

Tobacco Festival Permit Application

This permit is only available for the following license types:

- Tobacco Retailer-Off Premises License
- Tobacco Retailer Indoor Age Restricted License
- Cigar-Tobacco Bar License

Initial Application – \$50.00 Processing Fee

Subsequent Festival Application - \$50.00 per festival

Note - The number of permits issued for retailers with more than ten (10) retail locations may not exceed five (5) permits per retailer calendar year, and the number of permits issued to retailers with ten (10) or fewer retail locations may not exceed five (5) permits per retailer per calendar year.

Legal Business Name (License Holder/Tobacco Festival Applicant)

Trade Name/DBA Name

License Number

License Type

Sales Tax Number

Business Phone Number

Email Address

Premises Address

City

County

State ZIP Code

Mailing Address

City

State ZIP Code

Festival Information

Festival Name

Festival Location

Date(s) of Festival

What are the hours of tobacco/nicotine products service during each festival date(s)?
(1 festival can be no more than 72 hours, not including set up and tear down)

How and where tobacco/nicotine products will be secured and stored:

When setting up for the festival?

During the festival?

After the conclusion of the festival?

List of participating businesses (Attach a separate sheet if needed)

Name

License Number

License Type

Person Responsible

Phone Number

Name

License Number

License Type

Person Responsible

Phone Number

Name

License Number

License Type

Person Responsible

Phone Number

Name

License Number

License Type

Person Responsible

Phone Number

Attach a copy of the Premises Use Authorization Letter or Lease

Security and Control Plan and Clean Indoor Air Act Attestation

I affirm that I have attached a Security and Control plan that includes designated outdoor areas where smoking may only occur pursuant to the Colorado Clean Indoor Air Act (25-14-201 C.R.S.), which has been circulated and agreed upon by all participating licensees. Required signage will be displayed at every entrance and exit to the designated smoking areas of the tobacco festival.

Applicant's Signature

Date (MM/DD/YY)

I understand that it is my responsibility, the responsibility of my agents/employees, and the responsibility of participating businesses and their agents/employees to ensure that this tobacco festival is being held in compliance with the Colorado Clean Indoor Air Act(25-14-201 C.R.S.).

Applicant's Signature

Date (MM/DD/YY)

Additional Attestations

I understand that the tobacco festival permit holder and participating businesses must not allow the sale, transfer, or use of gasoline, diesel fuel, or controlled substances on the approved tobacco festival premises.

Applicant's Signature

Date (MM/DD/YY)

I understand that alcohol may not be sold without an approved liquor license or permit on the approved tobacco festival premises.

Applicant's Signature

Date (MM/DD/YY)

I understand that the tobacco festival permit holder and participating businesses must prohibit an individual who is under twenty-one (21) years of age from taking part in the permitted tobacco festival. "Taking part in a festival" means attending a tobacco festival, entering the permitted location of a tobacco festival, making purchases at a tobacco festival, working in the festival, or using any cigarette, tobacco product, or nicotine product at a tobacco festival.

Applicant's Signature

Date (MM/DD/YY)

I affirm that I have obtained any or all of the required permits from my local licensing authority to host a tobacco festival and that all local ordinances will be adhered to in addition to the rules set forth by the Division.

Applicant's Signature

Date (MM/DD/YY)

Oath Of Applicant

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. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with all applicable laws and regulations that affect my license.

Signature

Title

Date (MM/DD/YY)

Report of The Liquor and Tobacco Enforcement Division

Signature

Title

Date (MM/DD/YY)