Form AB-200

Alcohol Beverage License Application

32	For Municipal Use Only
٨	funicipality Appleton
ī	Icense Period

License(s) Requested: (up to two boxes may b	e checked)			Fees	
☐ Class "A" Beer	Class "B" Beer \$ _\C	10	License Fe	ees	\$ 600
☐ "Class A" Liquor	"Class B" Liquor \$ _5	00	Backgrour	d Check Fee	\$ 7
Class A" Liquor (cider only) \$	Reserve "Class B" Liquor \$		Publication	r Fee	\$ 60
Class C" Liquor (wine only) \$	Deposit \$50		Total Fees	5	\$667
Part A: Premises/Business Information 1. Legal Business Name (individual name if sole prop	rietorship)				
Nin a Appleton //	(ping. Cheng)				
2. Business Trade Name of DBA Ninja Sus	shi & Hibachi	•			
3. FEIN	4. 99/300//3//		ermit Number + 936-		
5. Entity Type (check one) Sole Proprietor Partnership	Limited Liability Company	, □ C	orporation	/ ☐ Nonpro	ofit Organization
6. State of Organization	7. Date of Organization			n DFI Registrati	
9. Premises Address 425 E LOTA IN					
10. City Appleton			11. State	12. Zip Code	
	14. Governing Municipality: X City of: ADD (++++++++++++++++++++++++++++++++++	Town	ı 🗌 Village	15. Alderman	IC DISTRICT
16. Premises Phone	of: Appleton 17. Premises Email Info (Anin) Appleto	n .Con	18. We	bsite	
19. Premises Description - Describe the building or are kept. Describe all rooms within the building, only on the premises described in this application.	ouildings where alcohol beverages ar ncluding living quarters. Authorized a	e produce Icohol bev	d, sold, store erage activiti	es and storage	, and related records of records may occur
The bet Pinning a About 4000/st.	rea/ kitchen/c	mle	r/FY	rever/p	eti o
20. Mailing Address (if different from premises addre	in total			/	The state of the s
21. City			22. State	23. Zip Code	;
Part B: Questions					
া Has the business (sole proprietorship, partner violating federal or state laws or local ordina	nces? Exclude traffic offenses un	or corpora iless relat	ation) been ted to alcoh	convicted of ol beverages.	☐ Yes X No
If yes, list the details of violation below. Attack	ch additional sheets if necessary.			rial Date	
Fam/Oldiustice Ainisten	Location			nai bata	
Penalty Imposed		Was sei	ntence com	pleted?	Yes No
Law/Ordinance Violated	Location]	rial Date	
Penalty Imposed		Was ser	ntence com	pleted?	Yes No

2. Are charges for any offenses pending a beverages.	against the business? Ex	clude traffic of	ffenses unle	ess related to alco	ohol 🔲 Yes	Ø №
If yes, describe the nature and status o	of pending charges using	the space bel	ow. Attach	additional sheets	as needed.	
3. Is the applicant business or any of its	officers, directors, memi	oers, agent, er	mplovees, o	owners, or other	related	
individuals or entities a restricted inve- lf yes, provide the name of the restrict	stor with any interest in	an alcohol bev	verage proc	lucer or distribute	or? Yes	⊠′No
				,		
Is the applicant business owned by and if yes, provide the name(s) and FEIN(s)				tíonal sheets as r	needed.	Ø, №
4a. Name of Business Entity		4b. Business	Entity FEIN			
5. Have the partners, agent, or sole propr	rietor satisfied the respor	sible beverag	e server tra	inina requiremen	t for	
this license period? Submit proof of con	mpletion			.	····· 🔀 Yes	☐ No
6. Is the applicant business indebted to a 7. Does the applicant business owe past		·=	*	•		M No
''	aue municipal property i	axes, assessii	nents, or ou	let lees f	····· ites	iΣ/ 140
Part C: Individual Information List the name, title, and phone number for each	h person or entity holding th	e following posi	tions in the a	policant business o	r husinesses liste	l in Part R
Question 4: sole proprietor, all officers, director managers, and agent of a limited liability comp	s, and agent of a corporation	on or nonprofit o				
Include Form AB-100 for each person listed be	low. Corporations and LLC	s must appoint a	an agent by i	ncluding Form AB-	101.	
Last Name	First Name	1	Title		Phone	
Chens	pine	C	XV91er	1	-1	_
)		•			_
11.00 100,000 100,000						
Part D: Attestation		L				
One of the following must sign and attest	to this application:	1-12-14-12-14-14-14-14-14-14-14-14-14-14-14-14-14-	NEW WOODS IN THE	SAN 60 St. Of Bull 1957 G. St.	(1/123-4210-1111-147E-1111-1440	TO THE DESCRIPTION OF THE PARTY.
• sole proprietor • one genera	al partner of a partnership	one •	corporate o	officer • one	member of an l	LC
READ CAREFULLY BEFORE SIGNING: Und						
rights and responsibilities conferred by the lice according to the law, including but not limited	ense(s), if granted, will not	be assigned to	another indiv	/idual or entity. I as	gree to operate th	is business
to any portion of a licensed premises during in	nspection will be deemed a	refusal to allow	inspection.	Such refusal is a m	ilsdemeanor and g	grounds for
revocation of this license. I understand that a understand that I may be prosecuted for submingly provides materially false information on	nitting false statements and	affidavits in con	nection with	this application, an	d that any person	
Last Name C Last N		t Name () _'	h Da	1 \$1,000 II CONVICTE	M.I	
(NOTO)		120				
Title	Email				Phone	
Signature			Date	1 1 at		
	$\sim\sim$	CC-coverage Back-AS	1 5/	1/005		1788 SAVINGO GO NACIOS
Part E: For Clerk Use Only Date Application Was Filed With Clerk Licen	se Number	100	Date Lin	ense Granted	Date License is	sued
5/2/25			2000 210		22.5 2.007.00 10	
Signature of Clerk/Deputy Clerk				Date Provisional I	lcense Issued (If	applicable)

