



CITY OF TRINIDAD
TRINIDAD, COLORADO

The Regular Meeting of the City Council of the City of Trinidad,
Colorado, will be held on Tuesday, July 15, 2014 at 7:00 P.M.
in City Council Chambers at City Hall

The following items are on file for consideration of Council:

PROCLAMATION – “MARY MARTINEZ DAY” – July 16, 2014

- 1) **ROLL CALL**
- 2) **APPROVAL OF MINUTES**, Special Meetings of June 26, 2014, June 30, 2014, July 1, 2014 and Regular Meeting of July 1, 2014
- 3) **PUBLIC HEARING**
 - a) New Medical Marijuana Center application filed by T. P. Main Street, LLC at 821 E. Main Street
 - b) New Medical Marijuana Optional Premise Cultivation Operation application filed by T. P. Main Street, LLC at 821 E. Main Street
 - c) New Medical Marijuana Infused-Products Manufacturer application filed by T. P. Main Street, LLC at 821 E. Main Street
- 4) **PETITIONS OR COMMUNICATIONS, ORAL OR WRITTEN**
- 5) **COUNCIL REPORTS**
- 6) **REPORTS BY CITY MANAGER AND CITY ATTORNEY**
- 7) **UNFINISHED BUSINESS**
- 8) **MISCELLANEOUS BUSINESS**
 - a) Special events permit request (malt, vinous, spirituous) by Trinidad Community Foundation at 206 N. Animas Street for September 13, 2014 – ArtoCade Cardango
 - b) Retail liquor store license renewal request by Opera House Wine & Spirits LLC d/b/a Tire Shop Wine & Spirits at 601 W. Main Street
 - c) Modification (permanent) of premises request by Image Hospitality, LLC d/b/a Quality Inn at 3125 Toupal Drive
 - d) Consideration of Contract Amendment to the Nomination and Construction Documents of Fish Hatchery and Zoo at Monument Lake Park
 - e) Appointment of Acting City Manager
 - f) Appointment of Director of Emergency Management pursuant to Section 12.4 of the Home Rule Charter
 - g) Letter of Support for a CNG Fueling Station in Trinidad
 - h) Appeal of a decision of the Planning, Zoning and Variance Commission filed by Forever Green, LLC, Application #2014-MMC-16 and 2014-OPCO-16, Request for Conditional Use Permit to establish a Medical Marijuana Center and a Medical Marijuana Optional Premise Cultivation Operation at 3019 Toupal Drive
- 9) **BILLS**
- 10) **PAYROLL**, July 5, 2014 through July 18, 2014
- 11) **ADJOURNMENT**

Individuals with disabilities needing auxiliary aid(s) may request assistance by contacting Audra Garrett, City Clerk, 135 N. Animas Street, Phone (719) 846-9843, or FAX (719) 846-4140. At least a 48 hour advance notice prior to the scheduled meeting would be appreciated so that arrangements can be made to locate the requested auxiliary aid(s).

Office of the Mayor

Trinidad, Colorado

Proclamation



"MARY MARTINEZ DAY"
July 16, 2014

WHEREAS, Mary Martinez, a Centenarian of Trinidad and Las Animas County, will celebrate her 103rd birthday on November 26, 2014, surpassing a milestone many of us will never attain; and

WHEREAS, Mary began her life in the Village of San Geronimo, New Mexico, the daughter of Elvido Gomez and Rita Swabacher-Gomez; and

WHEREAS, Mary is a woman of strong faith and has been since having made her First Holy Communion; and

WHEREAS, Mary moved to Cokedale, Colorado, when she was 13 years old, where she attended grade school, and then attended Sopris for her high school education; and

WHEREAS, Mary married Nestor Martinez in 1939 and together they raised five children; sadly a sixth passed away in infancy. Today Mary is blessed to have her children and 20 grandchildren, 40 great-grandchildren, and 25 great-great grandchildren; and

WHEREAS, Mary has enjoyed a full life, rich with the love of family and her faith in God. She continues to serve as an inspiration to her family.

NOW, THEREFORE, I, Joseph A. Reorda, Mayor of the City of Trinidad, Colorado, on behalf of the entire Trinidad City Council, do hereby proclaim July 16, 2014, as:

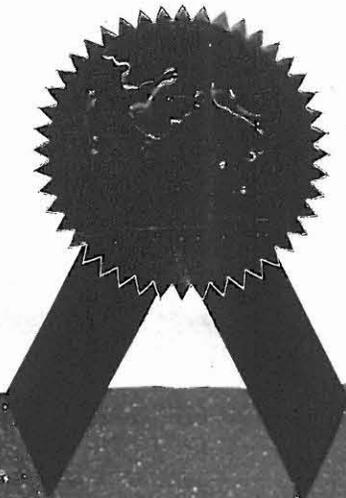
"MARY MARTINEZ DAY"

in the City of Trinidad, Colorado, in celebration of Mary Martinez's long, rich life.

*In witness whereof I have hereunto set my hand
and caused the seal of this city to be affixed.*

Mayor _____

Date _____



The City Council of the City of Trinidad, Colorado met in Special Session on Thursday, June 26, 2014, at 5:30 p.m. in City Council Chambers at City Hall pursuant to the following call:

CITY OF TRINIDAD
TRINIDAD, COLORADO

SPECIAL MEETING

There will be a Special Meeting of the City Council of the City of Trinidad, Colorado, on Thursday, June 26, 2014, at 5:30 p.m. in the Council Chambers at City Hall

The following items are on file for consideration of City Council:

- 1) Consideration of finance software acquisition
- 2) Consideration of 2014-2015 Colorado Welcome Center Statement of Work

The meeting was called to order at 5:30 p.m.

Roll call was taken.

There were present:	Mayor	Reorda, presiding
	Councilmembers	Bolton, Bonato, Mattie, Miles, Torres
Also present:	City Manager	Acre
	City Attorney	Downs
	City Clerk	Garrett
Absent:	Councilmember	Fletcher

Consideration of finance software acquisition. Finance Director Lonny Medina addressed Council. He explained that he was before them to see if they would approve the purchase of financial software to replace that which hasn't been upgraded in some time. He said he was hoping to saving \$5,000 (by acquiring the software prior to July 1st), but noticed in the contract that it was missing two modules, the board packets, agendas and meetings module and the human resources module. He said he looked back at the proposal and confirmed those were not included. Thereafter he contacted Tyler and they were willing to negotiate. The two modules missed would cost the City about \$25,000 more over five years. They agreed to \$5,000 more over the five years instead. They agreed to charge for training costs only instead. Finance Director Medina said he told Tyler he needed to bring this back to Council. Councilmember Bolton said that those two modules both sound important. Finance Director Medina said that he wanted to get this done by June 30th because on July 1st it will cost the City \$25,000 more. Councilmember Bolton questioned if that might be because it is the end of Tyler's fiscal year. Finance Director Medina said he thought it might be the end of their quarter. Councilmember Miles said she understood him to say at the last meeting that it will cost \$52,000 per year, and asked if it will now be \$53,000. Finance Director Medina said it will still cost \$52,000 per year. The additional \$5,000 is in training costs due next year and not part of the subscription agreement. When the work is done the City will pay at that time. Instead of training costing \$109,000 as discussed at the last meeting, it will be closer to \$114,000. Councilmember Mattie confirmed that the \$5,000 additional is not a software cost, just training. He said regarding the June 30th deadline he doesn't like being put on a short deadline, but recognizes there's a time limit to certain things. Had the City had a better system in place before we estimated utility bills, we might have alleviated some problems. The most glaring thing is the benefit to staff in efficiency and now is as good of time as any to do it with regard to the budget. Councilmember Torres told Council that she went through the contract and not knowing a lot about this subject she asked Jay Martinez and Era McCarthy to speak this evening. She stated that this company (Tyler) doesn't have a good track record and asked if he was aware of that. Finance Director Medina said that Tyler has over 2,000 customers. He said he is aware of one problem they had with a utility company that ended up political, from what he was told. They were apparently doing everything they needed to but were not being given enough time. Councilmember Bolton asked if he had spoken with other city administrators using Tyler and whether they were satisfied. Finance Director Medina answered that he went to the Government Finance Officers Association meeting last week and talked to a couple of people while he was there who were using Tyler's product and they were extremely happy with it and the fact that they have no wait time when they have problems and have to call in for help. He was also told that they wouldn't have any problem recommending the product to the City. Councilmember Bolton recalled that Raton, Las Animas County and Pueblo use Tyler. She asked if he had any discussions with anyone from those entities. Finance Director Medina said he talked to Kristy at Las Animas County today. She told him that the program does what it needs, they just need to watch for a couple of things. It was a matter of when dates are put into the system. He said he also spoke to the Finance Director in Raton who told him it works really well and they don't have any problems with it. Raton has their utilities on their system. He concluded that he feels Tyler is a reputable company and will handle anything the City needs to have done. Councilmember Torres asked Council to allow Jay Martinez and Era McCarthy to speak. She said the reason she asked them questions is because they do this type of work and had proposed some things to the City. Mayor Reorda agreed. Era McCarthy addressed Council. She said they actually found several court cases. Tyler does different types of modules and different types of software. Some of them seem to be more successful than others and some of their clients seem to do better than others. She said what she found to be scary was when one looks at the way they handle issues. They had written in one of the statements to the newspaper that any time you build something new there's going to be glitches and bugs. By using a company that's outside of the state, when there's an issue the City will have to pay to bring them here, and

it's not going to be cheap. As for training, she asked how many of the people Council thought on staff could handle two days of training. She asked if anyone looked at how Tyler is expecting the City to enter the data or convert it over. Ms. McCarthy asked who here is capable of doing that. Tyler is relying so much on the City and the way they have things set up if you look through their website, if anything goes wrong it's going to be the City's fault. She said it was kind of scary for her. They do work like this and in fact if they took on a contract like this they would work with MPI, a big company that they work with out of Florida, and an accounting firm. She said they wouldn't have done anything like this on their own. Ms. McCarthy said they did put in a proposal to do the very same thing probably nine months ago to Mr. Acre, and she wasn't sure if Council ever saw it. Almost everything they put, she said their company put also. Her company didn't go into detail because they didn't know what the City needed. She said they've been waiting for this RFP for quite a while. They thought they would be contacted at least to put in a bid. Whether they get it or not is neither here nor there, she said, but they would have liked the opportunity. She said it scares her how much responsibility is on Trinidad. Ms. McCarthy said she is here every day, helping people every day with their software, with their website and with their Facebook, and so she knows how much training it takes and doesn't think that somebody who isn't local would be willing to help someone here. The City is not just getting a payment system, there's a lot of bells and whistles on it and people need to be able to use it. Ms. McCarthy said that all they found when looking them up. There are a lot of people who are very unhappy but she thought it was because they couldn't handle the system, the training didn't work out for them, or it was a particular new module, especially schools. They had a school that had records disappearing and re-appearing, the grades. They are also having problems with their server information being backed up. She said she wouldn't even use servers. Servers are the past. She said they should be using an Amazon cloud-based storage. Finance Director Medina advised that it is cloud-based. Councilmember Miles said that is the hosted versus server they looked at, and are going with the hosted. Ms. McCarthy also opined that the price is a little high and that it seems like it doesn't fit Trinidad. She added that she didn't feel that it would have the small-town care. She didn't feel they would come in and personally train people, and if they do it will be very expensive. Mayor Reorda asked Finance Director Medina if he considered their proposal. Finance Director Medina said that he didn't know Ms. McCarthy's company could do this type of work. Mayor Reorda said he asked the Finance Director this morning if he went out to bid and he said he did not. Finance Director Medina said he contacted several companies that staff thought would work with the City best, Casselle, Tyler, BDG, and they gave the City proposals. BDG was more of a lateral movement than an upgrade. The City wanted someone to do everything. Mayor Reorda asked how he knows Jay and Era can't. Councilmember Bonato said he wasn't putting a plug in for Jay and Era, but he's been going to the I-25 corridor meetings and has seen the work they have done and thinks it is great work. He added that he didn't know whether City Attorney Downs had the opportunity to really read the contract with Tyler in the short time they had to do this. It is kind of a hard pill to swallow with the time period. He said his gut feeling is to not rush into things. He said he knows we need the update but feels if it takes a no vote for him to save the City \$250,000 and be wrong or give a yes vote and save \$5,000, he'd feel better about that. He said he thinks this is the shot in the arm we are looking for. Not a shot in the arm for Jay and Era, just a point that they are local people and do a fantastic job. We should give them a chance and see what they can do. Maybe they could add another 40 or 50 jobs. Councilmember Mattie asked Ms. McCarthy what other entities they serve with like software. He stated with all due respect to the presentation they made, they are doing a disservice to Tyler allowing Ms. McCarthy to shoot their bid without Tyler present. Ms. McCarthy told Council that she put in a proposal one year before they were ever contacted. Councilmember Mattie reiterated that it does a disservice to Tyler to have a competitor come up and assassinate their proposal. He added that from his own experience from where his wife works they use software from FPS Gold out of Utah. They have trainings and webinars. His wife and two employees just got back from training. They can do things out of state. He added that it is a disservice to City staff to think that they can't grasp the training in two days. It is an assault on their character and their mentalities. They are intelligent people. He said he believes they are qualified to make them good students to acquire the information in the training. The part he said he takes affront to is that a competitor is allowed to assassinate Tyler. If that's the case, we should have a representative of Tyler to refute her presentation and to express concerns about their work. Ms. McCarthy said the software was not put out to bid. Mayor Reorda said he's offended because they were not contacted to put a bid in. Ms. McCarthy said they have been putting in a bid for two years for this. Mayor Reorda comments that Council needs to see what they have done, having been to the I-25 meetings. They can connect with anybody in the state. Ms. McCarthy continued that they have been working with the cities and counties and organizations outside of here. Councilmember Mattie asked her to tell Council about their financial planning software that they have available. Ms. McCarthy stated that they just built one for Florida. Councilmember Mattie asked what they have to offer the City of Trinidad in financial software such as that being proposed. Ms. McCarthy said the City needs a processor first of all; you don't want to lose a lot of your money, secondly. You have to keep track of your records, you have to be able to do your data in your spreadsheets. She told him that he doesn't know anything about them and if they could put in the RFP they would have a lot more hold on it. The person that they build of it versus their partners is different. If they want to talk to her financial partner who builds that part with his team, he's a hold of it. It doesn't take one person; it is not her that would be building this software. It would be her and a whole team of people. She said they work with MPI and Itranware, which is local, in Hoehne, and his other partners are in Florida. There are a lot of local companies here that do work all over that she said she's sure the City doesn't know about. She continued that what really upsets her is that she's put this in over and over for two years. She said she is the one who turned in a whole paper to the City saying she found over twenty different federal violations on the City's website. They've been doing research for two years. They submitted a proposal that was very similar almost one year ago and they never even got a phone call to put in an RFP. There should have been an RFP. She clarified that she's not saying Tyler is bad or calling people stupid. She said what she is saying is that they only know what their experience is. She said when she first went to college she didn't even know how to load a disk in a computer. It took her longer to catch up than somebody else. Ms. McCarthy said this is a waste of their time and she and Jay Martinez and David Santistevan left Chambers. Mayor Reorda said he was told that Jay and Era approached the City in 2011 and he opined that City Manager Acre was not really fair to them. He said he recalled City Manager Acre saying the last time that he didn't get their e-mail and so Jay Martinez took it to City Manager Acre, but he didn't talk to Jay and Era. He asked why he is so adamant about not giving local people stuff. City Manager Acre said he left this software acquisition to Finance Director Medina. Mayor Reorda urged the incursion of local people. Councilmember Bolton said they shouldn't consider locals when they make a presentation like they just did. What they submitted was garbage. Mayor Reorda acknowledged her point but noted that they weren't even contacted to make a presentation. Councilmember Mattie said they weren't here to make a presentation; they were here make an assassination of Tyler, who wasn't here to defend themselves or explain it. Finance Director Medina reiterated that Tyler has over 2,000 cities using their software on a daily basis. It is not a system put together at one time or another. It is a well tested and used program that we are trying to get into our system. Mayor Reorda asked him if he knows Jay and Era can't do

this. Finance Director Medina answered that he doesn't know of them having cities or schools as customers. The programs that were looked at a highly specific, have a track record and have proven what they can do. The second program the city was looking at was the Casselle software. It was going to cost about \$100,000 more over five years. The software Tyler offers is high priced, however it is still \$100,000 less than the next company that would supply the City. Councilmember Miles said that in reading through the contract and knowing a little about software having dealt with some vendors herself, their management is located on the east coast. She said in reading what Jay Martinez distributed during the meeting it says "We first approached the City in 2011 about the serious issues with the City of Trinidad's website, payment and data systems." She said she remembers hearing about the website, recalling they had done some work for Economic Development. She stated that it seems to her that a website is different than what we are talking about here. Finance Director Medina said it is totally different. A website has information that people are able to look at. This software has a number of different processes and modules that are all in one house. Upon inquiry from Councilmember Miles, Finance Director Medina confirmed it is not an Excel spreadsheet. Staff is trying to get away from Excel spreadsheets as much as possible. City Attorney Downs told Council when Jay and Era and David Santistevan, who is in their employ, were departing Council Chambers their last words to you were "You will be hearing from our lawyer" and then from Jay to Era "I know, they suck." Whatever issues you may have notwithstanding, if they were otherwise up for consideration on this project, their behavior should probably eliminate them. He said he is about comportment and civility when people address Council. If they were in the mix their behavior upon departing Chambers should cause them to not be considered at least for this project. Councilmember Bonato asked if City Attorney Downs read the contract. City Attorney Downs said he did. Finance Director Medina had it for him to read right away. Subparagraph 1.4, Limitation of Liability, concerned him some, he said. Not being a software person, he said the contract seemed fine and provides for a lot of services and support. Finance Director Medina added that they are not just providing a couple of days worth of training. The City will have over 500 hours of training. Councilmember Bonato asked if the City will have to pay for lodging and meals. Finance Director Medina said we will have to pay for their lodging. However, he said Tyler will be able to log into the City's computers remotely. Councilmember Miles said that is the same as with her system. This history about their submittal to City Manager Acre she thought was two different things -- a website versus a payment system. She said she wouldn't tell website designer to build a payment system and conversely wouldn't tell a payment system vendor to build a website. She opined that the history seems a little disjointed. She asked if there are any legal issues with the bid process. What were the requirements? Finance Director Medina said \$50,000 plus would have to go to a formal bid process unless there is an exception for standardization and compatibility. He said he believes we would probably fall under the standardization and compatibility because every software company is different. For someone to build a software program for the City could be less but they may not have the experience or know how to actually come in and put a system together like this. He reiterated his opinion that he feels this would fall under the exception of compatibility or standardization. Mayor Reorda re-asked if we know Jay and Era can't do it. Finance Director Medina said if they don't have a proven track record working with municipalities, he said there would be no way he would recommend them. Mayor Reorda said he sees a lot of animosity with this whole thing and commented that he has worked with thousands of people, some he didn't like, but if they could do the job he didn't have to like them. Finance Director Medina agreed but said he is looking at the track records of the companies and not one that will build a program from the bottom up. Tyler's program is already in place, proven to work and people are using it on a daily basis. It is not one that will be put together as we go along. Councilmember Miles said she's been using her software program for only three years and has had nine updates. Prior to her use there were probably 70 updates based on people calling in glitches or requests for improvements. There's a big difference between building one system and running 2,000 systems. Councilmember Torres said that the point to be made is just because someone is local doesn't mean they should be discounted. She clarified that she's not lobbying for Jay and Era, she just knows they are not stupid. She added that she didn't think they came here to attack Tyler. They came to make a point because the same thing Council is looking at they put a proposal in to do for the City. Finance Director Medina said he didn't know anything about a proposal. She said Jay showed her a copy of the e-mail. City Manager Acre said he recalled the proposal to say "We'll develop whatever you want." He echoed what Finance Director Medina said in that Jay and Era don't have a proven track record with this type of work. Councilmember Mattie opined that we have to go with someone with 2,000 municipal customers and has a program and system in place. Era began her presentation with listing all of the bad things about Tyler. Then she handed Council a paper that doesn't say anything about their ability. We have a lot at risk here and we are spending a lot of money and we need to go with someone we know can do the job, has 2,000 customers, has the experience and is willing to do it. He said his wife has worked almost 40 years with FPS Gold software at her job. They do webinar trainings, they sometime travel, just as his wife and two of her co-workers did having just returned from a three-day training in California. Then other times they have to come here and their expenses have to be paid. Mayor Reorda commented that to be true of any company. Councilmember Mattie said Era stated Tyler's bid is \$200,000 above their bid. Their proposal would then be \$40,000 to \$50,000. What are we going to get? He said he didn't think it would be the product the City needs, wants or expects. That's not what the City needs. Councilmember Bolton opined that the City needs to stay with a professional group that has a good, long track record. City Manager Acre said when the City decides to update its website we will ask them to be involved in the RFP process. He added that he has nothing against them, despite what is stated on the piece of paper they handed out and he disputed having said. He said he has no issue working with them like the are trying to claim. However, we are looking for specific software and they don't have that track record. Mayor Reorda opined that when Jay and Era come here he feels like they are not really accepted or welcome in this arena, based on how they are treated. Councilmember Mattie said a large part of that is the way they handle themselves. Do we want two kids who walk out of a meeting in a frustrated manner telling us that 'you will hear from our lawyer and I suck?' Or do we want a professional company who has a proven track record, 2,000 customers, and they know what they are doing? He said he is all about helping local people when they have the ability and capability to do what we need, but sometimes you just can get it done. He compared it to going for open-heart surgery and going to an expert as opposed to a local doctor. Tara Marshall told Council that in 2011 the Tourism Board put out an RFP for a marketing company. They received seven submissions and Jay and Era was one of them submitted under Merged Media. The submissions were rated by a panel of five. Merged Media was ranked third, probably because of their lack of experience. The contract was awarded to Hess Arts, which is also a local company. The Tourism Board has not put out another RFP since, but when they do, Jay and Era will have the experience at that time. Obviously that would still be up to the Tourism Board to rank and decide. The things they presented were great but not of a financial software matter. They were virtual kiosks, informational signs, QR codes, etc. Councilmember Bonato said he was not satisfied with the hurry-up decision. He added that he likes to make sure they are doing the right thing. This is a forced deal to push things through. Mayor Reorda said that is why we have staff and Council needs to have confidence in them. Councilmember Mattie said he hates to rush too, but when opportunity presents itself you have to seize the moment.

Councilmember Bolton asked Finance Director Medina if he's ever worked with this system, to which he answered he has not. She asked if in his opinion the contract is sufficient to cover the City's assistance needs without numerous additional changes. Finance Director Medina said this is Tyler's business and they know approximately how much time it takes to train the people involved. He said he believes we will fall within range of what they say it will cost to get the training done. Councilmember Bolton said Council knows where the \$50,000 is coming from this and next year. She asked where the \$118,000 will come from next year. Finance Director Medina said all five funds will pay their share, at about \$25,000 each. Each would pay about \$35,000 next year (with the subscription cost). Mayor Reorda suggested he not commit to the cost until it is known what they find. Finance Director Medina said that Tyler would be hosting the system on their end all on their computer system. City staff will be getting training and learning to do the work on our computers. We won't have to deal with hardware or network issues. Councilmember Bolton surmised that Tyler would be putting in the equipment and training staff on the data input. City Manager Acre said he's talked to the County Administrator and she said the county is very happy with the program. When their Finance Director left and they had to bring in someone new Tyler was very good about getting them up to speed. They have a good track record. He added that he has heard of them before and supports the recommendation. Finance Director Medina told Council that Tyler has a training platform called Tyler University on their website. They offer continuing professional education and training courses if we are having trouble learning the modules. They will provide the City with modules to look at before they start training. Councilmember Mattie moved to accept the contract from Tyler as reviewed by City Attorney Downs and proceed with the purchase. The motion was seconded by Councilmember Bolton. Councilmember Miles asked if the City is on firm ground with respect to the exception to the bidding process. City Attorney Downs answered that he has no opinion as to whether the City is or not. He said he didn't know about the deviation from the normal bidding process. Mayor Reorda suggested the item be put on hold. City Manager Acre said the City had three firms provide quotes. Mayor Reorda pointed out that it wasn't advertised and said he wanted to hold off until legal counsel provides an opinion. Councilmember Miles asked if Tyler might be available by phone since Council heard negative things about them. Councilmember Torres said Council should get the copy (of the information about Tyler) Jay and Era had. Finance Director Medina said every company will have that sort of thing when people are unhappy. Councilmember Mattie added that it is like EBay sellers. Very few have all positive comments. They have a reason to be negative. Jay and Era were not scheduled to be here and showed up at Councilmember Torres' behest and Council extended the courtesy of listening to them. Then it explodes and as they are leaving he is told by them that he sucks. City Manager Acre asked Finance Director Medina to see if Tyler could participate by phone on Monday. Councilmembers Mattie and Bolton withdrew their motion and second, respectively. A motion to table the item to Monday, June 30, 2014, at 5:30 p.m. to get legal clearance was made by Councilmember Bolton. Councilmember Bonato seconded the motion which carried unanimously upon roll call vote.

Consideration of 2014-2015 Colorado Welcome Center Statement of Work. Colorado Welcome Center Director Tara Marshall addressed Council. She said this contract changed slightly from that approved last year. It was changed to require six meetings rather than eight for volunteer traveler counselors. Currently they have 12 meetings. They have added an additional informational study tour to require two per year for travel counselors and she said they are already doing that. The financial information is the same, whereby the State is committing \$64,278 and the City is matching \$17,500 from the General Fund. That also provides the documentation for the match for the Best and Brightest internship. This year the Welcome Center will come in under budget by about \$5,000 resulting in the City contributing about \$12,500 rather than the budgeted \$17,500. However the City needs to budget \$17,500 for the match for the Best and Brightest internship. A motion to approve the 2014-2015 Colorado Welcome Center Statement of Work between the City and the Colorado Tourism Office was made by Councilmember Bolton. The motion was seconded by Councilmember Bonato and carried by a unanimous roll call vote.

There being no further business, Councilmember Bonato moved to adjourn the meeting and Councilmember Miles seconded the motion. Upon a unanimous roll call vote, the meeting was adjourned.

ATTEST:

JOSEPH A. REORDA, Mayor

AUDRA GARRETT, City Clerk

The City Council of the City of Trinidad, Colorado met in Special Session on Monday, June 30, 2014, at 5:30 p.m. in City Council Chambers at City Hall pursuant to the following call:

CITY OF TRINIDAD
TRINIDAD, COLORADO

SPECIAL MEETING

There will be a Special Meeting of the City Council of the City of Trinidad, Colorado, on Monday, June 30, 2014, at 5:30 p.m. in the Council Chambers at City Hall

The following item is on file for consideration of City Council:

- 1) Consideration of finance software acquisition

The meeting was called to order at 5:30 p.m.

Roll call was taken.

There were present:	Mayor	Reorda, presiding
	Councilmembers	Bolton, Bonato, Fletcher, Mattie, Miles
Also present:	City Manager	Acre
	City Attorney	Downs
	City Clerk	Garrett
Absent:	Councilmember	Torres

Roll call was taken and Mayor Reorda called the meeting to order. Councilmember Bonato stated that he wanted it to go on record that he was objecting to going forward with the meeting. He said Section 5.12 of the Home Rule Charter states that business can only be transacted at a special meeting if all members present consent to the meeting. He said he does not consent to going forward with the meeting. Mayor Reorda argued that all of Council consented and Councilmember Bolton agreed that they did in their motion to table this item to this special meeting. Councilmember Bonato said he didn't have to have a reason. City Attorney Downs read Section 5.12 of the Home Rule Charter aloud "No business shall be transacted at any special meeting of the Council unless the same has been stated in the notice of such meeting. Any business which may lawfully come before a regular meeting may be transacted at a special meeting if all the members present consent thereto and all members absent file their written consent." He opined that Councilmember Bonato can consent at any time. Councilmember Bonato referred Council to the minutes of March 13, 2012 for another example of this. He said he just has to be present and say he doesn't agree to the special meeting. Mayor Reorda asked if he knew about this before. Councilmember Bonato said he found the language after the item was tabled. He added that he was not going to stay and attend an illegal meeting. Councilmember Bolton said it seems this is a continuation of a prior meeting and a motion was made to table and everyone agreed to vote on this matter today. Councilmember Bonato disagreed. Mayor Reorda agreed with Councilmember Bolton's assessment of this being a continuation of a prior meeting. City Attorney Downs reiterated that Councilmember Bonato can object to the meeting, however clarified that this is not an illegal meeting. City Manager Acre added that the meeting is not illegal but Councilmember Bonato can object to the business at hand. City Attorney Downs said all members present have to consent and Councilmember Bonato does not consent. Also absent members must give written consent and Councilmember Torres did not do so. For both of those reasons, he said the business can't be transacted. He noted that he was unaware that Councilmember Torres was going to be absent. Mayor Reorda told Councilmember Bonato he could leave and thanked him for bringing this to Council's attention and not going against the Home Rule Charter. Mayor Reorda called for a motion to adjourn. Councilmember Miles asked City Attorney Downs if he is confident that business cannot be conducted without Councilmember Torres's written consent and Councilmember Bonato's consent. City Attorney Downs said the Charter doesn't say anything about a prior consent. It says any business that may lawfully come before a regular meeting may be transacted if all members consent and absent members file their written consent. A Councilmember doesn't have to agree to a meeting, just to the business. Councilmember Miles commented that it seems City Attorney Down is clear on what we can and can't be done. She made a motion to adjourn the meeting. Councilmember Fletcher seconded the motion, which carried unanimously upon roll call vote.

Consideration of finance software acquisition. This item was not considered.

ATTEST:

JOSEPH A. REORDA, Mayor

AUDRA GARRETT, City Clerk

The City Council of the City of Trinidad, Colorado met in Special Session on Tuesday, July 1, 2014, at 5:30 p.m. in City Council Chambers at City Hall pursuant to the following call:

CITY OF TRINIDAD
TRINIDAD, COLORADO

SPECIAL MEETING

There will be a Special Meeting of the City Council of the City of Trinidad, Colorado, on Tuesday, July 1, 2014, at 5:30 p.m. in the Council Chambers at City Hall

The following items are on file for consideration of City Council:

- 1) Executive session – For a conference with the City’s Attorneys for the purpose of receiving legal advice on specific legal questions under C.R.S. Section 24-6-402(4)(b) – ARPA litigation update
- 2) Executive session – For discussion of a personnel matter under C.R.S. Section 24-6-402(2)(f) and not involving: any specific employees who have requested discussion of the matter in open session; any member of this body or any elected official; the appointment of any person to fill an office of this body or of an elected official; or personnel policies that do not require the discussion of matters personal to particular employees – Quarterly City Manager Evaluation
- 3) Consideration of Removal of the City Manager
 - a) Offer to provide written statement to the City Manager of the reasons alleged for his removal and the right to be heard publicly thereon at a meeting of the Council prior to the final vote on the question of his removal

The meeting was called to order at 5:38 p.m.

Roll call was taken.

There were present:	Mayor	Reorda, presiding
	Councilmembers	Bolton, Fletcher, Mattie, Miles, Torres

Also present:	City Manager	Acre
	City Attorney	Downs
	City Clerk	Garrett

Absent:	Councilmember	Bonato
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Executive session - For a conference with the City’s Attorneys for the purpose of receiving legal advice on specific legal questions under C.R.S. Section 24-6-402(4)(b) – ARPA litigation update; and Executive session – For discussion of a personnel matter under C.R.S. Section 24-6-402(2)(f) and not involving: any specific employees who have requested discussion of the matter in open session; any member of this body or any elected official; the appointment of any person to fill an office of this body or of an elected official; or personnel policies that do not require the discussion of matters personal to particular employees – Quarterly City Manager Evaluation. A motion to enter into executive session for the stated executive session purposes was made by Councilmember Bolton. Councilmember Torres seconded the motion. Upon roll call vote the motion carried unanimously. The executive session ensued at 5:39 p.m. That portion of the executive session not constituting legal advice was electronically recorded as required by the Open Meetings Law. Upon conclusion of executive session at 6:25p.m., Councilmember Mattie moved to resume the special meeting. Councilmember Bolton seconded the motion and upon a unanimous roll call vote, the special meeting resumed.

I, Les S. Downs, City Attorney for the City of Trinidad, do hereby attest that the executive session held on this 1st day of July, 2014, was permissible under CRS Section 24-6-402 (4)(b).

As City Attorney, it is my opinion that the discussion of the matter announced in the motion to enter into executive session constituted a privileged attorney-client communication. Therefore, it is my recommendation that no further record be kept of this executive session.

Les S. Downs
City Attorney

Consideration of Removal of the City Manager. Councilmember Bolton made a motion to remove the City Manager. The motion was seconded by Councilmember Mattie. The motion carried by a unanimous vote of Council members present.

Offer to provide written statement to the City Manager of the reasons alleged for his removal and the right to be heard publicly thereon at a meeting of the Council prior to the final vote on the question of his removal. Tom Acre decline the offer.

Discussion was held concerning an interim City Manager. Councilmember Bolton pointed out that Council has a letter from Tom Acre where he appointed Louis Fineberg and Audra Garrett to be Acting City Manager in his absence. City Attorney Downs agreed and said that Council is bound at this point to hold to his appointment temporarily until it is posted and have it identified on the next regular meeting agenda. Therefore that appointment is effective until the next regular meeting when Council can decide. He further clarified that because it was not on this agenda the alternative suggested is the appropriate course of action. Mayor Reorda commented that he wanted to put City Attorney Downs on notice that after yesterday's session with Councilmember Bonato that he was embarrassed Council was in that position. Someone didn't know rules and regulations. The City Attorney needs to spend more time to get the Charter down pact. City Attorney Downs said he didn't know all members had to consent. City Attorney Downs said he would have like advanced notice and he will not forget the experience.

There being no further business, the meeting was adjourned. Council wished Mr. Acre well and thanked him for his time and service.

ATTEST:

JOSEPH A. REORDA, Mayor

AUDRA GARRETT, City Clerk

The regular meeting of the City Council of the City of Trinidad, Colorado, was held on Tuesday, July 1, 2014, at 7:00 p.m. in City Council Chambers at City Hall.

There were present:	Mayor	Reorda, presiding
	Councilmembers	Bolton, Fletcher, Mattie, Miles, Torres
Also present:	City Attorney	Downs
	City Clerk	Garrett
Absent:	Councilmember	Bonato

The pledge of allegiance was recited.

Mayor Reorda asked for a motion to move items 8a, 8b and 8c under Miscellaneous Business to the beginning of the agenda so the people representing the liquor licenses wouldn't have to stay for the entire meeting. Councilmember Miles moved to adjust the agenda accordingly and Councilmember Bolton seconded the motion. Upon roll call vote the motion carried unanimously.

APPROVAL OF THE MINUTES. Regular Meeting of June 17, 2014 and Special Meetings of June 19, 2014 and June 24, 2014. A motion to approve the minutes as presented was made by Councilmember Bolton and seconded by Councilmember Torres. The motion carried unanimously, excepting the June 17th minutes whereby Councilmember Miles abstained due to her absence from that meeting.

MISCELLANEOUS BUSINESS. Special Events Permit (malt, vinous and spirituous) request by Arthur Roy Mitchell Memorial, Inc. at 150 E. Main Street for July 19, 2014 (Quick Draw Event). Susan Porterfield was present on behalf of the applicant. A motion to approve the permit was made by Councilmember Bolton. The motion was seconded by Councilmember Miles and carried unanimously upon roll call vote.

Retail liquor store license renewal request by Trinidad Beer, Liquor & Wine Depot, LLC d/b/a Trinidad Beer, Liquor & Wine Depot at 111 E. Kansas Avenue. Ken Geggelman was present on behalf of the applicant. A motion to approve the license renewal was made by Councilmember Bolton and seconded by Councilmember Miles. Upon roll call vote the motion carried unanimously.

Temporary modification of premises request by Mt. Carmel Health, Wellness & Community Center at 911 Robinson Avenue. Kim Schultz was present on behalf of Mr. Carmel Health, Wellness & Community Center. Councilmember Bolton moved to approve the temporary modification of premises request and the motion was seconded by Councilmember Fletcher. Roll call was taken on the motion and it carried unanimously.

