3-21-22

APPLICANT/AGENT: **BUSINESS NAME:** 25-22 BUSINESS ADDRESS: Aquirre LLC/Maria Aquirre La Patrona Family Restaurant 215 W. Wisconsin Ave.

Building Inspector approval:

I hereby certify that I have inspected the property above to see if they meet the municipal and state codes as it pertains to building inspection. To the best of my knowledge, with the available information, the property has passed inspection and I have no objection to the granting of the license for the above property. It is our recommendation that the license be:

/	Appi	roved)

Denied

Title: Sentor BULDAG DUSPECTOR
Date: 3/25/2022

If denied	, please specify why	

3-21-22

5-29-22 APPLICANT/AGENT:

Aguirre Aguirre A260-5508-3741-15

DATE OF BIRTH:

07/01/1983

ADDRESS:

1641 W Homestead Dr. Appleton WI 54914

BUSINESS NAME:

La Patrona Family Restaurant

BUSINESS ADDRESS:

215 W. Wisconsin Ave.

Police Department recommendation:

I hereby certify that we have checked municipal and state criminal records. It is our recommendation that the license be:

Approved

Signed: Bood Sondyfort

Denied

Title: Assistant chief

If denied, please specify why

3-15-22

APPLICANT/AGENT: BUSINESS NAME: BUSINESS ADDRESS: Aguirre LLC/Maria Aguirre La Patrona Family Restaurant 215 W Wisconsin Ave.

City Attorney/Paralegal Suggestions:

Signed: Les presentel.

Title: CA Afformy

Date: 3/21/22

3-25-22

APPLICANT/AGENT: BUSINESS NAME: BUSINESS ADDRESS: Aguirre LLC/Maria Aquirre

La Patrona Family Restaurant

215 W. Wisconsin Ave.

Planning and Community Development approval:

I hereby certify that I have inspected the property above to see if they meet the municipal and state codes as it pertains to planning and community development. To the best of my knowledge, with the available information, the property has passed inspection and I have no objection to the granting of the license for the above property. It is our recommendation that the license be:

Approved

Denied

Signed:

Title:

Jiteta 1

Date: 3/25/22

If denied, please specify why

3-22-22

APPLICANT/AGENT: BUSINESS NAME: BUSINESS ADDRESS: FILE NO.: Aguirre LLC/Maria Aguirre La Patrona Family Restaurant 215 W. Wisconsin Ave.

Fire Department approval:

I hereby certify that I have inspected the property above to see if they meet the municipal and state codes as it pertains to fire and safety issues. To the best of my knowledge, with the available information, the property has passed inspection and I have no objection to the granting of the license for the above property. It is our recommendation that the license be:

