

# **Applicant**

NAME OF LEGAL ENTITY

NAME OF BUSINESS(DBA)

**BUSINESS** 

CHUONG GARDEN OF INDEPENDENCE, IOWA, LLC

Chuong Garden

(319) 334-6380

ADDRESS OF PREMISES

PREMISES SUITE/APT NUMBER

CITY

COUNTY

ZIP

105 1st Street East

Independence

Buchanan

50644

MAILING ADDRESS

CITY

STATE

ZIP

215 1st Street West

Independence

Iowa

50644

#### **Contact Person**

NAME

**PHONE** 

**EMAIL** 

Jan Turner

(319) 334-6380

jan.turner@goslingcpa.com

### **License Information**

LICENSE NUMBER

LICENSE/PERMIT TYPE

TERM

STATUS

BW0098049

Special Class C Retail Alcohol License

12 Month

Submitted to Local Authority

TENTATIVE EFFECTIVE DATE

TENTATIVE EXPIRATION DATE

LAST DAY OF BUSINESS

July 11, 2024

July 10, 2025

SUB-PERMITS

Special Class C Retail Alcohol License

**PRIVILEGES** 



#### **Status of Business**

**BUSINESS TYPE** 

Limited Liability Company

# **Ownership**

#### Individual Owners

NAME	CITY	STATE	ZIP	POSITION	% OF OWNERSHIP	U.S. CITIZEN
Jan Turner						
Minh Chuong	Independence	Iowa	50644	Owner	100.00	Yes
Cindy Chuong	Independence	Iowa	50644	Spouse	0.00	Yes

# **Insurance Company Information**

INSURANCE COMPANY	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	
Illinois Casualty Co	July 1, 2024	July 1, 2025	
DRAM CANCEL DATE	OUTDOOR SERVICE EFFECTIVE DATE	OUTDOOR SERVICE EXPIRATION DATE	
BOND EFFECTIVE DATE	TEMP TRANSFER EFFECTIVE	TEMP TRANSFER EXPIRATION	

DATE

DATE