

PETITION CONCERNING A NEW RETAIL RECREATIONAL MARIJUANA STORE

LICENSE

Applicant:

STARBUDS COMMERCE CITY, LLC.

Trade Name:

STARBUDS

Proposed Location

5844 DAHLIA STREET

COMMERCE CITY, COLORADO 80022

Application For:

A RETAIL RECREATIONAL MARIJUANA STORE LICENSE

Public Hearing before the City of Commerce City Local Licensing Authority

Date:

December 2, 2016

Time:

1:00 P.M.

Location:

Commerce City Civic Center

7887 E. 60th Avenue – Room 2108 Commerce City, Colorado 80022

INSTRUCTIONS AND QUALIFICATIONS FOR SIGNING THIS PETITION: DO NOT SIGN THIS PETITION UNLESS:

- 1. You are at least 21 years of age.
- 2. You RESIDE within the defined neighborhood designated on the attached map.

<u>OR</u>

- 3. If you do not reside within the defined neighborhood, you are the OWNER OR MANAGER of a business within the designated neighborhood. Please see attached map.
- 4. You sign your name only. Please sign your first name or first initial, middle name or middle initial (if appropriate) and last name in the presence of the petition circulator. No individual may sign for another individual.
- 5. You have not signed another petition concerning the same application.
- 6. You have read or had the opportunity to read the petition in its entirety and understand its meaning.

PETITION TO THE LOCAL LICENSING AUTHORITY

IF YOU <u>SUPPORT</u> THIS APPLICATION FOR A RETAIL RECREATIONAL MARIJUANA STORE LICENSE BECAUSE THE PRESENT OUTLETS ARE NOT SUFFICIENT FOR YOUR NEEDS, AND IT IS YOUR DESIRE THIS LICENSE BE ISSUED, PLEASE MARK AN "X" IN THE "<u>SUPPORT</u>" COLUMN.

IF YOU <u>OPPOSE</u> THIS APPLICATION FOR A RETAIL RECREATIONAL MARIJUANA STORE LICENSE BECAUSE THE PRESENT OUTLETS ARE SUFFICIENT FOR YOUR NEEDS, AND IT IS YOUR DESIRE THIS LICENSE NOT BE ISSUED, PLEASE MARK AN "X" IN THE "<u>OPPOSE</u>" COLUMN.

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PETITION CONCERNING <u>A RETAIL RECREATIONAL MARIJUANA STORE LICENSE APPLICATION</u> APPLICANT: <u>STARBUDS COMMERCE CITY, LLC. TRADE NAME: STARBUDS</u> PROPOSED LOCATION: 5844 DAHLIA STREET, COMMERCE CITY, COLORADO 80022

The undersigned has read, or has had the oppo			tand its m	eaning.	
Signature-on top of line (First and Last Name)	Business Name	Support	Oppose	Age	Date Signed
Printed name-below line (Please use black ink)	Street Address (with suite number)				- 15
1 Juana Ortrga Manager Lowner	chipotle 5988 Dahlia St commerce City			22	11/9
Manager Owner 2.	CARLIS JR. 5998 DAHLID ST			37	11/9-
Dave Delharte Manager Manharte Marte	Rent A Center 4972 E. 62 rd Ave #BZ		/	52	11/9/16
Manager SIXCOUT MYE	Great Clips 4067 Est 624 Hores Sute A-6			47	119/6
Manager Owner	Ace Cash Express 4990 E. Wand And A4 Commerce City Co. 50000	. /		36	uplub
Manager Owner ay Gasard	People souther Hue	42		36	11/9/
Manager Hower	Work Wear 4952 E 62nd Aug AlA	/		39	1/9/14
18 1 0 1/1	6 Przza Hut 675 + 1 Parkway DR	/		28	11/9/16
MD. Slavin Manager Owner	PARK WAY CIQ. STORE GOTS Commerce cuty			43	11/9/16
Subway Sandwiches Manager Owner					
Manager , Owner Mike	Subway Sandwiches 6075 F. Parkray Dr. Commerce City 103			49	11 Ialia
Manager Owner	Board Mobile 6025 E Parkung Si			3)	11/9/16
Squire Petitioning Services, LLC	Page of	Circulato	r's Initia	ls:	7

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Esquire Petitioning Services, LLC

PROPOSED LOCATION: 5844 DAHLIA STREET, COMMERCE CITY, COLORADO 80022

	ortunity to read, the petition in its entirety and understand its meaning.						
Signature-on top of line (First and Last	D N				Date		
Name)	Business Name and	Support	Oppose	Age	Signed		
Printed name-below line	Street Address (with suite number)						
(Please use black ink)	briet radices (mili sale name.)						
1	Jack in the Box						
Jen I. Neier		/			11/9/16		
desse L Trice	- 6015 PARKWAY			32	11/9/12		
Manager Owner							
2011/1/00	Grease Monkey						
Jeff Vos	Grease Monkey 6000 Parkway			51	11/4/16		
Manager Owner	GOCO POLICE				172		
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Manager Owner							
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Manager Owner							
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Manager Owner							
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Manager Owner	4						
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Manager Owner							
12							
Manager Owner							
THE OWNER	1	1		. ,	1		

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Circulator's Initials:

CIRCULATOR AFFIDAVIT

I. Carol Johnson, being over the age of twenty-one
years and being first duly sworn upon oath, depose and state.
I was the circulator of the petition attached hereto and further assert that I
personally witnessed the placing of each signature on the attached petition. To the best of
my knowledge, each signature is the signature of the person whose name it purports to be
and each address given opposite each name is the true address of the person who signed
the petition. Additionally, every individual who signed the attached petition represented
himself or herself to be over the age of twenty-one (21) and is either a resident or the
owner or manager of a business in the neighborhood designated as the immediately
affected area. Further, every signer of the attached petition was given the opportunity to
read, or had read to them, the petition in its entirety. Finally, every signer was given the
opportunity to sign in support of, or in opposition to, the application and understood the
nature of the petition, and thereby and voluntarily signed the petition without the
employment of any promises, threats, force or inducements.
CIRCULATOR CIRCULATOR
STATE OF COLORADO COUNTY OF Arapahne SS. ALEXIS SASSE NOTARY PUBLIC STATE OF COLORADO NOTARY ID 20164032869 MY COMMISSION EXPIRES AUGUST 26, 2020
Subscribed and sworn to before me this day of November, 2016 NOTARY PUBLIC
My commission expires:

ALEXIS SASSE
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 20164032856
MY COMMISSION EXPIRES AUGUST 26, 2020