Approved Denied

Signed: Cody fuss

Title: Assistant Chief toss

Date: ________

If denied, please specify why



Renewal Alcohol			lication	Applicant's Wisconsin Seller's Pe	rmit Number	
(Submit to municipal clerk. R	lead instructions of	n page 3.)	1 (456-1030528970-02 FEIN Number		
For the license period beginni	ng: 04/01/202	2 ending: Do	30/2022	86-1185816 TYPE OF LICENSE	1	
	(52 /////		(IIIII do yyyy)	REQUESTED	FEE	
To the Coversing Reduction	Town of ka	ukauna		☐ @lass A beer	\$	
To the Governing Body of the	City of	uxauna		☑ Class B beer	\$ 25 \$ 35	
	₩ City oi			☑ Class C wine		
County of Outagamie		Aldermanic		Class A liquor	\$	
		(if required	by ordinance)	Class A liquor (cider only)	\$ N/A	
Check one: Individual	∠ Limited Liability	Company		☐ Class B liquor☐ Description	\$	
☐ Partnership	Corporation/Non		on	Class B (wine only) winery	-	
0				Publication fee	6 05	Deadle
Complete A or B. All must o	omplete C.			TOTAL FEE	\$ 75.00	rd. 3-14-22
A. Individual or Partnership:					P.	Pd. 3-14-22 Ceipt #6338
Full Name (Last)	(First)	(Middle Name)		ty or Post Office, & Zip Code)	4	10000 Jan
Aguirre	Maria			ead Dr Appleton WI	54914	
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, Ci	ty or Post Office, & Zip Code)		
Full Name (Last)	(First)	(Middle Name)	Harris Address (Obs. et Ol			
Tui Hame (Last)	(First)	(widdle Name)	Home Address (Street, Ci	ty or Post Office, & Zip Code)		
3. LLC or Corporation (and	Agent):					
Full Legal Name of Corporation / Nonp	rofit Organization / Limited	Liability Company Ac	ddress of Corporation / Lim	ited Liability Company (if different fro	m licensed premises)	
Aguirre llc		1	641 W Homestea	d Dr Appleton WI 54	1914	
All corporations/organizations of quor must appoint an agent.	or limited liability com	npanies applying	for a license to sell	fermented malt beverages a	ind/or intoxicating	
Agent Last Name	(First)	(Middle Name)	Home Address (Street, Cit	y or Post Office, & Zip Code)		
Aguirre	Maria		1641 W Homeste	ead Dr Appleton WI	54914	
All Officer(s) Director(s) of C	orporation and Men	nbers / Manager	rs of Limited Liabili	ty Company:		
President / Member Last Name	(First)			y or Post Office, & Zip Code)		
Aguirre	Maria		1641 W Homeste	ead Dr Appleton WI	54914	
Vice President / Member Last Name	(First)			y or Post Office, & Zip Code)		
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City	y or Post Office, & Zip Code)		
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City	y or Post Office, & Zip Code)		
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City	y or Post Office, & Zip Code)		
N	(5)					
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City	y or Post Office, & Zip Code)		
. Business Information						
. Trade Name La Patron	a Family Restar	urant	Business Phone	Number 920-759-5003		
2. Address of Premises 215	W Wisconsin Av	enue	Post Office & Zip	Code Kaukauna, WI 5	64130	
Does the applicant understoreweries and brewpurbs?	and that they must p					
					∠ Yes No	
 Premises description: Des include all rooms including records. (Alcohol beverage 	living quarters if use	od for the sales	carrica concumption	n and/or storage of alasha	I houseness and	
Alcohol will be s	stored in a m	nler hehim	d the count	. 1 (. 1	he, bar	
And Theil ha	Sold cooled	Land A	1		, , , , , , , , , , , , , , , , , , ,	
and at the cou	nter/bor.	l and Cons	sumed in the	main dining arc		
415 (P E 40)	•					

AT-115 (R. 5-18) Updated premise as directed by Maria, agent.

Wisconsin Department of Revenue

5.	Legal description (omit if street address is	s given on previous pa	ige):				
6.	Since filing of the last application, has member, officer, director, manager or organization licensee been convicter for violation of any federal laws, any or municipality? If yes, complete pa	r agent for either a lim e d of any offenses (e Wisconsin laws, any la	nited liability company excluding traffic offens aws of other states, o	licensee, or es not relate r ordinances	r nonprofit ed to alcohol) of any county	☐ Yes	☑ No
	b. Are charges for any offenses presen	ntly pending (excludin	ng traffic offenses not r	related to alc	ohol) against		
	the named licensee or any other person	ons affiliated with this	license? If yes, expl	ain fully on	page 3	☐ Yes	☑ No
7.	Except for questions 6a and 6b, have th by you on your last application for this li					☐ Yes	☑ No
8.	Was the profit or loss from the sale of alco or Franchise Tax return of the licensee? It					✓ Yes	□No
	Does the applicant understand they must [phone (608) 266-2776]					∀ Yes	□No
10.	Does the applicant understand that alcoho from the date of invoice and made available					✓ Yes	□No
11.	Is the applicant indebted to any wholesale	er beyond 15 days for	r beer or 30 days for li	quor?		☐ Yes	✓ No
12.	Does the applicant owe municipal proper (Note: Renewal of licenses may be denic assessments or other fees).					☐ Yes	⊘ No
bee app and voic this	AD CAREFULLY BEFORE SIGNING: Under truthfully answered to the best of the knowlication; that the applicant has read and most correct. The undersigned further underst d, and under penalty of state law, the application. Any person who knowingly prin \$1,000.	owledge of the signer. nade a complete answ lands that any license icant may be prosecut	The signer agrees that wer to each question, as issued contrary to Chated for submitting false	t he/she is the nd that the a apter 125 of statements	e person named nswers in each the Wisconsin and affidavits in	d in the for instance a Statutes s o connecti	regoing are true shall be on with
	ntact Person's Name (Last, First, M.I.)		Title / Member		Date	area de Armentena area area de Armentena de Armentena de Armentena de Armentena de Armentena de Armentena de A	
_	uirre Maria nature		Owner Phone Number		03/08/2022 Email Address		
	Maria Aguirre		920-574-8475		maguirrecs(gmail.	com
то	BE COMPLETED BY CLERK						ONATO-A-CHINISTANIO (CALI
		Date reported to council / bo	pard	Date license gr	anted		
Lice	inse number issued	Date license Issued		Signature of Cl	erk / Deputy Clerk		-
			^				