PUBLIC HEARING. New Medical Marijuana Center application filed by M & M Distributing, LLC at 422 N. Commercial Street. Mayor Reorda opened the hearing and called for comments for or against the application. Gloria Ahern, addressed Council and was sworn in. She said she was here to further disapprove of the medical marijuana center at 422 N. Commercial Street. Ms. Ahern said she is one of the owners of Curves, Healthy Changes, LLC, at 413 N. Commercial Street and is opposed to them joining the neighborhood and doesn't feel it belongs in that neighborhood. She continued that she is concerned, even though last time she spoke about the amount of water it will take for these cultivating places, after research this week with the City Clerk's office she was not able to determine that matter has ever been researched. She urged Council to do research so the businesses and citizens of the City and County can be assured there will be no disturbance to the amount of water they are able to have. John Micheliza and Geraldine DeAngelis addressed Council and were sworn in and introduced themselves. Geraldine (Gerri) DeAngelis told Council that they were both born and raised here and had been in the alcohol business previously for 50 years as a Budweiser distributorship/dealers. In 2000 they sold the business and their building has been empty now for 14 years. When marijuana came around it was like a light bulb going off. Their facility will be the perfect facility because it is a secure facility. When they had the beer in the warehouse they never had any problems. Ms. DeAngelis continued that when marijuana came around they thought someone would want to buy the building. Three people looked at it; none panned out. So, she said they decided it was time to do something with the building themselves. John has two grandchildren and Ms. DeAngelis said she has six grandchildren all reaching college age, three in and one graduated. Also they thought it would be a plus for the City of Trinidad economically. John Micheliza stated that he has been here a little longer than his sister, Ms. DeAngelis, 18 months. The family was in business over 60 years with their dad. He said they have a warehouse here and one in Lamar, both empty. They have to do something with them to pay for the taxes and the like. To City Attorney Downs' questions, Geraldine DeAngelis, on behalf of the applicant, testified as follows: The proposed license holder corporate name is M & M Distributing, LLC at 422 N. Commercial Street in Trinidad. City Attorney Downs requested that the questions posed be considered for both hearings for the two license types applied for, the medical marijuana center and the medical marijuana optional premise cultivation operation. Ms. DeAngelis testified that M & M Distributing, LLC is a Colorado corporation in good standing. She and John Micheliza are both principals in the limited liability corporation and each own 50% of the business. The limited liability corporation has existed since March, 2014. They have not registered a trade name. There are no other principals on the corporation. The only employee at this time is Geraldine's husband, Joseph DeAngelis, who has already also been cleared, having submitted to a background check. Two applications were submitted for two proposed marijuana licenses to the City Clerk. There are no material misrepresentations on the applications for the licenses. All of the information is correct. She further testified that they have made themselves familiar with the Colorado medical marijuana code, the statutory scheme for marijuana facilities, the Department of Revenue regulations and the City of Trinidad medical marijuana ordinance. She said they understand that they will have a continuous and ongoing obligation to comply with all City officials, the building official,

fire chief, police chief, city clerk, city attorney, planning director, etc. There are a lot of people to have to comply with in terms of the application process. Ms. DeAngelis said she has spoken to all of them. She showed Council their state key code badges which allows all three of them to work with medical marijuana at this time. Mayor Reorda asked which Joseph DeAngelis is licensed. Ms. DeAngelis answered that it is Joe, Sr. She testified that they have submitted their complete application to the Colorado Department of Revenue in support of the licenses they are seeking. They also understand their continuous duty to comply with the state as well and understand that there is a dual licensing scheme whereby both state and local licensing approval is needed. Ms. DeAngelis said they do not have an anticipated begin date. She testified that all three submitted to background checks and came back clean, no criminal history. They understand other principals and employees will have to submit to background checks as well. They have provided everything in terms of their application to the City Clerk to date. Ms. DeAngelis complimented staff. She testified that they paid the application fees in full for both licenses. Diagrams were submitted in support of the licenses accurately reflecting the floor plan for the proposed premises, indicating where they will intend to sell and cultivate marijuana. They understand the requirements with respect to whom they are allow to sell and cultivate for - the cardholders registered with their business. They have a lease arrangement. The building was owned by her sister Judy, John Micheliza and Geraldine DeAngelis. Last March their sister Judy passed away. Her share of the building went to a trust. She had two sons and a daughter-in-law who are part of the trust. M & M Distributing, LLC, is leasing the building from Judy's estate/trust, John Micheliza and herself. Those are the only owners of the building at 422 N. Commercial Street. The lease agreement is from the trust to M & M Distributing, LLC. That trust has authorized M & M Distributing, LLC to carry on a marijuana business or businesses. The financial backing has been fully disclosed for the proposed marijuana business, John Micheliza and Geraldine DeAngelis. There are no other financial backers and they don't anticipate any. Ms. DeAngelis upon continued questioning testified that they cooperated with the conditional use permit process, having appeared before the Planning and Zoning Commission. They received an approval for both license types. They have provided the Planning Director's office with everything required. They understand that there are lighting requirements for the exterior of the facility, and security for both the interior and exterior. Regarding security, she testified that they are contracting with a company for that purpose. When asked if there was anything else they wished to tell Council, Ms. DeAngelis said they are excited. It is a new venture for all of us. Both sides are learning. It is going to be a trial and error process. They are starting slow. She asked that Council help them out. City Attorney Downs asked if they understand that when they get a trade name they need to provide it to the City Clerk, as well as employee information first. They need to let the proper authority and state know. Any developments as they occur need to be reported. Ms. DeAngelis stated they understand. Mayor Reorda asked if they have money coming from the trust. Ms. DeAngelis said it is not. The trust has nothing to do with the business. The business is owned by just John Micheliza and herself. The members of the trust will be their consultants because she and John never used marijuana or know what it looks or smells like. They will depend on other people to get information. Councilmember Mattie asked if they understand the City is proceeding, as is the rest of the State, with Colorado enacted State law. As of the present, the City is doing so with the gratuity of the Federal government because marijuana continues to be a regulated substance in Federal law. Further the City has no control over what may or may not happen when and if the Federal government decides to take a more restrictive stance on the use, sale and growth of marijuana. Ms. DeAngelis said they are very well aware of it. John Micheliza stated one advantage they might have is having been in the beer business for 50 years they dealt with the federal government more than the state. Councilmember Mattie confirmed they realize the inherent risk and their eyes are wide open. He wished them good luck and God speed. Mayor Reorda said that is a concern, that the federal government is letting them go through and then all of a sudden may make some stringent and severe regulations that will kick you out of business. Ms. DeAngelis noted that we may get a new president with different views also. Councilmember Miles said there was testimony given that this fully discloses the financial interest. She said regarding the lease there is a way to have financial backing by having above or below market rents for the lease, creating a financial interest in the business. She asked if the rent at the business is at market rates. Ms. DeAngelis answered they are paying \$1,500 per month. Councilmember Miles asked for confirmation that they will not be profits diverted through the lease agreement. Ms. DeAngelis confirmed there would not be, adding that they haven't even paid rent yet. Councilmember Miles recalling the testimony that they don't have an anticipated opening date, asked if they thought it would be some time this year. Ms. DeAngelis said it should be this year. The office is not up to code and is currently being renovated and brought up to code. The warehouse and basement are empty. The storage area should be done by July 31st. John Micheliza added that the architectural drawings should be ready in the next week or two for the grow areas in the warehouse. Ms. DeAngelis told Council that they have contracted an engineer and electrical engineer. They are working on it. As fast as they can get things done it will be done. Councilmember Miles asked if they are aware that Building Inspector Chris Kelley is recommending the license be conditioned on them receiving a certificate of occupancy and if that is acceptable. Ms. DeAngelis said it is and added that they have been working with him closely. The police department and fire department said the same thing. There is nothing there for them to see right now except four walls. Mr. Micheliza added that the burglar and fire system in the building is 15 to 16 years old. A technician has been called in to update it. They are waiting to update it if the license goes through. City Attorney Downs asked if they have a water tap from the City and if they are planning on using City water, understanding that they are not allowed a ground well. Ms. DeAngelis answered affirmatively. City Attorney Downs asked if they understand their advertising limitations. Ms. DeAngelis said they do, only one green cross. She testified upon inquiry that they are seeking conditional use permits for retail marijuana licensing and have a meeting on July 8th. Once they get the conditional use permits they will submit their applications to the City and State. Mayor Reorda asked what the vote from the Planning Commission was for their conditional use permit requests. City Attorney Downs recalled it to be unanimous and Planning Director Fineberg confirmed. Mayor Reorda called for testimony from anyone concerning the application by M & M Distributing, LLC at 422 N. Commercial Street for a new Medical Marijuana Optional Premise Cultivation Operation. Gloria Ahern, Curves in Trinidad at 413 N. Commercial Street, addressed Council and stated she is opposed to this license for the same reasons she is opposed to the first one considered and is concerned about the amount of water that will be used for this cultivation and other cultivations for which conditional use permits are issued. Mayor Reorda stated that Council understands her concern. He called for further comment. Daryl Shoup addressed Council and was sworn in. He testified that he just moved his family to Trinidad. Mr. Shoup said he is an Eagle Scout and has been all over the United States, in the HVA business and had his own company for many years. He is employed by a large firm that covers several states. They do all kinds of HVAC boilers, chillers, etc. other grow facilities. He said he has a son and step daughter. Mr. Shoup said he has seen all of the effect of these businesses that have actually been very controlled and positive. He has noticed that the new security they are running improves the area where they build. He told Council he actually builds grow rooms, but does the HVAC, 100 ton and 50 ton units, all refrigeration. He said he plans on buying property here and likes this area. He said he's been here since childhood on and off. It is a positive thing for the community to fill vacant space and have good, healthy business, so long

as it is all done legally. He added that he has other interests in other business here, however nothing to do with medical marijuana. In their neighborhood he said if it were done correctly it would be professional. City Attorney Downs asked Council to accept the submittals contained in the application. He pointed to written findings provided. He submitted that the application has no material misrepresentations, the applicants are of good moral character, the premise is in the proper zoning classification as indicated by the Planning, Zoning and Variance Commission. He said he understands Gloria Ahern's concerns made as a party in interest as defined by ordinance. The applicant submitted a complete application. Mayor Reorda told Gloria Ahern that her areas of concern will be patrolled. They will not let other businesses fall apart because of marijuana. Council is as interested in her business as they are in marijuana. Councilmember Bolton moved to approve both licenses and recited the following:

This matter came on for hearing on the application of M & M Distributing, LLC at 422 N. Commercial Street in Trinidad, Colorado, for a Medical Marijuana Center License and a Medical Marijuana Optional Premise Cultivation Operation License, before the City Council of the City of Trinidad, Colorado, acting in its capacity as the local licensing authority on July 1, 2014, in City Council Chambers in City Hall. The City Council having reviewed the application and supporting documents, reports of the City Clerk and other City staff, evidence at the hearing and testimony taken during the hearing, makes the following **FINDINGS**:

1. The application is complete and signed by the applicant, and the applicant has paid the appropriate application and license fee.
2. The application appears to be in substantial compliance with all the requirements of Article 11, of Chapter 14 of the Trinidad Municipal Code. The applicant has testified to their willingness to comply with any all areas of said Article whereby compliance at this time cannot be fully attained or substantiated.
3. According to the testimony of the applicant, the application does not contain any material misrepresentations.
4. The proposed medical marijuana business complies with applicable zoning regulations. The City Council hereby finds that based upon the testimony of the applicant, the building in which the proposed medical marijuana business will be located will conform to the Trinidad City Codes, including the zoning code and all International Codes adopted by the City.
5. John Micheliza, Gerri DeAngelis and Daryl Shoup testified in favor of granting the license. Gloria Ahern testified in opposition.
6. The applicant through the facts and evidence adduced as a result of the City's investigation and testimony provided, made a prima facie showing the members of the limited liability corporation are of good moral character and any employees of their entity will likewise be of good moral character.
7. The City Clerk's report showed that there are currently no medical marijuana-licensed businesses within the City of Trinidad.
8. Based on the evidence presented at the hearing and the investigative materials provided for the hearing, the City Council finds that the location of the business is appropriate, and that the applicant officers are of satisfactory moral character and there is a willingness by the applicants to fully cooperate with the officials of the City in the operation of this business.

THEREFORE, the City Council of the City of Trinidad, Colorado, as the local marijuana licensing authority, hereby approves and grants a Medical Marijuana Center License and a Medical Marijuana Optional Premise Cultivation Operation License to M & M Distributing, LLC at 422 N. Commercial Street in Trinidad, Colorado. The issuance of said licenses shall be withheld until a certificate of occupancy is issued by the Chief Building Official and upon his absolute confirmation of compliance with all codes adopted by the City of Trinidad. The motion was seconded by Councilmember Miles and carried by a unanimous roll call vote of Council members present.

PETITIONS OR COMMUNICATIONS, ORAL OR WRITTEN. ADA. Stephen Hamer addressed Council. He told them that people think Stephen's List is composed of Stephen when in fact they have 24 people, four full-time employees, three part-time employees and 17 full-time volunteers. Their auditors felt that Mr. Acre put the City 100 years behind with regard to ADA compliance. He added that their position is that Louis Fineberg in his current position and as Acting City Manager will take the City back to the dark ages. The biggest obstructionist in their view is Louis Fineberg. His plans do not include mandatory standards by the ADA and the City needs to meet them for those who are disabled. The City slaps the disabled community face every day because of Louis Fineberg. Mr. Hamer said he wants the City to consider there has been no changes in the months that he has been here. There have been some cosmetic changes, but none of any sustenance. He urged Council to recognize and even make a proclamation that the City understands the needs of the disabled community and that the City is willing to treat them the same and those without disabilities. He called on Council to take action because there is really nothing happening. The disabled can't go across the crosswalks without their lives being endangered. He said he'd like to see a police presence at some of the crosswalks. He concluded that it is dangerous and he'd like to see change. He reiterated the group's opinion that Louis Fineberg is the biggest obstructionist in this city and county. He asked that his position as Acting City Manager be limited and there is a lot of brevity associated with it.

COUNCIL REPORTS. Councilmembers Mattie, Fletcher, Torres, Miles and Mayor Reorda had nothing to report.

Councilmember Bolton asked why the City's swimming pool is closed on the 4th of July. Asst. City Clerk Dona Valencich answered that there isn't enough attendance. Councilmember Bolton responded that is unbelievable. Sh'Tarra Getaus commented from the audience that she lives in that neighborhood and will be attending the library's summer reading program and feels like there are a lot of easy things that can be done through the community center that are just not being done. She concluded that she is talking with the director about it being a more attractive place.

REPORTS BY CITY ATTORNEY. City Attorney Downs advised Council that his formal annual evaluation is

City Attorney Downs reminded Council that at their last regular meeting Tom Murphy wanted to know the total figures paid to local counsel for the ARPA litigation. He said the total is approximately \$52,000, \$13,357, \$35,160 and \$4,173 were the approximate amounts. He said it was also suggested that the payments were coming from the General Fund and corrected that the allocations are coming out of the Power & Light Fund. Upon inquiry from Mayor Reorda, City Attorney Downs clarified that this is a separate firm. City Attorney Downs stated that the Albuquerque firm Juan Flores is with had to associate with local counsel. Councilmember Miles confirmed the three amount provided by City Attorney Downs to be the annual figures paid.

REPORTS BY CITY MANAGER. Acting City Manager Fineberg deferred to Tara Marshall for a report she wished to provide to Council. Ms. Marshall advised Council that the City received word last week that the City had been nominated for a Governor's award. The award nomination is for best downtown management program. It is for our elected officials' commitment to historic preservation and restoration of the downtown; it is for City staff's commitment to the Creative District and the Main Street Program and for the amazing number of volunteers the City has. She noted Marilyn Leuszler's presence in the audience as one volunteer and named the various volunteer boards and commissions the City has including the Tourism Board, Planning & Zoning, Parks and Recreation, Creative District, Main Street Program, the Community Foundation, Economic Development, the Chamber of Commerce, the A. R. Mitchell Museum, SCRT, the Arts Council and on and on. She reiterated that it is for the amazing number of volunteer who commit their time to improving our downtown. Ms. Marshall said the City was not self-nominated. We were nominated by another town along with two agencies. There will be an opportunity in the next couple of weeks for the City to round out the application. The award will be conferred by the Governor at the Downtown Colorado, Inc. conference held September 10th through September 12th in Fort Collins. Mayor Reorda called upon Marilyn Leuszler to presented an overview to Council of what their organization has done. Ms. Leuszler told Council that Creative District presented to the community all of those things that have been accomplished in the last couple of years, such as the process of Creative Industries, Creative District having formed, who were the first selected, who were the next five selected, of which Trinidad was one. They then spoke about the process as it continues. There was a presentation by the consultant for whom Creative Industries paid. She did a wonderful job. She has designed all sorts of great things, benches, our new logo and possibilities for pop-up art, etc. She said they are looking forward to putting some things in place. A lot of people in the community have asked what they have been doing. Ms. Leuszler said for a solid year and one-half they spent building a solid business-based organizational structure so they were not just flying out there blind. They are trying to plan a solid set of goals, put together in a way that they can facilitate them. That hard work is done behind the scenes to get everything set up and ready to implement things that will help the community. They are now at the implementation stage and things are moving forward quite rapidly and are very excited for things to continue. They have already seen new galleries open, new businesses in town and there are artists who have moved into the community from other locations, two from Kansas City. The new director at the Mitchell Museum is from Santa Fe, New Mexico. Her boyfriend will join her at the end of the summer. He is a graphic artist. They are talking about buying a home and opening a business. Things are moving and gaining momentum. She said they are glad they took the time they did to put things into place properly. We will soon see creative crosswalks in place in Trinidad, having been working with the City on that project. First designs have been wonderful. Part of it has been convincing people they are in fact creative. It's not so much art, it's creativity, innovation, and entrepreneurship. Things are moving forward better than they could have ever expected and the State loves Trinidad. They have a good camaraderie with other Creative Districts in the state. They have come to know the other people involved and they help each other. They are learning from one another and avoid some of the common plights and mistakes. It's a new program having only been in existence for a couple of years. She said they are all very happy with the progress that has been made. Mayor Reorda pointed out Planning Director Fineberg has been involved. Ms. Leuszler said he absolutely has been. He wrote the grant. Also there has been a team of six people involved from the inception starting with a phenomenal application and ensuing application where the City was designated as an emerging creative district and then a creative district, respectively. Trinidad is among the best in the state right now. She said she hopes Trinidad realizes that as well as the rest of the state. She recognized Carol Bolton, Tara Marshall, Harriet Vauegois, Jim Vigil, herself and Louis Fineberg as the team of six. It is something they feel strongly about and see successes in other creative district communities and are gathering data and looking at numbers. They will shortly be able to put those figure out and that data and it will help to tell the story to the business people as well as the rest of the community. Mayor Reorda asked to be invited to the next big meeting. Ms. Leuszler agreed but said he can't speak. Councilmember Fletcher applauded their efforts. Ms. Leuszler said it has been a community effort that went from 251 signatures to 1,075 signatures between the first and second application, plus letters of support from business and organizations in the community as well as City support. It wasn't the work of a few people; it has been the entire community. Mayor Reorda asked to be shown their video at a work session. Ms. Leuszler said they learned interesting things from the consultant's visit, such as the fact that there is a great neon sign company in Trinidad that none of us paid much attention to. There were things an outsider was able to see and we who live here walk by every day and don't notice so much. It was very well done and good plans for the future. There was great community input. Mayor Reorda asked if Council has notice the Creative District signs popping up around town. Councilmember Mattie commented there are good things under foot. Councilmember Bolton commented that the wall in Council Chambers has been painted if she and Ms. Bernhardt are ready to get to work. Ms. Leuszler explained that Deb Bernhart did a complete inventory of all public art held in Trinidad. Many pieces were found in closets at the library and this building. The art is now located around the City. She noted that Carol Bolton's company donated plaques identifying the pieces. It was again a community effort with everyone working together. Mayor Reorda commented that we fail to recognize agriculture as an industry in our area and we need to do that more.

UNFINISHED BUSINESS. Public hearing for consideration of an ordinance repealing and re-enacting Chapter 14 ("Planning and Zoning"), Article 8 ("Wireless Telecommunications Towers and Facilities"), Section 14-153 ("Development of Towers") of the Code of the City of Trinidad, Colorado, to protect the open zone district and the City's viewshed, minimizing the impact of man-made structures and grading on the ridges of hills, mesas, mountains, open spaces, and similar natural features, visible from public rights-of-way in the open zone district. Mayor Reorda declared the public hearing open and called for comments for or against the ordinance. There being none, the hearing was closed.

Second reading an ordinance repealing and re-enacting Chapter 14 ("Planning and Zoning"), Article 8 ("Wireless Telecommunications Towers and Facilities"), Section 14-153 ("Development of Towers") of the Code of the City of

Trinidad, Colorado, to protect the open zone district and the City's viewshed, minimizing the impact of man-made structures and grading on the ridges of hills, mesas, mountains, open spaces, and similar natural features, visible from public rights-of-way in the open zone district. The ordinance title was read aloud. A motion to approve the ordinance on second reading was made by Councilmember Miles and seconded by Councilmember Fletcher. The motion carried by a unanimous roll call vote and will become effective on July 11, 2014.

ORDINANCE NO. 1961

AN ORDINANCE REPEALING AND RE-ENACTING CHAPTER 14 ("PLANNING AND ZONING"), ARTICLE 8 ("WIRELESS TELECOMMUNICATIONS TOWERS AND FACILITIES"), SECTION 14-153 ("DEVELOPMENT OF TOWERS") OF THE CODE OF THE CITY OF TRINIDAD, COLORADO, TO PROTECT THE OPEN ZONE DISTRICT AND THE CITY'S VIEWSHED, MINIMIZING THE IMPACT OF MAN-MADE STRUCTURES AND GRADING ON THE RIDGES OF HILLS, MESAS, MOUNTAINS, OPEN SPACES, AND SIMILAR NATURAL FEATURES, VISIBLE FROM PUBLIC RIGHTS-OF-WAY IN THE OPEN ZONE DISTRICT

Consideration of finance software acquisition. City Attorney Downs addressed Council. He said with respect to the proposed purchase of software there are two issues. The first was whether it was necessary or legally required to have a bidding process or request for proposals published in support of seeking bids for this project. The Code of Ordinances requires that most purchases the City makes, certainly over \$30,000, be subjected to bidding or an RFP. That's the general rule under Section 7-52 of the Trinidad Municipal Code. Section 7-53 provides that it's an exception to the general rule for a bidding requirement and don't apply to the purchase of goods when the purchase is pursuant to contract with a United States agency, or when standardization or compatibility are overriding considerations. In conferring with Pat Merrill from CIRSA (the City's insurer), City Attorney Downs said that because of the unique nature of the service we are seeking, it is the opinion of staff that this should not have to be submitted to the bidding process or RFP process. Finance Director Medina has explored this and had been looking at it for over a year. He also conferred with over three dozen colleagues about suitable software for their municipalities. In each instance the names of software companies came up – Tyler, Casselle, ADG and Sungard. Finance Director Medina in exercising due diligence looked into this and his opinion is that the company he has a contract for is the most suitable. This is a company where everything is in-house. There is no outsourcing and no third-party agreements necessary. It's a company with thousands of people. It is one of the lowest prices we could have obtained and for all of those reasons the only company deemed suitable for our needs. The software will do everything function in Trinidad city government where needed. It does utility billing, meter reading, minutes, meetings, municipal court document case load management, and financial software. Everything we do, this software will do for us and that's why it is deemed appropriate. He added that the City didn't try to slight anyone or award a contract secretly. It was simply determined to be the best after a considerable amount of due diligence especially by Finance Director Lonny Medina. Mayor Reorda asked if the things we outsource will be done in house. City Attorney Downs said much of what is done now is done in house. This will bring us into the modern era. Every department is in need of a new software upgrade. No one was trying to be exclusionary. There are only a few companies that do this. Tyler has over 2000 cities including neighboring municipalities and they provide constant and consistent training, support and troubleshooting. Finance Director Medina told Council that he has done his research and thinks Tyler will move us into the modern era. The City needs an integrated governmental fund accounting software program that is hosted in a cloud system. We are doing that because the network for our infrastructure is aging. He told Council he wants to move forward. This will affect everyone in the City. People will be able to see their bill on line and pay their bill on line as well as use their credit card even at the pool. In discussions with Tyler if the City signed with them by June 30th we would receive about a \$20,000 discount. Since we didn't, they extended to us by saying if we sign it today and make it effective yesterday they will still honor the agreement. Councilmember Miles said she spent time on this matter yesterday, as Finance Director Medina and City Attorney Downs can attest. They had a conference call with Senior Attorney Pat Merrill at CIRSA where she told Council she pressed very hard on the matter of compliance with the ordinance. She asked questions about the process and it turns out that CIRSA is doing the very same thing for themselves. It is unique and there are very few providers and they feel comfortable doing it themselves. City Attorney Downs comments that Councilmember Miles was hard to move off of her position. Councilmember Miles told Council that they can take comfort in knowing that CIRSA is doing the same thing. City Attorney Downs told Council that the other concern raised by Councilmember Bonato by phone today was concerning Section 5.4 of the Home Rule Charter. He read "Every act making an appropriation, creating an indebtedness, authorizing borrowing of money, levying a tax, establishing any rule or regulation for the violation of which a penalty is imposed, placing any burden upon or limiting the use of private property, required by other provisions of this Charter or by state law shall be by ordinance." He said the City is not creating indebtedness by doing this. Finance Director Medina pointed out a part of the contract with Tyler on page 5, Section 1.12, Non-Appropriation. If we do not appropriate money for this purpose we are done and we all walk away with no further commitment. The money to be used for the first year is already appropriated in the budget. An ordinance that sets forth appropriations for the City already exists. He said no one is trying to avoid or sidestep the Charter requirement, but we are not creating indebtedness. We will have annual payments and the first payment is not due for 90 days. He reiterated that the language in the contract would allow for the City to walk away and not have to pay for the next four years. He suggested to Council that they would not be violating Section 5.4 of the Home Rule Charter. Councilmember Mattie said the matter of the process and legality of the acquisition of competitive bid proposal for a financial software package from only qualified product providers has been resolved by City Attorney Downs and Finance Director Medina to his satisfaction. Acting in what he believes to be a responsible manner in accordance with the trust given to him by the citizens of Trinidad and in consideration of needs of staff and the benefit to the City of Trinidad, Councilmember Mattie moved to accept the bid proposal from Tyler Technologies with an effective date of June 30, 2014. The motion was seconded by Councilmember Bolton and carried by a unanimous roll call vote of Council members present.

MISCELLANEOUS BUSINESS. Resolution determining that an election is required to consider one or more ballot issues and that such election should be held as a coordinated election. Councilmember Fletcher made a motion to adopt the resolution and the motion was seconded by Councilmember Miles. Upon roll call vote the motion carried unanimously.

A RESOLUTION OF THE CITY COUNCIL DETERMINING THAT AN ELECTION IS REQUIRED TO CONSIDER ONE OR MORE BALLOT ISSUES AND THAT SUCH ELECTION SHOULD BE HELD AS A COORDINATED ELECTION

Renewal of Intergovernmental Agreement with Las Animas County for the conduct of the November 4, 2014 Special Election as a coordinated election. A motion to approve the agreement was made by Councilmember Fletcher and seconded by Councilmember Bolton. The motion carried by a unanimous roll call vote of Council members present.

Housing Authority appointment. Mayor Reorda said there are two applicants for the Housing Authority appointment, himself and Arsenio Vigil. He reminded that this is a Mayoral appointment but Council is involved. Councilmember Fletcher said she didn't see a letter from the Mayor. City Clerk Garrett said he didn't submit one but reminded them of the interest he previously expressed. Councilmember Fletcher asked if alternatively the Mayor could serve as a liaison. Mayor Reorda said there is no such thing for this committee. Councilmember Miles said she couldn't recall the history of previous Mayors serving on it. Mayor Reorda clarified that the by-laws of the Housing Authority Board state the Mayor has the right to appoint anyone he wants including himself. He suggested he wanted to be on it but said whatever Council decides he will abide by. Councilmember Miles called upon Arsenio Vigil to comment and perhaps give Council pros and cons of the suggestion. Mr. Vigil addressed Council. He told them he has served on the commission for the last five years and is currently the chair of the commission. They are doing a lot of good things for the community. They have an excellent working relationship. He said he would like to continue to serve on the board. He added that if there are members of the community who want to serve on a board he thought it to be a good thing. Councilmember Mattie said he knows Mr. Vigil is a police officer and he does little league, so he is heavily involved, as is the Mayor. He said in light of earlier action taken tonight he suspected the Mayor's load will get really heavy and because of that proposed Arsenio Vigil be allowed to continue to serve on the Housing Authority Board. Councilmember Bolton seconded the motion, which carried unanimously upon roll call vote.

BILLS. Councilmember Mattie noted that June 30th was the expiration of the moratorium and end of the North Lake contract. He said those are pressing matters for those who now direct the train. Councilmember Bolton questioned on the bills a notation for Sun Construction Company, described as Water - North Lake Dam retainage #15 in the amount of \$3,948.90. She said it looks like a negative figure. Finance Director Medina said he would look into it. Knowing she will get an answer to her question, Councilmember Bolton moved to approve the bills and Councilmember Fletcher seconded the motion. The motion carried unanimously upon roll call vote.

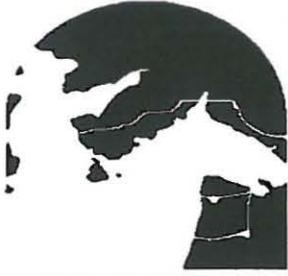
PAYROLL, June 21, 2014 through July 4, 2014. A motion to approve the payroll was made by Councilmember Fletcher and seconded by Councilmember Bolton. Roll call was taken and the motion carried unanimously.

ADJOURNMENT. There being no further business to come before Council, a motion to adjourn the regular meeting was made by Councilmember Bolton and seconded by Councilmember Miles. The meeting was adjourned by unanimous voice vote of Council.

ATTEST:

JOSEPH A. REORDA, Mayor

AUDRA GARRETT, City Clerk



CITY OF TRINIDAD, COLORADO
1876

COUNCIL COMMUNICATION

3

CITY COUNCIL MEETING: July 15, 2014
PREPARED BY: Audra Garrett, City Clerk
DEPT. HEAD SIGNATURE: *Audra Garrett*
OF ATTACHMENTS: 1

SUBJECT: PUBLIC HEARINGS New Medical Marijuana Center application filed by T. P. Main Street, LLC at 821 E. Main Street
New Medical Marijuana Optional Premise Cultivation Operation application filed by T. P. Main Street, LLC at 821 E. Main Street
New Medical Marijuana Infused-Products Manufacturer application filed by T. P. Main Street, LLC at 821 E. Main Street

PRESENTER: Les Downs, City Attorney

RECOMMENDED CITY COUNCIL ACTION: Conduct the public hearing. City Council may take up to 30 days thereafter to render a decision on the application.

SUMMARY STATEMENT: N/A

EXPENDITURE REQUIRED: No

SOURCE OF FUNDS: N/A

POLICY ISSUE: This is an application for new licenses.

ALTERNATIVE: N/A

BACKGROUND INFORMATION:

- This is a quasi-judicial matter and as such Council should only consider evidence and testimony provided during the public hearing.
- Two additional documents are included (last documents in application):
 - 1) Police departmental report
 - 2) Transfer documents for the sale of the property at 821 E. Main Street from Trinidad Pumping, Inc. to T. P. Main Street, LLC. This document supersedes the hand-written lease agreement contained within the application packet.

3

This matter came on for hearing on the application of T. P. Main Street, LLC at 821 E. Main Street in Trinidad, Colorado, for a Medical Marijuana Center License, a Medical Marijuana Optional Premise Cultivation Operation License, and Medical Marijuana Infused-Products Manufacturer before the City Council of the City of Trinidad, Colorado, acting in its capacity as the local licensing authority on July 15, 2014, in City Council Chambers in City Hall. The City Council having reviewed the application and supporting documents, reports of the City Clerk and other City staff, evidence at the hearing and testimony taken during the hearing, makes the following **FINDINGS**:

1. The application is complete and signed by the applicant, and the applicant has paid the appropriate application and license fee.
2. The application appears to be in substantial compliance with all the requirements of Article 11, of Chapter 14 of the Trinidad Municipal Code. The applicant has testified to their willingness to comply with and any all areas of said Article whereby compliance at this time cannot be fully attained or substantiated.
3. According to the testimony of the applicant, the application does not contain any material misrepresentations.
4. The proposed medical marijuana business complies with applicable zoning regulations. The City Council hereby finds that based upon the testimony of the applicant, the building in which the proposed medical marijuana business will be located will conform to the Trinidad City Codes, including the zoning code and all International Codes adopted by the City.
5. _____ testified in favor of granting the license. (No other persons testified in favor of or in opposition to the granting of the license.)
(_____ testified in opposition.)
6. The applicant through the facts and evidence adduced as a result of the City's investigation and testimony provided, made a prima facie showing the members of the limited liability corporation are of good moral character and any employees of their entity will likewise be of good moral character.
7. The City Clerk's report showed that there are currently three medical marijuana-licensed businesses within the City of Trinidad with one ownership, at one address.
8. Based on the evidence presented at the hearing and the investigative materials provided for the hearing, the City Council finds that the location of the business is appropriate, and that the applicant officers are of satisfactory moral character and there is a willingness by the applicants be fully cooperate with the officials of the City in the operation of this business.

THEREFORE, the City Council of the City of Trinidad, Colorado, as the local marijuana licensing authority, hereby approves and grants a Medical Marijuana Center License, a Medical Marijuana Optional Premise Cultivation Operation License and Medical Marijuana Infused-Products Manufacturer to T. P. Main Street, LLC at 821 E. Main Street in Trinidad, Colorado. The issuance of said license shall be withheld until a

certificate of occupancy is issued by the Chief Building Official and upon his absolute confirmation of compliance with all codes adopted by the City of Trinidad.



INVESTIGATIVE REPORT

Applicant: T. P. Main Street, LLC

Business Name: Trinidad Leaf

Business Address: 821 E. Main Street – Community Commercial zoning

Officers/Owners: Timothy Wayne Peters, 16018 Mamilla Lane, Bon Carbo, CO 81024
Juanita Ruth Peters, 16018 Mamilla Lane, Bon Carbo, CO 81024

Employee Key Licensee: No applications filed

Date of Application: May 19, 2014

Date Application Filed with Local Authority: June 3, 2014

Type of Request: New License

Type of License(s): Medical Marijuana Center
Medical Marijuana Optional Premises Cultivation Operation
Medical Marijuana Infused-Products Manufacturer

Hearing Date: Tuesday, July 15, 2014, 7:00 p.m.

APPLICATION CONTENTS -

Applicant's Documents: City of Trinidad Medical Marijuana License Application
CUP Approval Letter
Lease Agreement
Warranty Deed

Applicant's Documents: Articles of Organization
 (Cont.) Certificate of Good Standing
 Statement of Trade Name of Reporting Entity
 Sales Tax License
 Diagram of Premises
 Individual History Records
 Fingerprints
 Security Alarm Proposal
 Exterior Security Lighting Plan
 Colorado Business Medical Marijuana License Application
 Appendix A Optional Premise Cultivation License
 Application
 Colorado Associated Person & Associated Key Medical
 Marijuana License Applications
 Colorado Medical Marijuana License Bond

City Documents: Notices of Public Hearing
 Certificates of Mailing
 Proof Publication on 6/20/14
 Certificates of Posting
 Departmental Reports

LOCAL FEES -

Local Fees Medical Marijuana Center:

Investigation	\$2500.00
License	<u>1000.00</u>
Total	\$3500.00

Local Fees Medical Marijuana Optional Premise Cultivation Operation:

Investigation	\$2500.00
License	<u>1000.00</u>
Total	\$3500.00

Local Fees Medical Marijuana Infused-Products Manufacturer:

Investigation	\$2500.00
License	<u>1000.00</u>
Total	\$3500.00

TOTAL \$10,500.00

Local fees have been paid. Applicant has been advised the City's investigation fee is non-refundable and in the event the license is denied, license fees only shall be refunded.

ZONING –

The proposed premise is zoned Community Commercial, one of the appropriate zoning designations for location of a marijuana business pursuant to the Trinidad Municipal Code. Conditional Use Permit requests were heard by the Planning Commission on 4/22/14 and approved subject to five conditions identified within a letter dated 4/25/14 from Louis Fineberg, Planning Director. Abbreviated, the applicant must 1) comply with all state and local laws, rules, regulations relative to the operation of their business; 2) an air filtration plan must be submitted and approved by the Building Inspector; 3) the conditional use permit must be put into effect within one year or it will expire; 4) the applicant must comply with the reasonable requirements of all City officials with respect to establishment and operation of their business; 5) a revised site plan was required to be provided to the Planning Department. This requirement has been met.

LEASE AGREEMENT -

The lease agreement is between Trinidad Pumping, Inc., landlord, and T. P. Main Street, LLC, tenant. The term extends from the date of license approval annually until cancelled. Trinidad Pumping, Inc.'s corporate officers are Timothy and Juanita Peters. A deed for the property is provided.

CORPORATE DOCUMENTS –

Dated-stamped Articles of Organization for T. P. Main Street, LLC are provided, as well as a Certificate of Good Standing and Statement of Trade Name of a Reporting Entity issued by the Colorado Secretary of State. Minutes of T. P. Main Street, LLC are provided for 12/28/13, 4/22/14, and 5/12/14.

SALES TAX LICENSE -

Sales Tax License 29960634-0000 was verified.

DIAGRAM OF PREMISES -

The diagrams identify the proposed premises, which is a ground level facility to be constructed. It identifies three separate entrances at the west side of the building from the parking lot. One entrance is for the employees, one is for a waiting room and the third is for a waiting area. Between the two waiting areas is an ID check office. The diagram shows the medical sales area, a safe common area and a future recreational area. There is

a central room and two offices. The infused-products manufacturing kitchen/lab is located on the east side of the building and the cultivation areas are on the north side of the building. All of the facilities adjoin each other all within the confines of 821 E. Main Street. Initial plans do not indicate the proposed location of the security cameras or lighting. Locations will be based upon inspection from the Colorado Marijuana Division and the City Building and Fire Departments. The overall footprint of the building is shown as 14,656 square feet.

OWNERSHIP INFORMATION/BACKGROUNDS FINGERPRINTING -

Fingerprint cards were submitted to CBI/FBI on 5/29/14. Results have been received for Timothy Wayne Peters and Juanita Ruth Peters. Results are consistent with the information disclosed on the Individual History Record and the Police Department background check.

RESIDENCY REQUIREMENT -

Both members of T. P. Main Street, LLC meet the two-year Colorado residency requirement to hold a marijuana license.

COLORADO MEDICAL MARIJUANA LICENSE DOCUMENTS -

Copies of the entity's Colorado licensing documents were a required submittal with the City's application to obtain complete applicant information without redundancy. Those documents include the license application, optional premise cultivation license application, associated person and associated key license application, and license bond.

NOTICES OF HEARING -

Mailed to applicant – 6/11/14.
Published – 6/20/14.
Posted on the premises – 6/30/14.

DEPARTMENTAL REPORTS -

Fire Chief Tim Howard indicated the need for a fire inspection before a certificate of occupancy may be issued.

Building Inspector Chris Kelley recommends the license issuance be withheld until a certificate of occupancy is issued by him, if the license applications are approved.

Periodic inspections will continue throughout the process.

OTHER REVELANT CONCERNS -

SCHOOL DISTANCES –

There is a 1,000-foot limitation from a school for any marijuana business. The nearest school property is Goal Academy which is 2,378.63 feet from the nearest point of this property.

LICENSED OUTLETS WITHIN THE CITY -

M & M Distributing, LLC, 422 N. Commercial Street	Center
M & M Distributing, LLC, 422 N. Commercial Street	Optional Premise
	Cultivation Operation
M & M Distributing, LLC, 422 N. Commercial Street	Infused-Products
	Manufacturer

Dated this 7th day of July, 2014.

