROOM- NINE M/RS	1	1	1	0	3
DAWN ROOM- NINE ACCOMMOD	1	0	0	0	1
DAWN M/RS 1	0	10	20	20	50
DAWN M/RS 2	1	1	1	0	3
DAWN M/RS 3	1	1	1	0	3
DAWN M/RS 4	1	1	1	0	3
DAWN ACCOMMOD	1	0	0	0	1
TOTAL	10	13	21	20	64

## REFERENCE NOTES

[illegible]

COLLEKKA MOJES

[illegible]

### SYMBOLS LEGEND

[illegible]

**TRIPOLI AND NABATIAN: REVISITING THE**

[illegible]



[www.openstudio-usa.com](http://www.openstudio-usa.com)

San Antonio, Texas 78212  
Tel 210.417.4307

816 Camaron, Suite 230  
San Antonio, TX 78210  
Tel: 214-349-7800

**The Firesilver Building**

מיון

architecture

# 1. Introduction

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Sl. No.	Particulars	Amount
1	Office Expenses	100.00
2	Office Salaries	100.00
3	Office Expenses	100.00
4	Office Salaries	100.00
5	Office Expenses	100.00
6	Office Salaries	100.00
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11	Office Expenses	100.00
12	Office Salaries	100.00
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98	Office Salaries	100.00
99	Office Expenses	100.00
100	Office Salaries	100.00

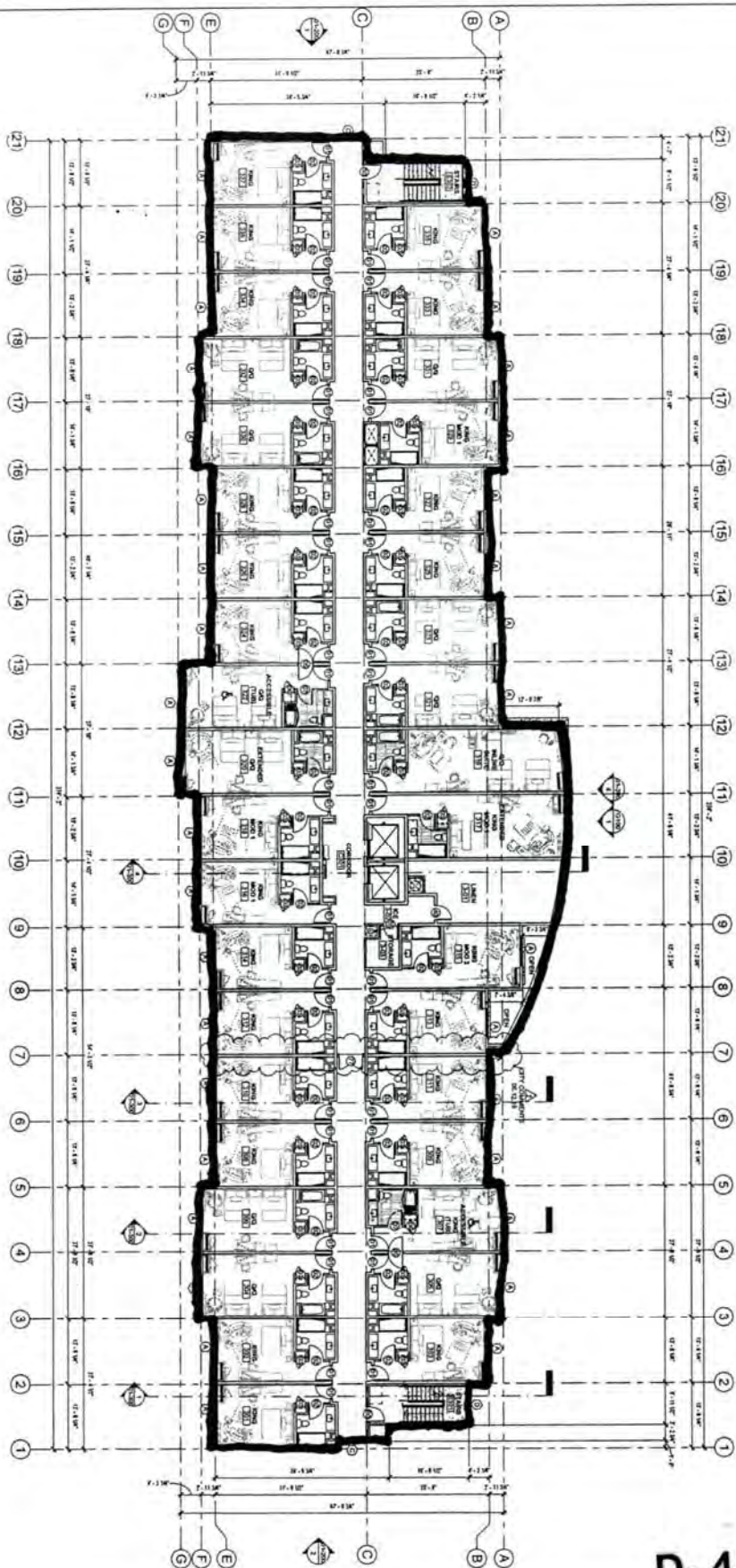
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COURTYARD BY MARRIOTT

3056 W. COUNTY LINE ROAD  
LITTLETON, CO, 80129

Project #:	1427
Date:	06/05/05
Drawn by:	Alvin
Checked by:	Chris
Drawing title:	THIRD FLOOR PLAN
Drawing number:	

01-102



### 1 THIRD FLOOR PLAN

GUEST ROOM COUNT BREAKDOWN:					
	1ST FLOOR	2ND FLOOR	3RD FLOOR	4TH FLOOR	TOTAL
GUEST ROOMS	2	8	8	8	26
SUITE SUITES ACCOMMOD	-	-	1	-	1
GUEST SUITES EXTENDED	-	1	1	1	3
SUITE SUITES NAME SUITE	-	-	-	1	1
SUITE SUITES NAME ACCOMMOD	1	-	-	-	1
NAME	8	26	26	26	86
NAME NAME 1	-	1	1	8	10
NAME NAME 2	1	1	1	1	4
NAME EXTENDED NAME 1	-	1	1	-	2
NAME ACCOMMOD	1	-	-	-	1
TOTAL	12	36	37	33	118

#### REFERENCE NOTES

1. RETURN TO THE LOCK ROOM FOR THE KEYS
2. RETURN TO THE LOCK ROOM FOR THE KEYS
3. RETURN TO THE LOCK ROOM FOR THE KEYS
4. RETURN TO THE LOCK ROOM FOR THE KEYS
5. RETURN TO THE LOCK ROOM FOR THE KEYS
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7. RETURN TO THE LOCK ROOM FOR THE KEYS
8. RETURN TO THE LOCK ROOM FOR THE KEYS
9. RETURN TO THE LOCK ROOM FOR THE KEYS
10. RETURN TO THE LOCK ROOM FOR THE KEYS

CRITERIA MOJES:[illegible]

### STIMULUS LEGEND

[illegible]

TRIPOLI ALL'INCONTRO. NOTTE 10 P.M.

[illegible]





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1. **FROM SCHOOL:** Please provide a brief description of your training and qualifications for this position.

- [illegible]

[illegible]

3056 W. COUNTY LINE ROAD  
LITTLETON, CO. 80129

project #:	14217
date:	06/08/2015
drawn by:	Amyl
checked by:	Emilee
drawing title:	

KITCHEN EQUIPMENT

Frequency Distribution

**04-800**