Form AB-101

Alcohol Beverage Appointment of Agent

Date		
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12	12125	

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Agent Type (check one)		untained Benner bit		
Original (no fee)	Successor (\$10 fee for m	unicipal licensees only)		
Part A: Business Infor	mation			
1. Legal Business Name (Indiv				
pany, Che	ng .			
2. Business Trade Name or Di	Minja sushi	& Hibachi		
3. Entity Type (check one)	☐ Limited Liability Company		☐ Nonprofit Organization	
4, Alcohol Beverage Business Municipal Retail L	icense		ate Permit or Municipal Retail Licens	e Number
6. Describe the reason for app	pointing a successor agent, if successo	r is checked above.		
l				
Part B: Agent Informa	ation			
1. Last Name		2. First Name Dino	3.	M.I.
15	<u> </u>		5, Phone	
4. Email			1	
6. Home Address	1 / 1/0 //			_
4535	watershed Way	lo ou la la 7th Codo	10. Data of Birth	
7. City Anni otor	(8. State 9. Zip Code	3	
11. Drivers License/State ID	Number		cense/State ID State or ssuance	-
·				
	•			
Part C: Agent Questi			47 ×	
Have you satisfied the Submit proof of complete.	responsible beverage server train etion.	ning requirement?	X Ye:	s No
2. Have you completed F Form AB-300, Alcohol	Form AB-100, Alcohol Beverage In Beverage Personal Questionnaire	dividual Questionnaire (license e (permittee)?	ee) or 	s 🗌 No
3. Have you been a Wisc See instructions for ex	consin resident for at least 90 cont ceptions.	inuous days?	Ye	s 🗌 No
			Con	ntinued →

Part D: Business Attestation	There is a second				
READ CAREFULLY BEFORE SIGNING: I, the Undersig corporation, nonprofit organization, or limited liability corporation, nonprofit organization, or limited liability corporates activities on such premises. I certify that I amended to be understand that I may be prosecuted for submitting false any person who knowingly provides materially false informif convicted.	npany with fu authorized by ent, I rescind a e statements	Il authority and co the above-named all previous agent a and affidavits in co	ntrol of the presentity to author appointments on meetion with	remises and o orize this indi for this premi o this applicat	of all alcohol ividual to act ses. Further, ion, and that
Last Name Cheney	First Name	Pine			M.I.
Title SWAREY Email		•		Phone	
Signature			Date	12025	
			-91-1		·
Part El: Agent Attestation					
READ CAREFULLY BEFORE SIGNING: I, the Agent, her nonprofit organization, or limited liability company and as on the premises for the above-named business. I further and affidavits in connection with this application, and that application may be required to forfeit not more than \$1,000.	sume full resp r understand l any person w	onsibility for the co that I may be pros tho knowingly prov	onduct of all a secuted for su	ilcohol bevera	ige activities
Last Name Cheng	First Name	Ding			M.I.
Signature	•		Date	12026	4
			,	1	



City of Appleton

Alcohol License Questionnaire

4	Applicant Name: ping, Cheng
2.	Business Name: Ninja Appleton LLC
	NOTE: A copy of a business's Wisconsin Department of Revenue Seller's Permit is required to be submitted with an alcohol license application.
3.	Business Address: 4025 E Loma Ca, Appleton, WI 54915
4.	Primary Business Activity: Restaurant Tavern/Night Club/Wine Bar Painting/Craft Studio Other (describe)
5.	Select the type of business premises: Existing Building
	this location: Restaurant
	If existing building, will there be construction or renovations? ☐ Yes ☒ No
	If yes, explain
6.	Do you lease or own the building? Lease Own NOTE: Proof of control of premises is required to be submitted with an alcohol license application. Acceptable documents include a lease or purchase agreement. What is the date of purchase or the date the lease began?
7.	Did you purchase the business from another individual or entity? ☑ Yes ☐ No
	If yes, is your acquisition of the business based upon an "arm's length transaction"? An arm's length transaction is defined as an open market sale in which the owner is willing but not obligated to sell, and the buyer is willing, but not obligated to buy. Yes No
	If yes, are you related to the former business owner/licensee by blood, adoption, or marriage? ☐ Yes ☒ No.

o. And	cipated date of opening?	Ang 1st
	your business sell or serve	
Yes 🛚	If yes, please describe the	type of food offerings available Sush, Hibachi
No T	7	
NO _	_	
10. Fill in		erational details listed below. Attaching a copy of the floor plan
on oour	Seating Capacity:	Inside: 300
		Outside:
	Operating Days/Hours:	
		Outside:Same
	Employees/Staff (per shi	ft/day) Number of Personnel:
	Approximate <u>floor buildir</u>	ng area of the premises to be licensed: <u>6500</u> sq. ft.
	Approximate outdoor are	a of the premises to be licensed:sq. ft.
	Summarize the day-to-da	y operations of the business in the space below:
	~ -	
	Control of the Contro	
	No.	
		the second and the fall of the factors of the second th
		ding materially false information on this or any application for a 5 is subject to civil, monetary, and license penalties. I understand th