CITY OF TRINIDAD, COLORADO



Audra Garrett, City Clerk

CERTIFICATE OF MAILING

I hereby certify that on the 7th day of July, 2014, I mailed a copy of the Investigative Report, by Certified Mail, to:

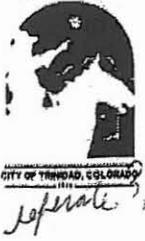
T. P. Main Street, LLC

6018 Manilla Lane

Don Carbo, CO 81024

Certified Mail # 7012 3460 0003 6816 1743


Audra Garrett, City Clerk



CITY OF TRINIDAD
 City Clerk's Office
 135 N Animas St
 P.O. Box 880
 Trinidad, Colorado 81082
 719-846-9843

City of Trinidad
 MAY 19 2014
 City Clerk's Office

MEDICAL MARIJUANA LICENSE APPLICATION	
<input checked="" type="checkbox"/> New License Application Fee \$2,500.00	<input checked="" type="checkbox"/> License Fee/Renewal Fee \$1,000.00
<input type="checkbox"/> Transfer of Ownership Application Fee \$1,500.00	<input type="checkbox"/> Change of Location \$1,500.00
LICENSE TYPE	
<input checked="" type="checkbox"/> Medical Marijuana Center	<input checked="" type="checkbox"/> Medical Marijuana Infused-Products Manufacturer
<input checked="" type="checkbox"/> Medical Marijuana-Optional Premises Cultivation Operation	
TYPE OF BUSINESS	
<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership
<input checked="" type="checkbox"/> Limited Liability Corporation	<input type="checkbox"/> Other
<input type="checkbox"/> Individual*	
*Sole Proprietorship (Individual) – Verification of Lawful Presence is required per State law (Signed Affidavit and Photo ID)	

Applicant T.P. Main Street LLC
 (Corporation/LLC)

Applicant _____
 (Sole Proprietor) First Name Middle Initial Last Name

Trade Name of Establishment (DBA) ~~TPD~~ - Trinidad Leaf

Address of Premise 821 E. Main Street, Trinidad, Co. 81082

Mailing Address _____

Telephone _____ Email Address _____

Contact Person/Manager Tim Peters Title MANAGER

Telephone _____ Email Address _____

Does the Applicant have legal possession of the premise for at least one (1) year from the date that this license will be issued by virtue of ownership, lease or other arrangement?

Ownership Lease Other (explain in detail)

If leased, list name of landlord and tenant, and date of expiration, EXACTLY as they appear on the lease:**
 Landlord Trinidad Pumping Inc. Tenant TP Main Street LLC Expires continuous until cancelled.

**If premises are leased, attach notarized consent by the owner of the property to the licensing of the premises for a medical marijuana facility.

ADDITIONAL DOCUMENTS TO BE SUBMITTED WITH APPLICATION

Individual History Records attached and completed by each individual applicant, all general partners of a partnership, and limited partners owning 10% (or more) of a partnership; all officers and directors of a corporation, and stockholders of a corporation owning 10% (or more) of the stock of such corporation; all limited liability company *MANAGING* members, and officers or other limited liability company members with a 10% (or more) ownership interest in such company and all managers and employees of a Medical Marijuana License.

1. Fingerprinting by the Trinidad Police Department for:

- ~~all~~ general partners of a partnership and limited partners owning 10% (or more) of a partnership;
 - all officers and directors of a corporation, and stockholders of a corporation owning 10% (or more) of the stock of such corporation;
 - all limited liability company *MANAGING* members, and officers or other limited liability company members with a 10% (or more) ownership interest in such company; and
 - all managers and employees of a Medical Marijuana License
- with the appropriate fee payable to Colorado Bureau of Investigation (currently \$38.50, March, 2014)

2. Lease or Deed – Evidence of Possession ✓

3. Conditional Use Permit approval ✓

4. Copy of alarm system contract ... pending

5. Copy of state sales tax license ✓

6. Certificate of Good Standing ✓

7. ~~Affidavit of Lawful Presence~~ (Sole Proprietors only) NA

8. Diagram of Premises:

• A floor plan, drawn to scale on 8-1/2 x 11" paper, showing the layout of the center and the principal uses of the floor area. Floor plan must include location of lighting and cameras required by state rules.

9. Copy of State Application with attachments

LIST OF OWNERS, OFFICERS, MANAGERS, EMPLOYEES & OTHERS WITH DIRECT OR INDIRECT FINANCIAL INTEREST

1. Name: Tim Peters Title: Managing Member

Address: [REDACTED]

Financial Interest: 90%

2. Name: JUANITA Peters Title: Member

Address: [REDACTED]

Financial Interest: 10%

3. Name: _____ Title: _____

Address: _____

Financial Interest: _____

4. Name: _____ Title: _____

Address: _____

Financial Interest: _____

5. Name: _____ Title: _____

Address: _____

Financial Interest: _____

6. Name: _____ Title: _____

Address: _____

Financial Interest: _____

7. Name: _____ Title: _____

Address: _____

Financial Interest: _____

The applicant hereby acknowledges that the applicant and its owners, officers, and employees may be subject to prosecution under federal laws relating to the possession and distribution of controlled substances, that the City of Trinidad accepts no legal liability in connection with the approval and subsequent operation of the medical marijuana business; and that the application and documents submitted for other approvals relating to the medical marijuana business operation are subject to disclosure in accordance with the Colorado Open Records Act.

By accepting a license issued pursuant to this ordinance, a licensee releases the City, its officers, elected officials, appointed officials, employees, attorneys and agents from any liability for injuries, damages or liabilities of any kind that result from any arrest or prosecution of dispensary owners, operators, employees, clients or customers for a violation of state or federal laws, rules or regulations.

By accepting a license issued pursuant to this ordinance a licensee, jointly and severally if more than one, agrees to indemnify and defend the City, its officers, elected officials, employees, attorneys, agents, insurers, and self-insurance pool against all liability, claims, and demands, on account of injury, loss, or damage, including without limitation, claims arising from bodily injury, personal injury, sickness, disease, death, property loss or damage, or any other loss of any kind whatsoever, which arise out of or are in any manner connected with the operation of the medical marijuana dispensary that is the subject of the license. The licensee further agrees to investigate, handle, respond to, and to provide defense for and defend against, any such liability, claims, or demands at its expense, and to bear all other costs and expenses related thereto, including court costs and attorney fees.

I declare, under penalty of perjury, that this application has been examined by me; that the statements made herein are made in good faith and, to the best of my knowledge and belief, true, correct and complete.

Signed: Tim Peters
(Must be signed by Individual Owner, Partner, or Officer)

Title: Managing Member

Printed Name: Tim Peters

Date: 5-15-2014



City of Trinidad, Colorado
1878

**CITY OF TRINIDAD, COLORADO
OFFICE OF THE CITY CLERK**

**LICENSEE'S STATEMENT REGARDING KNOWLEDGE
OF THE STATE OF COLORADO'S MEDICAL MARIJUANA CODES AND
REGULATIONS AND THE CITY OF TRINIDAD'S ORDINANCES AND LOCAL
RULES OF PROCEDURE GOVERNING MEDICAL MARIJUANA BUSINESSES**

The Local Licensing Authority, as the enforcement agency for the for the City of Trinidad, expects a Medical Marijuana Business licensee to be knowledgeable of the State of Colorado's and the City of Trinidad's Medical Marijuana laws, codes, regulations and ordinances and to seek further clarification of such information if necessary.

I, Tim Peters, hereby state that I have read Article 43.3 of Title 12, C.R.S., as amended, and the regulations promulgated thereunder, and the City of Trinidad Municipal Code regarding general business licensing and Medical Marijuana business licensing and understand the contents thereof.

Tim Peters
Printed Name of Licensee

Tim Peters
Authorized Signature of Licensee/Title

KAREN S. TOKAR
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 20054016083
MY COMMISSION EXPIRES 04/21/2017

May 15 - 2014
Date

STATE OF Colorado)
COUNTY OF Las Animas)

ss.

Subscribed and sworn to before me this 15 day of May, 2014.

Karen S. Tokar
Notary Public Signature

My Commission Expires: 4/21/2017



T. P. Main Street, LLC
16018 Manilla Lane
Bon Carbo, CO 81024

April 25, 2014

RE: CUP Application #: 2014-MMC-12 and #2014-OPCO-12 and #2014-MMIPM-12

Dear Applicant:

On April 22, 2014 the Planning, Zoning and Variance Commission approved your request for conditional use permits (CUP) to establish and operate a Medical Marijuana Center, an Optional Premise Cultivation Operation and a Medical Marijuana Infused-Products Manufacturing facility at 821 E. Main Street subject to the following conditions:

1. The applicant must comply with all provisions outlined in Article 12 of Chapter 14 of the City of Trinidad Municipal Code of Ordinances as well as any and all applicable state and local statutes, ordinances, rules, and regulations regarding the operation of medical marijuana centers, and other statutes, ordinances, rules, and regulations for the operation of businesses within the City of Trinidad, including but not limited to City sales tax and the City's sign code.
2. The applicant must provide the City with an air filtration plan describing the filtration system and/or other method or methods to be used to minimize odors associated with the cultivation and sale of medical marijuana. Approval of said air filtration plan is subject to the approval of the City Building Inspector.
3. If the proposed conditional use is not established within one year of its approval, discontinued for at least one year, or replaced by another use of the land, the conditional use permit and all associated conditional use permits shall expire.
4. The applicant must comply with the reasonable requirements of all Trinidad Municipal Officials with respect to the establishment and operation of the proposed facility or facilities.
5. The applicant must submit a revised site plan in accordance with the provisions of Section 14-63 of the City of Trinidad Municipal Code.

If you have any questions, please do not hesitate to contact me.

Thank you,

Louis Fineberg by KW

Louis Fineberg
Planning Director

CC: Chris Kelley, Building Inspector
Les Downs, City Attorney
Audra Garrett, City Clerk
File

5-13-14.

This is a lease agreement between Trinidad Pumping Inc., current owner of 321 E Main St. and T.P. Main Street LLC, to lease said property for a one year period from the date of license approval for one dollar per year. Lease to run annually from date of approval, until cancelled.

Tim Peters - VP of Trinidad Pumping Inc.

Tim Peters - Managing Member of T.P. Main St. LLC

THIS DEED, Made this 18 day of MARCH
in the year of our Lord TWO THOUSAND AND EIGHT
between:

200800696960
Filed for Record in
LAS ANIMAS, CO
BERNARD J. GONZALES
03-26-2008 At 03:49 pm.
WARRANTY DE 11.00
Doc Fees 25.95
DR Book 1076 Page 19 - 20

PAUL J. MARQUES AND CHRISTINE MARQUES

whose street address is 15110 COUNTY RD 75.1 City or Town TRINIDAD
and of the said County of LAS ANIMAS and State of CO 81082

of the first part, and

TRINIDAD PUMPING, INC

whose street address is PO Box 164 City or Town of Bon Carbo and of the said
County of Las Animas and State of Co 81024 of the second part.

Witnesseth, That the said parties of the first part, for and in consideration of the sum TWO HUNDRED FIFTY NINE THOUSAND FIVE HUNDRED DOLLARS to the said party of the first part in hand paid by the said parties of the second part, the receipt thereof is hereby confessed and acknowledged, have granted, bargained, sold and conveyed, and by these presents does grant, bargain, sell, convey and confirm, unto the said parties of the second part, the survivor of them, their assigns and the heirs and assigns of such survivor forever, all the following described lot or parcel of land situate, lying and being the County of LAS ANIMAS and State of COLORADO, to-wit:

LOT C, PART OF LOT 26 AND LOT 27 OF THE BACA LANDS SUBDIVISION TO THE CITY OF TRINIDAD, LAS ANIMAS COUNTY, COLORADO MORE PARTICULARLY DESCRIBED IN SCHEDULE "C" ATTACHED

Together, with all and singular the hereditaments and appurtenances thereunto belonging, or in anywise appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof, and all the estate, right, title, interest claim and demand whatsoever of said party of the first part, either in law or equity, of, in and to the above bargained premises, with the hereditaments and appurtenances. To Have and to Hold the said premises above bargained and described, with the appurtenances, unto the said parties of the second part, the survivor of them, their assigns and the heirs and assigns of such survivor forever. And the said parties of the first part, for themselves, their heirs, executors, and administrators, do hereby covenant, grant, bargain and agree to and with the said parties of the second part, the survivor of them, their assigns and the heirs and assigns of such survivor, that at the time of the ensembling and delivery of these presents, are well seized of the premises above conveyed, as of good, sure, perfect absolute and indefeasible estate of inheritance, in law, in fee simple, and have good right, full power and lawful authority to grant, bargain, sell and convey the same in manner and form aforesaid and that the same are free and clear from all former and other grants, bargains, sales, liens, taxes, assessments and encumbrances of whatever kind or nature soever, EXCEPT TAXES AND ANY ALL CONDITIONS, COVENANTS, EASEMENTS, RESERVATIONS, RESTRICTIONS, ROADS, RIGHTS OF WAY OF RECORD. And the above bargained premises in the quiet and peaceable possession of the said parties of the second part, the survivor of them, their assigns and the heirs and assigns of such survivor, against all and every person or persons lawfully claiming or to claim the whole or any part thereof, the said parties of the first part shall and will WARRANT AND FOREVER DEFEND.

In Witness Whereof, The said parties of the first part have hereunto set their hands and seals the day and year first above written.

Signed, Sealed and Delivered in the Presence of:

Paul J. Marques
PAUL J. MARQUES

Christine Marques (SEAL)
CHRISTINE MARQUES

STATE OF Co
COUNTY OF Las Animas

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 18 DAY OF MARCH, 2008 BY PAUL J. MARQUES AND CHRISTINE MARQUES

WITNESS my hand and official seal.



TRINIDAD PUMPING, INC

whose street address is PO Box 164 City or Town of Bon Carbo and of the said
County of Las Animas and State of Co 81024 of the second part.

Witnesseth, That the said parties of the first part, for and in consideration of the sum TWO HUNDRED FIFTY NINE THOUSAND FIVE HUNDRED DOLLARS to the said party of the first part in hand paid by the said parties of the second part, the receipt thereof is hereby confessed and acknowledged, have granted, bargained, sold and conveyed, and by these present does grant, bargain, sell, convey and confirm, unto the said parties of the second part, the survivor of them, their assigns and the heirs and assigns of such survivor forever, all the following described lot or parcel of land situate, lying and being the County of LAS ANIMAS and State of COLORADO, to-wit:

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In Witness Whereof, The said parties of the first part have hereunto set their hands and seals the day and year first above written.

Signed, Sealed and Delivered in the Presence of:

Paul J. Marques
PAUL J. MARQUES

Christine Marques (SEAL)
CHRISTINE MARQUES

STATE OF Co
COUNTY OF Las Animas

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 18 DAY OF MARCH, 2008 BY PAUL J. MARQUES AND CHRISTINE MARQUES

WITNESS my hand and official seal.

My commission expires: 11-25-2010

Mwendolyn D Brook
NOTARY PUBLIC



WARRANTY DEED



Colorado Secretary of State
 Date and Time: 08/04/2008 10:00 AM
 ID Number: 20081414421

Document must be filed electronically.
 Paper documents will not be accepted.

\$50.00

Document number: 20081414421
 Amount Paid: \$50.00

Document processing fee
 Fees & forms/cover sheets
 are subject to change.

To access other information or print
 copies of filed documents,
 visit www.sos.state.co.us and
 select Business Center.

ABOVE SPACE FOR OFFICE USE ONLY

Articles of Organization

filed pursuant to § 7-80-203 and § 7-80-204 of the Colorado Revised Statutes (C.R.S.)

1. The domestic entity name of the limited liability company is

T.P. Main Street L.L.C.

(The name of a limited liability company must contain the term or abbreviation "limited liability company", "ltd. liability company", "limited liability co.", "ltd. liability co.", "limited", "l.l.c.", "llc", or "ltd.". See §7-90-601, C.R.S.)

(Caution: The use of certain terms or abbreviations are restricted by law. Read instructions for more information.)

2. The principal office address of the limited liability company's initial principal office is

Street address

(Street number and name)

(City) _____ *(State)* _____ *(ZIP/Postal Code)*
United States
(Province - if applicable) *(Country)*

Mailing address

(leave blank if same as street address)

(Street number and name or Post Office Box information)

(City) *(State)* *(ZIP/Postal Code)*

(Province - if applicable) *(Country)*

3. The registered agent name and registered agent address of the limited liability company's initial registered agent are

Name
 (if an individual)

Peters **Tim**
(Last) *(First)* *(Middle)* *(Suffix)*

OR

(if an entity)
(Caution: Do not provide both an individual and an entity name.)

Street address

(Street number and name)

(City) *(State)* *(ZIP Code)*

Mailing address
(leave blank if same as street address) _____
(Street number and name or Post Office Box information)

(City) CO (State) (ZIP Code)

(The following statement is adopted by marking the box.)

The person appointed as registered agent has consented to being so appointed.

4. The true name and mailing address of the person forming the limited liability company are

Name
(if an individual) Walsh Kerry
(Last) (First) (Middle) (Suffix)

OR

(if an entity)
(Caution: Do not provide both an individual and an entity name.)

Mailing address 173 N. Main St., Suite 400
(Street number and name or Post Office Box information)

Sayville NY 11782
(City) (State) (ZIP/Postal Code)
United States
(Province - if applicable) (Country)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

The limited liability company has one or more additional persons forming the limited liability company and the name and mailing address of each such person are stated in an attachment.

5. The management of the limited liability company is vested in

(Mark the applicable box.)

one or more managers.

OR

the members.

6. (The following statement is adopted by marking the box.)

There is at least one member of the limited liability company.

7. (If the following statement applies, adopt the statement by marking the box and include an attachment.)

This document contains additional information as provided by law.

8. (Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)

The delayed effective date and, if applicable, time of this document is/are _____
(mm/dd/yyyy hour:minute am/pm)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that the document is the individual's act and deed, or that the individual in good faith believes the document is the act and deed of the person on whose behalf the individual is causing the document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S., the constituent documents, and the organic statutes, and that the individual in good faith believes the facts stated in the document are true and the document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is named in the document as one who has caused it to be delivered.

9. The true name and mailing address of the individual causing the document to be delivered for filing are

Walsh	Kerry		
<small>(Last)</small>	<small>(First)</small>	<small>(Middle)</small>	<small>(Suffix)</small>
173 N. Main Street, Suite 400			
<small>(Street number and name or Post Office Box information)</small>			
<hr/>			
Sayville	NY	11782	
<small>(City)</small>	<small>(State)</small>	<small>(ZIP/Postal Code)</small>	
	United States		
<small>(Province - if applicable)</small>	<small>(Country)</small>		

(If the following statement applies, adopt the statement by marking the box and include an attachment.)

- This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

Disclaimer:

This form/cover sheet, and any related instructions, are not intended to provide legal, business or tax advice, and are furnished without representation or warranty. While this form/cover sheet is believed to satisfy minimum legal requirements as of its revision date, compliance with applicable law, as the same may be amended from time to time, remains the responsibility of the user of this form/cover sheet. Questions should be addressed to the user's legal, business or tax advisor(s).

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

T.P. Main Street L.L.C.

is a **Limited Liability Company** formed or registered on 08/04/2008 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20081414421.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 05/15/2014 that have been posted, and by documents delivered to this office electronically through 05/19/2014 @ 09:41:48.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 05/19/2014 @ 09:41:48 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8852964.



A handwritten signature in black ink, appearing to read "Scott Gessler".

Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz-CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."



Colorado Secretary of State
 Date and Time: 05/18/2014 10:06 AM
 ID Number: [REDACTED]
 Document number: 20141307623
 Amount Paid: \$20.00

Document must be filed electronically.
 Paper documents are not accepted.
 Fees & forms are subject to change.
 For more information or to print copies
 of filed documents, visit www.sos.state.co.us.

ABOVE SPACE FOR OFFICE USE ONLY

Statement of Trade Name of a Reporting Entity
 filed pursuant to §7-71-103 and §7-71-107 of the Colorado Revised Statutes (C.R.S)

1. For the reporting entity delivering this statement, its ID number, true name, form of entity and the jurisdiction under the law of which it is formed are

ID Number	<u>[REDACTED]</u> <i>(Colorado Secretary of State ID number)</i>
True name	<u>T.P. Main Street L.L.C.</u>
Form of entity	<u>Limited Liability Company</u>
Jurisdiction	<u>Colorado</u>

2. The trade name under which such entity transacts business or conducts activities or contemplates transacting business or conducting activities in this state is

Trinidad Leaf

3. A brief description of the kind of business transacted or activities conducted or contemplated to be transacted or conducted in this state under such trade name is

Medical marijuana sales

4. *(If the following statement applies, adopt the statement by marking the box and include an attachment.)*

This document contains additional information as provided by law.

5. *(Caution: Leave blank if the document does not have a delayed effective date. Stating a delayed effective date has significant legal consequences. Read instructions before entering a date.)*

(If the following statement applies, adopt the statement by entering a date and, if applicable, time using the required format.)
 The delayed effective date and, if applicable, time of this document are _____
(mm/dd/yyyy hour:minute am/pm)

Notice:

Causing this document to be delivered to the Secretary of State for filing shall constitute the affirmation or acknowledgment of each individual causing such delivery, under penalties of perjury, that such document is such individual's act and deed, or that such individual in good faith believes such document is the act and deed of the person on whose behalf such individual is causing such document to be delivered for filing, taken in conformity with the requirements of part 3 of article 90 of title 7, C.R.S. and, if applicable, the constituent documents and the organic statutes, and that such individual in good faith believes the facts stated in such document are true and such document complies with the requirements of that Part, the constituent documents, and the organic statutes.

This perjury notice applies to each individual who causes this document to be delivered to the Secretary of State, whether or not such individual is identified in this document as one who has caused it to be delivered.

6. The true name and mailing address of the individual causing this document to be delivered for filing are

Peters Timothy Wayne
(Last) (First) (Middle) (Suffix)
[Redacted]
(Street number and name or Post Office Box information)
[Redacted] [Redacted] [Redacted]
(City) (State) (Postal/Zip Code)
United States
(Province - if applicable) (Country - if not US)

(If the following statement applies, adopt the statement by marking the box and include an attachment.)
This document contains the true name and mailing address of one or more additional individuals causing the document to be delivered for filing.

Disclaimer:

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Annual Reorganization Meeting minutes for TP Main Street llc.

Dec. 28 2013

Meeting was held at [REDACTED]

Present ;Tim Peters and Juanita Peters

Meeting was called to order at 6pm, by Juanita Peters.

A motion was made by Tim to keep everything the way is for the next year.

Motion was seconded, and unanimously approved.

Juanita made a motion to adjourn.

The motion was seconded and unanimously approved.

Meeting adjourned at 6:15.

T.P,Main Street LLC- Special Meeting Minutes 4-22-2014

The Meeting was called to order by meeting chair Tim Peters, at 4pm,at 16018 Manilla Lane,Boncarbo Co,81024

Present were Tim and Juanita Peters

A motion was made was made by Tim Peters to enter into a new business venture involving the building of a facility on 821 Main Street property for the purpose of growing of marijuana, medical sales and producing marijuana infused products.

The motion was seconded and approved unanimously.

A motion was then made by Tim Peters that by entering into this new venture that some form of reorganization of T.P. Main Street may be necessary and legal advice should be sought.

The motion was seconded and approved unanimously.

A motion was then made by Tim Peters, that considering this new venture, that Tim Peters should be made Managing Member of T.P. Main Street and that, upon legal advice, some amendments may necessary to properly reorganize in the near future.

The motion was seconded and unanimously approved.

A motion was the made by Juanita Peters to bring in Adam Schrepfer as a new member of the corporation and at this point, Mr. Schrepfer would have no stock or voting rights. Mrs Peters also added that legal counsel should be consulted on the proper way to do this and that some amendments may be necessary after consulting legal counsel.

The motion was seconded and unanimously approved.

A motion was then made by Tim Peters to approve any such actions and enter into contacts necessary in the pursuit of this new venture.

The motion was seconded and unanimously approved.

A motion was made by Juanita Peters to adjourn the meeting at 5pm.

The motion was seconded and unanimously approved.

Meeting was adjourned at 5pm.

T. P Main Street special meeting.

5-12- 2014

Meeting was called to order at 7 PM by Tim Peters. Present were Tim Peters Juanita Peters and on speakerphone Adam Schrepfer.

Member Juanita Peters called the special meeting to discuss the future of TP Main Street and Trinidad Leaf. Juanita Peters stated that she no longer wants to be a 50% partner in TP Main Street while it's involved with Trinidad Leaf.

Juanita Peters made a motion to transfer 40% of her 50% stock to Tim Peters making Tim a 90% managing member stockholder for sum of \$200. The motion was seconded and unanimously approved.

Just for clarification, Juanita Peters stated that Tim Peters is now the 90% managing member of TP Main St., Juanita Peters has a 10% ownership interest.

Juanita Peters stated that though she is in favor of pursuing Trinidad Leaf, she does not want to be an equal partner in this endeavor.

The meeting was adjourned at 7:30 PM.

DR 0140 (02/16/11)
DEPARTMENT OF REVENUE
DENVER CO 80261-0073

Must collect
taxes for:

SALES TAX LICENSE

THIS LICENSE MUST BE POSTED AT THE FOLLOWING LOCATION
IN A CONSPICUOUS PLACE: T.P. Main Street L.L.C.
821 E Main St Trinidad CO 81082-2722

T.P. MAIN STREET L.L.C.
ATTN: TIM PETERS
16018 MANILLA LANE
BONCARBO CO 81024



STATE CITY
COLORADO Trinidad

USE ACCOUNT NUMBER for all references	LIABILITY INFORMATION	ISSUE DATE	LICENSE VALID TO
[REDACTED]	county: [REDACTED] city: [REDACTED] industry: [REDACTED] type: [REDACTED] liability date: [REDACTED]	month: [REDACTED] day: [REDACTED] year: [REDACTED]	DECEMBER 31 2015

THIS LICENSE IS NOT
TRANSFERABLE

Steven Ford
Executive Director
Department of Revenue





Individual History Record
City of Trinidad, Colorado

CONFIDENTIAL INFORMATION
NOT FOR PUBLIC DISCLOSURE

PLEASE PRINT CLEARLY IN BLACK INK

To be completed by each individual applicant, all general partners of a partnership, and limited partners owning 10% (or more) of a partnership; all officers and directors of a corporation, and stockholders of a corporation owning 10% (or more) of the stock of such corporation; all limited liability company *MANAGING* members, and officers or other limited liability company members with a 10% (or more) ownership interest in such company and all managers and employees of a Medical Marijuana License.

NOTICE: This individual history record provides basic information which is necessary for the licensing authority investigation. All questions must be answered in their entirety or your application may be delayed or not processed. EVERY answer you give will be checked for its truthfulness. A deliberate falsehood or omission will jeopardize the application as such falsehood within itself constitutes evidence regarding the character of the applicant.

1. Owner/Company Name T. P. Main St. LLC
2. D/B/A (Doing Business As) Trinidad Leaf
3. Business address 821 E. Main St., Trinidad Co. 81082
4. Business License # _____

5. Your Full Name (last, first, middle) Peters Timothy Wayne
6. List any other names you have used _____

7. Mailing address (if different from residence) _____
8. Phone _____

9. List All Other Medical Marijuana Licenses issued to Applicant (Attach separate sheet if necessary) Location
None _____

10. Identify Medical Marijuana Optional Premise License, license number, and issuer of said license.

11. List all residence addresses below. Include current and previous addresses for the past five years.

	STREET AND NUMBER	CITY, STATE, ZIP	FROM	TO
Current	_____	_____	02	→ Present
Previous	_____	_____	_____	_____
	_____	_____	_____	_____

12. List all current and former employers or businesses engaged in within the last five years (Attach separate sheet if necessary)

NAME OF EMPLOYER	ADDRESS (STREET, NUMBER, CITY, STATE, ZIP)	POSITION HELD	FROM	TO
Peters Enterprises	[REDACTED]	President	02	Present
Trinidad Pumping	[REDACTED]	V.P.	06	Present

13. List the name(s) of relatives working in or holding a financial interest in the Colorado Medical Marijuana Industry.

NAME OF RELATIVE	RELATIONSHIP TO YOU	POSITION HELD	NAME OF LICENSEE
Juanita Peters	Wife	Member	TP Main St LLC (pending)

14. Have you ever applied for, held, or had an interest in a State of Colorado Medical Marijuana License, or loaned money, furniture or fixtures, equipment or inventory, to any Medical Marijuana licensee? If yes, answer in detail. YES NO

15. Have you ever received a violation notice suspension or revocation, for a law violation, or have you applied for or been denied a Medical Marijuana License anywhere in the U.S.? If yes, explain in detail. YES NO

16. 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? Include all arrests. If yes, explain in detail; include date, charge and disposition. YES NO

17. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? If yes, explain in detail. YES NO

18. Have you ever had any STATE issued licenses suspended, revoked, or denied including a drivers license? If yes, explain in detail. YES NO

PERSONAL AND FINANCIAL INFORMATION

19a. Date of Birth _____ b. Social Security Number SSN _____ c. Place of Birth Seattle Wash. d. U.S. Citizen? YES NO

e. If Naturalized, State where _____ f. When _____ g. Name of District Court _____

h. Naturalization Certificate Number _____ i. Date of Certification _____ j. If an Alien, Give Alien's Registration Card Number _____

k. Permanent Residence Card Number _____

l. Height _____ m. Weight _____ n. Hair Color _____ o. Eye Color _____ p. Sex Male q. Race _____

r. Do you have a current Driver's License? YES NO If so, give State and Number _____

14. Financial Information

This section is to be completed by each individual applicant, all general partners of a partnership, and limited partners owning 10% (or more) of a partnership; all officers and directors of a corporation, and stockholders of a corporation owning 10% (or more) of the stock of such corporation; all limited liability company MANAGING members, and officers or other limited liability company members with a 10% (or more) ownership interest in such company

20. Give name of bank where business account will be maintained; Account Name and Account Number; and the name or names of persons authorized to draw thereon.

International Bank - T.P. Main St. / Trinidad Leap

Tim and Juanita Peters

AFFIDAVIT

State of Colorado)
) ss.
 County of Las Animas)

I, Tim Peters, being first duly sworn, state that I am
 Printed Name of Applicant

an applicant for a Medical Marijuana Center for TP Main Street LLC
 Name of Establishment

Located at 821 E. Main St., Trinidad, Colorado;
 Address of Establishment

and that in connection with said application, 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.

In addition, I hereby state that I have not been convicted of a crime, fined, imprisoned, placed on probation, received a suspended sentence or forfeited bail for any offense in criminal or military court other than what has been reported within my application for said license, except traffic violations which did not result in suspension or revocation of my driver's license or conviction of driving under the influence of alcoholic beverages.

I fully understand that the Trinidad Police Department conducts a background investigation of all applicants (using this application for its beginning point), who are being considered for a Medical Marijuana License. This investigation includes, but is not limited to, an investigation of past employment, financial stability, driving records and character. I hereby waive any and all rights that I may have to examine, review, or inspect any documents or information of whatever kind, form or nature, obtained in the course of the background investigation.

I hereby authorize any person who is contacted by the Trinidad Police Department's personnel to release any information to the Trinidad Police Department pertaining to the background investigation.

I also understand hereby that this application and any and all papers and other exhibits submitted by me or any person, government agency, former employer, private business, or any other individual or group of individuals become, upon submission to the Trinidad Police Department, the property of the City of Trinidad, State of Colorado, and can not and will not be returned to me under any circumstances whatsoever, and will not be disclosed to me.

I authorize the Trinidad Police Department to release any information or documents collected during the application process to any person or entity lawfully empowered to obtain this information or documents.

I further agree to release and hold harmless any person releasing such information to the Trinidad Police Department from any and all liability or claims that I may have against that person arising out of the release of such information.

I further agree to release and hold harmless the City of Trinidad, its elected officials, officers, agents and employees from any and all liability or claims which I may have arising out of the disclosure of such information to the Trinidad Police Department for use by the Trinidad Police Department in the consideration of my application for a Medical Marijuana License, the disclosure or release of any information or documents by the Trinidad Police Department or agents thereof collected during the application process to any person or entity lawfully empowered to obtain such information or documents.

This Affidavit is made for purposes of inducing the Local Medical Marijuana Licensing Authority of the City of Trinidad, Colorado, to approve the aforementioned Medical Marijuana license application. This Affidavit is made with the knowledge and consent by me; and if this Affidavit for any reason proves to be false, the Trinidad Medical Marijuana Authority may revoke the license previously issued to me in reliance upon this Affidavit and said revocation may be accomplished without the necessity of any hearing.

Tim Peters
Signature of Applicant

The foregoing Affidavit was subscribed and sworn to before me this 15 day of May, 2014, by Timothy Peters.

KAREN S. TOKAR
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 20054016083
MY COMMISSION EXPIRES 04/21/2017

Witness my hand and official seal.
My commission expires 4/21/2017.

Kara Stolor
Notary Public

I, Tim Peters, Owner/Manager Approval (Required)
Owner or Manager's Name Printed Here, Owner/Manager of T.P. Main Street LLC
Business Name Printed Here

acknowledge and approve the submittal of an application for Tim Peters
Applicant's Printed Name Here



Individual History Record
City of Trinidad, Colorado

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To be completed by each individual applicant, all general partners of a partnership, and limited partners owning 10% (or more) of a partnership; all officers and directors of a corporation, and stockholders of a corporation owning 10% (or more) of the stock of such corporation; all limited liability company MANAGING members, and officers or other limited liability company members with a 10% (or more) ownership interest in such company and all managers and employees of a Medical Marijuana License.

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1. Owner/Company Name T.P. Main Street LLC
2. D/B/A (Doing Business As) Trinidad Leaf
3. Business address 821 E Main St. Trinidad Co 81082
4. Business License #

5. Your Full Name (last, first, middle) Juanita Ruth Peters
6. List any other names you have used Juanita Danielson, Juanita Schrepter

7. Mailing address (if different from residence)
8. Phone

9. List All Other Medical Marijuana Licenses issued to Applicant (Attach separate sheet if necessary) Location

10. Identify Medical Marijuana Optional Premise License, license number, and issuer of said license.

11. List all residence addresses below. Include current and previous addresses for the past five years.
Table with columns: Current, STREET AND NUMBER, CITY, STATE, ZIP, FROM, TO. Entry: [Redacted], [Redacted], 02 -> present.

12. List all current and former employers or businesses engaged in within the last five years (Attach separate sheet if necessary)

NAME OF EMPLOYER	ADDRESS (STREET, NUMBER, CITY, STATE, ZIP)	POSITION HELD	FROM TO
<i>Peters Ent.</i>	[REDACTED]	<i>VP</i>	<i>02 → present</i>
<i>Unidad Pumping</i>	<i>()</i>	<i>President</i>	<i>09 - present</i>

13. List the name(s) of relatives working in or holding a financial interest in the Colorado Medical Marijuana Industry.

NAME OF RELATIVE	RELATIONSHIP TO YOU	POSITION HELD	NAME OF LICENSEE
<i>Tim Peters</i>	<i>Husband</i>	<i>M.M.</i>	<i>T.P. MAIN ST. LLC</i> <i>(pending)</i>

14. Have you ever applied for, held, or had an interest in a State of Colorado Medical Marijuana License, or loaned money, furniture or fixtures, equipment or inventory, to any Medical Marijuana licensee? If yes, answer in detail. YES NO

15. Have you ever received a violation notice suspension or revocation, for a law violation, or have you applied for or been denied a Medical Marijuana License anywhere in the U.S.? If yes, explain in detail. YES NO

16. 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? Include all arrests. If yes, explain in detail; include date, charge and disposition. YES NO

17. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? If yes, explain in detail. YES NO

18. Have you ever had any STATE issued licenses suspended, revoked, or denied including a drivers license? If yes, explain in detail. YES NO

PERSONAL AND FINANCIAL INFORMATION

19a. Date of Birth [redacted] b. Social Security Number SSN [redacted] c. Place of Birth Kalispell, Montana d. U.S. Citizen? YES NO

e. If Naturalized, State where _____ f. When _____ g. Name of District Court _____

h. Naturalization Certificate Number _____ i. Date of Certification _____ j. If an Alien, Give Alien's Registration Card Number _____

k. Permanent Residence Card Number _____

l. Height [redacted] m. Weight [redacted] n. Hair Color [redacted] o. Eye Color green p. Sex F q. Race [redacted]

r. Do you have a current Driver's License? YES NO If so, give State and Number [redacted]

14. Financial Information

This section is to be completed by each individual applicant, all general partners of a partnership, and limited partners owning 10% (or more) of a partnership; all officers and directors of a corporation, and stockholders of a corporation owning 10% (or more) of the stock of such corporation; all limited liability company MANAGING members, and officers or other limited liability company members with a 10% (or more) ownership interest in such company

20. Give name of bank where business account will be maintained; Account Name and Account Number; and the name or names of persons authorized to draw thereon.

International Bank, 320 Convent,
T.P. Main Street LLC → account # [redacted]
(Tim and Juanita)

AFFIDAVIT

State of Colorado)
) ss.
 County of Las Animas)

I, JUANITA PETERS, being first duly sworn, state that I am
 Printed Name of Applicant

an applicant for a Medical Marijuana Center for T.P. Main Street LLC / Trinidad Leaf
 Name of Establishment

Located at 821 E Main St., Trinidad, Colorado;
 Address of Establishment

and that in connection with said application, 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.

In addition, I hereby state that I have not been convicted of a crime, fined, imprisoned, placed on probation, received a suspended sentence or forfeited bail for any offense in criminal or military court other than what has been reported within my application for said license, except traffic violations which did not result in suspension or revocation of my driver's license or conviction of driving under the influence of alcoholic beverages.

I fully understand that the Trinidad Police Department conducts a background investigation of all applicants (using this application for its beginning point), who are being considered for a Medical Marijuana License. This investigation includes, but is not limited to, an investigation of past employment, financial stability, driving records and character. I hereby waive any and all rights that I may have to examine, review, or inspect any documents or information of whatever kind, form or nature, obtained in the course of the background investigation.

I hereby authorize any person who is contacted by the Trinidad Police Department's personnel to release any information to the Trinidad Police Department pertaining to the background investigation.

I also understand hereby that this application and any and all papers and other exhibits submitted by me or any person, government agency, former employer, private business, or any other individual or group of individuals become, upon submission to the Trinidad Police Department, the property of the City of Trinidad, State of Colorado, and can not and will not be returned to me under any circumstances whatsoever, and will not be disclosed to me.

I authorize the Trinidad Police Department to release any information or documents collected during the application process to any person or entity lawfully empowered to obtain this information or documents.

I further agree to release and hold harmless any person releasing such information to the Trinidad Police Department from any and all liability or claims that I may have against that person arising out of the release of such information.

I further agree to release and hold harmless the City of Trinidad, its elected officials, officers, agents and employees from any and all liability or claims which I may have arising out of the disclosure of such information to the Trinidad Police Department for use by the Trinidad Police Department in the consideration of my application for a Medical Marijuana License, the disclosure or release of any information or documents by the Trinidad Police Department or agents thereof collected during the application process to any person or entity lawfully empowered to obtain such information or documents.

