ORIGINAL ALCOHOL BEVERAGE RETAIL LIC	ENSE APPLICATION	Applicant's WI Seller's Permit No.: FEIN	Number:
Submit to municipal clerk.		456 -10288 79124-02- 47 -36111511 LICENSE REQUESTED ▶	
For the license period beginning	20 ;	TYPE	FEE
For the license period beginning ending on June 30	20 😾	Class A beer	\$
		Class B beer	\$ 100
TO THE GOVERNING BODY of the: Uvillage of	- le for	Class C wine	\$ \$
City of	PICION		\$ N/A
		\$ N/A \$	
County of <u>Outagame</u> Aldermanic Dist. No. <u>I</u> (if required by ordinance)		Reserve Class B liquor	\$ 10,500.
<u> </u>	<u></u>	Class B (wine only) winery	\$
The named ☐ INDIVIDUAL ☐ PARTNERSHIP ☒ LIMITED LIABILITY COMPANY ☐ CORPORATION/NONPROFIT ORGANIZATION		Publication fee	\$
		TOTAL FEE	\$
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):			
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  Home Address  Post Office & Zip Code			
President/Member			
Vice President/MemberSecretary/Member			
Treasurer/Member			
Agent Day J Shumerth	9 Strawberry 1	ane Apoklon	10154915
Directors/Managers Joseph G Gill	Sole 12 T	ideuxter Dr.	Drmand Beach
3 Trade Name > Fox Cities Exploit up (enter Business Phone Number			
4. Address of Premises ▶ 355 W Lawrence St. Appleton Post Office & Zip Code ▶ 54911			
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?			
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant?			
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business?			
8. (a) Corporate/limited liability company applicants only: Insert state and date of registration.			
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company?			
(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?			
(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.) Legal description (omit if street address is given above):    Control   Con			
10. Legal description (omit if street address is given above):  11. (a) Was this premises licensed for the sale of liquor or beer during the past license year?			
(b) If yes, under what name was license issued?			
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5d) before beginning business? [phone 1-800-937-8864]			
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 be			
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the a edge of the signers. Signers agree to operate this business according to law another. (Individual applicants and each member of a partnership applicant mu access to any portion of a licensed premises during inspection will be deemed a	and that the rights and responsibilities st sign; corporate officer(s), members/n	conferred by the license(s), if granted, nanagers of Limited Liability Companies	will not be assigned to must sign.) Any lack of
SUBSCRIBED AND SWORN TO BEFORE ME			
this S day of August Ozoz/Oz/g 28 ndx 1 Ozoz/g 28 ndx 1 Ozoz/			
94£98634 #WWOO 94£986			
My commission expires    My commission expires   S   20   30   30   30   30   30   30   30			
TO BE COMPLETED BY CLERK			
Date received and filed Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk	
with municipal clerk \$/29/2017  Date license granted Date license issued	License number issued		
Date license granted	FIGURE HIGHING! 1990GA		
AT-106 (R. 9-16)		Wisconsin	Department of Revenue