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Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full N	lame (please print) (last na	me)	(first name)		(middle n	ame)	
AGUIRRE		M	IARIA					
Home Address (s	treet/route)	Post Office		City		State	Zip Code	
1641 W F	HOMESTEAD DR	APPLETON		APPLETON		WI	54914	
Home Phone Nu		122222011	Age	Date of Birth	***************************************	Place of B	1	
920-574-	-8475		38	07/01/1983	}			
The above na	med individual provides	the following information	as a pers	on who is (check o	ne):			
Applying	for an alcohol beverage	license as an individua l						
A membe	r of a partnership which	n is making application for	or an alcoh	ol beverage licens	se.			
AGENT			JIRRE :					
	fficer / Director / Member / Manag	er / Agent)	(Na	me of Corporation, Limited	d Liability Company	or Nonprofi	it Organization)	
which is n	naking application for an	alcohol beverage licens	e.					
The shove no	med individual provides	the following information	to the lice	nsing authority:				
		sided in Wisconsin prior						
_	•	ny offenses (other than			verages) for			
I lave you	any federal laws, any V	Visconsin laws, any laws	of any oth	er states or ordina	ances of any o	county		
violation of			-				Yes	VN
violation of	alitv?				<i></i>			<u></u>
violation of or municipa	ality?	ed, trial court, trial date a	nd penalty	imposed, and/or	date, descript	ion and		<u></u>
violation of or municipal If yes, give	law or ordinance violate	ed, trial court, trial date a room is needed, continue of	nd penalty	imposed, and/or	date, descript	ion and		<u></u>
violation of or municipal If yes, give status of cl	law or ordinance violate harges pending. (If more	ed, trial court, trial date a room is needed, continue of	nd penalty on reverse s	imposed, and/or or indexide of this form.)	date, descript	ion and		
violation of or municipal If yes, give status of cl	law or ordinance violate harges pending. (If more as for any offenses prese	ed, trial court, trial date a room is needed, continue of ently pending against you	nd penalty on reverse s (other that	imposed, and/or or dide of this form.) an traffic unrelated	date, descript	ion and		
violation of or municipal If yes, give status of cl Are charge for violation	law or ordinance violate harges pending. (If more so for any offenses present of any federal laws, an	ed, trial court, trial date a room is needed, continue of ently pending against you by Wisconsin laws, any la	on reverse s (other thanks of other	imposed, and/or of dide of this form.) an traffic unrelated or states or ordinar	to alcohol be	overages)	
violation of or municipality yes, give status of classics. Are charge for violation municipality	law or ordinance violate narges pending. (If more es for any offenses prese n of any federal laws, an y?	ed, trial court, trial date a room is needed, continue of ently pending against you y Wisconsin laws, any la	on reverse s (other thanks of other	imposed, and/or of dide of this form.) an traffic unrelated or states or ordinar	to alcohol be	overages)	
violation of or municipalifyes, give status of classifications. Are charged for violation municipalityes, descriptions.	law or ordinance violate harges pending. (If more as for any offenses present of any federal laws, and y?	ed, trial court, trial date a room is needed, continue of the continue of the court	on reverse s u (other thanks of other	imposed, and/or of this form.) an traffic unrelated or states or ordinar	to alcohol be	overages)	
violation of or municipal of yes, give status of cl. 3. Are charge for violation municipalital of yes, description organization organization.	law or ordinance violate harges pending. (If more as for any offenses present of any federal laws, any?	ed, trial court, trial date a room is needed, continue of the pending against you by Wisconsin laws, any laws	on reverse s u (other that was of other officer, dire company	imposed, and/or of this form.) an traffic unrelated or states or ordinar control or agent of a cholding or applying	to alcohol be nees of any co-	overages; ounty or onprofit) □ Yes	☑ N
violation of or municipal of yes, give status of cl. 3. Are charge for violation municipalital of yes, described by the companization organization organization.	law or ordinance violate harges pending. (If more as for any offenses present of any federal laws, any?	ed, trial court, trial date a room is needed, continue of the pending against you by Wisconsin laws, any laws, and the pending.	on reverse s u (other that was of other officer, dire company	imposed, and/or of this form.) an traffic unrelated or states or ordinar control or agent of a cholding or applying	to alcohol be nees of any co-	overages; ounty or onprofit) □ Yes	☑ N