This Affidavit is made for purposes of inducing the Local Medical Marijuana Licensing Authority of the City of Trinidad, Colorado, to approve the aforementioned Medical Marijuana license application. This Affidavit is made with the knowledge and consent by me; and if this Affidavit for any reason proves to be false, the Trinidad Medical Marijuana Authority may revoke the license previously issued to me in reliance upon this Affidavit and said revocation may be accomplished without the necessity of any hearing.

Tim Peters
Signature of Applicant

The foregoing Affidavit was subscribed and sworn to before me this 15 day of May, 2014 by Timothy Peters.

KAREN S. TOKAR
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 20054016083
MY COMMISSION EXPIRES 04/21/21

Witness my hand and official seal.
My commission expires 4/21/2017.

Karen S. Tokar
Notary Public

Owner/Manager Approval (Required)
I, Tim Peters, Owner/Manager of TP Main Street LLC
Owner or Manager's Name Printed Here Business Name Printed Here
acknowledge and approve the submittal of an application for Juanita Peters
Applicant's Printed Name Here

DATE 06/04/2014

PD TRINIDAD
2309 E MAIN ST
TRINIDAD, CO 81082

RE: PETERS, TIMOTHY WAYNE
SOC: [REDACTED]

DATE OF BIRTH: [REDACTED]

No Colorado record of arrest has been located based on above name and date of birth or through a search of our fingerprint files.

The Colorado Bureau of Investigation's database contains detailed information of arrest records based upon fingerprints provided by Colorado law enforcement agencies. Arrests which are not supported by fingerprints will not be included in this database. On occasion the Colorado criminal history will contain disposition information provided by the Colorado Judicial system. Additionally, warrant information, sealed records, and juvenile records are not available to the public.

Since a record may be established after the time a report was requested, the data is only valid as of the date issued. Therefore, if there is a subsequent need for the record, it is recommended another check be made.

Falsifying or altering this document with the intent to misrepresent the contents of the record is prohibited by law and may be punishable as a felony when done with intent to injure or defraud any person.

Sincerely,
Ronald C. Sloan, Director
Colorado Bureau of Investigation

FEDERAL BUREAU OF INVESTIGATION - CJIS DIVISION

CIVIL APPLICANT RESPONSE

A SEARCH OF THE FINGERPRINTS ON THE INDIVIDUAL HAS REVEALED NO PRIOR ARREST.

ICN: E2014155000000076849
OCA: CO0360100
Name: PETERS, TIMOTHY WAYNE
Date of Birth: [REDACTED]
Sex: M
Race: [REDACTED]
Height: 5'09"
Weight: [REDACTED]
SSN: [REDACTED]
Misc ID:
Captured Date: 06/02/2014
Submitted Date: 06/04/2014

DATE 06/04/2014

PD TRINIDAD
2309 E MAIN ST
TRINIDAD, CO 81082

RE: PETERS, JUANITA RUTH
SOC: [REDACTED]

DATE OF BIRTH: [REDACTED]

No Colorado record of arrest has been located based on above name and date of birth or through a search of our fingerprint files.

The Colorado Bureau of Investigation's database contains detailed information of arrest records based upon fingerprints provided by Colorado law enforcement agencies. Arrests which are not supported by fingerprints will not be included in this database. On occasion the Colorado criminal history will contain disposition information provided by the Colorado Judicial system. Additionally, warrant information, sealed records, and juvenile records are not available to the public.

Since a record may be established after the time a report was requested, the data is only valid as of the date issued. Therefore, if there is a subsequent need for the record, it is recommended another check be made.

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Sincerely,
Ronald C. Sloan, Director
Colorado Bureau of Investigation

FEDERAL BUREAU OF INVESTIGATION - CJIS DIVISION

CIVIL APPLICANT RESPONSE

A SEARCH OF THE FINGERPRINTS ON THE INDIVIDUAL HAS REVEALED NO PRIOR ARREST.

ICN:	E201415500000074487
OCA:	CO0360100
Name:	PETERS, JUANITA RUTH
Date of Birth:	[REDACTED]
Sex:	F
Race:	[REDACTED]
Height:	[REDACTED]
Weight:	[REDACTED]
SSN:	[REDACTED]
Misc ID:	
Captured Date:	06/02/2014
Submitted Date:	06/04/2014



Trinidad Police Department

2309 E Main St.

Trinidad, Co 81082

(719) 846-4441 (719) 846-3728 (fax)

To Audra Garrett, City Clerk

From Det Sgt Phil Martin 

June 24, 2014

RE: T.P. Main St LLC Timothy W and Juanita R Peters

To whom it may concern:

In reference to the above listed applicants, the Trinidad Police Department conducted a check of various public access data bases and found nothing to indicate any concerns in regard to the applicants

If further information is required, please feel free to contact this agency

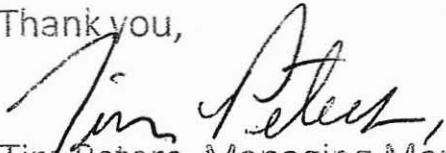
SECURITY CONTRACT

April 19, 2014

At this point, we do not currently have a security contract in place. At this point none of our applications have been approved. Our building permit has not been approved. Once our applications have been approved & and our building, we will fully comply with all city and state regulations. We will submit an exact, detailed contract at that point.

I have already been in contact with M.E. D. officials on coordinating the exact security set up that we will need.

Thank you,

 *Managing Member - T.P. Main Street LLC*
Tim Peters, Managing Member of TP Main St. LLC

copy for City



COLORADO BUSINESS MEDICAL MARIJUANA LICENSE APPLICATION

Marijuana Enforcement Division

Colorado Marijuana Licensing Authority Business License Application

License Types & Fees (Check only one application type. See Application Checklist for details on license types and fees.)			
<input checked="" type="checkbox"/> Medical Marijuana Center (Type 1*) <input type="checkbox"/> Medical Marijuana Center (Type 2*) <input type="checkbox"/> Medical Marijuana Center (Type 3*)	<input checked="" type="checkbox"/> Medical Marijuana-Infused Products Manufacturer. <small>*Type 1=300 or fewer patients, *Type 2=301 to 500 patients; *Type 3=501 or more patients</small> Fill out a separate Appendix A form (DR 8544) for each optional premise cultivation license you are applying for.		
Applicant's Legal Business Name (Please Print) <i>T. P. Main Street LLC</i>		Medical Marijuana License Number (Assigned by Division)	
Trade Name (DBA) (Provide Trade Name Registration) <i>Trinidad Leaf</i>		Website Address <i>No site</i>	
Physical Address			
Street Address of Medical Marijuana Business (Use Appendix A for Optional Premises Cultivation Information) <i>821 E Main St.</i>			City <i>Trinidad</i>
			State <i>CO</i>
			ZIP <i>81082</i>
Business Phone Number [REDACTED]	Business Fax Number <i>No fax yet</i>	Email Address [REDACTED]	
Mailing Address (if different from Business Address)			
Address [REDACTED]		City <i>Boncarbo</i>	State <i>CO</i>
		ZIP <i>81024</i>	
* On a separate sheet, list all principal places of business for the past 10 years if different from above.			
Primary Contact Person for Business <i>Tim Peters</i>		Title <i>Managing Member</i>	Primary Contact Phone Number [REDACTED]
Primary Contact Address (city, state ZIP) [REDACTED]		Primary Contact Fax Number [REDACTED]	
Federal Taxpayer ID [REDACTED]	Colorado Sales Tax License # [REDACTED]	Email Address [REDACTED]	
Type of Business Structure			
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Publicly Traded Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Other			
State of Incorporation or Creation of Business Entity <i>Colorado</i>			Date <i>8-1-2008</i>
Date of Qualification to Conduct Business in Colorado (Provide Certificate of Good Standing from the Colorado Secretary of State's Office) <i>8-1-2008</i>			
If a Corporation, List all States Where the Corporation is Authorized to Conduct Business <i>CO</i>			
List all Trade Names used by the Business Entity (other than above) <i>None</i>			
* Attach certified of all articles of incorporation, bylaws, articles of organization, or a true copy of any partnership or trust agreement, including any and all amendments to such.			
If a corporation, attach copies of all annual and bi-annual reports, SEC filings, if any, and all minutes from all corporate meetings for the past 12 months.			

1. 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

2. 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 a privileged license (ie: Liquor, Gaming, Racing and Medical Marijuana)?
 (b) had a privileged license (ie: Liquor, Gaming, Racing and Medical Marijuana) suspended or revoked?
 (c) had interest in another entity that had a privileged (ie: Liquor, Gaming, Racing and Medical Marijuana) license denied, suspended or revoked?
 If you answered yes to 2a, b or c, explain in detail on a separate sheet.

3. Are the premises to be licensed within 1000 feet of a school (as defined in 12-43.3 104 (15) C.R.S.), alcohol or drug treatment facility, principal campus of a college, university, or seminary, or a residential childcare facility? If YES, then include a copy of a waiver or ordinance from the local jurisdiction where the business is located.

4. Has a Medical Marijuana 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 current or former financial interest in said business including any loans to or from a licensee.

5. Does the applicant have legal possession of the premises by virtue of ownership, lease or other arrangement? Attach all documentation showing legal possession. Deed, Title, sale or lease agreements etc.
 Ownership Lease Other (Explain in Detail) _____
 (a) If leased, list name of landlord and tenant, and date of expiration, EXACTLY as they appear on the lease:

Landlord <i>NA</i>	Tenant	Expires
-----------------------	--------	---------

Attach a diagram of the premises to be licensed and outline or designate the area (including dimensions) which shows the limited access areas, walls, partitions, entrances, exits and what each room shall be utilized for in this business, including security equipment locations. This diagram should be no larger than 8 1/2" X 11". (It does not have to be to scale)

6. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies, trusts), will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money or profits from this business. Attach a separate sheet if necessary.

Name	Date of Birth	FEIN OR SSN	Interest
<i>None</i>			

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.

Local Licensing Authority/Department

Local Licensing Authority/Department <i>City of Trinidad - Clerk</i>	Address <i>135 N. Animas St., Trinidad Co 81082</i>
Local Licensing Authority contact name <i>Audra Garrett</i>	Contact Phone <i>719-246-9843</i>
Date of application with local authority <i>5-15-2014</i>	Contact Email <i>Audra.garrett@trinidad.co.gov</i>
	Date of approval from local authority, if any

Are you requesting a concurrent review? Yes No

7. Optional Premises Cultivation License
 Has the Applicant filed for an Optional Premises License? Yes No

What City or County? (Fill out Appendix A completely)
Trinidad

8. Does the Applicant have evidence of a good and sufficient bond in the amount of \$5000.00 in accordance with 12-43.4-304 C.R.S. (Include evidence with application)?

Printed Legal Business Name <i>TP Main Street LLC</i>	Printed Trade Name (DBA) <i>Trinidad Leaf</i>
--	--

copy ↑

Ownership Structure

List all persons and/or entities with any ownership interest, and all officers and directors, whether they have ownership interest or not. If an entity (corporation, partnership, LLC, etc.) has interest, list all persons associated with such entity, their ownership in the entity, and their effective ownership in the license. List all parent, holding or other intermediary business interest. An Associated Key License Application form must be submitted for all persons in a privately held company or a publicly traded corporation, and all officers and directors.

Name <i>Tim Peters</i>	Title <i>Managing Member</i>	SSN/FEIN [REDACTED]	DOB [REDACTED]	App submitted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Address [REDACTED]	City [REDACTED]	State [REDACTED]	ZIP [REDACTED]	Phone Number [REDACTED]
Business Associated with (Parent business or sub-entity) <i>T.P. Main Street LLC</i>		Own. % Business Associated with <i>90%</i>		Effective Own. % in Applicant <i>90%</i>

Name <i>Juanita Peters</i>	Title <i>member</i>	SSN/FEIN [REDACTED]	DOB [REDACTED]	App submitted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Address [REDACTED]	City [REDACTED]	State [REDACTED]	ZIP [REDACTED]	Phone Number [REDACTED]
Business Associated with (Parent business or sub-entity) <i>TP Main Street LLC</i>		Own. % Business Associated with <i>10%</i>		Effective Own. % in Applicant <i>10%</i>

Name	Title	SSN/FEIN	DOB	App submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address	City	State	ZIP	Phone Number
Business Associated with (Parent business or sub-entity)		Own. % Business Associated with		Effective Own. % in Applicant

Name	Title	SSN/FEIN	DOB	App submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address	City	State	ZIP	Phone Number
Business Associated with (Parent business or sub-entity)		Own. % Business Associated with		Effective Own. % in Applicant

Name	Title	SSN/FEIN	DOB	App submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address	City	State	ZIP	Phone Number
Business Associated with (Parent business or sub-entity)		Own. % Business Associated with		Effective Own. % in Applicant

Name	Title	SSN/FEIN	DOB	App submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address	City	State	ZIP	Phone Number
Business Associated with (Parent business or sub-entity)		Own. % Business Associated with		Effective Own. % in Applicant

Name	Title	SSN/FEIN	DOB	App submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address	City	State	ZIP	Phone Number
Business Associated with (Parent business or sub-entity)		Own. % Business Associated with		Effective Own. % in Applicant

Are there any outstanding options and warrants?

Yes No *If YES, attach list of persons with outstanding options and warrants

Are there any other persons, other than those listed in the Ownership Structure, including but not limited to suppliers, lenders and landlords, who will receive, directly or indirectly, any compensation or rents based upon a percentage or share of gross proceeds or income of the Marijuana business?

Yes No *If YES, attach list of persons and submit Associate Key License Application forms for each person

Printed Legal Business Name TP Main Street LLC		Printed Trade Name (DBA) Trinidad Leaf	
1. Has the applicant, the applicant's parent company or any other intermediary business entity ever applied for a Marijuana license in this or any other jurisdiction, foreign or domestic, whether or not the license was ever issued? If YES, provide details on a separate sheet, including jurisdiction, type of license, license number, and dates license held or applied for.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2. Has the applicant, the applicant's parent company or any other intermediary business entity ever been denied a Marijuana license, withdrawn a Marijuana license or had any disciplinary action taken against any Marijuana license that they have held in this or any other jurisdiction, foreign or domestic? If YES, provide details on a separate sheet, including jurisdiction, type of action, and date of action.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Financial History			
1. Is the applicant, the applicant's parent company or any other intermediary business entity delinquent in the payment of any judgments or tax liabilities due to any governmental agency anywhere? If YES, provide details on a separate sheet and attach any documents to prove settlement or resolution of the delinquency.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
2. Has the applicant, the applicant's parent company or any other intermediary business entity filed a bankruptcy petition in the past 5 years, had such a petition filed against it, or had a receiver, fiscal agent, trustee, reorganization trustee or similar person appointed for it? If YES, provide details on a separate sheet and attach any documents from the bankruptcy court.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3. Is the applicant, the applicant's parent company or any other intermediary business entity currently a party to, or has it ever been a party to, in any capacity, any business trust instrument? If YES, provide details on a separate sheet.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
4. Has a complaint, judgment, consent decree, settlement or other disposition related to a violation of federal, state or similar foreign antitrust, trade or security law or regulation ever been filed or entered against the applicant, the applicant's parent company or any other intermediary business entity? If YES, provide details on a separate sheet and attach any documents to prove the settlement of any of these issues. Include any items currently under formal dispute or legal appeal.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Has the applicant, the applicant's parent company or any other intermediary business entity been a party to a lawsuit in the past 5 years, either as a plaintiff or defendant, complainant or respondent, or in any other fashion, in this or any other country? If YES, provide details on a separate sheet and attach any documents to prove the settlement of any of these issues. Include any items currently under formal dispute or legal appeal.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
6. Has the applicant, the applicant's parent company or any other intermediary business entity filed a business tax return in the past two years?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
7. Has the applicant, the applicant's parent company or any other intermediary business entity completed financial statements, either audited or unaudited, in the past two years? If YES, attach all financial statements completed in the past two years.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. Has any interest or share in the profits of the sale of Marijuana been pledged or hypothecated as security for a debt or deposited as a security for the performance of an act or to secure the performance of a contract? If YES, provide details on a separate sheet.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
* ✓ 9. <u>Attach</u> a list detailing the operating and investment accounts for this business, including financial institution name, address, telephone number, and account number for each account.			
✓ 10. Attach a list detailing each outstanding loan and financial obligation obtained for use in this business, including creditor name, address, phone number, loan number, loan amount, loan terms, date acquired, and date due. ?			
Person who maintains Applicant's business records <i>At this time → Juanita Peters</i>		Title <i>Member</i>	
Address [REDACTED]		Phone Number [REDACTED]	
Person who prepares Applicant's tax returns, government forms & reports <i>Tax and Business Service, Theresa Coats</i>		Title <i>?</i>	
Address <i>721 San Mateo, Alb. NM, 87108</i>		Phone Number <i>505-266-7702</i>	
Location of financial books and records for Applicant's business [REDACTED]			

Affirmation & Consent

I, Tim Peters, as an authorized agent for the applicant, state under penalty for offering a false instrument for recording pursuant to 18-5-114 C.R.S. that the entire Medical Marijuana Business License Application Form, statements, attachments, and supporting schedules are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal to issue a Medical Marijuana license by the State Licensing Authority. Further, I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for the denial of a temporary Medical Marijuana application or the revocation of the license. I am voluntarily submitting this application to the Colorado Marijuana Licensing Authority under oath with full knowledge that I may be charged with perjury or other crimes for intentional omissions and misrepresentations pursuant to Colorado law or for offering a false instrument for recording pursuant to 18-5-114 C.R.S. I further consent to any background investigation necessary to determine my present and continuing suitability and that this consent continues as long as I hold a Colorado Medical Marijuana License, and for 90 days following the expiration or surrender of such Medical Marijuana license. Note: If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your banking account electronically.

Print Full Legal Agent Name clearly below:

Applicant's Business Name <i>T.P. MAIN Street LLC</i>		Trade Name (DBA) <i>Trinidad LEAF</i>	
Legal Agent Last Name (Please Print) <i>Peters</i>	Legal Agent First Name <i>Timothy</i>	Legal Agent Middle Name <i>Wayne</i>	
Signature <i>Tim Peters</i>			Date <i>5-11-14</i>

Investigation Authorization Authorization to Release Information

I, Tim Peters, as an authorized agent for the applicant, hereby authorize the Colorado Marijuana Licensing Authority, the Marijuana Enforcement Division, (hereafter, the Investigatory Agencies) to conduct a complete investigation into my personal background, using whatever legal means they deem appropriate. I hereby authorize any person or entity contacted by the Investigatory Agencies to provide any and all such information deemed necessary by the Investigatory Agencies. I hereby waive any rights of confidentiality in this regard. I understand that by signing this authorization, a financial record check may be performed. I authorize any financial institution to surrender to the Investigatory Agencies a complete and accurate record of such transactions that may have occurred with that institution, including, but not limited to, internal banking memoranda, past and present loan applications, financial statements and any other documents relating to my personal or business financial records in whatever form and wherever located. I understand that by signing this authorization, a financial record check of my tax filing and tax obligation status may be performed. I authorize the Colorado Department of Revenue to surrender to the Investigatory Agencies a complete and accurate record of any and all tax information or records relating to me. I authorize the Investigatory Agencies to obtain, receive, review, copy, discuss and use any such tax information or documents relating to me. I authorize the release of this type of information, even though such information may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws. I understand that by signing this authorization, a criminal history check will be performed. I authorize the Investigatory Agencies to obtain and use from any source, any information concerning me contained in any type of criminal history record files, wherever located. I understand that the criminal history record files contain records of arrests which may have resulted in a disposition other than a finding of guilt (i.e., dismissed charges, or charges that resulted in a not guilty finding). I understand that the information may contain listings of charges that resulted in suspended imposition of sentence, even though I successfully completed the conditions of said sentence and was discharged pursuant to law. I authorize the release of this type of information, even though this record may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws.

The Investigatory Agencies reserve the right to investigate all relevant information and facts to their satisfaction. I understand that the Investigatory Agencies may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. However, the State of Colorado, Investigatory Agencies, and other agents or employees of the State of Colorado shall not be held liable for the receipt, use, or dissemination of inaccurate information. I, on behalf of the applicant, its legal representatives, and assigns, hereby release, waive, discharge, and agree to hold harmless, and otherwise waive liability as to the State of Colorado, Investigatory Agencies, and other agents or employees of the State of Colorado for any damages resulting from any use, disclosure, or publication in any manner, other than a willfully unlawful disclosure or publication, of any material or information acquired during inquiries, investigations, or hearings, and hereby authorize the lawful use, disclosure, or publication of this material or information. Any information contained within my application, contained within any financial or personnel record, or otherwise found, obtained, or maintained by the Investigatory Agencies, shall be accessible to law enforcement agents of this or any other state, the government of the United States, or any foreign country.

Print Full Legal Name of Authorized Agent clearly below:

Applicant's Business Name <u>TP Main Street LLC</u>		Trade Name (DBA) <u>Trinidad Leaf</u>	
Legal Agent Last Name (Please Print) <u>Peters</u>	Legal Agent First Name <u>Tim</u>	Legal Agent Middle Name <u>Wayne</u>	
Legal Agent Title <u>Managing member</u>	Signature (Must be signed in front of one witness) <u>Tim Peters</u>		
Date (MM/DD/YYYY) <u>05/14/2014</u>	City <u>Trinidad</u>	State <u>Co.</u>	
Witness 1 Signature <u>Carole A. McKeon</u>			

Applicant's Request to Release Information

TO:	FROM: (Applicant's Printed Name) <i>Tim Peters</i>	
<ol style="list-style-type: none"> 1. I/We hereby authorize and request all persons to whom this request is presented having information relating to or concerning the above named applicant to furnish such information to a duly appointed agent of the Marijuana Enforcement Division whether or not such information would otherwise be protected from the disclosure by any constitutional, statutory or common law privilege. 2. I/We hereby authorize and request all persons to whom this request is presented having documents relating to or concerning the above named applicant to permit a duly appointed agent of the Marijuana Enforcement Division to review and copy any such documents, whether or not such documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege. 3. I/We hereby authorize and request the Colorado Department of Revenue to permit a duly appointed agent of the Marijuana Enforcement Division to obtain, receive, review, copy, discuss and use any such tax information or documents relating to or concerning the above named applicant, whether or not such information or documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege. 4. If the person to whom this request is presented is a brokerage firm, bank, savings and loan, or other financial institution or an officer of the same, I/we hereby authorize and request that a duly appointed agent of the Marijuana Enforcement Division be permitted to review and obtain copies of any and all documents, records or correspondence pertaining to me/us, including but not limited to past loan information, notes co-signed by me/us, checking account records, savings deposit records, safe deposit box records, passbook records, and general ledger folio sheets. 5. I/We do hereby make, constitute, and appoint any duly appointed agent of the Colorado Marijuana Enforcement Division, my/our true and lawful attorney in fact for me/us in my/our name, place, stead, and on my/our behalf and for my/our use and benefit: <ol style="list-style-type: none"> (a) To request, review, copy sign for, or otherwise act for investigative purposes with respect to documents and information in the possession of the person to whom this request is presented as I/we might; (b) To name the person or entity to whom this request is presented and insert that person's name in the appropriate location in this request; (c) To place the name of the agent presenting this request in the appropriate location on this request. 6. I grant to said attorney in fact full power and authority to do, take, and perform all and every act and thing whatsoever requisite, proper, or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I/we might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that said attorney in fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted. 7. This power of attorney ends twenty-four (24) months from the date of execution. 8. The above named applicant has filed with the Colorado Marijuana Licensing Authority an application for a Medical Marijuana license. Said applicant understands that it is seeking the granting of a privilege and acknowledges that the burden of proving its qualifications for a favorable determination is at all times on the applicant. Said applicant accepts any risk of adverse public notice, embarrassment, criticism, or other action of financial loss, which may result from action with respect to this application. 9. I/We do, for myself/ourselves, my/our heirs, executors, administrators, successors, and assigns, hereby release, remise, and forever discharge the person to whom this request is presented, and his agents and employees from all and all manner or actions, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known or unknown, in law or equity, which the applicant ever had, now has, may have, or claims to have against the person to whom this request is being presented or his agents or employees arising out of or by reason of complying with the request. 10. I/We agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees from and against all claims, damages, losses, and expenses, including reasonable attorneys' fees arising out of or by reason of complying with this request. 11. A reproduction of this request by photocopying or similar process shall be for all intents and purposes as valid as the original. 		
Print Full Legal Name of Authorized Agent clearly below:		
Legal Agent Last Name (Please Print) <i>Peters</i>	Legal Agent First Name <i>Timothy</i>	Legal Agent Middle Name <i>Wayne</i>
Legal Agent Title <i>Managing Member</i>	Signature (Must be signed in front of one witness) <i>Timothy Wayne Peters</i>	
Date (MM/DD/YYYY) <i>05/14/2014</i>	City <i>Windward</i>	State <i>CO</i>
Witness 1 Signature <i>Travis D. [Signature]</i>		
Signature of Marijuana Enforcement Division agent presenting this request		Date

Question on Appendix A concerning principal places of business in the last five years.

I have been President of Peters Enterprises Inc. for the last 12 years. Peters Ent is a construction/development company.

I have also been VP of Trinidad Pumping Inc for the past 8 years. Trinidad Pumping is a portable toilet rental and service company, as well as septic tank installs and repairs.

On the State App, page 6, #9 asks for banking account info:

International Bank, 320 N Convent, Trinidad Co 81082 719-846-1600 Att: Bank Pres Joe Degarbo
TP Main Street llc account: [REDACTED] (just opened a couple weeks ago)

On pg 6, question #10

We have a note on the land, 821 E Main Street. We bought it in 2008, we still owe \$190,000, we pay \$2000 per month. That is the property we propose to build on for this business.

International Bank, 320 N Convent, Trinidad Co 81082 719-846-1600 Att: Bank Pres Joe Degarbo
[REDACTED]

Appendix A

Colorado Marijuana Licensing Authority

Optional Premise Cultivation License

Business Applicant must fill out an Appendix A for EACH Cultivation it is applying for. Please see website for fee table.

Applicant's Legal Business Name (Please Print) <i>T.P. Main Street LLC</i>		Marijuana License Number (Assigned by Division)	
Trade Name (DBA) (Provide Trade Name Registration) <i>Trinidad Leaf</i>		Website Address <i>No site yet</i>	
Physical Address			
Street Address of Optional Premises Cultivation <i>821 E Main Street</i>		City <i>Trinidad</i>	State <i>CO</i>
		ZIP <i>81082</i>	
Business Phone Number	Home Phone Number	Email Address	
Mailing Address (if different from Business Address)			
Address		City	State ZIP
* On a separate sheet, list all principal places of business for the past 5 years if different from above.			
Primary Contact Person for Business <i>Tim Peters</i>		Title <i>Managing Member</i>	Primary Contact Phone Number
Primary Contact Address (city, state ZIP)		Primary Contact Fax Number	
		<i>NA</i>	
Federal Taxpayer ID	Colorado Sales Tax License #	Email Address	
Does the applicant have legal possession of the premises by virtue of ownership, lease or other arrangement? <input checked="" type="checkbox"/> Ownership <input type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____			
(a) If leased, list name of landlord and tenant, and date of expiration, EXACTLY as they appear on the lease:			
Landlord <i>NA</i>	Tenant	Expires	
Attach a diagram of the premises to be licensed and outline or designate the area (including dimensions) which shows the limited access areas, walls, partitions, entrances, exits and what each room shall be utilized for in this business, including security equipment locations. This diagram should be no larger than 8 1/2" X 11". (Doesn't have to be to scale)			
Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies, trusts), will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money or profits from this business. Attach a separate sheet if necessary.			
Name		Date of Birth	FEIN or SSN
Interest			
<i>None</i>			
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.			
Local Licensing Authority (To be completed by Applicant)			
Local Licensing Authority/Department <i>City of Trinidad - Clerk</i>		Address <i>135 N Animas St, Trinidad CO 81082</i>	
Local Licensing Authority contact name <i>Audra Garrett</i>		Contact Number <i>719-256-9813</i>	Contact Email <i>audra.garrett@trinidad.co.gov</i>
Date of application with local authority		Date of approval from local authority, if any	
Are you requesting a concurrent review? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

Question on Appendix A concerning principal places of business in the last five years.

I have been President of Peters Enterprises Inc. for the last 12 years. Peters Ent is a construction/development company.

I have also been VP of Trinidad Pumping Inc for the past 8 years. Trinidad Pumping is a portable toilet rental and service company, as well as septic tank installs and repairs.

On the State App, page 6, #9 asks for banking account info:

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On pg 6, question #10

We have a note on the land, 821 E Main Street. We bought it in 2008, we still owe \$190,000, we pay \$2000 per month. That is the property we propose to build on for this business.

International Bank, 320 N Convent, Trinidad Co 81082 719-846-1600 Att: Bank Pres Joe Degarbo
[REDACTED]

Explanation of funding.

We will use the 821 E Main St property that we purchased in 2008 for the business location. We are selling one of our other businesses, Trinidad Pumping. We just put a home in Montana for sale. We are refinancing our home. My construction company will build the building. We have very good credit and will probably get a bank loan when needed. We will keep working Peters Enterprises, the construction company . We have some nice jobs lined up there.

Tim



**COLORADO
ASSOCIATED PERSON &
ASSOCIATED KEY
MEDICAL MARIJUANA
LICENSE APPLICATION**

Copy

Medical Marijuana Enforcement Division

Colorado Medical Marijuana Enforcement Division

Associated Person & Associated Key Application Instructions

APPLICATION CHECKLIST

- 1 License Types (Check on One, and Only One, of the following Types)**
Associated Person: Any stockholder holding an interest in a medical marijuana licensee, or any officer or director, who does not act as a Key executive, employee or agent.
Associated Key: Any stockholder holding an interest in a medical marijuana licensee, or any officer or director, who also acts as a Key executive, employee or agent while physically working in a licensed establishment, Optional Premises or Infused Products Manufacturer location.
- 2 Application Completed & Signed**
Type or clearly print an answer to every question. If a question does not apply to you, indicate so with an N/A. If you are unsure if a question applies to you or what information the form is asking you to provide, contact any Medical Marijuana Enforcement Division office to seek clarification. If the available space is insufficient, continue on a separate sheet and precede each answer with the appropriate title. Sign and date the application.
Notice: You are required by state law to provide your social security number. If you do not have a social security number, you must complete a sworn statement (available at any Medical Marijuana Enforcement Division office) stating you do not have a social security number.
- 3 Fingerprint Card & Verification of Fingerprints**
Ensure the fingerprint card is filled out completely and signed.

Medical Marijuana Enforcement Offices can Perform fingerprinting service.
- 4 Bring in Application**
You must call to make an appointment and bring in application and all attachments to:
Medical Marijuana Enforcement Division
455 Sherman Street, Suite 390
Denver, CO 80203

Medical Marijuana License Number (Leave Blank)

Associated Person & Associated Key License Application Form

License Types (Check only one application type. See Application Checklist for details on license types.)						Associated Person <input checked="" type="checkbox"/> Associated Key	
Applicant's Last Name (Please Print) Peters			First Name (Please Print) Timothy			Middle Name Wayne	
Name of Medical Marijuana Licensee Associated With T.P. Main Street LLC DBA - Trinidad Leaf			Maiden/Married Names Used (Full Name) (Attach separate sheet if necessary) —			Nicknames, Aliases, Etc. Used (Full Name) (Attach separate sheet if necessary) —	
Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F	Race [Redacted]	Date of Birth [Redacted]	Social Security Number [Redacted]		Other Social Security Numbers Used <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes attach details.		
Place of Birth: City Seattle Wash		State Wash.	Country King		Drivers License Number and State+ [Redacted]		
Physical Appearance → Height 5-9		Weight [Redacted]	Hair Color Blond	Eye Color Blue	Scars/Tattoos <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes explain on a separate sheet		
U.S. Citizen: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CO Resident <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date of Residency 2002	*If "No", include details here: (Attach separate sheet if necessary)			Alien Registration Number —	
Physical Address							
Address [Redacted]			City LA	County Las Animas	State CO	ZIP [Redacted]	
Length of time at this Address: Year(s) 12 Month(s)		Home Phone Number [Redacted]	Cell Phone Number [Redacted]	Email Address [Redacted]			
Mailing Address (if different from Physical Address)							
Address —			City —	State —	ZIP —		
List all addresses where you have lived during the last 10 years, not including present address, (attach separate sheet if necessary)							
Street and Number		City/State/ZIP		From	To		
[Redacted]		[Redacted]		2002	present		
Name of licensed Medical Marijuana business where you will be working TP Main Street LLC / Trinidad Leaf				Work Phone Number [Redacted]	Job Title Managing Member		
Name of present employer, if different from above Peters Enterprises Inc.				Work Phone Number [Redacted]	Occupation or Job Title President		
Do you currently possess a Colorado support Medical Marijuana license or are you an associated person in any other type of Colorado Medical Marijuana license? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *If "Yes", indicate license type and number here: _____							
Have you ever applied before for a Medical Marijuana license in this or any other jurisdiction, domestic or foreign, whether or not the license was ever issued? (Not including a medical marijuana patient card) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *If "Yes", explain here: _____							
Have you ever been denied a Medical Marijuana license, withdrawn a Medical Marijuana license application or had any disciplinary action taken against any Medical Marijuana license that you have held, either individually or as part of an ownership group, in this or any other jurisdiction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No *If "Yes", explain here: _____							
Applicant's Signature Tim Peters						Date 5-11-2014	

Applicant's Last Name (Please Print) <i>Peters</i>	First Name (Please Print) <i>Timothy</i>	Middle Name <i>Wayne</i>
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NOTICE: The Associated Person & Associated Key License Application Form is an official document. If you provide false information on your Medical Marijuana license application and/or do not disclose all information the application asks, your license is subject to denial or revocation, and you may be subject to criminal prosecution. The Medical Marijuana Enforcement Division will conduct a complete background investigation and will check all sources of information.

If you need clarification of any of the following questions, please contact the Investigations Section at any Medical Marijuana Enforcement Division office.

1. Have you ever been convicted of a felony at anytime regarding the possession, distribution, or use of a controlled substance?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. Have you served a sentence, including probation or parole, within the past 5 years upon conviction for any felony, even if the conviction occurred more than 5 years ago?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Have you failed to remedy an outstanding delinquency for taxes owed, an outstanding delinquency for judgements owed to a government agency, or an outstanding delinquency for child support?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Are you a licensed Physician making patient recommendations?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. Have you had your authority to act as a primary caregiver revoked by the State Health Agency?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6. Are you under 21 years of age at the time of this application?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7. Are you the spouse or child living in the household of any person employed by the Colorado Medical Marijuana Enforcement Division?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. Are you an officer, reserve police officer, agent, or employee of any law enforcement agency of the State of Colorado?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



If you answered YES to any of the above questions, by Colorado law you cannot obtain or hold a Colorado Medical Marijuana license.

I have thoroughly read and understand the questions above, and understand that I cannot hold a Colorado Medical Marijuana license if at any time in the future I can ever answer "Yes" to any of the questions above.	
Applicant's Signature <i>Timothy Wayne Peters</i>	Date <i>5-11-2014</i>

Applicant's Last Name (Please Print) <i>Timothy Peters</i>	First Name <i>Timothy</i>	Middle Name <i>Wayne</i>
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Education				
High School Name <i>Enterprise HS</i>		Location <i>Redding, CA.</i>		
Major _____	Dates Attended From <i>1976</i>	To <i>1980</i>	Graduate <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Degree Earned _____
College/Vo-Tech Name (Submit diploma copy)		Location		
Major	Dates Attended From	To	Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Earned
Other College/School Name (Submit diploma copy)		Location		
Major	Dates Attended From	To	Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Earned
Other College/School Name (Submit diploma copy)		Location		
Major	Dates Attended From	To	Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Earned
Other College/School Name (Submit diploma copy)		Location		
Major	Dates Attended From	To	Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Earned

Criminal History	
1. Have you, after turning 18 years of age, ever been arrested, served a criminal summons, charged with, or convicted of ANY crime regarding the possession, distribution, or use of a controlled substance?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. In the last 10 years have you ever been arrested, served with a criminal summons, charged with, or convicted of ANY crime or offense in any manner in this or any other country? <ul style="list-style-type: none"> You must include ALL arrests, charges, and convictions in the last 10 years but not prior to the age of 18 regardless of the outcome, even if the charges were dismissed or you were found not guilty. You must include ALL arrests, charges, and convictions regardless of the class of crime (felonies, misdemeanors, and/or petty offenses). You must include ALL serious traffic offenses, including DUI; DWAI; reckless driving; leaving the scene of an accident (hit and run); driving under denial, suspension or revocation; or any other offense which resulted in your being taken into custody. NOTICE: Do not rely upon your understanding that an arrest or charge is "not supposed to be on your record." A criminal record was not cleared, erased, sealed or expunged unless you were given, and have in your possession, a written order from a judge directing that action. If yes, give details below. List all cases without exception, including bankruptcies: 	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*If you answered YES, explain in detail on a separate sheet and attach it to your application. For each offense for which you were arrested or charged, YOU MUST OBTAIN OFFICIAL DOCUMENTATION FROM THE COURT WHERE YOU APPEARED, SHOWING THE FINAL DISPOSITION (OUT-COME) OF YOUR CASE. This information will include whether you were found guilty or not guilty; and the penalty (money fine, time in jail or prison, or probation or deferred sentence). If you received a deferred judgment, a deferred sentence, or probation, your documentation must include the date that you were discharged or released from probation or other supervision.	
3. Have you ever received a pardon or its equivalent for any criminal offense in this or any other country?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Have you, as an individual, as a member of a partnership or other form of domestic or foreign business entity, or as owner, director, or officer of a corporation, ever been a party to a lawsuit (other than divorces), either as a plaintiff or defendant, complainant or respondent, or in any other fashion, in this or any other country?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*If you answered YES to any of the preceding questions, explain in detail on a separate sheet and attach it to your application.	

Applicant's Initials *TP*

Applicant's Last Name (Please Print) <i>Peters</i>	First Name <i>Timothy</i>	Middle Name <i>Wayne</i>
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DR 8521 (06/28/12)
 COLORADO DEPARTMENT OF REVENUE
 MEDICAL MARIJUANA ENFORCEMENT DIVISION

ARREST DISCLOSURE FORM

If, since turning age 18, you have ever been arrested, served a criminal summons, charged with, or convicted of ANY crime regarding the possession, distribution or use of a controlled substance, you must disclose this information to the Medical Marijuana Enforcement Division. If you have been arrested in the past 10 years, given a summons, or been convicted of any offense, you must disclose this information to the Medical Marijuana Enforcement Division.

