CITY OF BOULDER

Officer & Ownership Change –

Application Packet

Instructions & Guide: Pages 2-8

Application: Pages 9-12

Last Edited: 5/27/2021

OWNERSHIP/ OFFICER/ MEMBER CHANGES CHANGES MUST BE REPORTED WITHIN 30 DAYS

CHECKLIST OF REQUIRED DOCUMENTS

Report of Changes, Corporation, LLC and Partnership Application (State form DR8177): completed fully listing all current officers, members, managing members and partners and who they are replacing, listing all owners with over a 10% interest and who they are replacing, and signed in Oath of Applicant section by an authorized representative of the licensee.
Certificate of Good Standing from Secretary of State's website for licensee business entity.
Articles of Incorporation, Organization, or Partnership from Secretary of State's website for licenses business entity.
Corporate, Limited Liability, or Partnership documents explaining the reported change in ownership officers, directors, members, managing members, and partners i.e. stock or share purchase agreements signed by both seller and buyer, corporate minutes signed by corporate secretary, signed letters or resignation, signed letters of appointment, signed amendments to bylaws, corporate articles, LLC operating agreements and exhibits, and partnership agreements.
Individual History Record Form (State form- DR8404-I) for each new owner, officer, member, managing member, and partner to describe the financial details of their involvement and for all remaining owners officers, members, managing members, and partners if their originally submitted financial disclosures are amended due to this change. Form should also list all criminal arrests and convictions for new person.
CABS receipt for digital prints for all new owners, officers, members, managing members, and partners.
Fees \$100.00 per each new person requiring city research payable to the "City of Boulder" Paid online at https://energovcss.bouldercolorado.gov/EnerGov_Prod/SelfService/

Application Process: Licensing Office will: i) IHR self check via CBI website conducted on all new owners, officers, members, managing members, and partners. ii) Fingerprint cards submitted to CBI for CBI/FBI check. iii) Licensing database updated to record changes to ownership and responsible persons. iv) Calendar tickler for 90 days to await CBI/FBI check results. v) IHR Addendum sent to new person at their home address for explanation on any undisclosed background results to check for dismissal. vi) At 90 days or sooner if results received, DR8177 state form, approved by City of Boulder, with attachments will be mailed to state liquor enforcement division. Licensing database should have change status updated to indicate form forwarded to state. If criminal background check results are found indicating the need for Beverage Licensing Authority (BLA) hearing, then applicant is informed in writing and BLA hearing is scheduled. If administratively approved or approved by BLA, when received back, state approved copy of state form should be mailed to licensee applicant's business mailing address for their records.

Liquor and Marijuana Licensing Fingerprinting

The City of Boulder Licensing Division has changed their fingerprinting procedures in response to Senate Bill 17-189.

The Colorado Bureau of Investigations (CBI) has implemented a new process beginning September 24, 2018: Colorado Applicant Background Services (CABS).

To use this service, you will need to go online to one of the state approved vendors to register, schedule your appointment, and pay for your own fingerprinting.

These vendors are selected and trained specifically by the CBI and will be the only locations where civil fingerprinting services will now be available.

The vendor services will be located throughout the state, which is intended to increase applicants' ability to obtain fingerprints in a timely manner. Fingerprints will be submitted electronically, which will allow results to take only hours for processing instead of days or weeks.

In order to receive your City of Boulder specific code to register/schedule with CABS, you must first book your application intake appointment with city licensing staff

by calling 303-441-4192.

Once confirmed, we will email you your unique code for the CABS vendor.

Please make sure you retain your receipt or confirmation of fingerprinting as this will replace the print card proof you will need to submit with your city application at your appointment.

The City of Boulder has chosen the following CABS vendor:

IDEMIA - IdentoGO https://www.idemia.com

Please direct further questions about registration, services, and locations to your CABS vendor.



Identification Unit 690 Kipling Street, Suite 3000 Denver, CO 80215 303-239-4208

NOTICE TO APPLICANTS

As an applicant for a position requiring fingerprints to be submitted to the Colorado Bureau of Investigation ("CBI") and the Federal Bureau of Investigation ("FBI"), your fingerprints will be submitted to these agencies to check state and FBI records.

Discrepancies on your Colorado record can be challenged and corrected by contacting the Colorado Bureau of Investigation at 690 Kipling St., Suite 3000, Denver, CO 80215, or by calling the Identification Unit at (303) 239-4208. Additional information is available from CBl's website at www.colorado.gov/cbi.

