Application for Cigarette and Tobacco Products Retail License

Submit to municipal clerk.

Period Covered 07/01/2023-06/30/2024 Date of Issuance

REDACTED This must be issued in the same Legal Name of the licensee below.					5	Date of issuance	
Legal Name (corporation, limited liability company, partnership or sole proprietorship) SH Corporation						Federal Employer Identification No. (FEIN) REDACTED	
Trade or Business Name (if different than Legal Name)						Telephone Number (REDACTED	
The Dispo Business Address (Lidense Location) Business Located In						Business Telephone	
2929 N Richmond St Ste 1 City Village Town						0)574 - 3984	
Municipalit	y .	State Zif	Code	of A 11 -	Count	y _	
Appleton WI 54911				of Appleton	Ou	agamie	
Mailing Address (if different than Business Address)				Municipality	State	Zip G ode	
Organiza	ntion (check o	ne)			<u> </u>		
	Proprietor	•	Corporation – Ente	r date incorporated: _	2-3-22		
Partr	nership			you registered to do b		sin? Yes No	
Othe	r (describe)	•			A DEL AND MARKET		
Yes	Yes No 1. Does the applicant understand that they must purchase cigarettes only from distributors or jobbers who hold a permit with the Wisconsin Department of Revenue?						
Yes Yes	☐ No	 Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-266-6701. See application form CTP- 129, revenue.wi.gov/forms/excise/ctp-129.pdf.) 					
Yes	☐ No		Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products from another retailer, including transferring existing stock to a new owner?				
Yes Yes	☐ No		Does the applicant understand that they must provide employees with tobacco sales training approved by the Wisconsin Department of Health Services? (https://witobaccocheck.org)				
X Yes	☐ No		Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products and nicotine products to minors (including electronic cigarettes containing nicotine)?				
Yes	☐ No	6. Does the applica	Does the applicant understand that they may not sell single cigarettes?				
Yes	☐ No	7. Does the applicant understand that cigarette and tobacco products invoices must be kept on the licensed premises for two years from the date of the invoice and be available for inspection by the Wisconsin Department of Revenue/law enforcement and that failure to comply can result in criminal penalties, including loss of cigarettes/tobacco products?					
Yes	☐ No	8. Does the applicant understand that only cigarettes and roll-your-own (RYO) tobacco products listed on the Wisconsin Department of Justice's website labeled "Directory of Certified Tobacco Manufacturers and Brands" at www.doj.state.wi.us/dls/tobacco-directory may be sold in Wisconsin?					
Cigarette	es / Tobacco	will be sold	over counter	through ver	nding machine	both	
been trut	thfully answe		owledge of the ap	plicant. Applicant agre	es to operate this	ch of the above questions has business according to law and r.	
						ermit inspection. Such refusal erially false information on this	

(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

application may be required to forfeit not more than \$1,000.