

### **Applicant**

INC.

NAME OF LEGAL ENTITY

NAME OF BUSINESS(DBA)

**BUSINESS** 

INDEPENDENCE CELEBRATIONS COMMITTEE,

Celebrate Indee

(319) 610-0117

ADDRESS OF PREMISES

PREMISES SUITE/APT NUMBER

CITY

COUNTY

ZIP

6th Street Northeast

Independence

Buchanan

50644

MAILING ADDRESS

CITY

STATE

ZIP

506 15th Avenue Place

Independence

Iowa

50644

#### **Contact Person**

NAME

PHONE

**EMAIL** 

Juan Rodriguez

(319) 610-0117

juanrod40@gmail.com

#### **License Information**

LICENSE NUMBER

LICENSE/PERMIT TYPE

License

TERM

STATUS

Special Class C Retail Alcohol

5 Day

Submitted to Local

Authority

TENTATIVE EFFECTIVE DATE

TENTATIVE EXPIRATION DATE

LAST DAY OF BUSINESS

July 2, 2025

July 6, 2025

SUB-PERMITS

Special Class C Retail Alcohol License



**PRIVILEGES** 

**Outdoor Service** 

### **Status of Business**

**BUSINESS TYPE** 

Nonprofit entity which has a principal office in the State of Iowa.

## **Ownership**

#### Individual Owners

NAME	CITY	STATE	ZIP	POSITION	% OF OWNERSHIP	U.S. CITIZEN
JUAN Rodriguez	Independence	Iowa	50644	president	100.00	Yes

# **Insurance Company Information**

INSURANCE COMPANY	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	
Secura Insurance Company	July 2, 2025	July 6, 2025	
DRAM CANCEL DATE	OUTDOOR SERVICE EFFECTIVE DATE	OUTDOOR SERVICE EXPIRATION DATE	
BOND EFFECTIVE DATE	TEMP TRANSFER EFFECTIVE DATE	TEMP TRANSFER EXPIRATION DATE	