Any person licensed by the Medical Marijuana Enforcement Division, and any associated person to a licensee, must make written notification to the Division's office of any criminal conviction and/or criminal charge pending against such person within 10 days of such arrest, summons, or conviction. This includes:

- Being taken into custody for any offense, including traffic offenses
- Being issued a summons or citation for any offense except for minor traffic offenses
- Failing to comply with your sentencing requirements
- Failing to appear for a court proceeding and having a bench warrant issued
- Having your driver's license suspended or revoked
- Being alleged to have driven under the influence or impairment of intoxicating liquor or drugs

Failure to disclose an arrest or citation may result in disciplinary action, up to and including the denial of your license application.

Please List Each Offense Separately

1	Date of Offense <i>1982-1983</i>	Place of Offense <i>San Diego CA.</i>
Arresting Agency <i>San Diego PD ?</i>		
Original Charge <i>?</i>		
Disposition Narrative — Must also provide official documentation (except for minor traffic offense). <i>In 1982-1983, I got ticketed outside a concert in San Diego. It was nothing more than that, I really don't remember if I just paid the ticket or had to go to court. It was over 30 yrs ago.</i>		

2	Date of Offense	Place of Offense
Arresting Agency		
Original Charge		
Disposition Narrative — Must also provide official documentation (except for minor traffic offense).		

Printed Name	Medical Marijuana License Number
Signature	Date

Applicant's Last Name (Please Print) <i>Peters</i>	First Name <i>Timothy</i>	Middle Name <i>Wayne</i>
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DR 8521 (06/28/12)
 COLORADO DEPARTMENT OF REVENUE
 MEDICAL MARIJUANA ENFORCEMENT DIVISION

ARREST DISCLOSURE FORM

(Continued)

Please List Each Offense Separately

3	Date of Offense	Place of Offense
Arresting Agency		
Original Charge		
Disposition Narrative — Must also provide official documentation (except for minor traffic offense).		

4	Date of Offense	Place of Offense
Arresting Agency		
Original Charge		
Disposition Narrative — Must also provide official documentation (except for minor traffic offense).		

Printed Name	Medical Marijuana License Number
Signature	Date

Applicant's Last Name (Please Print) Peters	First Name Timothy	Middle Name Wayne
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Employment and Business Association History

Beginning with your current employment, list all jobs you have held in the past 10 years, but not prior to age 18. Also, list all businesses with which you have been associated, including all corporations, partnerships or any other business ventures with which you have been associated, including as an officer, director, stockholder, partner, limited partner, member, or in any other related capacity.

Employer/Business Name	Dates (from-to)	Title	Description of Duties	Reason for Leaving
Peters Ent. Inc.	2002-present	Pres.	Contractor	still there
Address (include ZIP code)				Supervisor's Name
[Redacted]				Self
Trinidad Pumping	2004-present	VP.	Manage Business	Still there
Address (include ZIP code)				Supervisor's Name
[Redacted]				Self
Employer/Business Name	Dates (from-to)	Title	Description of Duties	Reason for Leaving
Address (include ZIP code)				Supervisor's Name
Employer/Business Name	Dates (from-to)	Title	Description of Duties	Reason for Leaving
Address (include ZIP code)				Supervisor's Name
Employer/Business Name	Dates (from-to)	Title	Description of Duties	Reason for Leaving
Address (include ZIP code)				Supervisor's Name
Employer/Business Name	Dates (from-to)	Title	Description of Duties	Reason for Leaving
Address (include ZIP code)				Supervisor's Name

Character References

List three character references who have known you five or more years. Do not include relatives, present employer, or employees.

1	Last Name Degarbo	First Name Joe	Middle Name	Residence Phone [Redacted]
Years Known 12	Address [Redacted]		City Trinidad	State Co
ZIP 81082				Business Phone (719) 846-1600
Employer International Bank				
Address 320 Convent			City Trinidad	State Co
ZIP 81082				
2	Last Name Noard	First Name John	Middle Name	Residence Phone [Redacted]
Years Known	Address [Redacted]		City Trinidad	State Co
ZIP 81082				Business Phone ()
Employer Retired.				
Address		City	State	ZIP
3	Last Name Brimeir	First Name Carol	Middle Name	Residence Phone [Redacted]
Years Known 11	Address [Redacted]		City Trinidad	State Co
ZIP 81082				Business Phone (719) 846-9296
Employer Self-Trinidad Realty				
Address			City Trinidad	State Co
ZIP 81082				

Applicant's Last Name (Please Print) <i>Peters</i>	First Name <i>Timothy</i>	Middle Name <i>Wayne</i>
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Financial History		
1.	Are you delinquent in the filing of any tax return with any taxing agency anywhere?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.	Are you delinquent in the payment of any taxes, interest, or penalties due to any taxing agency anywhere?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.	Are you delinquent in the payment of any judgments due to any governmental agency anywhere?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4.	Are you delinquent in the repayment of any government-insured student loans?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5.	Are you delinquent in the payment of any child support?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6.	Check any of the following privileged or professional licenses you have held individually or as part of an ownership group in this state or any other domestic or foreign jurisdiction: <input type="checkbox"/> Liquor <input type="checkbox"/> Real Estate Broker/Sales <input type="checkbox"/> Accountant <input type="checkbox"/> Lawyer <input type="checkbox"/> Physician <input type="checkbox"/> Insurance <input type="checkbox"/> Racing <input type="checkbox"/> Lottery <input type="checkbox"/> Securities Dealer <input type="checkbox"/> Other <i>General Contractor - Trinidad and Las Animas County</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.	Have you ever been denied a privileged or professional license, withdrawn a privileged or professional license application or had any disciplinary action taken against any such license that you have held, either individually or as part of an ownership group?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8.	Have you, as an individual, principal of any form of business entity, or as an owner, officer or director of a corporation, ever filed a bankruptcy petition, had such a petition filed against you or the business entity or the corporation; or had a receiver, fiscal agent, trustee, reorganization trustee or similar person appointed for you or the business entity or corporation?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9.	Do you now own, have ever owned, or otherwise derive a benefit from assets held outside the United States, whether held in your own name or another name, on your behalf or for another person or entity, or through other individuals or business entities, or in trust, or in any other fashion or status?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10.	Are you currently a party, or ever been a party, in any capacity, to any trust instrument?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11.	Has a complaint, judgment, consent decree, settlement or other disposition related to a violation of federal, state or similar foreign antitrust, trade or security law or regulation ever been filed or entered against you or a business entity of which you were a principal or against a corporation for which you were an owner, officer or director.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*If you answered YES to any of the questions above or checked any boxes above, give details on separate sheet, including license number and dates license held for licenses marked on question 6. Include any items currently under formal dispute or legal appeal. Attach any documents to prove your settlement on any of these issues.		

Applicant's Initials *TP*

Applicant's Last Name (Please Print) Peters	First Name Timothy	Middle Name Wayne
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Personal Financial

1. Annual Income

Salary (Source): <u>Peter Enterprise Inc.</u>	\$ <u>65,000</u>
Salary (Source): <u>Trinidad Pumping Inc.</u>	\$ <u>50,000</u>
Interest (Source): _____	\$ _____
Interest (Source): _____	\$ _____
Dividends (Source): _____	\$ _____
Dividends (Source): _____	\$ _____
Other (Source): _____	\$ _____
Other (Source): _____	\$ _____
TOTAL	
	\$ _____

Please submit all executed agreements or documents that grant you any right to any percent of ownership or percent of income from the Colorado Medical Marijuana business with which you are associated.

2. Amount to be invested in business: 200-400,000 \$ 200-400,000

3. Percentage of ownership this amount represents: 90% %

4. Investment will be derived from the following sources:
We are selling one business (Trinidad Pumping)
We are selling a home in Montrose.
We are refinancing our personal home.
Our construction business is doing fine, that will help. We have good credit, we will get bank loans.

5. Has your interest in this Medical Marijuana establishment been assigned, pledged or hypothecated to any person, firm, or corporation, or has any agreement been entered into whereby your interest is to be assigned, pledged or sold, either in part or whole? Yes No

If YES, explain: _____

Applicant's Initials TP



AFFIDAVIT - RESTRICTIONS ON PUBLIC BENEFITS

I, Timothy Wayne Peters, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

- I am a United States citizen.
- I am not a United States citizen but I am a Permanent Resident of the United States.
- I am not a United States citizen but I am lawfully present in the United States pursuant to Federal law.
- I am a foreign national not physically present in the United States.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature

Timothy Wayne Peters

Date

5-11-2018

Affirmation & Consent

I, Timothy Wayne Peters, state under Penalty for offering a false instrument for recording pursuant to 18-5-114 C.R.S. that the entire Associated Person & Associated Key License Application Form, statements, attachments, and supporting schedules are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal to issue a Medical Marijuana license by the State Licensing Authority. Further, I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for the denial of a temporary Medical Marijuana application or the revocation of the license. I am voluntarily submitting this application to the Colorado Medical Marijuana Licensing Authority under oath with full knowledge that I may be charged with perjury or other crimes for intentional omissions and misrepresentations pursuant to Colorado law or for offering a false instrument for recording pursuant to 18-5-114. I further consent to any background investigation necessary to determine my present and continuing suitability and that this consent continues as long as I hold a Colorado Medical Marijuana license, and for 90 days following the expiration or surrender of such Medical Marijuana license. Note: If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your banking account electronically.

Print your Full Legal Name clearly below:

Legal Last Name (Please Print)	Legal First Name	Legal Middle Name
Peters	Timothy	Wayne
Signature	Date	
Timothy Wayne Peters	5-11-14	

Investigation Authorization Authorization to Release Information

I, Timothy Wayne Peters, hereby authorize the Colorado Medical Marijuana Licensing Authority, the Medical Marijuana Enforcement Division, (hereafter, the Investigatory Agencies) to conduct a complete investigation into my personal background, using whatever legal means they deem appropriate. I hereby authorize any person or entity contacted by the Investigatory Agencies to provide any and all such information deemed necessary by the Investigatory Agencies. I hereby waive any rights of confidentiality in this regard. I understand that by signing this authorization, a financial record check may be performed. I authorize any financial institution to surrender to the Investigatory Agencies a complete and accurate record of such transactions that may have occurred with that institution, including, but not limited to, internal banking memoranda, past and present loan applications, financial statements and any other documents relating to my personal or business financial records in whatever form and wherever located. I understand that by signing this authorization, a financial record check of my tax filing and tax obligation status may be performed. I authorize the Colorado Department of Revenue to surrender to the Investigatory Agencies a complete and accurate record of any and all tax information or records relating to me. I authorize the Investigatory Agencies to obtain, receive, review, copy, discuss and use any such tax information or documents relating to me. I authorize the release of this type of information, even though such information may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws. I understand that by signing this authorization, a criminal history check will be performed. I authorize the Investigatory Agencies to obtain and use from any source, any information concerning me contained in any type of criminal history record files, wherever located. I understand that the criminal history record files contain records of arrests which may have resulted in a disposition other than a finding of guilt (i.e., dismissed charges, or charges that resulted in a not guilty finding). I understand that the information may contain listings of charges that resulted in suspended imposition of sentence, even though I successfully completed the conditions of said sentence and was discharged pursuant to law. I authorize the release of this type of information, even though this record may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws.

The Investigatory Agencies reserve the right to investigate all relevant information and facts to their satisfaction. I understand that the Investigatory Agencies may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. However, the State of Colorado, Investigatory Agencies, and other agents or employees of the State of Colorado shall not be held liable for the receipt, use, or dissemination of inaccurate information. I, on behalf of the applicant, its legal representatives, and assigns, hereby release, waive, discharge, and agree to hold harmless, and otherwise waive liability as to the State of Colorado, Investigatory Agencies, and other agents or employees of the State of Colorado for any damages resulting from any use, disclosure, or publication in any manner, other than a willfully unlawful disclosure or publication, of any material or information acquired during inquiries, investigations, or hearings, and hereby authorize the lawful use, disclosure, or publication of this material or information. Any information contained within my application, contained within any financial or personnel record, or otherwise found, obtained, or maintained by the Investigatory Agencies, shall be accessible to law enforcement agents of this or any other state, the government of the United States, or any foreign country.

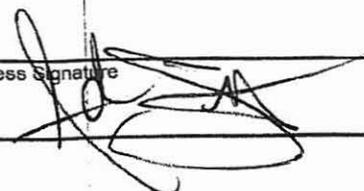
Print your Full Legal Name clearly below:

Legal Last Name (Please Print) <u>Peters</u>	Legal First Name <u>Timothy</u>	Legal Middle Name <u>Wayne</u>
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Signature (Must be signed in front of a witness)

Dated this 11th day of May, 20 14, at 10 AM

Boncarbo Co. (city) Co. (state)

Witness Signature  05/11/2014

Applicant's Request to Release Information

TO: _____

FROM: (Applicant's Printed Name) Timothy Wayne Peters

1. I/We hereby authorize and request all persons to whom this request is presented having information relating to or concerning the above named applicant to furnish such information to a duly appointed agent of the Medical Marijuana Enforcement Division whether or not such information would otherwise be protected from the disclosure by any constitutional, statutory or common law privilege.
2. I/We hereby authorize and request all persons to whom this request is presented having documents relating to or concerning the above named applicant to permit a duly appointed agent of the Medical Marijuana Enforcement Division to review and copy any such documents, whether or not such documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege.
3. I/We hereby authorize and request the Colorado Department of Revenue to permit a duly appointed agent of the Medical Marijuana Enforcement Division to obtain, receive, review, copy, discuss and use any such tax information or documents relating to or concerning the above named applicant, whether or not such information or documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege.
4. If the person to whom this request is presented is a brokerage firm, bank, savings and loan, or other financial institution or an officer of the same, I/we hereby authorize and request that a duly appointed agent of the Medical Marijuana Enforcement Division be permitted to review and obtain copies of any and all documents, records or correspondence pertaining to me/us, including but not limited to past loan information, notes co-signed by me/us, checking account records, savings deposit records, safe deposit box records, passbook records, and general ledger folio sheets.
5. I/We do hereby make, constitute, and appoint any duly appointed agent of the Colorado Medical Marijuana Enforcement Division, my/our true and lawful attorney in fact for me/us in my/our name, place, stead, and on my/our behalf and for my/our use and benefit:
 - (a) To request, review, copy sign for, or otherwise act for investigative purposes with respect to documents and information in the possession of the person to whom this request is presented as I/we might;
 - (b) To name the person or entity to whom this request is presented and insert that person's name in the appropriate location in this request;
 - (c) To place the name of the agent presenting this request in the appropriate location on this request.
6. I grant to said attorney in fact full power and authority to do, take, and perform all and every act and thing whatsoever requisite, proper, or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I/we might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that said attorney in fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.
7. This power of attorney ends twenty-four (24) months from the date of execution.
8. The above named applicant has filed with the Colorado Medical Marijuana Licensing Authority an application for a Medical Marijuana license. Said applicant understands that it is seeking the granting of a privilege and acknowledges that the burden of proving its qualifications for a favorable determination is at all times on the applicant. Said applicant accepts any risk of adverse public notice, embarrassment, criticism, or other action of financial loss, which may result from action with respect to this application.
9. I/We do, for myself/ourselves, my/our heirs, executors, administrators, successors, and assigns, hereby release, remise, and forever discharge the person to whom this request is presented, and his agents and employees from all and all manner or actions, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known or unknown, in law or equity, which the applicant ever had, now has, may have, or claims to have against the person to whom this request is being presented or his agents or employees arising out of or by reason of complying with the request.
10. I/We agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees from and against all claims, damages, losses, and expenses, including reasonable attorneys' fees arising out of or by reason of complying with this request.
11. A reproduction of this request by photocopying or similar process shall be for all intents and purposes as valid as the original.

Applicant's Last Name (Please Print) <u>Peters</u>	First Name <u>Timothy</u>	Middle Name <u>Wayne</u>
Signature (Must be signed in front of a witness) <u>Timothy Wayne Peters</u>		
Dated this <u>11</u> day of <u>May</u> , 20 <u>14</u> at <u>10 am</u> (day) (month) (year) (time) <u>Bonaville Co.</u> (city) <u>Co.</u> (state)		
Witness Signature <u>[Signature]</u> <u>05/11/2014</u>		
Spouse's Last Name (Please Print) <u>Peters</u>	Spouse's First Name <u>Juanita</u>	Middle Name <u>Ruth</u>
Spouse's Signature (Must be signed in front of a witness) <u>Juanita Peters</u>		
Dated this <u>11</u> day of <u>May</u> , 20 <u>14</u> at <u>10 am</u> (day) (month) (year) (time)		
Witness Signature <u>[Signature]</u> <u>05/11/2014</u>		
Signature of Medical Marijuana Enforcement Division agent presenting this request		Date

STATE OF COLORADO

DEPARTMENT OF REVENUE
Medical Marijuana Enforcement Division



John W. Hickenlooper
Governor

Barbara J. Brohl
Executive Director

Dear Applicant:

Thank you for your interest in becoming an associated person/key with a licensed business in the Medical Marijuana industry. Before you submit your application, we want to make you aware of a few facts.

The Medical Marijuana industry in Colorado is one of the most scrutinized businesses in the state, because Colorado citizens want the industry and everyone involved in it free from even the hint of any corruption or deceit. That's why we take our regulation of the industry very seriously, including the issuance of licenses.

During the licensing process, we will conduct a thorough check of your background. If you pass our qualifications, you will be found suitable as an associated person/key that will allow you to work in the Medical Marijuana Industry. You should know that a Medical Marijuana license is a privilege, not a right. And one thing you must do to obtain this privilege is be completely honest on your license application.

In particular, we ask you on page 4 of the application: "In the past 10 years, but not prior to age 18 have you been arrested, served with a criminal summons, charged with, or convicted of ANY crime or offense in any manner in this or any other country?" The application goes on to tell you to explain ALL such arrests or charges no matter the final outcome.

Did you list ALL arrests and charges in the past 10 years? Are you clear about what you need to disclose? If not, then ask someone at the front desk to assist you and answer any questions you might have. Here are some of the excuses we have heard from people who have failed to disclose arrests to us:

- My attorney told me I didn't have to disclose.
- I didn't think I was arrested, because I only got a ticket.
- I didn't think the arrest had anything to do with Medical Marijuana.
- I didn't think that was still on my record.

But there is no excuse not to disclose an arrest. You have been informed throughout the application to disclose ALL arrests. And you have just been informed again: You will not necessarily be denied a license if you have ever been arrested, but you will be denied if you fail to disclose any arrest.

I have read and understand this letter.

Signed

A handwritten signature in black ink, appearing to read "Tim Johnson".

Date

5-11-2014

Quanita

Copy



**COLORADO
ASSOCIATED PERSON &
ASSOCIATED KEY
MEDICAL MARIJUANA
LICENSE APPLICATION**

~~Need fingerprint card for photo!~~

Medical Marijuana Enforcement Division

Colorado Medical Marijuana Enforcement Division

Associated Person & Associated Key Application Instructions

APPLICATION CHECKLIST

- 1 **License Types (Check on One, and Only One, of the following Types)**
Associated Person: Any stockholder holding an interest in a medical marijuana licensee, or any officer or director, who does not act as a Key executive, employee or agent.
Associated Key: Any stockholder holding an interest in a medical marijuana licensee, or any officer or director, who also acts as a Key executive, employee or agent while physically working in a licensed establishment, Optional Premises or Infused Products Manufacturer location.
- 2 **Application Completed & Signed**
Type or clearly print an answer to every question. If a question does not apply to you, indicate so with an N/A. If you are unsure if a question applies to you or what information the form is asking you to provide, contact any Medical Marijuana Enforcement Division office to seek clarification. If the available space is insufficient, continue on a separate sheet and precede each answer with the appropriate title. Sign and date the application.
Notice: You are required by state law to provide your social security number. If you do not have a social security number, you must complete a sworn statement (available at any Medical Marijuana Enforcement Division office) stating you do not have a social security number.
- 3 **Fingerprint Card & Verification of Fingerprints**
Ensure the fingerprint card is filled out completely and signed.
Medical Marijuana Enforcement Offices can Perform fingerprinting service.
- 4 **Bring in Application**
You must call to make an appointment and bring in application and all attachments to:
Medical Marijuana Enforcement Division
455 Sherman Street, Suite 390
Denver, CO 80203

Medical Marijuana License Number (Leave Blank)

Associated Person & Associated Key License Application Form

License Types
 (Check only one application type. See Application Checklist for details on license types.)

Associated Person
 Associated Key

Applicant's Last Name (Please Print) Peters First Name (Please Print) Juanita Middle Name Roth

Name of Medical Marijuana Licensee Associated With T.P. Main Street LLC Maiden/Married Names Used (Full Name) (Attach separate sheet if necessary) Danielson/Schrepper Nicknames, Aliases, Etc. Used (Full Name) (Attach separate sheet if necessary)

Sex M F Race [Redacted] Social Security Number [Redacted] Other Social Security Numbers Used Yes No If yes attach details.

Place of Birth: City Kalispell State MT Country USA Drivers License Number and State [Redacted]

Physical Appearance → Height [Redacted] Weight [Redacted] Hair Color Blond Eye Color Green Scars/Tattoos Yes No If yes explain on a separate sheet

U.S. Citizen Yes No CO Resident Yes No Date of Residency 2002 *If "No", include details here: (Attach separate sheet if necessary) NA Alien Registration Number NA

Physical Address
 Address [Redacted] City [Redacted] County Las Animas State CO ZIP 82102

Length of time at this Address: Year(s) 12 Month(s) [Redacted] Home Phone Number [Redacted] Cell Phone Number [Redacted] Email Address [Redacted]

Mailing Address (if different from Physical Address)
 Address Same City [Redacted] State [Redacted] ZIP [Redacted]

List all addresses where you have lived during the last 10 years, not including present address, (attach separate sheet if necessary)

Street and Number	City/State/ZIP	From	To

Name of licensed Medical Marijuana business where you will be working T.P. Main St. LLC / Trinidad Heat Work Phone Number [Redacted] Job Title Member

Name of present employer, if different from above Peters Enterprises Inc. Work Phone Number [Redacted] Occupation or Job Title Bookkeeper Building Contractor

Do you currently possess a Colorado support Medical Marijuana license or are you an associated person in any other type of Colorado Medical Marijuana license?
 Yes No *If "Yes", indicate license type and number here: _____

Have you ever applied before for a Medical Marijuana license in this or any other jurisdiction, domestic or foreign, whether or not the license was ever issued? (Not including a medical marijuana patient card)
 Yes No *If "Yes", explain here: _____

Have you ever been denied a Medical Marijuana license, withdrawn a Medical Marijuana license application or had any disciplinary action taken against any Medical Marijuana license that you have held, either individually or as part of an ownership group, in this or any other jurisdiction?
 Yes No *If "Yes", explain here: _____

Applicant's Signature Juanita Peters Date 5-11-14

Applicant's Last Name (Please Print) <i>Peters</i>	First Name (Please Print) <i>Juanita</i>	Middle Name <i>Roth</i>
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NOTICE: The Associated Person & Associated Key License Application Form is an official document. If you provide false information on your Medical Marijuana license application and/or do not disclose all information the application asks, your license is subject to denial or revocation, and you may be subject to criminal prosecution. The Medical Marijuana Enforcement Division will conduct a complete background investigation and will check all sources of information.

If you need clarification of any of the following questions, please contact the Investigations Section at any Medical Marijuana Enforcement Division office.

1. Have you ever been convicted of a felony at anytime regarding the possession, distribution, or use of a controlled substance?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. Have you served a sentence, including probation or parole, within the past 5 years upon conviction for any felony, even if the conviction occurred more than 5 years ago?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Have you failed to remedy an outstanding delinquency for taxes owed, an outstanding delinquency for judgements owed to a government agency, or an outstanding delinquency for child support?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Are you a licensed Physician making patient recommendations?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. Have you had your authority to act as a primary caregiver revoked by the State Health Agency?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6. Are you under 21 years of age at the time of this application?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7. Are you the spouse or child living in the household of any person employed by the Colorado Medical Marijuana Enforcement Division?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. Are you an officer, reserve police officer, agent, or employee of any law enforcement agency of the State of Colorado?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



If you answered YES to any of the above questions, by Colorado law you cannot obtain or hold a Colorado Medical Marijuana license.

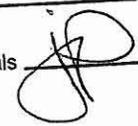
I have thoroughly read and understand the questions above, and understand that I cannot hold a Colorado Medical Marijuana license if at any time in the future I can ever answer "Yes" to any of the questions above.

Applicant's Signature <i>Juanita Peters</i>	Date <i>5-11-14</i>
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Applicant's Last Name (Please Print) Peters	First Name Juanita	Middle Name Roth
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Education			
High School Name Flathead High School	Location Kalispell mt		
Major	Dates Attended From 75 To 78	Graduate <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Degree Earned NO
College/Vo-Tech Name (Submit diploma copy)		Location	
Major	Dates Attended From To	Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Earned
Other College/School Name (Submit diploma copy)		Location	
Major	Dates Attended From To	Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Earned
Other College/School Name (Submit diploma copy)		Location	
Major	Dates Attended From To	Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree Earned

Criminal History	
1. Have you, after turning 18 years of age, ever been arrested, served a criminal summons, charged with, or convicted of ANY crime regarding the possession, distribution, or use of a controlled substance?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. In the last 10 years have you ever been arrested, served with a criminal summons, charged with, or convicted of ANY crime or offense in any manner in this or any other country? <ul style="list-style-type: none"> You must include ALL arrests, charges, and convictions in the last 10 years but not prior to the age of 18 regardless of the outcome, even if the charges were dismissed or you were found not guilty. You must include ALL arrests, charges, and convictions regardless of the class of crime (felonies, misdemeanors, and/or petty offenses). You must include ALL serious traffic offenses, including DUI; DWAI; reckless driving; leaving the scene of an accident (hit and run); driving under denial, suspension or revocation; or any other offense which resulted in your being taken into custody. NOTICE: Do not rely upon your understanding that an arrest or charge is "not supposed to be on your record." A criminal record was not cleared, erased, sealed or expunged unless you were given, and have in your possession, a written order from a judge directing that action. If yes, give details below. List all cases without exception, including bankruptcies. *If you answered YES, explain in detail on a separate sheet and attach it to your application. For each offense for which you were arrested or charged, YOU MUST OBTAIN OFFICIAL DOCUMENTATION FROM THE COURT WHERE YOU APPEARED, SHOWING THE FINAL DISPOSITION (OUT-COME) OF YOUR CASE. This information will include whether you were found guilty or not guilty; and the penalty (money fine, time in jail or prison, or probation or deferred sentence). If you received a deferred judgment, a deferred sentence, or probation, your documentation must include the date that you were discharged or released from probation or other supervision.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Have you ever received a pardon or its equivalent for any criminal offense in this or any other country?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. Have you, as an individual, as a member of a partnership or other form of domestic or foreign business entity, or as owner, director, or officer of a corporation, ever been a party to a lawsuit (other than divorces), either as a plaintiff or defendant, complainant or respondent, or in any other fashion, in this or any other country?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*If you answered YES to any of the preceding questions, explain in detail on a separate sheet and attach it to your application.	

Applicant's Initials 

Applicant's Last Name (Please Print) <i>Peters</i>	First Name <i>Juanita</i>	Middle Name <i>Ruth</i>
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DR 8521 (06/28/12)
COLORADO DEPARTMENT OF REVENUE
 MEDICAL MARIJUANA ENFORCEMENT DIVISION

ARREST DISCLOSURE FORM — *None*

If, since turning age 18, you have ever been arrested, served a criminal summons, charged with, or convicted of ANY crime regarding the possession, distribution or use of a controlled substance, you must disclose this information to the Medical Marijuana Enforcement Division. If you have been arrested in the past 10 years, given a summons, or been convicted of any offense, you must disclose this information to the Medical Marijuana Enforcement Division.

Any person licensed by the Medical Marijuana Enforcement Division, and any associated person to a licensee, must make written notification to the Division's office of any criminal conviction and/or criminal charge pending against such person within 10 days of such arrest, summons, or conviction. This includes:

- Being taken into custody for any offense, including traffic offenses
- Being issued a summons or citation for any offense except for minor traffic offenses
- Failing to comply with your sentencing requirements
- Failing to appear for a court proceeding and having a bench warrant issued
- Having your driver's license suspended or revoked
- Being alleged to have driven under the influence or impairment of intoxicating liquor or drugs

Failure to disclose an arrest or citation may result in disciplinary action, up to and including the denial of your license application.

Please List Each Offense Separately

1	Date of Offense	Place of Offense
Arresting Agency		
Original Charge		
Disposition Narrative — Must also provide official documentation (except for minor traffic offense).		

2	Date of Offense	Place of Offense
Arresting Agency		
Original Charge		
Disposition Narrative — Must also provide official documentation (except for minor traffic offense).		

Printed Name	Medical Marijuana License Number
Signature	Date

Applicant's Last Name (Please Print)	First Name	Middle Name
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DR 8521 (06/28/12)
COLORADO DEPARTMENT OF REVENUE
 MEDICAL MARIJUANA ENFORCEMENT DIVISION

ARREST DISCLOSURE FORM

(Continued)

Please List Each Offense Separately

3	Date of Offense	Place of Offense
Arresting Agency		
Original Charge		
Disposition Narrative — Must also provide official documentation (except for minor traffic offense).		

4	Date of Offense	Place of Offense
Arresting Agency		
Original Charge		
Disposition Narrative — Must also provide official documentation (except for minor traffic offense).		

Printed Name	Medical Marijuana License Number
Signature	Date

Applicant's Last Name (Please Print) Peters	First Name Juanita	Middle Name Ruth
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Employment and Business Association History

Beginning with your current employment, list all jobs you have held in the past 10 years, but not prior to age 18. Also, list all businesses with which you have been associated, including all corporations, partnerships or any other business ventures with which you have been associated, including as an officer, director, stockholder, partner, limited partner, member, or in any other related capacity.

Employer/Business Name	Dates (from-to)	Title	Description of Duties	Reason for Leaving
Peters Enterprises Inc -	02-Present	VP	Books	Still there
Address (include ZIP code)			Supervisor's Name	
16018 Manila Lane, Boncarbo Ca 91024			- NA	
Trinidad Pumping Inc	04-Present	Pres.	Accounting	still there
Address (include ZIP code)			Supervisor's Name	
Address (include ZIP code)			Supervisor's Name	
Address (include ZIP code)			Supervisor's Name	
Address (include ZIP code)			Supervisor's Name	
Address (include ZIP code)			Supervisor's Name	

Character References

List three character references who have known you five or more years. Do not include relatives, present employer, or employees.

1	Last Name Mc Kee	First Name Carole	Middle Name	Residence Phone
Years Known 11	Address	City Boncarbo	State Co	ZIP 81024
Employer retired	Address			Business Phone ()
Address			City	State Co
Address			State	ZIP
2	Last Name Brimmeier	First Name Carol	Middle Name	Residence Phone
Years Known 9	Address	City Trinidad	State Co	ZIP 81082
Employer Trinidad Realty (owner)	Address			Business Phone (719) 846 9296
Address			City Trinidad	State Co
Address			State	ZIP 81082
3	Last Name De Garbo	First Name Joey	Middle Name	Residence Phone
Years Known 11	Address	City Trinidad	State Co	ZIP 81082
Employer International Bank	Address			Business Phone (719) 846 1600
Address			City Trinidad	State Co
Address			State	ZIP 81082

Applicant's Last Name (Please Print) <i>JUANITA Peters</i>	First Name <i>JUANITA</i>	Middle Name <i>Ruth</i>
---	------------------------------	----------------------------

Financial History		
1.	Are you delinquent in the filing of any tax return with any taxing agency anywhere?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2.	Are you delinquent in the payment of any taxes, interest, or penalties due to any taxing agency anywhere?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.	Are you delinquent in the payment of any judgments due to any governmental agency anywhere?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4.	Are you delinquent in the repayment of any government-insured student loans?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5.	Are you delinquent in the payment of any child support?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6.	Check any of the following privileged or professional licenses you have held individually or as part of an ownership group in this state or any other domestic or foreign jurisdiction: <input type="checkbox"/> Liquor <input type="checkbox"/> Real Estate Broker/Sales <input type="checkbox"/> Accountant <input type="checkbox"/> Lawyer <input type="checkbox"/> Physician <input type="checkbox"/> Insurance <input type="checkbox"/> Racing <input type="checkbox"/> Lottery <input type="checkbox"/> Securities Dealer <input type="checkbox"/> Other _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>None</i>
7.	Have you ever been denied a privileged or professional license, withdrawn a privileged or professional license application or had any disciplinary action taken against any such license that you have held, either individually or as part of an ownership group?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8.	Have you, as an individual, principal of any form of business entity, or as an owner, officer or director of a corporation, ever filed a bankruptcy petition, had such a petition filed against you or the business entity or the corporation; or had a receiver, fiscal agent, trustee, reorganization trustee or similar person appointed for you or the business entity or corporation?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9.	Do you now own, have ever owned, or otherwise derive a benefit from assets held outside the United States, whether held in your own name or another name, on your behalf or for another person or entity, or through other individuals or business entities, or in trust, or in any other fashion or status?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
10.	Are you currently a party, or ever been a party, in any capacity, to any trust instrument?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11.	Has a complaint, judgment, consent decree, settlement or other disposition related to a violation of federal, state or similar foreign antitrust, trade or security law or regulation ever been filed or entered against you or a business entity of which you were a principal or against a corporation for which you were an owner, officer or director.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
*If you answered YES to any of the questions above or checked any boxes above, give details on separate sheet, including license number and dates license held for licenses marked on question 6. Include any items currently under formal dispute or legal appeal. Attach any documents to prove your settlement on any of these issues.		

Applicant's Initials *[Signature]*



AFFIDAVIT - RESTRICTIONS ON PUBLIC BENEFITS

I, Juanita Ruth Peters, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

- I am a United States citizen.
- I am not a United States citizen but I am a Permanent Resident of the United States.
- I am not a United States citizen but I am lawfully present in the United States pursuant to Federal law.
- I am a foreign national not physically present in the United States.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature

Juanita Peters

Date

5-11-14

Affirmation & Consent

I, Juanita Ruth Peters state under Penalty for offering a false instrument for recording pursuant to 18-5-114 C.R.S. that the entire Associated Person & Associated Key License Application Form, statements, attachments, and supporting schedules are true and correct to the best of my knowledge and belief, and that this statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal to issue a Medical Marijuana license by the State Licensing Authority. Further, I am aware that later discovery of an omission or misrepresentation made in the above statements may be grounds for the denial of a temporary Medical Marijuana application or the revocation of the license. I am voluntarily submitting this application to the Colorado Medical Marijuana Licensing Authority under oath with full knowledge that I may be charged with perjury or other crimes for intentional omissions and misrepresentations pursuant to Colorado law or for offering a false instrument for recording pursuant to 18-5-114. I further consent to any background investigation necessary to determine my present and continuing suitability and that this consent continues as long as I hold a Colorado Medical Marijuana license, and for 90 days following the expiration or surrender of such Medical Marijuana license. Note: If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your banking account electronically.

Print your Full Legal Name clearly below:

Legal Last Name (Please Print)	Legal First Name	Legal Middle Name
Peters	Juanita	Ruth
Signature	Date	
Juanita Peters	5-11-14	

Investigation Authorization Authorization to Release Information

I, Juanita Ruth Peters, hereby authorize the Colorado Medical Marijuana Licensing Authority, the Medical Marijuana Enforcement Division, (hereafter, the Investigatory Agencies) to conduct a complete investigation into my personal background, using whatever legal means they deem appropriate. I hereby authorize any person or entity contacted by the Investigatory Agencies to provide any and all such information deemed necessary by the Investigatory Agencies. I hereby waive any rights of confidentiality in this regard. I understand that by signing this authorization, a financial record check may be performed. I authorize any financial institution to surrender to the Investigatory Agencies a complete and accurate record of such transactions that may have occurred with that institution, including, but not limited to, internal banking memoranda, past and present loan applications, financial statements and any other documents relating to my personal or business financial records in whatever form and wherever located. I understand that by signing this authorization, a financial record check of my tax filing and tax obligation status may be performed. I authorize the Colorado Department of Revenue to surrender to the Investigatory Agencies a complete and accurate record of any and all tax information or records relating to me. I authorize the Investigatory Agencies to obtain, receive, review, copy, discuss and use any such tax information or documents relating to me. I authorize the release of this type of information, even though such information may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws. I understand that by signing this authorization, a criminal history check will be performed. I authorize the Investigatory Agencies to obtain and use from any source, any information concerning me contained in any type of criminal history record files, wherever located. I understand that the criminal history record files contain records of arrests which may have resulted in a disposition other than a finding of guilt (i.e., dismissed charges, or charges that resulted in a not guilty finding). I understand that the information may contain listings of charges that resulted in suspended imposition of sentence, even though I successfully completed the conditions of said sentence and was discharged pursuant to law. I authorize the release of this type of information, even though this record may be designated as "confidential" or "nonpublic" under the provisions of state or federal laws.

The Investigatory Agencies reserve the right to investigate all relevant information and facts to their satisfaction. I understand that the Investigatory Agencies may conduct a complete and comprehensive investigation to determine the accuracy of all information gathered. However, the State of Colorado, Investigatory Agencies, and other agents or employees of the State of Colorado shall not be held liable for the receipt, use, or dissemination of inaccurate information. I, on behalf of the applicant, its legal representatives, and assigns, hereby release, waive, discharge, and agree to hold harmless, and otherwise waive liability as to the State of Colorado, Investigatory Agencies, and other agents or employees of the State of Colorado for any damages resulting from any use, disclosure, or publication in any manner, other than a willfully unlawful disclosure or publication, of any material or information acquired during inquiries, investigations, or hearings, and hereby authorize the lawful use, disclosure, or publication of this material or information. Any information contained within my application, contained within any financial or personnel record, or otherwise found, obtained, or maintained by the Investigatory Agencies, shall be accessible to law enforcement agents of this or any other state, the government of the United States, or any foreign country.

