OAK#68

Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

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All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquid must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official organization or one member/manager of a limited liability company and the recommendation made by the proper local official organization or one member/manager of a limited liability company and the recommendation made by the proper local official organization or one member/manager of a limited liability company and the recommendation made by the proper local official organization or one member/manager of a limited liability company and the recommendation made by the proper local official organization or one member/manager of a limited liability company and the recommendation made by the proper local official organization or one member/manager of a limited liability company and the recommendation made by the proper local official organization or one member/manager of a limited liability company and the recommendation made by the proper local official organization or one member/manager of a limited liability company and the recommendation made by the proper local official organization or one member/manager or organization or one member or organization organization or organization or organization organiza
Town
To the governing body of: Village of APPLETON County of CALUMET
City
The undersigned duly authorized officer/member/manager of ALDI INC (WISCONSIN)
(Registered Name of Corporation / Organization or Limited Liability Company)
a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as
ALDI #68 (Trade Name)
located at 116 N LINWOOD AVE., APPLETON WI 54914
located at
appoints CHRIS RYAN SUBERT
(Name of Appointed Agent)
W8426 COUNTY RD F SHIOCTON, WI 54170
(Home Address of Appointed Agent)
to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?
Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).
Is applicant agent subject to completion of the responsible beverage server training course?
How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 19 YEARS
Place of residence last year W8426 COUNTY RD F SHIOCTON, WI 54170
For: ALDI, INC (WISCONSIN)
(Name of Corporation / Organizațion / Limited Liability Company)
By:
(Signature of Office / Member / Manager)
Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.
ACCEPTANCE BY AGENT
CHRIS RYAN SUBERT
I, CHRIS RIAN SUBERT , hereby accept this appointment as agent for the hereby accept
corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcoholographic conducted on the premises for the corporation/organization/limited liability company.
11612023 Agent's age
(Signature of Agent) (Gate)
W8426 COUNTY RD F SHIOCTON, WI 54170 (Home Address of Agent) Date of birth
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APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)
I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available informatio the character, record and reputation are satisfactory and I have no objection to the agent appointed.
Approved on by Title
Approved on by Title (Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chie