Discrepancies on records from the FBI or relating to another state can be challenged through the FBI. Information, including that listed below, can be found at their website at www.fbi.gov.

The <u>U.S. Department of Justice Order 556-73</u> establishes rules and regulations for the subject of an FBI Identification Record to obtain a copy of his or her own record for review. The FBI's Criminal Justice Information Services ("CJIS") Division processes these requests.

Who May Request a Copy of a Record? (or proof that a record does not exist) Only you can request a copy of your own Identification Record.

How to Request a Copy of Your Record?

The FBI offers two methods for requesting your FBI Identification Record or proof that a record does not exist:

Option 1: Submit your request directly to the FBI.

Option 2: Submit your request to an FBI-approved Channeler, which is a private business that has contracted with the FBI to receive the fingerprint submission and relevant data, collect the associated fee(s), electronically forward the fingerprint submission with the necessary information to the FBICJIS Division for a national criminal history record check, and receive the electronic record check result for dissemination to the individual. Contact each Channeler for processing times.

AGENCY INSTRUCTIONS: To comply with federal law, provide a copy of this document to each applicant fingerprinted.



Privacy Act Statement

This privacy act statement is located on the back of the FD-258 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 03/30/2018

Declaración de la Ley de Privacidad

Esta declaración de la ley de privacidad se encuentra al dorso del FD-258 tarjeta de huellas digitales.

Autoridad: La adquisición, preservación, e intercambio de huellas digitales e información relevante por el FBI es autorizada en general bajo la 28 U.S.C. 534. Dependiendo de la naturaleza de su solicitud, la autoridad incluye estatutos federales, estatutos estatales de acuerdo con la Pub. L. 92-544, Órdenes Ejecutivas Presidenciales, y reglamentos federales. El proveer sus huellas digitales e información relevante es voluntario; sin embargo, la falta de hacerlo podría afectar la terminación o aprobación de su solicitud.

Propósito Principal: Ciertas determinaciones, tal como empleo, licencias, y autorizaciones de seguridad, podrían depender de las investigaciones de antecedentes basados en huellas digitales. Se les podría proveer sus huellas digitales e información relevante/ biométrica a la agencia empleadora, investigadora, o responsable de alguna manera, y/o al FBI con el propósito de comparar sus huellas digitales con otras huellas digitales encontradas en el sistema Next Generation Identification (NGI) del FBI, o su sistema sucesor (incluyendo los depósitos de huellas digitales latentes, criminales, y civiles) u otros registros disponibles de la agencia empleadora, investigadora, o responsable de alguna manera. El FBI podría retener sus huellas digitales e información relevante/biométrica en el NGI después de terminar esta solicitud y, mientras las mantengan, sus huellas digitales podrían continuar siendo comparadas con otras huellas digitales presentadas a o mantenidas por el NGI.

Usos Rutinarios: Durante el procesamiento de esta solicitud y mientras que sus huellas digitales e información relevante/biométrica permanezcan en el NGI, se podría divulgar su información de acuerdo a su consentimiento, y se podría divulgar sin su consentimiento de acuerdo a lo permitido por la Ley de Privacidad de 1974 y todos los Usos Rutinarios aplicables según puedan ser publicados en el Registro Federal, incluyendo los Usos Rutinarios para el sistema NGI y los Usos Rutinarios Generales del FBI. Los usos rutinarios incluyen, pero no se limitan a divulgación a: agencias empleadoras gubernamentales y no gubernamentales autorizadas responsables por emplear, contratar, licenciar, autorizaciones de seguridad, y otras determinaciones de aptitud; agencias de la ley locales, estatales, tribales, o federales; agencies de justicia penal; y agencias responsables por la seguridad nacional o seguridad pública.

A partir de 30/03/2018

NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. 1 These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained.2
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at https://www.fbi.gov/services/cjis/identity-history-summary-checks and https://www.edo.cjis.gov.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via https://www.edo.cjis.gov. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.3

¹ Written notification includes electronic notification, but excludes oral notification.

