



# Brighton<sup>SM</sup>

## Liquor Licensing Authority Temporary Permit Application

Name of Applicant: \_\_\_\_\_

Trade Name (DBA): \_\_\_\_\_

Business Address: \_\_\_\_\_

Type of License Applied For: \_\_\_\_\_

Current Name of Licensee: \_\_\_\_\_

Current Trade Name (DBA): \_\_\_\_\_

Current License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

I/We wish to apply for a Temporary Permit for the location listed above to permit the sale of alcohol as permitted under the current license during the period in which the application for transfer is pending.

No more than thirty (30) days has elapsed since the filing of the application for transfer.

I/We understand that this Temporary Permit, if granted, shall be valid for one hundred twenty (120) days, from date of issuance until the application to transfer ownership has been granted or denied, whichever is the first to occur.

I/We further understand that if the transfer has not been granted within one hundred twenty (120) days, and if I/we demonstrate good cause, and timely file a request for extension of the Temporary Permit, the Local Licensing Authority may, in its sole discretion, extend the Temporary Permit for an additional period not to exceed sixty (60) days.

I/We further understand that the temporary Permit may be cancelled, revoked or summarily suspended if there is a determination that there is a probable cause to believe that the Applicant has violated any applicable statutory provision, or rule, or regulation, or has failed to truthfully provide all required information.

Attached hereto is a copy of the statement of accounts required by C.R.S Section 12-47-303(3))b)(V) which has been filed with the state licensing authority.



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Attached is the \$100.00 non-refundable Temporary Permit Fee.

\_\_\_\_\_  
Signature and Title

\_\_\_\_\_  
Date

STATE OF COLORADO )

) ss

COUNTY OF ADAMS )

This application for a Temporary Permit was executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
by \_\_\_\_\_, the \_\_\_\_\_, of \_\_\_\_\_

SEAL

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_