Print your Full Legal Name clearly below:

Legal Last Name (Please Print) <u>Peters</u>	Legal First Name <u>Juanita</u>	Legal Middle Name <u>Ruth</u>
---	------------------------------------	----------------------------------

Signature (Must be signed in front of a witness) Juanita Peters

Dated this 11 (day) day of May (month), 2014 (year), at 5:40 (time)
Bonanza (city), Colo (state)

Witness Signature
Carole A. [Signature]

Applicant's Request to Release Information

TO: _____
 FROM: (Applicant's Printed Name) Juanita Ruth Peters

1. I/We hereby authorize and request all persons to whom this request is presented having information relating to or concerning the above named applicant to furnish such information to a duly appointed agent of the Medical Marijuana Enforcement Division whether or not such information would otherwise be protected from the disclosure by any constitutional, statutory or common law privilege.
2. I/We hereby authorize and request all persons to whom this request is presented having documents relating to or concerning the above named applicant to permit a duly appointed agent of the Medical Marijuana Enforcement Division to review and copy any such documents, whether or not such documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege.
3. I/We hereby authorize and request the Colorado Department of Revenue to permit a duly appointed agent of the Medical Marijuana Enforcement Division to obtain, receive, review, copy, discuss and use any such tax information or documents relating to or concerning the above named applicant, whether or not such information or documents would otherwise be protected from disclosure by any constitutional, statutory, or common law privilege.
4. If the person to whom this request is presented is a brokerage firm, bank, savings and loan, or other financial institution or an officer of the same, I/we hereby authorize and request that a duly appointed agent of the Medical Marijuana Enforcement Division be permitted to review and obtain copies of any and all documents, records or correspondence pertaining to me/us, including but not limited to past loan information, notes co-signed by me/us, checking account records, savings deposit records, safe deposit box records, passbook records, and general ledger folio sheets.
5. I/We do hereby make, constitute, and appoint any duly appointed agent of the Colorado Medical Marijuana Enforcement Division, my/our true and lawful attorney in fact for me/us in my/our name, place, stead, and on my/our behalf and for my/our use and benefit:
 - (a) To request, review, copy sign for, or otherwise act for investigative purposes with respect to documents and information in the possession of the person to whom this request is presented as I/we might;
 - (b) To name the person or entity to whom this request is presented and insert that person's name in the appropriate location in this request;
 - (c) To place the name of the agent presenting this request in the appropriate location on this request.
6. I grant to said attorney in fact full power and authority to do, take, and perform all and every act and thing whatsoever requisite, proper, or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I/we might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that said attorney in fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.
7. This power of attorney ends twenty-four (24) months from the date of execution.
8. The above named applicant has filed with the Colorado Medical Marijuana Licensing Authority an application for a Medical Marijuana license. Said applicant understands that it is seeking the granting of a privilege and acknowledges that the burden of proving its qualifications for a favorable determination is at all times on the applicant. Said applicant accepts any risk of adverse public notice, embarrassment, criticism, or other action of financial loss, which may result from action with respect to this application.
9. I/We do, for myself/ourselves, my/our heirs, executors, administrators, successors, and assigns, hereby release, remise, and forever discharge the person to whom this request is presented, and his agents and employees from all and all manner or actions, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known or unknown, in law or equity, which the applicant ever had, now has, may have, or claims to have against the person to whom this request is being presented or his agents or employees arising out of or by reason of complying with the request.
10. I/We agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees from and against all claims, damages, losses, and expenses, including reasonable attorneys' fees arising out of or by reason of complying with this request.
11. A reproduction of this request by photocopying or similar process shall be for all intents and purposes as valid as the original.

Applicant's Last Name (Please Print) <u>Peters</u>	First Name <u>Juanita</u>	Middle Name <u>Ruth</u>
Signature (Must be signed in front of a witness) <u>Juanita Peters</u>		
Dated this <u>11</u> (day) day of <u>May</u> (month), 20 <u>14</u> (year), at <u>5:40 pm</u> (time), <u>Boncarbo</u> (city), <u>Colorado</u> (state)		
Witness Signature <u>Carole A. [Signature]</u>		
Spouse's Last Name (Please Print) <u>Peters</u>	Spouse's First Name <u>Timothy</u>	Middle Name <u>Wayne</u>
Spouse's Signature (Must be signed in front of a witness) <u>Tim Peters</u>		
Dated this <u>14th</u> (day) day of <u>May</u> (month), 20 <u>14</u> (year), at <u>6 pm</u> (time), <u>Coles</u> (city), <u>Colorado</u> (state)		
Witness Signature <u>Carole A. [Signature]</u>		
Signature of Medical Marijuana Enforcement Division agent presenting this request		Date

STATE OF COLORADO

DEPARTMENT OF REVENUE
Medical Marijuana Enforcement Division



John W. Hickenlooper
Governor

Barbara J. Brohl
Executive Director

Dear Applicant:

Thank you for your interest in becoming an associated person/key with a licensed business in the Medical Marijuana industry. Before you submit your application, we want to make you aware of a few facts.

The Medical Marijuana industry in Colorado is one of the most scrutinized businesses in the state, because Colorado citizens want the industry and everyone involved in it free from even the hint of any corruption or deceit. That's why we take our regulation of the industry very seriously, including the issuance of licenses.

During the licensing process, we will conduct a thorough check of your background. If you pass our qualifications, you will be found suitable as an associated person/key that will allow you to work in the Medical Marijuana Industry. You should know that a Medical Marijuana license is a privilege, not a right. And one thing you must do to obtain this privilege is be completely honest on your license application.

In particular, we ask you on page 4 of the application: "In the past 10 years, but not prior to age 18 have you been arrested, served with a criminal summons, charged with, or convicted of ANY crime or offense in any manner in this or any other country?" The application goes on to tell you to explain ALL such arrests or charges no matter the final outcome.

Did you list ALL arrests and charges in the past 10 years? Are you clear about what you need to disclose? If not, then ask someone at the front desk to assist you and answer any questions you might have. Here are some of the excuses we have heard from people who have failed to disclose arrests to us:

- My attorney told me I didn't have to disclose.
- I didn't think I was arrested, because I only got a ticket.
- I didn't think the arrest had anything to do with Medical Marijuana.
- I didn't think that was still on my record.

But there is no excuse not to disclose an arrest. You have been informed throughout the application to disclose ALL arrests. And you have just been informed again: You will not necessarily be denied a license if you have ever been arrested, but you will be denied if you fail to disclose any arrest.

I have read and understand this letter.

Signed

A handwritten signature in black ink, appearing to read "Granita P. K.", written over a horizontal line.

Date

5-11-14

Colorado Medical Marijuana License Bond

Name of Bonding Company Philadelphia Indemnity Insurance Company

Bond Number PB11499801169

Effective Date: 05/13/2014

KNOWALL PERSONS BY THESE PRESENTS:

That we, TP Main Street llc, Street Address 16018 Manilla Lane,
City Boncarbo, County of Las Animas, State of Colorado, as Principal, and
Philadelphia Indemnity Insurance Company, a surety company qualified and authorized to do surety business in the State of Colorado,
as Surety, are held and firmly bound unto the State of Colorado to indemnify the State or local governmental entity for any loss suffered
by reasons of violation of the conditions hereinafter contained in the penal sum of FIVE THOUSAND DOLLARS (\$5,000.00), lawful
money of the United States, for the payment of which, well and truly to be made, we bind ourselves, our heirs, executors, administrators,
successors and assigns jointly, severally, and firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH that whereas the Principal is applying for the issuance or renewal of a license issued
pursuant to the Colorado Medical Marijuana Code, Article 43.3 of Title 12 of the Colorado Revised Statutes, which license or license
renewal shall be valid, if not suspended or revoked, for a license period ending one year from the last day of the month of issuance of
the license or renewal;

NOW, THEREFORE, if the Principal is granted a license by the State pursuant to Article 43.3 of Title 12 of the Colorado Revised Statutes,
during the term of said license and any renewal thereof, the Principal shall report and pay all sales and use taxes due the State of
Colorado, or due any other entity for which the State is the collector or collecting agent, in a timely manner as provided by law.

IT IS FURTHER PROVIDED that the aggregate liability of the Surety for all breaches of the condition of this bond, regardless of the
number of years this bond shall continue in force, the number of claims made against this bond, and the number of premiums which shall
be payable or paid shall not exceed the amount of the bond.

IT IS FURTHER PROVIDED that pursuant to Section 12-43.3-304(2), C.R.S., the Surety shall not be required to make payments to the
State of Colorado claiming under this bond until a final determination of failure to pay taxes due to the State has been made by the State
Licensing Authority or a court of competent jurisdiction.

IT IS FURTHER PROVIDED that the Surety shall have the right to cancel this bond for any reason authorized by statute by filing forty-
five (45) days' written notice of such cancellation with the Principal and with the State Licensing Authority. If cancellation is based upon
nonpayment of premium, this bond may be cancelled by the Surety upon ten (10) days' written notice to the Principal and the State
Licensing Authority.

THIS OBLIGATION may be continued from year to year by the issuance by the Surety of a proper continuation certificate delivered to the
State Licensing Authority pursuant to Section 12-43.3-304(3), C.R.S.

Dated this 14th day of May, 2014.

For the Principal: [Signature] For the Surety: [Signature]
John D. Weisbrot, Attorney-in-Fact

ACKNOWLEDGMENT OF SURETY

STATE OF Pennsylvania

COUNTY OF Bucks | SS.

On this 14th day of May, 2014, before me, a notary public in and for the above State, personally appeared
John D. Weisbrot, to me personally known and being by me duly sworn, did say that he or she is an
authorized corporate officer or the Attorney-in-Fact of Philadelphia Indemnity Insurance Company, a corporation duly organized and existing
under the laws of the State of Colorado, or authorized to do business therein, and that he or she as such officer executed the foregoing
instrument for the purposes herein contained on behalf of said corporation, and further acknowledged that the instrument was executed
as the free act and deed of said corporation.

IN WITNESS WHEREOF, I hereunto set my name and affixed my official seal on the day and year written above.

COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
S E A L
Jsa M. Grimsley, Notary Public
Plumstead Twp., Bucks County
My Commission Expires Sept. 25, 2014
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

[Signature]
Notary Public, State of Pennsylvania
My commission expires: _____



NOTICE OF PUBLIC HEARING

PURSUANT TO THE MARIJUANA LAWS OF COLORADO, T. P. Main Street, LLC, d/b/a Trinidad Leaf, 821 E. Main Street, Trinidad, CO, has requested the licensing officials of the City of Trinidad to grant a new Medical Marijuana Center license at this location.

Hearing on application will be held on Tuesday, July 15, 2014, at 7:00 p.m. in the Council Chambers, City Hall, 135 N. Animas Street, Trinidad, CO.

Date of Application: June 3, 2014

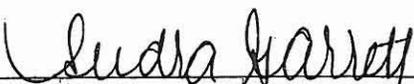
Officers: Tim Peters, Managing Member, [REDACTED] CO [REDACTED]
Juanita Peters, Member, [REDACTED] CO [REDACTED]

Remonstrances may be filed with the City Clerk's Office, 135 N. Animas, Trinidad, CO.

Dated this 11th day of June, 2014.

By order of the Trinidad City Council.

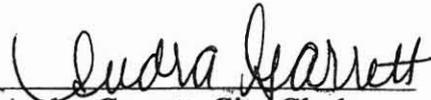
CITY OF TRINIDAD, COLORADO


Audra Garrett, City Clerk

CERTIFICATE OF MAILING

I hereby certify that on the 11th day of June, 2014, I mailed the Notice of Public Hearing by first-class mail, postage pre-paid to:

T. P. Main Street, LLC
16018 Manilla Lane
Bon Carbo, CO 81024


Audra Garrett, City Clerk



NOTICE OF PUBLIC HEARING

PURSUANT TO THE MARIJUANA LAWS OF COLORADO, T. P. Main Street, LLC, d/b/a Trinidad Leaf, 821 E. Main Street, Trinidad, CO, has requested the licensing officials of the City of Trinidad to grant a new Medical Marijuana Optional Premise Cultivation Operation license at this location.

Hearing on application will be held on Tuesday, July 15, 2014, at 7:00 p.m. in the Council Chambers, City Hall, 135 N. Animas Street, Trinidad, CO.

Date of Application: June 3, 2014

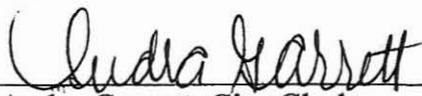
Officers: Tim Peters, Managing Member, [REDACTED]
Juanita Peters, Member, [REDACTED]

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Bon Carbo, CO 81024


Audra Garrett, City Clerk



NOTICE OF PUBLIC HEARING

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Hearing on application will be held on Tuesday, July 15, 2014, at 7:00 p.m. in the Council Chambers, City Hall, 135 N. Animas Street, Trinidad, CO.

Date of Application: June 3, 2014

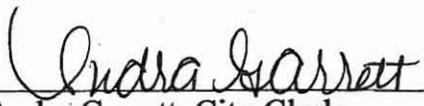
Officers: Tim Peters, Managing Member, [REDACTED]
Juanita Peters, Member, [REDACTED]

Remonstrances may be filed with the City Clerk's Office, 135 N. Animas, Trinidad, CO.

Dated this 11th day of June, 2014.

By order of the Trinidad City Council.

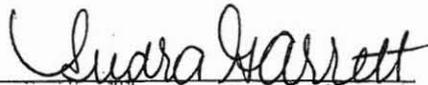
CITY OF TRINIDAD, COLORADO


Audra Garrett, City Clerk

CERTIFICATE OF MAILING

I hereby certify that on the 11th day of June, 2014, I mailed the Notice of Public Hearing by first-class mail, postage pre-paid to:

T. P. Main Street, LLC
16018 Manila Lane
Bon Carbo, CO 81024


Audra Garrett, City Clerk

PROOF OF PUBLICATION

STATE OF COLORADO
COUNTY OF LAS ANIMAS } SS

Krysta E. Toci, of lawful age, being first duly sworn upon oath, deposes and says that she is the authorized agent of The Chronicle-News, daily newspaper of general circulation which is published and circulated in the City of Trinidad, Las Animas County, Colorado, that said newspaper is a newspaper of general circulation complying with all of the requirements of Articles I to VII, Chapter 130, 1935, Colorado Statutes Annotated, and all other laws of said State, and that said legal / notice has been so published for the period of time prescribed in said newspaper proper and not a supplement.

The attached Notice was published in said newspaper in its issue(s) dated

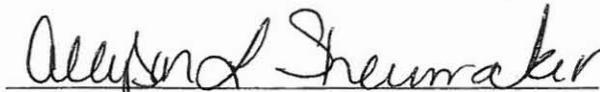
53927

June 20, 2014



Krysta E. Toci

Subscribed and sworn to before me this
25 day of June,
A. D., 2014.



Allyson L. Sheumaker

My commission expires on August 26, 2015

NOTICE OF PUBLIC HEARING

PURSUANT TO THE MARIJUANA LAWS OF COLORADO, T. P. Main Street, LLC d/b/a Trinidad Leaf, 821 E. Main Street, Trinidad, CO, has requested the licensing officials of the City of Trinidad to grant a new Medical Marijuana Center license at this location.

Hearing on application will be held on Tuesday, July 15, 2014, at 7:00 p.m. in the Council Chambers, City Hall, 135 N. Animas Street, Trinidad, CO.

Date of Application: June 3, 2014.

Officers: Tim Peters, Managing Member, 16018 Manilla Lane, Bon Carbo, CO 81024
Juanita Peters, Member, 16018 Manilla Lane, Bon Carbo, CO 81024

Remonstrances may be filed with the City Clerk's Office, 135 N. Animas, Trinidad, CO.

Dated this 11th day of June, 2014.

By Order of the Trinidad City Council
Audra Garrett, City Clerk

PUBLISHED: June 20, 2014

53927



My Comm. Expires August 26, 2015

PROOF OF PUBLICATION

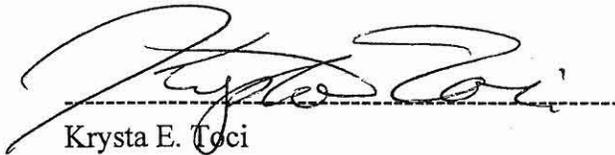
STATE OF COLORADO
COUNTY OF LAS ANIMAS} SS

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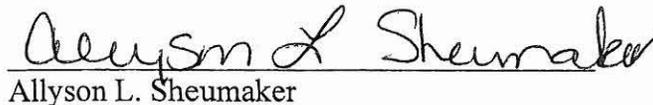
53928

June 20, 2014



Krysta E. Toci

Subscribed and sworn to before me this
25 day of June,
A. D., 2014.



Allyson L. Sheumaker

My commission expires on August 26, 2015

NOTICE OF PUBLIC HEARING

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Hearing on application will be held on Tuesday, July 15, 2014, at 7:00 p.m. in the Council Chambers, City Hall, 135 N. Animas Street, Trinidad, CO.

Date of Application: June 3, 2014.

Officers: Tim Peters, Managing Member, 16018 Manilla Lane, Bon Carbo, CO 81024
Juanita Peters, Member, 16018 Manilla Lane, Bon Carbo, CO 81024

Remonstrances may be filed with the City Clerk's Office, 135 N. Animas, Trinidad, CO.

Dated this 11th day of June, 2014.

By Order of the Trinidad City Council
Audra Garrett, City Clerk

PUBLISHED: June 20, 2014

53928



My Comm. Expires August 26, 2015

PROOF OF PUBLICATION

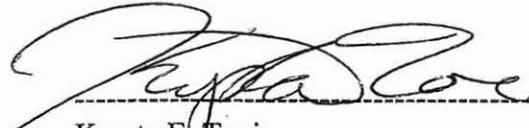
STATE OF COLORADO
COUNTY OF LAS ANIMAS } SS

Krysta E. Toci, of lawful age, being first duly sworn upon oath, deposes and says that she is the authorized agent of The Chronicle-News, daily newspaper of general circulation which is published and circulated in the City of Trinidad, Las Animas County, Colorado, that said newspaper is a newspaper of general circulation complying with all of the requirements of Articles I to VII, Chapter 130, 1935, Colorado Statutes Annotated, and all other laws of said State, and that said legal / notice has been so published for the period of time prescribed in said newspaper proper and not a supplement.

The attached Notice was published in said newspaper in its issue(s) dated

53926

June 20, 2014

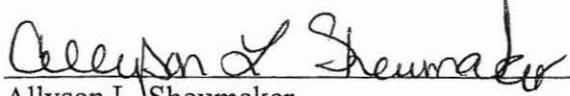


Krysta E. Toci

Subscribed and sworn to before me this

25 day of June,

A. D., 2014.



Allyson L. Sheumaker

My commission expires on August 26, 2015

NOTICE OF PUBLIC HEARING

PURSUANT TO THE MARIJUANA LAWS OF COLORADO, T. P. Main Street, LLC d/b/a Trinidad Leaf, 821 E. Main Street, Trinidad, CO, has requested the licensing officials of the City of Trinidad to grant a new Medical Marijuana Infused-Products Manufacturer license at this location.

Hearing on application will be held on Tuesday, July 16, 2014, at 7:00 p.m. in the Council Chambers, City Hall, 135 N. Animas Street, Trinidad, CO.

Date of Application: June 3, 2014.

Officers: Tim Peters, Managing Member, 16018 Manilla Lane, Bon Carbo, CO 81024

Juanita Peters, Member, 16018 Manilla Lane, Bon Carbo, CO 81024

Remonstrances may be filed with the City Clerk's Office, 135 N. Animas, Trinidad, CO.

Dated this 11th day of June, 2014.

By Order of the Trinidad City Council
Audra Garrett, City Clerk

PUBLISHED: June 20, 2014

53926

ALLYSON L SHEUMAKER
NOTARY PUBLIC, STATE OF COLORADO

My Comm. Expires August 26, 2015

STATE OF COLORADO)
COUNTY OF LAS ANIMAS) SS
CITY OF TRINIDAD)

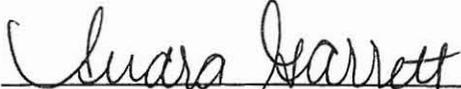
CERTIFICATE OF POSTING

I, Audra Garrett, City Clerk of the City of Trinidad, Colorado, do hereby certify that pursuant to the laws of the State of Colorado, T. P. Main Street, LLC d/b/a Trinidad Leaf, 821 E. Main Street, Trinidad, Colorado, which business has applied for a new Medical Marijuana Optional Premise Cultivation Operation license at said location, was duly posted for not less than ten continuous days, with the first day of posting occurring on the 30th day of June, 2014.

WITNESS, my hand and the official seal of the City of Trinidad, Colorado, this 30th day of June, 2014.

CITY OF TRINIDAD, COLORADO

(SEAL)



Audra Garrett, City Clerk

STATE OF COLORADO)

COUNTY OF LAS ANIMAS) SS

CITY OF TRINIDAD)

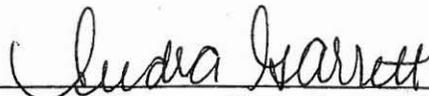
CERTIFICATE OF POSTING

I, Audra Garrett, City Clerk of the City of Trinidad, Colorado, do hereby certify that pursuant to the laws of the State of Colorado, T. P. Main Street, LLC d/b/a Trinidad Leaf, 821 E. Main Street, Trinidad, Colorado, which business has applied for a new Medical Marijuana Center license at said location, was duly posted for not less than ten continuous days, with the first day of posting occurring on the 30th day of June, 2014.

WITNESS, my hand and the official seal of the City of Trinidad, Colorado, this 30th day of June, 2014.

CITY OF TRINIDAD, COLORADO

(S E A L)



Audra Garrett, City Clerk

STATE OF COLORADO)
COUNTY OF LAS ANIMAS) SS
CITY OF TRINIDAD)

CERTIFICATE OF POSTING

I, Audra Garrett, City Clerk of the City of Trinidad, Colorado, do hereby certify that pursuant to the laws of the State of Colorado, T. P. Main Street, LLC d/b/a Trinidad Leaf, 821 E. Main Street, Trinidad, Colorado, which business has applied for a new Medical Marijuana Infused-Products Manufacturer license at said location, was duly posted for not less than ten continuous days, with the first day of posting occurring on the 30th day of June, 2014.

WITNESS, my hand and the official seal of the City of Trinidad, Colorado, this 30th day of June, 2014.

CITY OF TRINIDAD, COLORADO

(S E A L)



Audra Garrett, City Clerk

6/27/14

DEPARTMENTAL INSPECTION REPORT
MEDICAL MARIJUANA LICENSE

Applicant: T. P. Main Street, LLC

dba: Trinidad Leaf

Address: 821 E. Main Street

Type of License: Medical Marijuana Center, Optional Premise Cultivation Operation, Infused Products Manufacturer

Renewal Transfer Change of Location New

FOR CONSIDERATION AT
COUNCIL MEETING DATE: July 15, 2014, 7:00 p.m.

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS: fire inspection needed before
C.O. issued.

6-30-14
Date

[Signature]
Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 7, 2014

6/27/14

DEPARTMENTAL INSPECTION REPORT
MEDICAL MARIJUANA LICENSE

Applicant: T. P. Main Street, LLC

dba: Trinidad Leaf

Address: 821 E. Main Street

Type of License: Medical Marijuana Center, Optional Premise Cultivation Operation, Infused Products Manufacturer

Renewal Transfer Change of Location New

FOR CONSIDERATION AT
COUNCIL MEETING DATE: July 15, 2014, 7:00 p.m.

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS: IF approved license should not be
released until the C.O. has been issued.

7.1.2014
Date

Cheri A. Kelley
Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 7, 2014

Consent To Sale and Transfer

The undersigned holder of the deed of trust described herein, International Bank (the "Lender") does hereby waive any rights that it may have to object to the conveyance and transfer of the following described real property and all appurtenant rights (the "Land") to the party named below, and consents to the conveyance and transfer.

The legal description of the Land transferred and conveyed is attached hereto as an exhibit. The Land is presently part of the collateral under a deed of trust given in favor of the Lender, which deed of trust was given to secure payment of a note or notes (the "Note"), and the deed of trust is described below.

Lender:	International Bank	
Grantor:	Trinidad Pumping, Inc.	
Deed of trust:	Date:	
	Recording Date:	March 26, 2008
	Original Principal:	
	Recording Data:	Book: 1076 Page: 21
	County:	Las Animas

By signing this Consent, the Lender is not releasing either (a) any lien or collateral interest that it may have in the Land that is being conveyed and transferred, (b) any of the original makers of the Note from liability to pay the Note.

Lender:

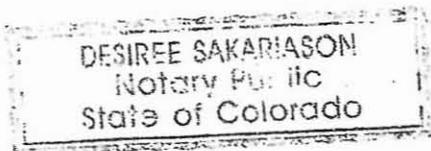
By Joseph V. DeGarbo
 Name: **Joseph V. DeGarbo**
 Title: **President**

STATE OF COLORADO)
)ss.
 County of Las Animas)

The foregoing instrument was acknowledged before me on June 30, 2014, by Joseph V. DeGarbo, who is authorized to sign this document on behalf of the Lender.

My Commission Expires: 10/15/2015

Desiree Sakariason
 Notary Public



Legal Description To Consent To Sale And Transfer

All of Trinidad Pumping, Inc.'s interest in all of the real property, improvements, appurtenances, water and water rights, minerals and mineral rights, and all other associated rights and interests that were described and conveyed in the following described deeds that are recorded in the Las Animas County, Colorado records:

Reception #	Book	Page	Recording Date
1076000019	1076	19	3-18-2008

situate in Trinidad, County of Las Animas, State of Colorado.
Now known as TP Main Street LLC Tract as shown on the plat map recorded August 13, 2009 at Reception No. 200900704086, in the Las Animas County, Colorado records.

Also described as:

Lot C, Park of Lot 26 and all of Lot 27 of the Baca Lands Subdivision to the City of Trinidad, County of Las Animas, State of Colorado more particularly described as follows: Commencing at the Northeast corner of Linden and Main Streets said point also being the Southwest corner of Lot 26; Thence N 65°39' 13" E along the Northerly line of Main Street, 80.00 feet to the point of beginning of the following described tract of land; thence N 26°53'10" W, along the east line of Lot 26, 110.00 feet to a point; Thence S 65°39'13" W, 80.00 feet to a point on the West line of Lot 26 which is also the easterly line of Linden Avenue; thence N 26°53'10" W, 130.00 feet to the Northwest corner of Tract C; Thence N 65°39'13" E, along the Southerly line of Elm Street and the Northerly line of Tract C, 340.42 feet to the Northeast corner of Lot C; Thence S 26°53'10" E along the East line of Lot C and Lot 27, 124.89 feet to the Northeast corner of a Tract of Land deeded to Linda Lopez, recorded in Book 1076 , page 18 in the Las Animas County Clerk and Recorder's Office. Thence S 65°39' 13" W, . 26.82 feet to the Northwest corner of said Lopez Tract; thence S 28°04'40" E, 115.24 feet to a point on the Northerly line of Main Street, said point being the Southeast Corner of said Lopez Tract; thence departing said Lopez Tract, S 65°39' 13" W, along the Northerly line of Main Street, 236.00 feet to the point of beginning, now known as TP Main Street LLC Tract as shown on the plat map recorded August 13, 2009 at Reception No. 200900704086, County of Las Animas, State of Colorado.

STATEMENT OF AUTHORITY AND INCUMBENCY
ON BEHALF OF T.P. MAIN STREET, LLC

(C.R.S. 38-30-172)

This statement is made and executed for the following reasons: (1a) to provide prima facie evidence of (a) the existence of the following described entity, and (1b) the authority of the following described person or persons to execute instruments, on behalf of the entity, that convey, encumber, or otherwise affect title to real property. This statement is made pursuant to C.R.S. 38-30-172, and supersedes any prior or contrary Statement of Authority or other conflicting recorded document; and (2) to certify to persons and entities that the following persons are fully authorized by proper action to transact business with all persons and entities.

1. Name of Entity: T.P. Main Street, LLC
2. Type of Entity: Limited liability company
3. State where formed: Colorado,
4. Mailing Address of Entity:
16018 Manilla Lane, Bon Carbo, CO 81024
5. Name and Position of Authorized person(s):
Tim Peters, President and sole manager
6. Limitations on Authority: None
7. Other matters concerning the manner in which the Entity deals with any interest in real property: None.

I, further certify that the managers, members, or other authorized persons named above have been duly elected or designated, are now acting and are qualified to sign on behalf of the LLC, and that the resolutions duly adopted by the members of the LLC electing or designating these managers, members or other authorized persons are now in full force and effect.


Name: Juanita Peters

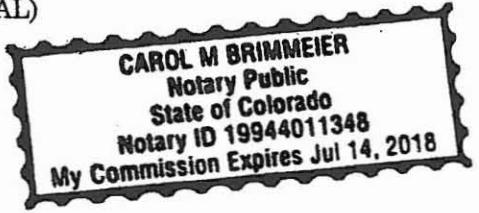
Date: ~~June 3, 2014~~ July 9, 2014
CMS

STATE OF Colorado)
County of Las Animas) ss.

Subscribed and sworn to before me on ~~June 3, 2014~~ ^{July 9, 2014}, by Juanita Peters.
CMS

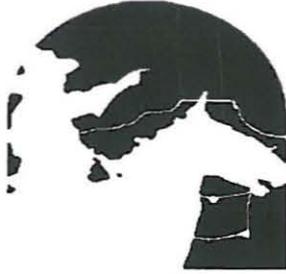
My commission expires: 7/14/18
Witness my hand and official seal:

(SEAL)





Notary Public



CITY OF TRINIDAD, COLORADO
1876

COUNCIL COMMUNICATION

CITY COUNCIL MEETING: July 15, 2014
PREPARED BY: Audra Garrett, City Clerk
DEPT. HEAD SIGNATURE: *Audra Garrett*
OF ATTACHMENTS: 10

SUBJECT: Special event permit request (malt, vinous and spirituous) by Trinidad Community Foundation at 206 N. Animas Street on September 13, 2014 (ArtoCade's CarDango Gala)

PRESENTER: Trinidad Community Foundation representative

RECOMMENDED CITY COUNCIL ACTION: Consider approval of the permit as requested

SUMMARY STATEMENT: N/A

EXPENDITURE REQUIRED: No

SOURCE OF FUNDS: N/A

POLICY ISSUE: N/A

ALTERNATIVE: N/A

BACKGROUND INFORMATION:

- The application is in order.
- The Fire Chief indicated an inspection is on file and has approved the safety plan.
- The departmental report from the Building Inspector indicated his approval upon the Fire Chief's approval.
- The Police Chief approved the security plan.
- Disclosure statements are provided by Councilmembers Miles and Torres.
- Appropriate fees have been paid.

\$ 25 - City of Trinidad
**APPLICATION FOR A SPECIAL
 EVENTS PERMIT**

Department Use Only

**IN ORDER TO QUALIFY FOR A SPECIAL EVENTS PERMIT, YOU MUST BE NONPROFIT
 AND ONE OF THE FOLLOWING (See back for details.)**

- | | | |
|------------------------------------|--|---|
| <input type="checkbox"/> SOCIAL | <input type="checkbox"/> ATHLETIC | <input checked="" type="checkbox"/> PHILANTHROPIC INSTITUTION |
| <input type="checkbox"/> FRATERNAL | <input type="checkbox"/> CHARTERED BRANCH, LODGE OR CHAPTER | <input type="checkbox"/> POLITICAL CANDIDATE |
| <input type="checkbox"/> PATRIOTIC | <input type="checkbox"/> OF A NATIONAL ORGANIZATION OR SOCIETY | <input type="checkbox"/> MUNICIPALITY OWNING ARTS FACILITIES |
| <input type="checkbox"/> POLITICAL | <input type="checkbox"/> RELIGIOUS INSTITUTION | |

LIAB TYPE OF SPECIAL EVENT APPLICANT IS APPLYING FOR:
 2110 MALT, VINOUS AND SPIRITUOUS LIQUOR \$25.00 PER DAY
 2170 FERMENTED MALT BEVERAGE (3.2 Beer) \$10.00 PER DAY

DO NOT WRITE IN THIS SPACE

LIQUOR PERMIT NUMBER

1. NAME OF APPLICANT ORGANIZATION OR POLITICAL CANDIDATE
Trinidad Community Foundation State Sales Tax Number (Required)
20-5077446

2. MAILING ADDRESS OF ORGANIZATION OR POLITICAL CANDIDATE
 (include street, city/town and ZIP)
*134 W. Main St., Suite 24
 Trinidad, CO 81082*

3. ADDRESS OF PLACE TO HAVE SPECIAL EVENT
 (include street, city/town and ZIP)
*Sebastian Gym
 206 N. Amador St.
 Trinidad, CO 81082*

NAME	DATE OF BIRTH	HOME ADDRESS (Street, City, State, ZIP)	PHONE NUMBER
4. PRES./SEC'Y OF ORG. or POLITICAL CANDIDATE <i>Phil Rico, President</i>	 	 <i>Trinidad, CO 81082</i>	
5. EVENT MANAGER <i>Susan Palmer</i>	 	 <i>Trinidad, CO 81082</i>	

6. HAS APPLICANT ORGANIZATION OR POLITICAL CANDIDATE BEEN ISSUED A SPECIAL EVENT PERMIT THIS CALENDAR YEAR?
 NO YES HOW MANY DAYS? _____

7. IS PREMISES NOW LICENSED UNDER STATE LIQUOR OR BEER CODE?
 NO YES TO WHOM? _____

8. DOES THE APPLICANT HAVE POSSESSION OR WRITTEN PERMISSION FOR THE USE OF THE PREMISES TO BE LICENSED? Yes No

LIST BELOW THE EXACT DATE(S) FOR WHICH APPLICATION IS BEING MADE FOR PERMIT

Date	Hours	From	To	Date	Hours	From	To	Date	Hours	From	To	Date	Hours	From	To
<i>9-13-14</i>															
		<i>6:45 p.m.</i>	<i>12:00 a.m.</i>												

OATH OF APPLICANT

I declare under penalty of perjury in the second degree that I have read the foregoing application and all attachments thereto, and that all information therein is true, correct, and complete to the best of my knowledge.

SIGNATURE *Phil Rico* TITLE *President* DATE *6/19/14*

REPORT AND APPROVAL OF LOCAL LICENSING AUTHORITY (CITY OR COUNTY)

The foregoing application has been examined and the premises, business conducted and character of the applicant is satisfactory, and we do report that such permit, if granted, will comply with the provisions of Title 12, Article 48, C.R.S., as amended.

THEREFORE, THIS APPLICATION IS APPROVED.

LOCAL LICENSING AUTHORITY (CITY OR COUNTY) *Trinidad* CITY COUNTY TELEPHONE NUMBER OF CITY/COUNTY CLERK *(719) 846-9843*
 SIGNATURE _____ TITLE *Mayor* DATE _____

DO NOT WRITE IN THIS SPACE - FOR DEPARTMENT OF REVENUE USE ONLY

LIABILITY INFORMATION

License Account Number	Liability Date	State	TOTAL
		<i>-750 (999)</i>	\$

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Trinidad Community Foundation

is a **Nonprofit Corporation** formed or registered on 06/06/2006 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20061230461.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 06/19/2014 that have been posted, and by documents delivered to this office electronically through 06/20/2014 @ 12:19:27.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 06/20/2014 @ 12:19:27 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8881646.



Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/bi-/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions."

TRINIDAD AREA CATHOLIC COMMUNITY (TACC)
235 N CONVENT ST.
TRINIDAD, CO 81082

SEBASTIANI GYM RENTAL AGREEMENT

RENTER: Artocade (Rodney Wood)
DATE OF EVENT: *September 13, 2014*
RENT AMOUNT: \$850.00
DAMAGE DEPOSIT: \$1000.00

1. Lease: This lease is between Trinidad Area Catholic Community (TACC) and Artocade (Rodney Wood) (RENTER). The RENTER agrees to abide by the agreed upon guidelines.
2. Use: The Sebastiani Gym located at 206 N Animas St., Trinidad, Co 81082 will be used solely by the RENTER for the purpose Gala event for art car festival.
3. Term: The term of agreement shall start *5 day* prior to the date of event as indicated above and shall include the date of event and *1 day* after the event for cleanup.
4. Rent: RENTER agrees to pay the rent as specified above upon signing of this agreement.
5. Damage Deposit: RENTER shall pay a damage deposit in the above amount to be held by TACC. Upon termination of the agreement and following the date of the event, TACC shall return to the RENTER the damage deposit provided the RENTER has fulfilled all the terms and conditions of this agreement. The RENTER and the Business Manager will do a walkthrough after said event. If damage exceeds the amount of the deposit, the RENTER is liable for the difference. The gym is to be cleaned to the specifications of the Business Manager.
6. Use & Repair: RENTER shall use the property in a careful and safe manner; shall allow only qualified persons to enter and use the property; shall comply with all applicable laws and regulations, and shall maintain the property in good condition. All tables will be covered with a plastic covering. No staples are to be used on the tables. All tables and chairs will have rubber tips. Any and all fixtures brought in by RENTER for use on the gym floor shall have a protective covering between the fixture and the floor. The Business Manager shall hold RENTER responsible for gym property and premises until inspection and release.
7. Surrender: Upon termination of this agreement, RENTER, at RENTER's expense, shall return the property in same condition, ordinary wear and tear expected.
8. Loss or Damage: RENTER shall bear the entire risk of loss, theft, damage or other destruction to the property and any of its equipment. If any item of property in the gym is lost, stolen or destroyed, RENTER shall pay to TACC or replace such equipment with like equipment in good repair or new equipment.
9. Indemnity: Neither TACC nor any of TACC's employees, agents, or guests shall be liable to the RENTER for an injury or damage to any person or property in or about the gym by or from any cause. RENTER waives any such claims against TACC. RENTER shall

indemnify TACC against and hold TACC harmless from all claims, actions, proceedings, expenses, and liabilities arising from RENTER's use or lease of the gym. TACC is not liable for lost or stolen articles or damage or theft of vehicles.

In the event that the terms of this agreement are unable to be fulfilled through no fault of either party, this agreement shall be declared null and void and both parties shall indemnify each other against any loss. Any and all deposits will be returned to its rightful owner.

10. Assignment: The RENTER shall neither assign or otherwise transfer this agreement or any of the RENTER's interests in the agreement, nor sublease the property or any part of the property without the prior written consent of TACC. Any assignment, transfer or sublease made without the prior written approval TACC, shall be void and shall terminate this agreement.
11. Insurance: Proof of insurance must be on filed with the TACC at least thirty (30) prior to the date of event. If alcohol is served, it must be noted on the Certificate of Insurance. TACC and the Diocese of Pueblo are to be added as additional insured on the certificate for this event.
12. Rules & Conditions: RENTER agrees to observe and comply with all of TACC rules and conditions.
13. Attorney's Fees: The prevailing party shall pay all costs, including reasonable attorney fees and interest rate of 10% from any actions brought concerning the provisions of this agreement.
14. Miscellaneous: This agreement shall be binding and inure to the benefit of the successors and approved assignees of TACC and the RENTER.
This lease shall be governed by and interpreted in accordance with the laws of the State of Colorado.
This lease shall not be amended except by a written instrument signed by both parties.

