Original Alcohol Beverage Retail License Application			Applicant's W Seller's Permit No.: FEIN	
Submit to municipal clerk.			LICENSE REQUESTED	23740178
For the license period beginning	na //	20 18 :	TYPE	FEE
For the license period beginning ending	iq —	20	Class A beer	\$
			Class B beer	\$ 160.
	Town of	1-1-	Class C wine	\$
TO THE GOVERNING BODY of	the: Utiliage of	pleton	Class A liquor	\$
•	City of	•	Class A liquor (cider only)	\$ N/A
County of Wha gan	ທິCAldermanic Dist. No	(if required by ordinance)	☐ Class B liquor ☐ Reserve Class B liquor	\$
<b>_U</b>			Class B (wine only) winery	
1. The named Individual		Limited Liability Company	Publication fee	\$
Corporation / Nonprofit Organization hereby makes application for the alcohol beverage license(s) checked above.			TOTAL FEE	\$
• • • • • • • • • • • • • • • • • • • •	• ,,			<u> </u>
2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):    Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name):   Name (individual/partners give last name, first, middle; corporations/limi				
An "Auxiliary Questionnaire,'	' Form AT-103, must be complet	ed and attached to this application	on by each individual applicant, b	y each member of a
	cer, director and agent of a corposite, title, and place of residence of		, and by each member/manager a	nd agent of a limited
Tit	le Name (La:	st. First. M.I.)	me Address Post	Office & Zip Code
President/Member	er Son	a Nalee	me Address Post 3131N. Duricee S	+ 5491
Vice President/Member		, <del></del>	· · · · · · · · · · · · · · · · · · ·	
Agent <b>&gt;</b>				
Directors/Managers				
3. Trade Name ▶ Bung	LOK POST	Busines	s Phone Number <u>920-30</u>	04-0013
4. Address of Premises ▶ 180	M S. Lawe S	Post Off	ice & Zip Code > 5491	5
5. Is individual, partners or agent	of corporation/limited liability comp	any subject to completion of the res		•
			of this business?	
			late of registration.	
			ability company?	
		gent or limited liability company, or		
agent hold any interest in a	ny other alcohol beverage license	or permit in Wisconsin?		Yes No-
(NOTE: All applicants explain fu	ılly on reverse side of this form eve	ery YES answer in sections 5, 6, 7 a	and 8 above.)	
Premises description: Describe     all rooms including living quarte     may be sold and stored only on	ers if used for the sales service o		hol beverages and records. (Alcoho	l beverages
10. Legal description (omit if street				
11. (a) Was this premises licensed		g the past license year?		. ☐ Yes ☑ No
(b) If yes, under what name wa				
12. Does the applicant understand Tobacco Tax and Trade Bureau			al government, Alcohol and ne 1-877-882-3277]	. Yes □ No
13. Does the applicant understand	they must hold a Wisconsin Seller	's Permit?	•	
				. ✓ Yes □ No
14. Does the applicant understand	that they must purchase alcohol be	everages only from Wisconsin whole	esalers, breweries and brewpubs?.	. Yes No
READ CAREFULLY BEFORE SIGNING knowledge of the signer. Any person who this business according to law and that the a partnership applicant must sign; one of during inspection will be deemed a refus	o knowingly provides materially false in the rights and responsibilities conferred orporate officer, one member/manage	formation on this application may be re d by the license(s), if granted, will not be er of Limited Liability Companies must	equired to forfeit not more than \$1,000. See assigned to another. (Individual applications) Any lack of access to any portion	Signer agrees to operate cants, or one member of a of a licensed premises
TO BE COMPLETED BY CLEDIC				
TO BE COMPLETED BY CLERK  Date received and filed with municipal clerk	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk	····
11-8-18	,		2 man arean arean oron	
Date license granted	Date license issued	License number issued		
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