² https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

³ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

DERECHOS DE PRIVACIDAD DE SOLICITANTES - JUSTICIA, NO CRIMINAL

Como solicitante sujeto a una indagación nacional de antecedentes criminales basado en huellas dactilares, para un propósito no criminal (tal como una solicitud para empleo o una licencia, un propósito de inmigración o naturalización, autorización de seguridad, o adopción), usted tiene ciertos derechos que se entablan a continuación. Toda notificación se le debe proveer por escrito.1 Estas obligaciones son de acuerdo al Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, y Title 28 Code of Federal Regulations (CFR), 50.12, entre otras autorizaciones.

- Se le debe proveer una Declaración de la Ley de Privacidad del FBI (con fecha de 2013 o más reciente) por escrito cuando presente sus huellas digitales e información personal relacionada. La Declaración de la Ley de Privacidad debe explicar la autorización para tomar sus huellas digitales e información relacionada y si se investigarán, compartirán, o retendrán sus huellas digitales e información relacionada.2
- Se le debe notificar por escrito el proceso para obtener un cambio, corrección, o
 actualización de su historial criminal del FBI según delineado en el 28 CFR 16.34.
- Se le tiene que proveer una oportunidad de completar o disputar la exactitud de la información contenida en su historial criminal del FBI (si tiene dicho historial).
- Si tiene un historial criminal, se le debe dar un tiempo razonable para corregir o completar el historial (o para rechazar hacerlo) antes de que los funcionarios le nieguen el empleo, licencia, u otro beneficio basado en la información contenida en su historial criminal del FBI.
- Si lo permite la política de la agencia, el funcionario le podría otorgar una copia de su
 historial criminal del FBI para repasarlo y posiblemente cuestionarlo. Si la política de la
 agencia no permite que se le provea una copia del historial, usted puede obtener una copia
 del historial presentando sus huellas digitales y una tarifa al FBI. Puede obtener
 información referente a este proceso en https://www.fbi.gov/services/cjis/identity-historysummary-checks y https://www.edo.cjis.gov.
- Si decide cuestionar la veracidad o totalidad de su historial criminal del FBI, deberá presentar sus preguntas a la agencia que contribuyó la información cuestionada al FBI. Alternativamente, puede enviar sus preguntas directamente al FBI presentando un petición por medio de .https://www.edo.cjis.gov. El FBI luego enviará su petición a la agencia que contribuyó la información cuestionada, y solicitará que la agencia verifique o corrija la información cuestionada. Al recibir un comunicado oficial de esa agencia, el FBI hará cualquier cambio/corrección necesaria a su historial de acuerdo con la información proveída por la agencia. (Vea 28 CFR 16.30 al 16.34.)
- Usted tiene el derecho de esperar que los funcionarios que reciban los resultados de la
 investigación de su historial criminal lo usarán para los propósitos autorizados y que no los
 retendrán o diseminarán en violación a los estatutos, normas u órdenes ejecutivos federales,
 o reglas, procedimientos o normas establecidas por el National Crime Prevention and
 Privacy Compact Council.3

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Actualizado 6/11/2019

La notificación por escrito incluye la notificación electrónica, pero excluye la notificación verbal.

² https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

³ Vea 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (anteriormente citada como 42 U.S.C. § 14616), Article IV(c); 28 CFR 20.21(c), 20.33(d) y 906.2(d).

DR 8177 (06/10/19) COLORADO DEPARTMENT OF REVENUE

Liquor Enforcement Division (303) 205-2300

Report of Changes Corporation, Limited Liability Company and Partnership Liquor and Fermented **Malt Beverage Licenses**

