

## COMMON CONSUMPTION AREA APPLICATION

The Lakewood Liquor Authority may approve an application for a Common Consumption Area (CCA) within a designated Entertainment District, subject to the provisions of Chapter 5.39.040 of the Lakewood Municipal Code and C.R.S. 44-3-101, et seq.

<input type="checkbox"/>	<b>Common Consumption Area Application Fee</b>	<b>\$500</b>
<input type="checkbox"/>	<b>Common Consumption Area Renewal Application Fee</b>	<b>\$250</b>

**Common Consumption Information.** Please list the name of the entertainment district where the common consumption area will be located: \_\_\_\_\_.

**Site Plan Information.** Please include the following information to satisfy the site plan requirements for the common consumption area:

- ☐ **A map indicating the location of the common consumption area within the entertainment district.**
- ☐ **A diagram showing the boundaries of the proposed common consumption area outlined in red.**
- ☐ **The location of all physical barriers, entrances and exits of the common consumption area.**
- ☐ **Identify of any liquor licensed premises that are immediately adjacent, but not attached to the common consumption area:**

1. Business Name (dba): _____ Liquor License Class: _____
2. Business Name (dba): _____ Liquor License Class: _____
3. Business Name (dba): _____ Liquor License Class: _____
4. Business Name (dba): _____ Liquor License Class: _____
5. Business Name (dba): _____ Liquor License Class: _____



- ☐ **Identify all non-liquor licensed businesses whose premises are included within the boundaries of the common consumption area:**

1. Business Name: _____
2. Business Name: _____
3. Business Name: _____
4. Business Name: _____
5. Business Name: _____
6. Business Name: _____
7. Business Name: _____
8. Business Name: _____
9. Business Name: _____
10. Business Name: _____
11. Business Name: _____
12. Business Name: _____
13. Business Name: _____
14. Business Name: _____
15. Business Name: _____

*(Attach additional sheets as needed)*



- ☐ **Identify all liquor licensed premises to be attached to the common consumption area, including addresses, contact names and liquor license number:**

1. Business Name (dba): \_\_\_\_\_  
Address: \_\_\_\_\_  
Owner & Manager: \_\_\_\_\_  
Liquor License Number: \_\_\_\_\_  
Licensed Square Footage: \_\_\_\_\_  
☐ Will be providing alcohol beverages for consumption within the proposed CCA.

2. Business Name (dba): \_\_\_\_\_  
Address: \_\_\_\_\_  
Owner & Manager: \_\_\_\_\_  
Liquor License Number: \_\_\_\_\_  
Licensed Square Footage: \_\_\_\_\_  
☐ Will be providing alcohol beverages for consumption within the proposed CCA.

3. Business Name (dba): \_\_\_\_\_  
Address: \_\_\_\_\_  
Owner & Manager: \_\_\_\_\_  
Liquor License Number: \_\_\_\_\_  
Licensed Square Footage: \_\_\_\_\_  
☐ Will be providing alcohol beverages for consumption within the proposed CCA.

4. Business Name (dba): \_\_\_\_\_  
Address: \_\_\_\_\_  
Owner & Manager: \_\_\_\_\_  
Liquor License Number: \_\_\_\_\_  
Licensed Square Footage: \_\_\_\_\_  
☐ Will be providing alcohol beverages for consumption within the proposed CCA.

5. Business Name (dba): \_\_\_\_\_  
Address: \_\_\_\_\_  
Owner & Manager: \_\_\_\_\_  
Liquor License Number: \_\_\_\_\_  
Licensed Square Footage: \_\_\_\_\_  
☐ Will be providing alcohol beverages for consumption within the proposed CCA.