This agreement is signed on the date of: 10/30/13

~~TRINIDAD AREA CATHOLIC COMMUNITY~~

Name: [Signature]

Title: Business Manager

RENTER

Organization: ARTCCADE

Name: Rodney Wood

717-334-0087 Rodney

Title: CREATOR

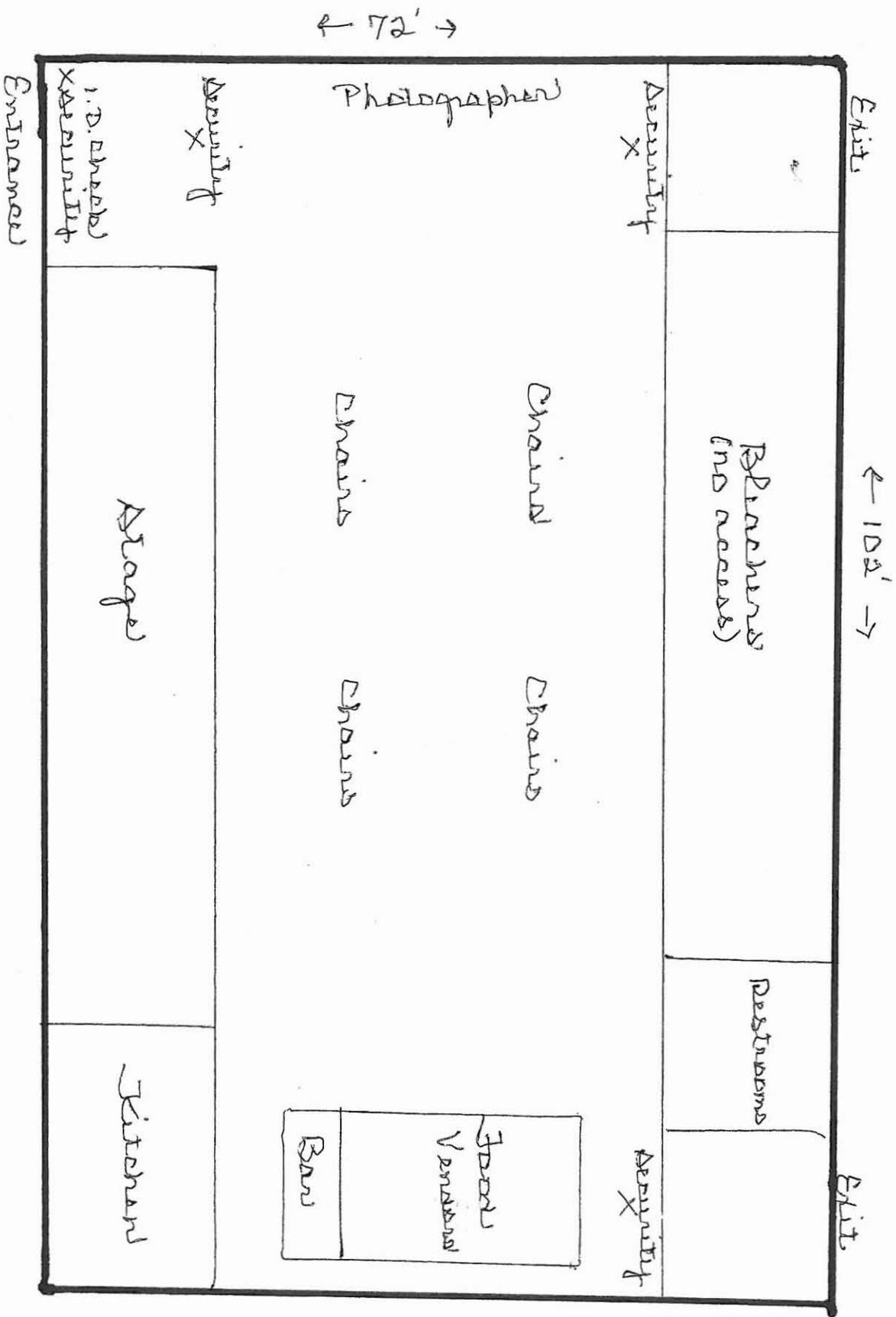
85-603-6181 Susan

Address: 214 E. MAIN ST.

City, State, Zip: TRINIDAD CO 81082

APRIL 13, 1914
CARDANO
9-13-14

300-500



6/25/14

DEPARTMENTAL INSPECTION REPORT
3.2% BEER (FERMENTED MALT BEVERAGE)
OR LIQUOR LICENSE

Applicant: Trinidad Community Foundation

dba: Artocade CarDango – 9/13/2014

Address: 206 N. Animas Street

Type of License: Malt, Vinous and Spirituous

Renewal Transfer Change of Location New Special Event

FOR CONSIDERATION AT
COUNCIL MEETING DATE: July 15, 2014

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS: inspection on file

6/19/14
Date

[Signature]
Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 6, 2014

**FIRE SAFETY PLAN
CITY OF TRINIDAD TOURISM BOARD
EVENT -- ArtoCade's CARdango Gala**

Date of Operation: September 13, 2014 Pre-operation briefing: _____
Operational Period: 6:45 pm-12:00 pm Operations Supervisor: _____

LOCATION: Sebastiani Gym, 206 N. Animas Street, Trinidad, CO.

GROUND RULES: (1) No smoking in building or on grounds, (2) Alcoholic beverages in moderation, (3) No underage drinking, (4) Adhere to capacity requirement of 1500.

SAFETY OBJECTIVES: (1) To provide safety for participants attending the City of Trinidad Tourism Board-sponsored ArtoCade's gala after the art car parade, a/k/a CARdango; (2) To maintain public safety during the evening event; (3) To provide safety in the operational area to include bar

NOTE: Ingress/egress is located at the front of the building (on Animas Street) with Emergency exits clearly marked adjacent to each side of the bleachers exiting to the back of the building. All ingress/egress locations will have security personnel stationed to monitor appropriate movement of participants.

ATTACHMENT: A schematic is attached to show the operational area(s).

EMERGENCIES: Emergency exits shall remain clear. In case of fire/emergency, staff will contact 911 dispatch.

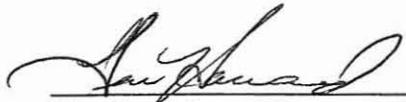
FIRE EXTINGUISHER(S): Available in kitchen area.

Susan Palmer, CARdango Organizer

Date

Rodney Wood, ArtoCade or Pat Patrick, Tourism Board Pres.

Date



Fire Department Representative

6/19/14

Date

6/25/14

DEPARTMENTAL INSPECTION REPORT
3.2% BEER (FERMENTED MALT BEVERAGE)
OR LIQUOR LICENSE

Applicant: Trinidad Community Foundation

dba: Artocade CarDango - 9/13/2014

Address: 206 N. Animas Street

Type of License: Malt, Vinous and Spirituous

Renewal Transfer Change of Location New Special Event

FOR CONSIDERATION AT
COUNCIL MEETING DATE: July 15, 2014

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS: when Fire plan is approved by the Fire Chief

C. 30.14
Date

Chris L. Kelly
Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 6, 2014

6/25/14

DEPARTMENTAL INSPECTION REPORT
3.2% BEER (FERMENTED MALT BEVERAGE)
OR LIQUOR LICENSE

Applicant: Trinidad Community Foundation

dba: Artocade CarDango - 9/13/2014

Address: 206 N. Animas Street

Type of License: Malt, Vinous and Spirituous

Renewal Transfer Change of Location New Special Event

FOR CONSIDERATION AT
COUNCIL MEETING DATE: July 15, 2014

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS: _____

No Reports / FOLLOW APPROVED SECURITY PLAN

06-27-14
Date

Charles J. Howari
Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 6, 2014

OPERATIONS PLAN
ArtoCade's CARdango Gala

Date of Operation: September 13, 2014
Pre-Operation Briefing: TBD

Operation Period: 6:45pm - midnight
Operation Supervisor: TBD

Location of Operation: Sebastiani Gym, 206 N. Animas Street, Trinidad, CO. Entrance to the event will be via the front door only (Animas Street).

Operation Objectives: Provide security for CARdango event. Maintain public peace and order during the event. Provide security in the operational area to include event bar. It should be noted that ingress/egress is located at the front entrance (Animas Street). Emergency egress is located adjacent to each side of the bleachers (schematic attached). Security Personnel (Guardian Angel Security, LLC) will be stationed at each of these three doors to monitor appropriate attendee movement.

Radio Contact: Security personnel carry cell phones, which will have the TPD's Communications Center number programmed into the device.

Event Staffing (Security): Guardian Angel Security, LLC has been contracted to provide three (3) personnel, one at each ingress/egress door. In addition, Mr. Ernie Zambonato has been contracted to check IDs and apply wrist bands at the entrance. NO ID = NO BAND = NO ALCOHOL

Handling of Calls: Guardian Angel Security, LLC personnel will call from their own cell phone to the TPD's Communications Center should a situation arise which requires official attention.

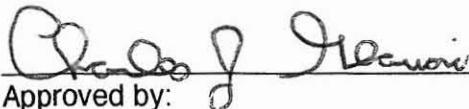
Bar staff: All staff operating the bar will be TIPS certified, will wear attire designating them as bar staff, and will ensure that only those with wrist bands will be served. In addition, bar staff will ensure that intoxicated persons are not served (per CRS and Municipal Code).

Accounting system: The bar will accept only "tickets" previously purchased in exchange for alcoholic beverages; no money will be exchanged at the bar. A tip jar will be placed on the bar for anyone wishing to tip the bar staff. Our designated financial/accounting volunteer will monitor and collect these tips, removing the cash to a secure location periodically.

Critical incidents: Any incident requiring a call to the TPD Communications Center will be reported immediately to the event organizer, Susan Palmer.

Prepared by: Susan Palmer, Event Organizer

Date


Approved by:

6-30-14
Date

STATE OF COLORADO)
COUNTY OF LAS ANIMAS) SS
CITY OF TRINIDAD)

CERTIFICATE OF POSTING

I, Audra Garrett, City Clerk of the City of Trinidad, Colorado, do hereby certify that pursuant to the laws of the State of Colorado, and the ordinances of the City of Trinidad, Trinidad Community Foundation, 134 W. Main Street, Ste. 24, Trinidad, Colorado, which business has applied for a Special Events Permit, to sell and dispense Malt, Vinous and Spirituous Liquors at 206 N. Animas Street, Trinidad, Colorado, on September 13, 2014, was duly posted for no less than ten continuous days, with the first day of posting occurring on the 26th day June, 2014.

WITNESS, my hand and the official seal of the City of Trinidad, Colorado, this 26th day of June, 2014.

CITY OF TRINIDAD, COLORADO



Audra Garrett, City Clerk

(S E A L)

DISCLOSURE STATEMENT

I, Michelle Miles, hereby state and affirm that I am a member of Opera House Wine & Spirits, LLC, a Colorado limited liability company formed on February 22, 2010, whose principal office address is 601 W. Main Street, Trinidad, Colorado, 81082; that said limited liability company owns and operates Tire Shop Wine & Spirits, a retail liquor store licensed entity, licensed under Title 12, Articles 46 or 47, CRS 1973, as amended of the State of Colorado and under Chapter 3 of the Municipal Code of the City of Trinidad, located at 601 W. Main Street, in the City of Trinidad, County of Las Animas, State of Colorado; that I hold a 99% interest in Opera House Wine & Spirits, LLC; and, that I am able to act independently upon liquor licensing matters that come before the Trinidad City Council, the local liquor licensing authority, of which I am a member.



Michelle Miles
12/4/12

Date

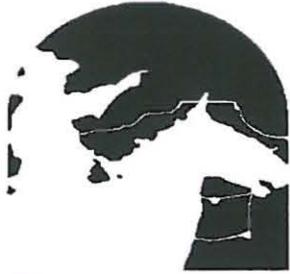
DISCLOSURE STATEMENT

I, Liz Torres, hereby state and affirm that I am a member of Ristras Restaurant and Cantina, LLC, a Colorado limited liability company formed on February 13, 2014, whose principal office address is 516 Elm Street, Trinidad, Colorado, 81082; that said limited liability company owns and operates Ristras Restaurant and Cantina, a hotel and restaurant licensed entity, licensed under Title 12, Articles 46 or 47, CRS 1973, as amended of the State of Colorado and under Chapter 3 of the Municipal Code of the City of Trinidad, located at 516 Elm Street, in the City of Trinidad, County of Las Animas, State of Colorado; that I hold a 34% interest in Ristras Restaurant and Cantina, LLC; and, that I am able to act independently upon liquor licensing matters that come before the Trinidad City Council, the local liquor licensing authority, of which I am a member.



Liz Torres
4.8.14

Date



CITY OF TRINIDAD, COLORADO
1876

COUNCIL COMMUNICATION

CITY COUNCIL MEETING: July 15, 2014
PREPARED BY: Audra Garrett, City Clerk
DEPT. HEAD SIGNATURE: *Audra Garrett*
OF ATTACHMENTS: 5

86

SUBJECT: Retail liquor store license renewal request by Opera House Wine & Spirits, LLC d/b/a Tire Shop Wine & Spirits at 601 W. Main Street

PRESENTER: Opera House Wine & Spirits, LLC

RECOMMENDED CITY COUNCIL ACTION: Consider renewal of the license

SUMMARY STATEMENT: N/A

EXPENDITURE REQUIRED: No

SOURCE OF FUNDS: N/A

POLICY ISSUE: N/A

ALTERNATIVE: N/A

BACKGROUND INFORMATION:

- The renewal application is in order.
- The Fire Department and Building Department report no issues /satisfactory inspection / recommend approval.
- The Police Department reported no calls for service.
- Disclosure statements from Councilmembers Miles and Torres are attached.
- Appropriate fees have been paid.

86

**LIQUOR OR 3.2 BEER LICENSE
 RENEWAL APPLICATION**

TIRE SHOP WINE & SPIRITS
 601 W MAIN ST
 TRINIDAD CO 81082-2627

Fees Due	
Renewal Fee	\$227.50
Storage Permit \$100 x _____	_____
Optional Premise \$100 x _____	_____
Related Resort \$75 x _____	_____
Amount Due/Paid	

Make check payable to: Colorado Department of Revenue. The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department may collect the payment amount directly from your banking account electronically.

PLEASE VERIFY & UPDATE ALL INFORMATION BELOW

RETURN TO CITY OR COUNTY LICENSING AUTHORITY BY DUE DATE

Licensee Name OPERA HOUSE WINE & SPIRITS LLC		DBA TIRE SHOP WINE & SPIRITS		
Liquor License # 42829460000	License Type Liquor Store (city)	Sales Tax License # 42829460000	Expiration Date 7/13/2014	Due Date 5/29/2014
Street Address 601 W MAIN ST TRINIDAD CO 81082-2627				Phone Number (719) 404 3812
Mailing Address 601 W MAIN ST TRINIDAD CO 81082-2627				
Operating Manager Carol Cometto	Date of Birth [REDACTED]	Home Address [REDACTED] Trinidad Co		Phone Number [REDACTED]

- Do you have legal possession of the premises at the street address above? YES NO
 Is the premises owned or rented? Owned Rented* *If rented, expiration date of lease **June 2015 with option to renew**
- Since the date of filing of the last annual application, has there been any change in financial interest (new notes, loans, owners, etc.) or organizational structure (addition or deletion of officers, directors, managing members or general partners)? If yes, explain in detail and attach a listing of all liquor businesses in which these new lenders, owners (other than licensed financial institutions), officers, directors, managing members, or general partners are materially interested. YES NO
NOTE TO CORPORATION, LIMITED LIABILITY COMPANY AND PARTNERSHIP APPLICANTS: If you have added or deleted any officers, directors, managing members, general partners or persons with 10% or more interest in your business, you must complete and return immediately to your Local Licensing Authority, Form DR 8177: Corporation, Limited Liability Company or Partnership Report of Changes, along with all supporting documentation and fees.
- Since the date of filing of the last annual application, has the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) been convicted of a crime? If yes, attach a detailed explanation. YES NO
- Since the date of filing of the last annual application, has the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) been denied an alcohol beverage license, had an alcohol beverage license suspended or revoked, or had interest in any entity that had an alcohol beverage license denied, suspended or revoked? If yes, attach a detailed explanation. YES NO
- Does the applicant or any of its agents, owners, managers, partners or lenders (other than licensed financial institutions) have a direct or indirect interest in any other Colorado liquor license, including loans to or from any licensee or interest in a loan to any licensee? If yes, attach a detailed explanation. YES NO
- SOLE PROPRIETORSHIPS, HUSBAND-WIFE PARTNERSHIPS AND PARTNERS IN GENERAL PARTNERSHIPS:** Each person must complete and sign the DR 4679: Affidavit – Restriction on Public Benefits (available online or by calling 303-205-2300) and attach a copy of their driver's license, state-issued ID or valid passport.

AFFIRMATION & CONSENT

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.

Type or Print Name of Applicant/Authorized Agent of Business Michelle Diles	Title Owner
Signature [Signature]	Date 6/27/14

REPORT & APPROVAL OF CITY OR COUNTY LICENSING AUTHORITY

The foregoing application has been examined and the premises, business conducted and character of the applicant are satisfactory, and we do hereby report that such license, if granted, will comply with the provisions of Title 12, Articles 46 and 47, C.R.S. **THEREFORE THIS APPLICATION IS APPROVED.**

Local Licensing Authority For Trinidad	Date
Signature	Title Mayor
	Attest

7/1/14

DEPARTMENTAL INSPECTION REPORT
3.2% BEER (FERMENTED MALT BEVERAGE)
OR LIQUOR LICENSE

Applicant: Opera House Wine & Spirits

dba: Tire Shop Wine & Spirits

Address: 601 W. Main Street

Type of License: Retail Liquor Store

Renewal Transfer Change of Location New Special Event

FOR CONSIDERATION AT
COUNCIL MEETING DATE: July 15, 2014

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS: inspected ok

7/1/14
Date

[Signature]
Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 6, 2014

7/1/14

DEPARTMENTAL INSPECTION REPORT
3.2% BEER (FERMENTED MALT BEVERAGE)
OR LIQUOR LICENSE

Applicant: Opera House Wine & Spirits

dba: Tire Shop Wine & Spirits

Address: 601 W. Main Street

Type of License: Retail Liquor Store

Renewal Transfer Change of Location New Special Event

FOR CONSIDERATION AT
COUNCIL MEETING DATE: July 15, 2014

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS: approved

7-2-2014
Date

Chris S. Kelley
Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 6, 2014

DISCLOSURE STATEMENT

I, Michelle Miles, hereby state and affirm that I am a member of Opera House Wine & Spirits, LLC, a Colorado limited liability company formed on February 22, 2010, whose principal office address is 601 W. Main Street, Trinidad, Colorado, 81082; that said limited liability company owns and operates Tire Shop Wine & Spirits, a retail liquor store licensed entity, licensed under Title 12, Articles 46 or 47, CRS 1973, as amended of the State of Colorado and under Chapter 3 of the Municipal Code of the City of Trinidad, located at 601 W. Main Street, in the City of Trinidad, County of Las Animas, State of Colorado; that I hold a 99% interest in Opera House Wine & Spirits, LLC; and, that I am able to act independently upon liquor licensing matters that come before the Trinidad City Council, the local liquor licensing authority, of which I am a member.



Michelle Miles
12/4/12

Date

DISCLOSURE STATEMENT

I, Liz Torres, hereby state and affirm that I am a member of Ristras Restaurant and Cantina, LLC, a Colorado limited liability company formed on February 13, 2014, whose principal office address is 516 Elm Street, Trinidad, Colorado, 81082; that said limited liability company owns and operates Ristras Restaurant and Cantina, a hotel and restaurant licensed entity, licensed under Title 12, Articles 46 or 47, CRS 1973, as amended of the State of Colorado and under Chapter 3 of the Municipal Code of the City of Trinidad, located at 516 Elm Street, in the City of Trinidad, County of Las Animas, State of Colorado; that I hold a 34% interest in Ristras Restaurant and Cantina, LLC; and, that I am able to act independently upon liquor licensing matters that come before the Trinidad City Council, the local liquor licensing authority, of which I am a member.



Liz Torres
4.8.14

Date



COUNCIL COMMUNICATION

CITY COUNCIL MEETING: July 15, 2014
PREPARED BY: Audra Garrett, City Clerk
DEPT. HEAD SIGNATURE:

OF ATTACHMENTS: 7

SUBJECT: Modification of premises request by Image Hospitality, LLC d/b/a Quality Inn at 3125 Toupal Drive

PRESENTER: Image Hospitality, LLC, LLC

RECOMMENDED CITY COUNCIL ACTION: Consider approval of the modification as requested

SUMMARY STATEMENT: N/A

EXPENDITURE REQUIRED: No

SOURCE OF FUNDS: N/A

POLICY ISSUE: N/A

ALTERNATIVE: N/A

BACKGROUND INFORMATION:

- The application is in order. The licensee seeks to modify the licensed premise by building a small kitchen in the bar area on the west side of the building and omitting the kitchen and dining area as a licensed area. They seek to lease the kitchen and dining area and provide meals to patrons of the bar area and rooms from the leased premise.
- The Fire Chief indicates a fire inspection is required upon completion of the new kitchen.
- The Building Inspector indicates a building permit is required for the new kitchen.
- The Police Chief states an inspection was done on July 2, 2014 and no issues were found.
- Disclosure statements provided by Council members Miles and Torres are attached.
- Appropriate fee has been paid.

PERMIT APPLICATION AND REPORT OF CHANGES

CURRENT LICENSE NUMBER _____
ALL ANSWERS MUST BE PRINTED IN BLACK INK OR TYPEWRITTEN
LOCAL LICENSE FEE \$ _____
APPLICANT SHOULD OBTAIN A COLORADO LIQUOR & BEER CODE BOOK TO ORDER CALL (303) 370-2165

1. Applicant is a		PRESENT LICENSE NUMBER
<input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company		
2. Name of Licensee <u>Image Hospitality LLC</u>		3. Trade Name <u>Quality Inn</u>
4. Location Address <u>Quality Inn</u>		
<u>3125 Toupal Dr.</u>		
City <u>Trinidad</u>	County <u>Las Animas</u>	ZIP <u>81082</u>

SELECT THE APPROPRIATE SECTION BELOW AND PROCEED TO THE INSTRUCTIONS ON PAGE 2.

Section A - Manager reg/change	Section C
• License Account No. <u>42870940000</u> 1983-750 (999) <input type="checkbox"/> Manager's Registration (Hotel & Restr.)..\$75.00 2012-750 (999) <input type="checkbox"/> Manager's Registration (Tavern).....\$75.00 <input type="checkbox"/> Change of Manager (Other Licenses) NO FEE	2210-100 (999) <input type="checkbox"/> Retail Warehouse Storage Permit (ea) \$100.00 2200-100 (999) <input type="checkbox"/> Wholesale Branch House Permit (ea).... 100.00 2260-100 (999) <input type="checkbox"/> Change Corp. or Trade Name Permit (ea) .50.00 2230-100 (999) <input type="checkbox"/> Change Location Permit (ea)..... 150.00 2280-100 (999) <input checked="" type="checkbox"/> Change, Alter or Modify Premises \$150.00 x <u>2</u> Total Fee <u>300</u>
Section B - Duplicate License	
• Liquor License No. _____ 2270-100 (999) <input type="checkbox"/> Duplicate License\$50.00	2220-100 (999) <input type="checkbox"/> Addition of Optional Premises to Existing H/R \$100.00 x _____ Total Fee _____ 1988-100 (999) <input type="checkbox"/> Addition of Related Facility to Resort Complex \$75.00 x _____ Total Fee _____

DO NOT WRITE IN THIS SPACE - FOR DEPARTMENT OF REVENUE USE ONLY

DATE LICENSE ISSUED <u>11</u> <u>NO-18-13</u>	LICENSE ACCOUNT NUMBER	PERIOD
---	------------------------	--------

-750 (999)	-100 (999)	The State may convert your check to a one time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.	TOTAL AMOUNT DUE \$ <u>300</u> .00
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INSTRUCTION SHEET

FOR ALL SECTIONS, COMPLETE QUESTIONS 1-4 LOCATED ON PAGE 1

Section A

To Register or Change Managers, check the appropriate box in section A and complete question 8 on page 4. Proceed to the Oath of Applicant for signature (Please note: Hotel, Restaurant, and Tavern licensees are required to register their managers).

Section B

For a Duplicate license, be sure to include the liquor license number in section B on page 1 and proceed to page 4 for Oath of Applicant signature.

Section C

Check the appropriate box in section C and proceed below.

- 1) **For a Retail Warehouse Storage Permit**, go to page 3 complete question 5 (be sure to check the appropriate box). Submit the necessary information and proceed to page 4 for Oath of Applicant signature.
- 2) **For a Wholesale Branch House Permit**, go to page 3 and complete question 5 (be sure to check the appropriate box). Submit the necessary information and proceed to page 4 for Oath of Applicant signature.
- 3) **To Change Trade Name or Corporation Name**, go to page 3 and complete question 6 (be sure to check the appropriate box). Submit the necessary information and proceed to page 4 for Oath of Applicant signature.
- 4) **To modify Premise**, go to page 4 and complete question 9. Submit the necessary information and proceed to page 4 for Oath of Applicant signature.
- 5) **For Optional Premises or Related Facilities** go to page 4 and complete question 9. Submit the necessary information and proceed to page 4 for Oath of Applicant signature.
- 6) **To Change Location**, go to page 3 and complete question 7. Submit the necessary information and proceed to page 4 for Oath of Applicant signature.

STORAGE PERMIT

5. Retail Warehouse Storage Permit or a Wholesalers Branch House Permit

- Retail Warehouse Permit for:**
 - On-Premises Licensee (Taverns, Restaurants etc.)
 - Off-Premises Licensee (Liquor stores)
- Wholesalers Branch House Permit**

Address of storage premise: _____
 City _____, County _____, Zip _____

Attach a deed/ lease or rental agreement for the storage premises.
 Attach a detailed diagram of the storage premises.

CHANGE TRADE NAME OR CORPORATE NAME

6. Change of Trade Name or Corporation Name

- Change of Trade name / DBA only
- Corporate Name Change (Attach the following supporting documents)
 1. Certificate of Amendment filed with the Secretary of State, or
 2. Statement of Change filed with the Secretary of State, and
 3. Minutes of Corporate meeting, Limited Liability Members meeting, Partnership agreement.

Old Trade Name	New Trade Name
Old Corporate Name	New Corporate Name

CHANGE OF LOCATION

7. Change of Location

NOTE TO RETAIL LICENSEES: An application to change location has a local application fee of \$750 payable to your local licensing authority. You may only change location within the same jurisdiction as the original license that was issued. Pursuant to 12-47-311 (1) C.R.S. Your application must be on file with the local authority thirty (30) days before a public hearing can be held.

Date filed with Local Authority _____ Date of Hearing _____

(a) Address of current premises _____
 City _____ County _____ Zip _____

(b) Address of proposed New Premises (Attach copy of the deed or lease that establishes possession of the premises by the licensee)
 Address _____
 City _____ County _____ Zip _____

(c) New mailing address if applicable.
 Address _____
 City _____ County _____ State _____ Zip _____

(d) Attach detailed diagram of the premises showing where the alcohol beverages will be stored, served, possessed or consumed. Include kitchen area(s) for hotel and restaurants.

CHANGE OF MANAGER

8. Change of Manager or to Register the Manager of a Tavern or a Hotel and Restaurant liquor license.

(a) Change of Manager (attach Individual History DR 8404-I H/R and Tavern only)

Former manager's name _____

New manager's name _____

(b) Date of Employment _____

Has manager ever managed a liquor licensed establishment?..... Yes No

Does manager have a financial interest in any other liquor licensed establishment?..... Yes No

If yes, give name and location of establishment _____

MODIFY PREMISES OR ADDITION OF OPTIONAL PREMISES OR RELATED FACILITY

9. Modification of Premises, Addition of an Optional Premises, or Addition of Related Facility

NOTE: Licensees may not modify or add to their licensed premises until approved by state and local authorities.

(a) Describe change proposed exclude current kitchen and dining area; building small kitchen in bar area

(b) If the modification is temporary, when will the proposed change:

Start _____ (mo/day/year) End _____ (mo/day/year)

NOTE: THE TOTAL STATE FEE FOR TEMPORARY MODIFICATION IS \$300.00

(c) Will the proposed change result in the licensed premises now being located 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?

(If yes, explain in detail and describe any exemptions that apply) Yes No

(d) Is the proposed change in compliance with local building and zoning laws? Yes No

(e) If this modification is for an additional Hotel and Restaurant Optional Premises or Resort Complex Related Facility, has the local authority authorized by resolution or ordinance the issuance of optional premises?

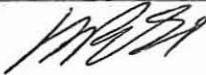
..... Yes No

(f) Attach a diagram of the current licensed premises and a diagram of the proposed changes for the licensed premises.

(g) Attach any existing lease that is revised due to the modification.

OATH OF APPLICANT

I declare under penalty of perjury in the second degree that I have read the foregoing application and all attachments thereto, and that all information therein is true, correct, and complete to the best of my knowledge.

Signature 	Title <u>owner</u>	Date <u>6/27/14</u>
--	-----------------------	------------------------

REPORT AND APPROVAL OF LOCAL LICENSING AUTHORITY (CITY / COUNTY)

The foregoing application has been examined and the premises, business conducted and character of the applicant is satisfactory, and we do report that such permit, if granted, will comply with the applicable provisions of Title 12, Articles 46 and 47, C.R.S., as amended. THEREFORE, THIS APPLICATION IS APPROVED.

Local Licensing Authority (City or County)		Date filed with Local Authority
Signature	Title	Date

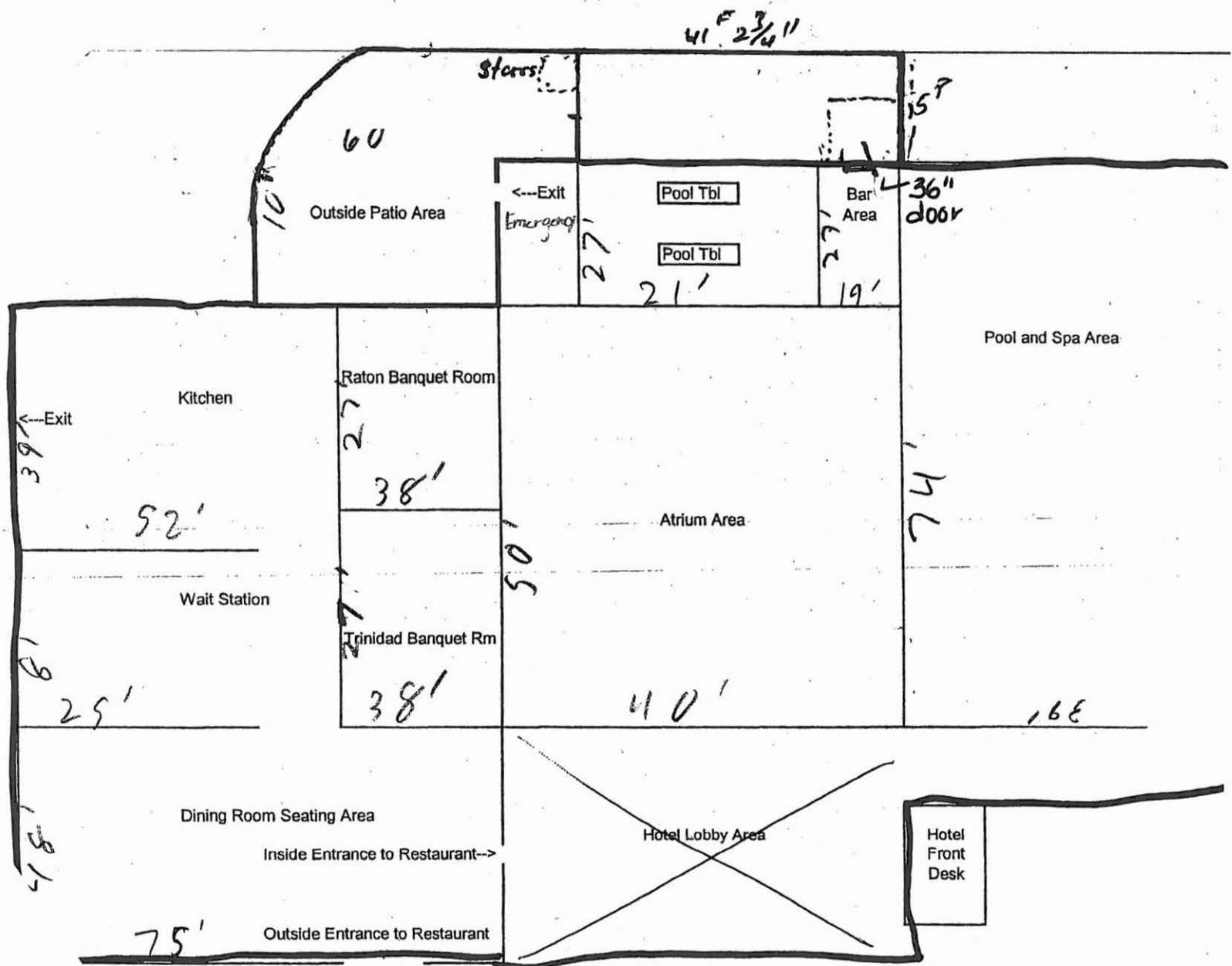
REPORT OF STATE LICENSING AUTHORITY

The foregoing has been examined and complies with the filing requirements of Title 12, Article 47, C.R.S., as amended.

Signature	Title	Date
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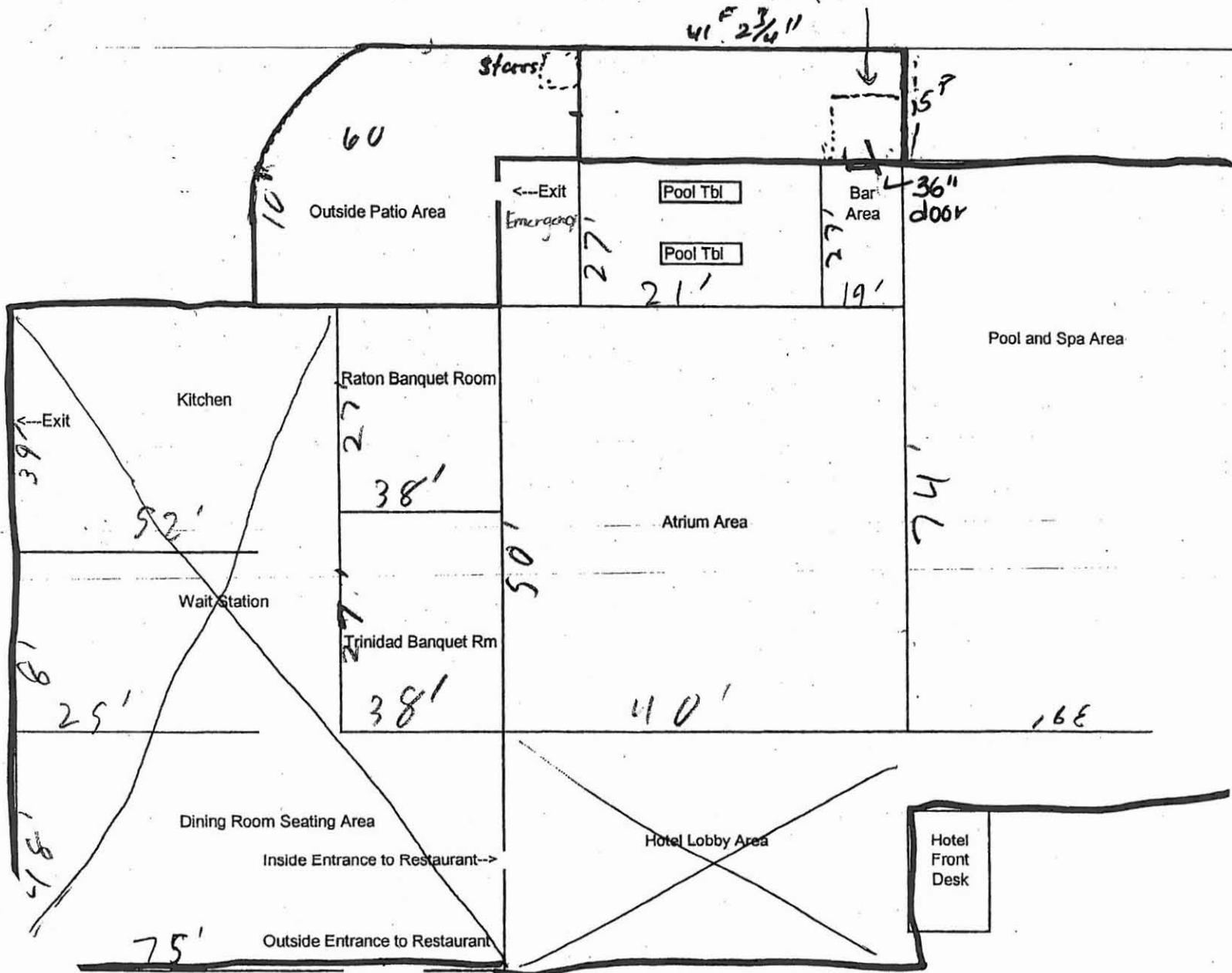
Current

Lumber Railing Surrounding deck



Proposed

Lumber Railing Surrounding deck
Propose new Kitchen



Basic Terms of Lease

Rent shall be a flat \$5,000.00 per month and include equipment, general property and liability insurance,

July: \$3,000.00

August: \$5,000.00 + \$1,500.00

September: \$5,000.00 + \$1,500.00

October: \$5,000.00 + \$1,500.00

November \$5,000.00 + \$1,500.00

December \$5,000.00 + \$1,000.00

January, 2015 \$5,000.00 going forward unless by mutual agreement.

