

**CITY OF WOODLAND PARK
RETAIL LIQUOR TASTINGS
PERMIT APPLICATION**

Licensee Name: _____

DBA: _____

Address: _____

City, State, Zip: _____

Mailing Address (if different): _____

State License Number _____

Business Phone Number: _____

At all times during all Tastings, the Licensee shall post and keep visible to the public in a conspicuous place on the licensed premises the Tastings Permit issued by the City Clerk, and a Minor Warning sign [C.R.S. 12-47-901(5)(h)].

CERTIFICATION OF APPLICANT

I hereby certify that the information in this application is true, correct, and complete to the best of my knowledge. I certify that it is my responsibility to be sure that all current and future employees complete a servers training program through the Woodland Park Police Department and to submit documentation of training to the City Clerk's office. I certify that the licensed premises will keep a log of all tasting dates and times, the log will be kept on the premises for inspection at any time by the local or state enforcement agencies. I certify that it is my responsibility and the responsibility of my agents and employees to comply with all applicable laws, including all applicable provisions of the City of Woodland Park Municipal Code and the Colorado Liquor or Beer Code Regulations that affect my license.

Authorized Signature: _____

Title: _____

Date: _____

**CITY OF WOODLAND PARK
APPROVAL OF LOCAL LICENSING AUTHORITY**

(This permit runs concurrently with the liquor license approved by the State of Colorado)

Mayor Date

ATTEST:

City Clerk Date