<p>6. Business Name (dba): _____ Address: _____ Owner &amp; Manager: _____ Liquor License Number: _____ Licensed Square Footage: _____ <input type="checkbox"/> Will be providing alcohol beverages for consumption within the proposed CCA.</p>
<p>7. Business Name (dba): _____ Address: _____ Owner &amp; Manager: _____ Liquor License Number: _____ Licensed Square Footage: _____ <input type="checkbox"/> Will be providing alcohol beverages for consumption within the proposed CCA.</p>
<p>8. Business Name (dba): _____ Address: _____ Owner &amp; Manager: _____ Liquor License Number: _____ Licensed Square Footage: _____ <input type="checkbox"/> Will be providing alcohol beverages for consumption within the proposed CCA.</p>
<p>9. Business Name (dba): _____ Address: _____ Owner &amp; Manager: _____ Liquor License Number: _____ Licensed Square Footage: _____ <input type="checkbox"/> Will be providing alcohol beverages for consumption within the proposed CCA.</p>
<p>10. Business Name (dba): _____ Address: _____ Owner &amp; Manager: _____ Liquor License Number: _____ Licensed Square Footage: _____ <input type="checkbox"/> Will be providing alcohol beverages for consumption within the proposed CCA.</p>

*(Attach additional sheets as needed)*



**Hours of Operation:** Please provide a description of the proposed days and hours of operation for the common consumption area or indicate if operating hours will be for specific events only.

<b>Sunday</b> Yes    No	Start Time: _____	End Time: _____
<b>Monday</b> Yes    No	Start Time: _____	End Time: _____
<b>Tuesday</b> Yes    No	Start Time: _____	End Time: _____
<b>Wednesday</b> Yes    No	Start Time: _____	End Time: _____
<b>Thursday</b> Yes    No	Start Time: _____	End Time: _____
<b>Friday</b> Yes    No	Start Time: _____	End Time: _____
<b>Saturday</b> Yes    No	Start Time: _____	End Time: _____

Any additional comments about dates and hours: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**THE FOLLOWING ITEMS MUST ALSO BE SUBMITTED:**

- ☐ **Security & Admissions Plan:** Provide a detailed description of the security arrangements, which must include the following items: the approximate number of security personnel and the approximate location of personnel within the common consumption area; training of personnel; how responsible service and health and safety of neighborhood will be ensured; how alcohol will be prevented from leaving the common consumption area; how will alcohol be prevented in being brought into the common consumption area in nonapproved containers during operating hours.
- ☐ **Parking & Transportation Plan:** Any required permits or authorizations for parking and transportation including, but not limited to, right-of-way, street closures or zoning variances.
- ☐ **Health & Sanitation Plan:**
- ☐ Any other applicable zoning, fire or building permits / variances.
- ☐ Articles of Incorporation for Promotional Association must include a list of the board members that shows a member from each licensed premises to be providing alcohol for consumption in the common consumption area.



- ☐ Proof that notice of the application for a common consumption area was served on the owner of each non-liquor licensed business located within the proposed consumption including the date and time of the hearing to be held regarding the establishment of such consumption area, such service to be either in person or by registered mail.
- ☐ Evidence of community support, which may include any additional operational requirements that the registered neighborhood organization(s) within the designated neighborhood, if any, desire to protect the health, safety, and welfare of the surrounding community.
- ☐ Permission for use of Common Consumption Area — Provide written permission from the property owner permitting use of all portions of the common consumption area.
- ☐ Application Fee of \$500.00 or Renewal Fee of \$250.00 — A CCA shall be approved for a term not to exceed twelve (12) months.

**APPLICANT CONTACT INFORMATION AND AUTHORIZATION:**

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

**Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**OATH OF APPLICANT:**

I declare under penalty of law 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 Code, Colorado Beer Code, and all other state or municipal ordinances. I declare that I am authorized to sign this document.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Please submit your completed application to the Lakewood City Clerk's Office at: 480 S. Allison Parkway Lakewood, CO 80226. If submitting through email, please send applications to: [cityclerksoffice@lakewood.org](mailto:cityclerksoffice@lakewood.org)

**City Use Only**  
**Local Licensing Authority Approval**

**Hearing Date:** \_\_\_\_\_

**Common Consumption Area:** \_\_\_\_\_ Approved \_\_\_\_\_ Disapproved

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_