

< CITY OF DYERSVILLE

Retail Tobacco License Review

CITY OF DYERSVILLE

1908371804

>

Application Information

Legal Ownership Information

| | |
|----------------------------------------------------------------|----------------------------------------------|
| Name of sole proprietor, partnership, corporation, LLC, or LLP | : CASEYS MARKETING COMPANY |
| Type of ownership | : Corporation |
| Primary office address | : 1 SE CONVENIENCE BLVD ANKENY IA 50021-9672 |
| Legal Ownership Phone | : 515-381-4090 |
| Legal Ownership Email | : licensingteam@caseys.com |

Application Information

| | |
|-----------------------------|----------------------------------------------|
| City/County Permit Number | : 01-2024 |
| Sales and Use Permit Number | : 131022927 |
| Location Name | : CASEY'S #2585 |
| Location Phone Number | : 563-875-2175 |
| Location Address | : 1402 9TH ST SE DYERSVILLE IA 52040-2335 |
| Location Mailing Address | : 1 SE CONVENIENCE BLVD ANKENY IA 50021-9672 |

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| Renewal | : Yes |
| Start Date | : 01-Jul-2025 |
| End Date | : 30-Jun-2026 |
| License Fee | : 75.00 |
| Types of Sales | : Over the Counter |
| Type of Establishment | : Convenience store/gas station |
| Types of Products Sold | : Cigarettes, Tobacco, Vapor Products, Alternative Nicotine Products |
| Do you intend to make retail sales to ultimate consumers? | : Yes |
| Do you have other permits issued under Iowa Code chapter 453A at this retail location? If yes, provide permit number(s) in the next step: | : No |

Corporate Officers

| Title | Name | Address |
|---------------------|----------------|--------------------------------------------|
| PRESIDENT | JAMES, SAMUEL | 3204 NE AVERY DR ANKENY IA 50021-6301 |
| ASSISTANT SECRETARY | BEECH, DOUGLAS | 729 NE BROOK HAVEN DR ANKENY IA 50021-4529 |
| TREASURER | LARSEN, ERIC | 4407 NW 5TH ST ANKENY IA 50023-8841 |
| SECRETARY | FABER, SCOTT | 6749 CARDIFF CT JOHNSTON IA 50131-2783 |
| VICE PRESIDENT | JOHNSON, BRIAN | 9129 NW 73RD CIR JOHNSTON IA 50131-4836 |

Suppliers List

| File Name | View File |
|-----------|-----------|
|-----------|-----------|

| File Name | View File |
|----------------------------|---------------------------|
| 2025 TOBACCO SUPPLIERS.pdf | View File |

Decision

Select the decision of whether you approve or deny this permit application.

Iowa Department of Revenue will be issuing a permit number if this application is approved. However, the local authority has the option to also issue a permit number. If the local authority decides to issue a local permit number, it can be entered in the "Local Permit Number" field. Otherwise, only the state-issued permit number will appear on the permit.

Select a Decision *

| | |
|---------|------|
| Approve | Deny |
|---------|------|

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