Original Alcohol Beverage Retail License Application

Submit to municipal clerk.

Applicant's WI Seller's Permit No.:	FEIN Number:
456-1030084451-02	47-2969115

LICENSE REQUESTED ▶	
TYPE	FEE
☐ Class A beer	$
☑ Class B beer	$ 100.00 50.
☐ Class C wine	$
☐ Class A liquor	$
☐ Class A liquor (cider only)	$ N/A
☑ Class B liquor	$ 500.00 50.
☐ Reserve Class B liquor	$
☐ Class B (wine only) winery	$
Publication fee	$ 60.00
TOTAL FEE	$ 660.00 160.

For the license period beginning MAY 6 20 2018 ;
ending _____ 20 _____

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☑ City of } APPLETON

County of OUTGAMIE Aldermanic Dist. No. _____ (if required by ordinance)

1. The named ☐ INDIVIDUAL ☐ PARTNERSHIP ☑ LIMITED LIABILITY COMPANY ☐ CORPORATION/NONPROFIT ORGANIZATION
hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): ▶ BARK ENTERTAINMENT LLC.

An **"Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company.** List the name, title, and place of residence of each person.

	Title	Name (Last, First, M.I.)	Home Address	Post Office & Zip Code
President/Member	MEMBER	NORWEST, ADAM G	1309 27TH ST CT NW	GIG HARBOR, WA 98335
Vice President/Member	MEMBER	NORWEST, LOREN B	1309 27TH ST CT NW	GIG HARBOR, WA 98335
Secretary/Member	MEMBER	FANDT, KEVIN R	8511 E BROAD LANE,	SPOKANE WA 99212
Treasurer/Member	MEMBER	FANDT. RENEE A	8511 E BROAD LANE,	SPOKANE WA 99212
Agent ▶ Hailee Sturm			800 N Fernmeadow Dr	Appleton, WI 54915
Directors/Managers				

3. Trade Name ▶ SKYLINE COMEDY CLUB Business Phone Number 920-734-5653 EXT 3
4. Address of Premises ▶ 1004 S. OLDE ONEIDA ST., 3RD FLR Post Office & Zip Code ▶ APPLETON, WI 54915
5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? ☐ Yes ☑ No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? ☐ Yes ☑ No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? ☐ Yes ☑ No
8. (a) **Corporate/limited liability company applicants only:** Insert state WASHINGTON and date 2015 of registration.
   (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? ☐ Yes ☑ No
   (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? ☐ Yes ☑ No
   (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)
9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 3RD FLOOR, SHOWROOM AND LOBBY WITH STORAGE ROOM
10. Legal description (omit if street address is given above): COMEDY CLUB
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? ☑ Yes ☐ No
    (b) If yes, under what name was license issued? SKYLINE PRODUCTIONS INC. DBA SKYLINE COMEDY CAFE
12. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-800-937-8864] ☑ Yes ☐ No
13. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☑ Yes ☐ No
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☑ Yes ☐ No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME
this 19 day of March 20 18

Cathy Bolwerk
(Clerk/Notary Public)

My commission expires _____

CATHY BOLWERK NOTARY PUBLIC STATE OF WISCONSIN My Commission Expires January 23, 2020

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

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

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk 3-19-18	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	