		structions a	and Fee Sch	edule on Page 2				
1. Corporate/LLC P	artnership Name	,	2. State Tax A	ccount Number	3. State Liq	3. State Liquor License Number		
4. Trade Name						5. Telephone Number		
6. Address of Licens	sed Premises			Dity	State	ZIP		
	5 1155 t t1			N	21.1	710		
7. Mailing Address i	f different than abo	ove		City	State	ZIP		
				.C) or General Partner(s). Each officer, Dire	ector, Managing Member or		
Position Held				ome Address	DOB	Replaces		
			more) Members or	10% (or more) Limited	Partners. Each pe	son listed Must Fill out a		
		-	Н	ome Address	DOB	Replaces		
owning 10% (o	r more) of busine	ess Owned						
10 Registered Age	nt			Address For Service				
Ter regional rigor				/ tudioco i oi coivio				
			of perjury in the s	econd degree that this				
4. Trade Name 6. Address of Licensed Premises City State ZIP 7. Mailing Address if different than above City State ZIP 8. LIST ALL Officers, directors (corporation) or Managing Members (LLC) or General Partner(s). Each officer, Director, Managing Meml Partner MUST FILL OUT a DR 8404-1 (Individual History Record). Position Held Names Home Address DOB Replaces 9. LIST ALL 10% (or more) Stockholders or 10% (or more) Members or 10% (or more) Limited Partners. Each person listed Must Fill on DR 8404-1 (Individual History Record) Stockholders/Members/Partners %					Date			
	The fore				LL icensing Authorit	.,		
12. Local Licensing	Authority For	sgoing changes na	ive been received a	nd examined by the Loca	Licensing Admong			
Signature			Title			Town/City Date		
oignatule			Title			Date		
Attest						Date		
	D. N	04 \A/wi40 In Th	la Chana - Free	Demontrace of Demontrace	amus Haa Oak			
	DO N	ot write in 1ni		Department of Rev	enue USE Uniy			
License Acco	unt Number	Per	riod	Cash Fund	d	Total		
						•		

Instructions

Corporation, Limited Liability Company or Partnership Report of Changes

NOTE: ENCLOSE A CHECK PAYABLE TO THE AUTHORITY WHERE THIS APPLICATION WILL BE FILED FOR \$100.00 FOR EACH PERSON LISTED IN SECTIONS 8 AND 9 ON THE APPLICATION. MASTERFILE APPLICANTS MUST INCLUDE A FEE OF \$250.00 FOR EACH PERSON LISTED PAYABLE TO THE

COLORADO DEPARTMENT OF REVENUE. (Application filed directly to the state)

NOTE: Check the appropriate box at the top to indicate whether you are Limited Liability Company (LLC), Partnership or Corporation.

Attach the following supporting documents to the Report of Changes Application:

- Certificate of Incorporation (or) Date stamped Articles or, Partnership Agreement (Limited and General Partnerships)
- Certificate of Good Standing dated within the last two years
- Certificate of Authority (only if a foreign corporation)
- Copies of minutes of meetings by the Corporation, Limited Liability Company or Partnership supporting the changes reflected on the front of this application. This includes letters of resignation, or appointment of any officers, or directors of a Corporation, or any managing member or members of a Limited Liability Company, or any general or limited partner in a Partnership (including husband and wife partnerships).
- NOTE: If the Licensee as listed on Line 1 has a sole stockholder that is a Corporation, or LLC, or Partnership, attach a letter designating one officer, or managing member or the general partner to be the "principal person" for the applicant. This person MUST ALSO fill out a DR8404-I (Individual History Record) and submit fingerprints by making an appointment with an approved State Vendor through the Vendor's website:

The vendors are as follows:

IdentoGO - https://uenroll.identogo.com/

Phone: 844-539-5539 (toll-free)

IdentoGO FAQs: https://www.colorado.gov/pacific/cbi/identification-faqs

Colorado Fingerprinting - http://www.coloradofingerprinting.com

Appointment Scheduling Website:

http://www.coloradofingerprinting.com/cabs/

Phone: 720-292-2722 Toll Free: 833-224-2227

This application and all supporting documents must FIRST BE FILED WITH, AND APPROVED BY, THE LOCAL LICENSING AUTHORITY (CITY, TOWN, COUNTY). Applications will not be accepted unless all applicable questions are fully answered, all supporting documents correspond exactly with the name of the applicant.

- 1. List the name of the Corporation or Limited Liability Company or Partnership
- 2. List the State Sales Tax Number.
- 3. List the Applicant's State Liquor License Number.
- 4. List the Trade name of the business.
- 5. List the area code and telephone number of the business.
- List the complete address, City, State and Zip Code, of the licensed premises.
- 7. List your mailing address if different than number 6 above.
- 8. List all officers, directors of a corporation, or all managing members of the LLC, or General Partners of Limited or General Partnerships. List the person's Position, Home Address, Date of Birth and the name of the person being replaced (if applicable).
- 9. List all 10% (or more) stockholders or members or Partners, and indicate ownership percentage, Home Address, Date of Birth, and the name of the person they purchased ownership interest from (if applicable).
- 10. List the name and address for service of the Registered Agent.
- 11. A person authorized to sign on behalf of the Applicant must sign the application, list their title, and the date the application was signed.
- 12. To be filled out by the local licensing authority only. List the name of the authority and indicate if the authority is a county, town/city. Then sign the application, list your title and attest the city/county officials signature and date the application.