Tenant reserves the right to prepay above "+" amounts at any time;

The rent shall exclude the restaurants share of the natural gas, electrical, cable television, trash and water expenses and shall be paid to Landlord within 24 hours of receipt of billing provided by Landlord;

Tenant shall provide Landlord with all copies of licenses and insurance necessary to protect Landlord from liability of restaurant operations;

Tenant will provide a continental breakfast for guests of the hotel at its expense in exchange for a \$3.00 fee paid by Landlord for each food voucher redeemed at restaurant by hotel guests on a monthly basis. Landlord may, at his discretion, apply monthly voucher redemptions to Tenant's rent. Hours of offered continental breakfast shall be daily from 6 a.m. until 9:30 a.m.;

Tenants shall be responsible for the upkeep and maintenance of all equipment and contents of the restaurant and will be responsible for any repairs or replacement for said contents at its own expense including 2 roof top air conditioners and 1 swamp cooler;

Tenants shall be responsible for employees it hires and any insurance, payroll, taxes and any other actions its employees may take;

Tenant understands that it may offer room service, banquet, catering and food delivery at its own expense and profit. Tenant also understands that Landlord may charge Tenant a fee to use banquet rooms under mutually agreeable terms;

Tenant and Landlord agree that the operation of the restaurant and other food services provided by Tenant will be conducted under separate companies and that co-mingling of funds is prohibited;

Tenant agrees to maintain restaurant hours from 6:00 a.m. until 9:00 p.m. Monday – Sunday but may close on certain holidays with advance notice to Landlord. The hours may be changed only by mutual consent of both parties;

Landlord agrees that Tenants may advertise its restaurant at its own expense and will pay 25% of any mutual advertising previously agreed to by both parties;

Both parties agree that this lease expires at midnight on December 31st, 2016 unless extended or terminated by mutual consent;



Rent shall be due by the 5th day of each month. If rent is paid on the 6th or thereafter, Tenant agrees to pay a late fee of \$150.00;

Landlord reserves right to inspect property at any time. If a maintenance issue is discovered, Landlord will provide a written request for repair. If repair is not made within a reasonable time frame or constitutes an imminent danger to Landlords property or guests, Landlord may revoke lease;

If Tenant breaks lease in violation of above stated conditions, Tenant will surrender deposit of \$5000.00. When at mutual lease termination, Tenant agrees to pay for damages above normal wear and tear;

In the event Tenant loses legal action brought by Landlord for violating any of the clauses in this agreement, Tenant agrees to pay all legal costs associated with the legal action;

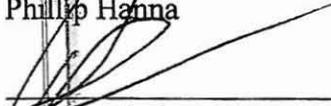
Tenants agree to provide documentation establishing legal name and residency within the United States;

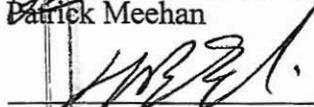
Tenants agree to assume the restaurant "as-is" and will be responsible for any work needed prior to opening. Landlord represents the property to be in good working order and agrees to repair, at his expense, any items needed for opening the restaurant. When Tenant opens the restaurant on the first day of the lease, all repairs and maintenance become the responsibility of the Tenant (see above);

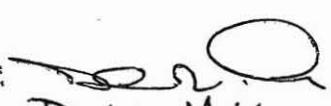
Tenant agrees that all employees of the restaurant shall park in the northern area of the parking lot only;

6-21-14
Date


Phillip Hanna


Patrick Meehan


Harry Patel

witness: 
Delvis Molina

7/1/14

DEPARTMENTAL INSPECTION REPORT
3.2% BEER (FERMENTED MALT BEVERAGE)
OR LIQUOR LICENSE

Applicant: Image Hospitality, LLC

dba: Quality Inn – Permanent Modification of Premises Request

Address: 3125 Toupal Drive

Type of License: Hotel & Restaurant

Renewal Transfer Change of Location New Special Event

FOR CONSIDERATION AT
COUNCIL MEETING DATE: July 15, 2014

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS: fire inspection must be completed
after new kitchen is built

7/1/14
Date

[Signature]
Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 6, 2014

7/1/14

DEPARTMENTAL INSPECTION REPORT
3.2% BEER (FERMENTED MALT BEVERAGE)
OR LIQUOR LICENSE

Applicant: Image Hospitality, LLC

dba: Quality Inn - Permanent Modification of Premises Request

Address: 3125 Toupal Drive

Type of License: Hotel & Restaurant

Renewal Transfer Change of Location New Special Event

FOR CONSIDERATION AT
COUNCIL MEETING DATE: July 15, 2014

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS: NEEDS a permit if he is adding
A kitchen no permit has been approved for

7-3-2014
Date

Chris S. Kelley
Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 6, 2014

7/1/14

DEPARTMENTAL INSPECTION REPORT
3.2% BEER (FERMENTED MALT BEVERAGE)
OR LIQUOR LICENSE

Applicant: Image Hospitality, LLC

dba: Quality Inn - Permanent Modification of Premises Request

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Type of License: Hotel & Restaurant

Renewal Transfer Change of Location New Special Event

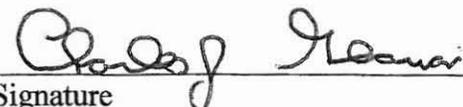
FOR CONSIDERATION AT
COUNCIL MEETING DATE: July 15, 2014

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS: Premises inspected on 7-2-14
NO ISSUES FOUND.

7-3-14
Date


Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 6, 2014

7/1/2014

**DEPARTMENTAL INSPECTION REPORT
3.2 % BEER (FERMENTED MALT BEVERAGE)
OR LIQUOR LICENSE**

Applicant's Name: Opera House Wine & Spirits, LLC

DBA: Tire Shop Wine & Spirits

Business Address: 601 W. Main Street

Type of License: Retail Liquor Store

Renewal Transfer Change of Location New Special Event

FOR CONSIDERATION AT

COUNCIL MEETING DATE: July 15, 2014

DEPARTMENT REVIEW

DEPARTMENT: FIRE / INSPECTION / POLICE / HEALTH DEPARTMENT

COMMENTS:

No reports

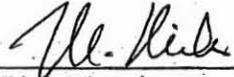
7-11-14
Date

Charles J. Glencoe
Signature

RETURN TO THE CITY CLERK'S OFFICE BEFORE: July 6, 2014

DISCLOSURE STATEMENT

I, Michelle Miles, hereby state and affirm that I am a member of Opera House Wine & Spirits, LLC, a Colorado limited liability company formed on February 22, 2010, whose principal office address is 601 W. Main Street, Trinidad, Colorado, 81082; that said limited liability company owns and operates Tire Shop Wine & Spirits, a retail liquor store licensed entity, licensed under Title 12, Articles 46 or 47, CRS 1973, as amended of the State of Colorado and under Chapter 3 of the Municipal Code of the City of Trinidad, located at 601 W. Main Street, in the City of Trinidad, County of Las Animas, State of Colorado; that I hold a 99% interest in Opera House Wine & Spirits, LLC; and, that I am able to act independently upon liquor licensing matters that come before the Trinidad City Council, the local liquor licensing authority, of which I am a member.


Michelle Miles
12/4/12
Date

DISCLOSURE STATEMENT

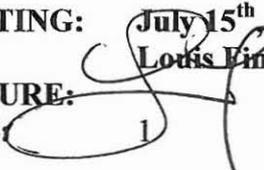
I, Liz Torres, hereby state and affirm that I am a member of Ristras Restaurant and Cantina, LLC, a Colorado limited liability company formed on February 13, 2014, whose principal office address is 516 Elm Street, Trinidad, Colorado, 81082; that said limited liability company owns and operates Ristras Restaurant and Cantina, a hotel and restaurant licensed entity, licensed under Title 12, Articles 46 or 47, CRS 1973, as amended of the State of Colorado and under Chapter 3 of the Municipal Code of the City of Trinidad, located at 516 Elm Street, in the City of Trinidad, County of Las Animas, State of Colorado; that I hold a 34% interest in Ristras Restaurant and Cantina, LLC; and, that I am able to act independently upon liquor licensing matters that come before the Trinidad City Council, the local liquor licensing authority, of which I am a member.


Liz Torres
4.8.14
Date



CITY OF TRINIDAD, COLORADO
1876

COUNCIL COMMUNICATION

CITY COUNCIL MEETING: July 15th 2014
PREPARED BY: Louis Fineberg
DEPT. HEAD SIGNATURE: 
OF ATTACHMENTS: 1

SUBJECT: Contract Amendment for SHF Grant - Monument Lake Fish Hatchery & Zoo Construction Documents (2013-M2-030)

PRESENTER: Louis Fineberg, Planning Director

RECOMMENDED CITY COUNCIL ACTION: Council should approve the contract amendment as presented.

SUMMARY STATEMENT:

The contract amendment is to document approval of the use of \$800 in funding from the contingency line item for additional expenses incurred for the nomination process.

EXPENDITURE REQUIRED: The City will be responsible for 30% of the required contingency amount of \$800, or \$240.

SOURCE OF FUNDS: NA.

POLICY ISSUE: Should the City of Trinidad approve the use of the contingency funds?

ALTERNATIVE: The City of Trinidad could decide not utilize the contingency funding.



HISTORY Colorado

June 9, 2014

Mr. Louis Fineberg
Planning Director, City of Trinidad
135 North Animas Street
PO Box 880
Trinidad, CO 81082

RE: Project #2013-M2-030
Nomination and Construction Documents of Fish Hatchery and Zoo at Monument Lake Park
Contract Period: 4/15/2013 to 4/15/2015

Dear Mr. Fineberg:

Enclosed are three (3) copies of the Amended Contract for the above project. Read the Amended Contract carefully and call if you have any questions. **Please review the enclosed instructions (green sheet) prior to signing the contracts.**

Return the original three (3) copies of the Amended Contract to our office as soon as possible, but no later than **July 31, 2014**. Amended Contracts received after this date will be void. Be certain that each original copy of the contract amendment contains the following:

1. Original signature(s) for each party
2. Date(s) below signatures have been entered
3. Name of the signer(s) printed
4. Title of the signer(s) printed

Blank lines on the signature page will result in contracts being sent back for completion. When the Amended Contract has been fully executed an original signature copy will be sent to you for your files.

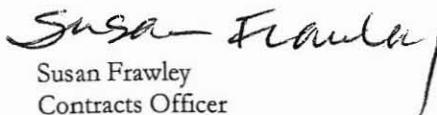
Additionally, Your SHF Historic Preservation Specialist Estella Cole has reviewed and approved your recent request to use the Contingency line item from your Project Budget. Our new system utilizes a Contingency Tracking letter and Project Budget sheet to expedite the process. Please refer to the table below to track your contingency use to date.

Approved Date	Budget Line Item	Amount Approved	Remaining Contingency ‡
June 4, 2014	A. Prepare National Register Nomination	- \$800	\$1,080

‡ Please note that the above approved Contingency use may only be applied to the corresponding budget line item. Remember that any remaining Contingency must have *prior approval* from your Historic Preservation Specialist.

If you would like technical information or assistance regarding your project, please contact your SHF Historic Preservation Specialist Estella Cole at (303) 866-2896. If you have administrative or contractual questions, please contact Grant Staff: Contracts Officer, Susan Frawley at (303) 866-3043 or Contract Specialist, Lindsay Orr at (303) 866-2887.

Sincerely,


Susan Frawley
Contracts Officer

LO:

\\chs-db\gifts\Document\09084032.doc

Approval/Cover letter for amending contracts requesting signatures

PROJECT BUDGET

TASK	AMOUNT
A. Prepare National Register Nomination	\$ 5,000
B. Prepare Design Development Drawings	\$18,920
C. Perform Materials Testing	\$ 1,950
D. Prepare Construction Documents including plans, specifications, and engineering design	\$ 9,980
E. Reimbursable expenses, including materials testing	\$ 1,970
<hr/>	
<i>Subtotal A – E</i>	<i>\$37,820</i>
F. Grant Administration (6.6% of <i>Subtotal A – E</i>) *	\$ 2,500
<hr/>	
<i>Project Subtotal **</i>	<i>\$40,320</i>
<i>Contingency ‡</i>	<i>\$ 1,880 (see tracking below)</i>

Approved Date	Budget Line Item	Amount Approved	Remaining Contingency ‡
June 4, 2014	A. Prepare National Register Nomination	- \$800	\$1,080

PROJECT TOTAL	\$42,200
Grant Request (70%)	\$ 29,540
Cash Match (30%)	\$ 12,660

* Grant Administration cannot exceed 15% of *Subtotal* amount

** Grant payments will be based off *Project Subtotal* amount. Total payments will be Grant Award percentage of *Project Subtotal* up to a maximum of the Grant Award Amount.

‡ Contingency - Must receive written approval from SHF Staff prior to use.

Travel must be within SHF/State allowable rates (\$.51/mile – mileage, \$100/night – Hotel, \$46/day – Per Diem)

Department or Agency Name
History Colorado, the Colorado Historical Society
Department or Agency Number
GCA
Routing Number
APPROVED WAIVER FORM -Amendment #37

CONTRACT AMENDMENT #2013-M2-030 A

THIS AMENDMENT, made this _____ day of _____, _____ by and between the State of Colorado for the use and benefit of the Department of Higher Education, History Colorado, the Colorado Historical Society, 1200 Broadway, Denver, Colorado 80203, hereinafter referred to as the State and/or History Colorado, and the City of Trinidad, 135 North Animas Street, Trinidad, Colorado 81082, hereinafter referred to as the Contractor,

FACTUAL RECITALS

Authority exists in the Law and Funds have been budgeted, appropriated and otherwise made available and a sufficient unencumbered balance thereof remains available for payment; and

Required approval, clearance, and coordination has been accomplished from and with appropriate agencies; and

The Parties entered into a contract dated March 12, 2013, (the "Original Contract"), for SHF Project #2013-M2-030, wherein the Contractor agreed to undertake the performance of certain work and services in consideration for which the State agreed to make certain payments; and

The Scope of Work is being revised to more adequately meet the Secretary of Interior Standards; and

The State and the Contractor both wish to bring the project to completion in order to fulfill the objectives of the Original Contract.

NOW THEREFORE, it is hereby agreed that:

1. Consideration for this amendment to the original contract, C.E. Number 13M2030, Contract Routing Number N/A Approved Waiver Form, dated March 12, 2013, consists of the payments which shall be made pursuant to this amendment and the promises and agreements herein set forth.
2. It is expressly agreed by the parties that this Amendment is supplemental to the original contract, as amended Number #2013-M2-030, dated March 12, 2013, referred to as the "original contract," which is, by this reference incorporated herein, that all terms, conditions, and provisions thereof, unless specifically modified herein, are to apply to this amendment as though they were expressly rewritten, incorporated, and included herein.
3. It is agreed the original contract is and shall be modified, altered, and changed in the following respects only:
 - a. Provision #1 of the original contract, the Scope of Work and activities are revised as reflected in the attached Revised Exhibit A: Scope of Work.
 - b. Provision #2 of the original contract, APPLICABLE STANDARDS, the Scope of Work and activities are revised as reflected in the attached Revised Exhibit A: Scope of Work.
4. The effective date of this amendment is upon approval of the State Controller or August 1, 2014, whichever is later.
5. Except for the "Special Provisions," in the event of any conflict, inconsistency, variance or contradiction between the provisions of this Amendment, and any of the provisions of the Original Contract, the provisions of this Amendment, shall in all respects supersede, govern, and control. The "Special Provisions" shall always be controlling over other provisions in the contract or amendments. The representations in the Special Provisions concerning the absence of bribery or corrupt influences and personal interest of State employees are presently reaffirmed.
6. FINANCIAL OBLIGATIONS OF THE STATE PAYABLE AFTER THE CURRENT FISCAL YEAR ARE CONTINGENT UPON FUNDS FOR THAT PURPOSE BEING APPROPRIATED, BUDGETED, AND OTHERWISE MADE AVAILABLE.

IN WITNESS WHEREOF, the parties hereto have executed this Amendment on the day first above written.

*Persons signing for Contractor hereby swear and affirm that they are authorized to act on Contractor's behalf and acknowledge that the State is relying on their representations to that effect.

CONTRACTOR:
(Grant Recipient)

STATE OF COLORADO
John W. Hickenlooper, GOVERNOR

BY: _____
Executive Director or Designee
Edward C. Nichols, President

History Colorado

Date: _____

Department of Higher Education

STATE HISTORICAL FUND

BY: _____
Director or Designee
Steve W. Turner, Vice President OAHP & SHF/Deputy SHPO

Date: _____

WAIVER CONTRACT REVIEWER

BY: _____
Contracts Officer or Designee
Susan Frawley, State Historical Fund

Date: _____

ALL CONTRACTS MUST BE APPROVED BY THE STATE CONTROLLER

CRS 24-30-202 requires that the State Controller to approve all State Contracts. This Contract is not valid until signed and dated below by the State Controller or delegate. Contractor is not authorized to begin performance until such time. If Contractor begins performing prior thereto, the State of Colorado is not obligated to pay Contractor for such performances or for any goods and/or services provided hereunder.

STATE CONTROLLER
Robert Jaros, CPA, MBA, JD

BY: _____
Joseph Bell
CHS, Vice President Finance, Facilities & Regional
Museums

Date: _____

Revised, September 26, 2013
\\chs-db\gifts\Document\09083756.doc
Approval/Contract: Amendment/Scope of Work (and Time Extension)

SCOPE OF WORK

- I. **Project Purpose:** The purpose of this project is to complete and present a National Register nomination and complete Construction Documents for the Fish Hatchery and Zoo at Monument Lake Park near Trinidad, Colorado.
- II. **The Scope of Work is as follows:**
- A. Prepare National Register Nomination
1. Start-up Tasks and Fieldwork
- a. Consult with National Register staff to discuss project purpose and Scope of Work. Discuss methodology, boundary, Rural Historic Landscape elements and water structure laws and documentation required
 - b. Conduct fieldwork to describe architectural features, apparent alterations, and materials of the buildings, including significant interior features. Additionally conduct fieldwork and describe any historical archaeology and archaeological features (e.g., bridges, water structures, foundations, rock walls, etc.).
 - c. Take color digital images of the buildings, features and elements, and save as TIFF files on a CD to submit with final submission.
 - d. Conduct additional historical research into the design, construction, use of the buildings and historical archaeology resources, archaeology, and biographical information on the owners.
 - e. Conduct research with the office of the State Engineer regarding water structures
 - f. Remove the following buildings, structures and sites from the nomination:
 - Water Treatment Plant (identified as building NC4 in the previous draft nomination)
 - East Spillway and Canal (identified as structure 1 in the previous draft nomination)
 - Central Water Supply Station and Pond (identified as structure 2 in the previous draft nomination)
 - Central Canal (identified as structure 4 in the previous draft nomination)
 - Zoo Pond (identified as structure 8 in the previous draft nomination)
 - Maxwell Irrigating Ditch No. 3 (identified as structure 6 in the previous draft nomination)
 - Dam and Lake Perimeter Road (identified as structure 13 in the previous draft nomination)
 - South Entrance Gate (identified as structure 14 in the previous draft nomination)
 - North Entrance Gate (identified as structure 15 in the previous draft nomination)
 - Monument Lake (man-made reservoir)
 - Site: Fish Cleaning Station Foundation ((identified as site NC1 in the previous draft nomination)

2. Prepare Nomination and Consult with OAHP/History Colorado National Register Staff
 - a. Complete forms, including architectural, historical archaeology, and archaeology descriptions, historical backgrounds, discussions of buildings' significance, bibliographies, sketches and USGS location maps
 - b. Consult with representative OAHP/History Colorado to discuss the buildings' significance and relevant NRHP criteria; schedule a potential site visit with National Register staff
 - c. Submit forms for review and comment from both OAHP/History Colorado National Register staff and City of Trinidad
 3. Revise and Submit Final Nomination for State Review Board Meeting
 - a. Produce final nomination packets with nomination forms
 - b. Submit two sets of 4"x 6" black and white photographic prints printed on archival paper.
 - c. Submit an annotated USGS map.
 - d. Provide findings from research with the office of the State Engineer regarding water structures
 - e. Submit an archival CD-ROM with color TIFF image files
 - f. Submit CD-ROM with MS Word version of the nomination
 - g. Provide a copy of the proof of ownership from the assessor's office
 4. Present and Submit Final Nomination
 - a. Attend State Review Board meeting and address any questions regarding the nomination
 - b. Complete any needed revisions to the nomination.
 - c. Provide final version of the nomination narrative to the History Colorado National Register staff professionals.
- B. Prepare Design Development Drawings
1. Perform existing condition fieldwork, discovery, materials sampling, necessary consultations
 2. Complete discovery excavation
 3. Perform archaeological monitoring related to excavation
 4. Complete aquaculture consultation related to hatchery recommissioning
- C. Perform Materials Testing
- D. Prepare Construction Documents including plans, specifications, and engineering design for the following:
1. Roof reconstruction for the IWL (Issac Walton League) stone building
 - a. Restore/replicate vigas
 - b. Restore/replicate sheathing
 - c. Install new roofing and related flashings and detailing
 2. Masonry restoration; window and door restoration, reconstruction, and rehabilitation; and rehabilitation of interior finishes for the IWL (Issac Walton League) stone building
 - a. Restore and reconstruct windows

- b. Restore, reconstruct, and rehabilitate doors
- c. Remove non-historic deteriorated interior finishes and rehabilitate the interior
- 3. Restoration, reconstruction, and rehabilitation for the adobe fish hatchery building
 - a. Reconstruction of adobe that is missing or deteriorated beyond repair, including missing adobe of north elevation
 - b. Restoration of existing adobe and stucco finish
 - c. Rehabilitation of east large chimney and adjacent walls
- 4. Restoration of positive drainage away from buildings
- 5. Restoration and preservation of all fish hatchery features, including raceways, runways, ponds, and spillways
- 6. Remediation of damaging invasive vegetation

H:\Contracts\2013\13M2030 Exhibit A_revised 6.9.14.docx



COUNCIL COMMUNICATION

8e

CITY COUNCIL MEETING: July 15, 2014
PREPARED BY: Audra Garrett, City Clerk
DEPT. HEAD SIGNATURE: *Audra Garrett*
OF ATTACHMENTS: 1

SUBJECT: Appointment of Acting City Manager

PRESENTER:

RECOMMENDED CITY COUNCIL ACTION: Select an appointee for up to 180 days

SUMMARY STATEMENT: N/A

EXPENDITURE REQUIRED: No

SOURCE OF FUNDS: N/A

POLICY ISSUE: This is a requirement of Section 6.3 of the Home Rule Charter

ALTERNATIVE: N/A

BACKGROUND INFORMATION:

- Section 6.3 of the Home Rule Charter states that in the event the position of City Manager becomes vacant, the City Council may appoint an acting City Manager for not more than 180 days.

8e

CHAPTER VI

MANAGER

City Manager

- 6.1 **Appointment, Qualifications, Compensation, Service.** The Council shall appoint a City Manager, by a majority vote of the City Council and fix his/her compensation. The City Manager shall be chosen on the basis of his/her executive and administrative qualifications with special consideration given to experience and knowledge.
- 6.2 **Removal of the City Manager.** The City Manager shall be removable at the pleasure of the Council by a majority vote of the City Council. Before the Manager may be removed he/she shall, if he/she desires, be given a written statement of the reasons alleged for his/her removal and the right to be heard publicly thereon at a meeting of the Council prior to the final vote on the question of his/her removal.
- 6.3 **Acting City Manager.** The City Manager shall designate, with consent and confirmation of Council, immediately upon his/her appointment a qualified administrative City employee to perform his/her duties during his/her temporary absence or disability. Such designation shall be made by letter and filed with the City Clerk. In case the City Manager fails to make such a designation, the City Council may, by resolution, appoint a qualified administrative City employee to perform the duties of City Manager during the absence of the City Manager. In the event
→ the position of City Manager becomes vacant, the City

Council may appoint an acting City Manager for not more than one hundred and eighty (180) days.

- 6.4 **Annual Evaluation.** The City Council shall, annually, evaluate the professional performance of the City Manager. The procedure for such evaluation of the City Manager shall be at City Council's discretion, except that the Council shall give the public the opportunity to provide written comment. The written evaluation of the City Manager shall not be made public. The City Council shall advise the City Manager of the criteria being used for the evaluation.
- 6.5 **Powers and Duties of the City Manager.** The City Manager shall be the chief administrative officer of the City. He/she shall be responsible to the Council for all City affairs placed in his/her charge by this Charter, the City Council, or by law. He/she shall have the following powers and duties:
- (a) Be responsible for the enforcement of the laws and ordinances for the City;
 - (b) Hire, suspend, transfer and remove City employees for cause, except as otherwise provided in this Charter;
 - (c) Make appointments on the basis of executive and administrative ability, training and experience related to the work which they are to perform;
 - (d) Cause a proposed budget to be prepared annually and submit it to the Council and be responsible for the administration of the budget after



COUNCIL COMMUNICATION

CITY COUNCIL MEETING: July 15, 2014
PREPARED BY: Audra Garrett, City Clerk
DEPT. HEAD SIGNATURE: 
OF ATTACHMENTS: 1

SUBJECT: Appointment of Director of Emergency Management

PRESENTER: Audra Garrett, City Clerk

RECOMMENDED CITY COUNCIL ACTION: Select an appointee to carry out the requirements of the Charter

SUMMARY STATEMENT: N/A

EXPENDITURE REQUIRED: No

SOURCE OF FUNDS: N/A

POLICY ISSUE: This is a requirement of Section 12.4 of the Home Rule Charter

ALTERNATIVE: N/A

BACKGROUND INFORMATION:

- Section 12.4 of the Home Rule Charter requires City Council to appoint a Director of Emergency Management for the City.

preceding the election at which the vote is offered shall have paid a property tax on property in the City of Trinidad.

(m) Qualified Elector. A resident of the City who is qualified to vote under the Constitution and Statutes of the State of Colorado.

(n) Regular Election. The municipal election held every two (2) years at which candidates for elective offices of the City are voted upon.

(o) Shall. Construed as mandatory.

(p) Statutes. The applicable laws of the State of Colorado as they now exist or as they may be amended, changed, repealed or otherwise modified by legal procedure.

12.3 **Intergovernmental Agreements.** The Council by majority vote may join with or participate in formation of associations, authorities, or other legal entities, and enter into joint exercise of powers, agreements, or other cooperative arrangements with other governmental units of every kind and character for the joint use of buildings, equipment and facilities, or for the furnishing, purchasing, or receiving commodities, electricity, water, gas, other products of every kind and character, or services, and may commit financial, property, and personnel resources under the terms of any such arrangement.

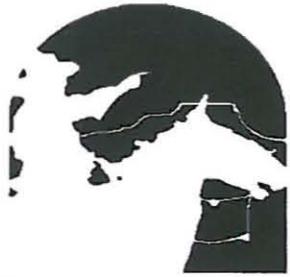
12.4 **Emergency Preparedness.** The Council shall appoint a Director of Emergency Management for the City of Trinidad. The Director shall prepare, at the direction

of Council, a Local Emergency Operations Plan. The plan shall follow the Model Operations Plan as provided by the Department of Local Affairs, Office of Emergency Management. This plan shall be promulgated within one year of adoption of this Charter. Upon promulgation, the City shall have the authority to incur indebtedness or borrow money in the event of a declared disaster as specified by the Local Emergency Operations Plan.

12.5 **Residency Requirement.** The City Council may establish residency requirements for officers and employees of the City.

12.6 **Rights to Organize and Bargain Collectively.** All permanent/fulltime employees in the service of the City of Trinidad, with the exception of those in supervisory positions, shall have the right to bargain collectively with the City of Trinidad and to be represented by an employee organization in such collective bargaining respecting wages, rates of pay, hours, benefits, grievance and disciplinary procedures which may result in arbitration, working conditions and all other terms and conditions of employment, except that employees in the service of the City of Trinidad shall not be permitted to bargain in regard to disciplinary measures and the application thereof to individual employees, provided that the application thereof to individual employees may be grieved according to the grievance procedures contained in a collective bargaining agreement. Both parties will bargain in good faith.

12.7 **Economic Development.** The Council shall encourage economic development by providing innovative,



CITY OF TRINIDAD, COLORADO
1876

COUNCIL COMMUNICATION

CITY COUNCIL MEETING: July 15, 2014
PREPARED BY: Audra Garrett, City Clerk
DEPT. HEAD SIGNATURE: *Audra Garrett*
OF ATTACHMENTS: 1

SUBJECT: Letter of Support for a CNG Fueling Station in Trinidad

PRESENTER: Audra Garrett, City Clerk

RECOMMENDED CITY COUNCIL ACTION: Approve the letter of support to accompany a grant application that is due July 24th to the Colorado Energy Office.

SUMMARY STATEMENT: N/A

EXPENDITURE REQUIRED: Yes. The City had to retain a specialized engineer to provide a modeling of our gas system. However, the model will be useful for the City to have. Also, at some point when the fueling station is established, they hope to see the City convert some of our fleet to CNG.

SOURCE OF FUNDS: Gas Fund.

POLICY ISSUE: N/A

ALTERNATIVE:

BACKGROUND INFORMATION:

- As Council was told by County Commissioner Mack Loudon and COG Executive Director Pete Frasier, this project has been in the works for some time.
- They are nearing a grant submission deadline of July 24, 2014.
- Staff will work towards providing them with the information necessary to submit the grant application.



CITY of TRINIDAD

P. O. Box 880
TRINIDAD, COLORADO 81082
TELEPHONE (719) 846-9843
FAX NO. (719) 846-4140

July 9, 2014

Mr. Norman Herrera
Sparq Natural Gas, LLC
3555 Northwest 58th Street
Suite 625 West
Oklahoma City, OK 73112

Support Letter - CNG Fueling: Trinidad, Colorado

Dear Mr. Herrera:

The City of Trinidad is pleased to offer this Letter of Support to Sparq Natural Gas, LLC ("Sparq") and look forward to the opportunity for Sparq to provide compressed natural gas ("CNG") fueling services to the City's fleet vehicles. In total, the City of Trinidad owns and/or intends to deploy an estimated 3 fleet vehicles which can be fueled with CNG and desire a reliable fueling vendor that can make CNG available as we move forward to increase the number of vehicles in our fleet that can be fueled with CNG.

Sparq Natural Gas is an experienced operator, and the City of Trinidad believes Sparq has the requisite capabilities to provide CNG in our area allowing the City as well as several other companies in our area consistent access to CNG. Additionally, due to the location of Trinidad on the I-25 corridor, this partnership with Sparq will make CNG available to the many tractor trailers that travel through our area daily.

The City of Trinidad would like to enter into a set of understandings with Sparq to expedite the provisioning of CNG and offers the supporting document as Exhibit A to facilitate our mutual requirements. The City understands the environmental, energy security, and cost benefits to transitioning to compressed natural gas, and strongly supports compressed natural gas operations at the Duran Oil Company location at 9960 Santa Fe Trail, Trinidad, CO 81082.

We look forward to working with Sparq and Duran Oil on this important effort to support Colorado's leadership efforts behind the alternative Fuel Vehicle Station Grant Program administered by the Colorado Energy Office.

Sincerely,

Joseph A. Reorda
Mayor
City of Trinidad

EXHIBIT A

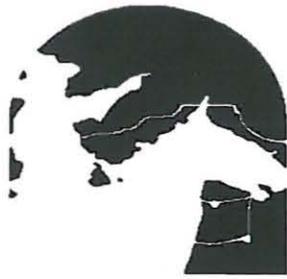
COMMITMENT OF SUPPORT

1. The City of Trinidad intends to timely replace or improve its fleet of vehicles fueled in the Trinidad, CO area with CNG and/or CNG bi-fuel vehicles in quantities noted below. The chart below reflects the gasoline usage for 3 of our fleet vehicles and we expect to purchase CNG in the quantity equivalent to these gasoline gallons commencing upon completion of construction and operational readiness of CNG fueling capabilities at Sparq's Trinidad, CO CNG location.

2. At the request of Sparq, the City may provide certain specifications to inform the construction of, and equipment related to, the CNG station, but shall not be responsible or liable for any use, performance, or warranty thereof. Sparq, at its own expense, shall be fully responsible for the construction, operation, use, and maintenance of the CNG station, including all CNG-related equipment.

Estimated Fleet Size and Fuel Demand

	<u>Year1</u>	<u>Year 2</u>	<u>Year 3</u>
Number of Vehicles	3	3	3
Fuel Volume (gasoline)	3316.5	3347.47	3354.84



CITY OF TRINIDAD, COLORADO
1876

COUNCIL COMMUNICATION

CITY COUNCIL MEETING: July 15, 2014
PREPARED BY: Audra Garrett, City Clerk
DEPT. HEAD SIGNATURE: *Audra Garrett*
OF ATTACHMENTS: 2

Sh

SUBJECT: Appeal of a decision of the Planning, Zoning and Variance Commission filed by Forever Green, LLC, Application #2014-MMC-16 and 2014-OPCO-16, Request for Conditional Use Permit to establish a Medical Marijuana Center and a Medical Marijuana Optional Premise Cultivation Operation at 3019 Toupal Drive

PRESENTER: Les Downs, City Attorney

RECOMMENDED CITY COUNCIL ACTION: Set a public hearing for Council's consideration of the request no earlier than ten days from July 11, 2014 nor more than 60 days from the same

SUMMARY STATEMENT: Due process is provided for persons aggrieved by a decision of the Planning, Zoning and Variance commission

EXPENDITURE REQUIRED: No

SOURCE OF FUNDS: N/A

POLICY ISSUE: TMC Section 14-139 sets for the procedure for appeals from the Planning, Zoning and Variance Commission.

ALTERNATIVE: None

BACKGROUND INFORMATION:

- The Planning, Zoning and Variance Commission heard the three CUP requests on Tuesday, July 8, 2014.
- Mr. Sanchez, representative of Forever Green, LLC, submitted a signed letter appealing the decision of the Planning Commission to the City Clerk's office on Friday, July 11, 2014.
- Council needs to set the matter for hearing, no earlier than July 22nd nor later than September 9, 2014

Sh



City of Trinidad
JUL 11 2014
City Clerk's Office

7/10/2014

To: City Council Trinidad, Colorado

From: Terry Sanchez, Owner Forever Green LLC

Dear Council Members,

I am requesting that the council hears my appeal pursuant to Section 14-139 of the City of Trinidad Municipal Code, related to the decision the Planning and Zoning Committee made regarding my application for a CUP to be located at 3019 Toupal Drive, Trinidad, CO 81082 on Tuesday 7/8/2014. My CUP request was denied.

I believe the P & Z Committee treated my application and me in an inconsistent manner as compared to the other applications it has reviewed. I feel that the questioning and the length of questioning I endured was biased and delivered with extreme prejudice. I was present at previous hearings and none of the applicants were subjected to the questioning and conjecture that I was made to endure. I understand that it is the responsibility of the P & Z committee to base their decisions on facts and the ability of a business location to meet with the rules and regulations adopted by the City of Trinidad. This was not the case in my situation as it became increasingly obvious that certain committee members had a personal bias. This is not only unfair; it is unprofessional and not becoming of individuals charged with making decisions of this nature.

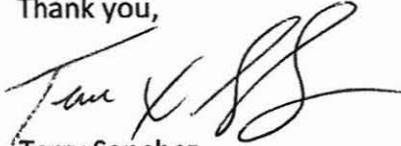
Two committee members stated why they denied my application. First, Mr. Leone stated that he was denying my application based on "safety" issues. He did not state what these issues were. I was not questioned about safety issues other than concerns for the cleanliness of the physical property I intend to lease. I answered with my plans to address this concern. All of the other applicants face the same and or similar safety concerns. They were not denied their CUP for this reason.

The second member, Mr. Winters stated that he was denying my request based on the type of business it is and its possible effects on surrounding businesses. Again I state that no other applicants, all of which are entering into this exact same business, were denied the CUP for this reason. Is it his responsibility to determine what type of business goes where? I do not believe so.

A traffic study was perseverated on ad nauseam based on hypothetical information under the guise of "environmental impact". Again I assert that whether the traffic is going to my place of business or any of the other businesses reviewed, it's a concern. I don't understand why my location was singled out so intently versus the other applicants. In all reality, my location has the most parking and ease of access as compared to other locations reviewed. Those other businesses reviewed were not met with such scrutiny to the point of harassment.

I can go on and look forward to doing so at the appeal hearing. All in all, I assert that I did not receive the same courtesy and professionalism as the other applicants in this line of business. I feel I was treated unfairly and with prejudice and discrimination. I ask that this matter be heard in a timely fashion. I implore you to review the minutes and video of this meeting.

Thank you,

A handwritten signature in black ink, appearing to read "Terry Sanchez", written over a horizontal line.

Terry Sanchez

Forever Green LLC

Owner

ARTICLE 6. BOARD OF APPEALS.

Section 14-137. City Council designated as Board of Appeals.

The City Council is designated as the Board of Appeals for the City of Trinidad pursuant to Section 8.5 of the Charter of the City of Trinidad.

Section 14-138. Powers and duties.⁴⁰

The City Council, in its capacity as the Board of Appeals, shall hear and decide appeals from decisions of the City Planning, Zoning and Variance Commission either granting or denying requests for variances and with respect to applications for a conditional use or special use permit, and from orders of the Building Inspector to repair or demolish buildings. All decisions shall be final. (Ord. 1632, eff., 6/30/00)

Section 14-139. Appeals from Planning, Zoning and Variance Commission - Procedure.⁴¹

Any person aggrieved by a decision of the Planning, Zoning and Variance Commission granting or denying a variance request, or any officer or department of the City, may appeal such decision to the City Council. Any applicant for a conditional use or special use permit within a zone district whose application has been denied by the Planning, Zoning and Variance Commission or who is dissatisfied with the decision imposing conditions on the conditional or special use by the Planning, Zoning and Variance Commission, may appeal such decision to the City Council. Such appeal must be in writing and filed with the City Clerk no later than fifteen (15) days following the issuance of the decision by the Planning, Zoning and Variance Commission. The appeal shall contain, at a minimum, a brief statement setting forth the basis for the appeal. The City Clerk shall refer the appeal to the City Council, which shall schedule a hearing to be held no less than ten (10) days nor more than sixty (60) days from the date the appeal was filed with the City Clerk. Written notice of the time and place of the hearing shall be given at least ten (10) days prior to the date of the hearing to the Appellant by the City Clerk, by causing a copy of such notice to be delivered to the Appellant personally or by mailing a copy thereof, postage prepaid, addressed to the Appellant at his/her address as shown on the appeal. The City Planner shall be served with the notice in the same manner. In the case of an appeal of a variance decision, the person who requested the variance shall also be served in the same manner. Notice of such hearing shall also be published at least ten (10) days prior to the date of the hearing. (Ord. 1632, eff., 6/30/00)

Section 14-140. Appeals from orders of Building Inspector - Procedures.

Appeals from orders of the Building Inspector to repair or demolish buildings shall be made in the manner set forth in Chapter 5 of the Uniform Code for the Abatement of Dangerous Buildings, 1994 Edition.

⁴⁰ Chapter 14, Article 6, Section 14-138 repealed and reenacted. (Ord 1632, eff., 6/30/00)

⁴¹ Chapter 14, Article 6, Section 14-139 is repealed and reenacted. (Ord 1632, eff., 6/30/00)