DR 8404-I (03/20/19)
COLORADO DEPARTMENT OF REVENUE
Liquor Enforcement Division
(303) 205-2300

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

Notice: This individual history recomust be answered in their entirety so by "N/A". Any deliberate misre separate sheet if necessary to enal	or the prese	license application tation or mater	on may b rial omis	e delayed or denied. If sion may jeopardize t	a question	is not apı	plicable, plea	se indicate	
1. Name of Business				Home Phone Number	Cellular No	ar Number			
Your Full Name (last, first, middle) 4. Mailing address (if different from residence)				3. List any other names you have used					
				Email Address					
5. List current residence address. I	nclude	any previous ad	dresses	within the last five yea	rs. (Attach	separate	sheet if nece	ssary)	
Street and Number				City, State, Z	ip		From	То	
Current									
Previous									
6. List all employment within the las	st five	years. Include ar	ny self-er	mployment. (Attach ser	parate shee	t if neces	sary)		
Name of Employer or Busines	ss	Address (Stre	et, Num	ber, City, State, Zip)	Position Held		From	То	
7. List the name(s) of relatives world	king in	or holding a fina	ncial inte	erest in the Colorado al	cohol bever	age indu	stry.		
Name of Relative	ı	Relationship to	You	Position He	ld N		Name of Licensee		
Have you ever applied for, held, furniture, fixtures, equipment or in the second					e, or loaned	I money,	□Ye	s 🗆 No	
8. Have you ever applied for, held, furniture, fixtures, equipment or i					e, or loaned	I money,	□Ye	s 🗆 No	
					e, or loaned	I money,	□Ye	s 🗆 No	
					e, or loaned	I money,	□Ye	s 🗆 No	
	on not	ory to any license	ee? (If ye	s, answer in detail.) ation for a liquor law vic	plation, or h	ave you	Vo		
furniture, fixtures, equipment or i 9. Have you ever received a violation	on not	ory to any license	ee? (If ye	s, answer in detail.) ation for a liquor law vic	plation, or h	ave you	Vo		
furniture, fixtures, equipment or i 9. Have you ever received a violation	on not	ory to any license	ee? (If ye	s, answer in detail.) ation for a liquor law vic	plation, or h	ave you	Vo		

DR 8404-I (03/20/19)								
					ence, deferred sen ges pending? (If ye	tence, or forfeited s, explain in detail.)	☐ Yes ☐	No
	tly under probation nce? (If yes, expla		unsupervise	ed), parole,	or completing the i	requirements of a	☐ Yes ☐	No
12. Have you ever	had any professio	nal license sus	pended, revo	ked, or de	nied? (If yes, expla	in in detail.)	☐ Yes ☐	No
Unless otherwise professional information requires		e personal infor	mation requi	ired in ques	Information stion #13 will be tre	ated as confidentia	. The personal	
	b. Social Security N		c. Place of E			d. U.S. Citiz	en Yes	No
e. If Naturalized, state where			f. When		g. Name of District			
h. Naturalization Cert	tificate Number i.	Date of Certificati	ion j. If an Alier	n, Give Alien'	s Registration Card Nur	mber k. Permanent Re	esidence Card Nu	mbe
I. Height m. Weight	n. Hair Color	. Eye Color	p. Gender			s's License/ID? If so, giv		te.
b. List the total notes, loan * If corpore ** Section to the component of the corporation of the corporatio	s, cash, services on ate investment or o should reflect the	ersonal investmor equipment, op nly please skip ne total of sect estment describ	perating capi to and com ions c and e	tal, stock p plete sect ou must acc	urchases or fees prion (d)	on #2, in this busine aid. \$ sources of this inves		
Type. Gasii, Gei	vices of Equipme	7	Account Typ		Dair	(Name	Amount	
d. Provide details of separate sheet i		vestment descri	bed in 14 (a)	. You must	account for all of the	ne sources of this in	vestment. (Attac	ch a
Type: Cash, Services or Equipment		ent Loans	Loans Account Type		Bank Name		Amount	
e. Loan Information		all notes or loa	ans)					
Name	of Lender		Address		Term	Security	Amount	

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