violation of or municipalityes, give status of classifications. 3. Are charge for violation municipalityes, description organization organization.	law or ordinance violate harges pending. (If more see for any offenses present of any federal laws, and y?	ed, trial court, trial date a room is needed, continue of the pending against you by Wisconsin laws, any laws. Dending. Dending against you are determined against of a limited liability.	u (other the laws of other company	imposed, and/or of this form.) an traffic unrelated or states or ordinar coron agent of a cholding or applying	to alcohol be nees of any co corporation/no g for any othe	overages; ounty or onprofit) □ Yes	
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violation of or municipal of yes, give status of classification of violation municipalital organization beverage lift yes, identify yes, ident	law or ordinance violate harges pending. (If more as for any offenses present of any federal laws, any?	ed, trial court, trial date a room is needed, continue of the pending against you by Wisconsin laws, any laws and the pending. Determine the pending against you are continued in the pending. Determine the pending against you are continued in the pending against of a limited liability company holding the pending against of a limited liability company holding against of the pending against your	u (other that was of other company	imposed, and/or of ide of this form.) an traffic unrelated or states or ordinary ctor or agent of a cholding or applying and Type of License/Permemploye of any pering for a wholesal	to alcohol be nees of any co-corporation/neg for any otherson or corpoe beer permit	overages; ounty or onprofit er alcohol) Yes Yes	
violation of or municipal of yes, give status of classification of violation municipalital of yes, deserged organization beverage of the yes, identify yes,	law or ordinance violate harges pending. (If more as for any offenses present of any federal laws, any?	ed, trial court, trial date a room is needed, continue of the pending against you by Wisconsin laws, any laws. Dending. Dending against you are determined in the pending. Dending again of a limited liability Description of the pending against of a limited liability.	u (other that was of other company	imposed, and/or of ide of this form.) an traffic unrelated or states or ordinary ctor or agent of a cholding or applying and Type of License/Permemploye of any pering for a wholesal	to alcohol be nees of any co-corporation/neg for any otherson or corpoe beer permit	overages; ounty or onprofit er alcohol) Yes Yes	☑ N
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violation of or municipal of yes, give status of old and a constant of constant of the status	law or ordinance violate harges pending. (If more as for any offenses present of any federal laws, any?	ed, trial court, trial date a room is needed, continue of the pending against you by Wisconsin laws, any law agent of a limited liability on the pending. Deer, director, stockholder, der, director, stockholder, de liquor, manufacturer or	u (other the aws of other company company agent or eagent or eagen	imposed, and/or of ide of this form.) an traffic unrelated or states or ordinary ctor or agent of a cholding or applying and Type of License/Permemploye of any pering for a wholesal	to alcohol be nees of any corporation/no g for any otherwith reson or corpo e beer permit of Wisconsin?	overages; ounty or onprofit er alcohol) Yes Yes Yes	
violation of or municipal of yes, give status of old and a constant of constant of the status	law or ordinance violate harges pending. (If more as for any offenses present of any federal laws, any?	ed, trial court, trial date a croom is needed, continue of the pending against you by Wisconsin laws, any law and the pending. Cation for or are you and agent of a limited liability company holding a liquor, manufacturer or the wholesale Licensee or Permittee.	u (other the aws of other company company agent or eagent or eagen	imposed, and/or of ide of this form.) an traffic unrelated or states or ordinary ctor or agent of a cholding or applying and Type of License/Permemploye of any pering for a wholesal	to alcohol be nees of any corporation/no g for any otherwith reson or corpo e beer permit of Wisconsin?	overages; ounty or onprofit er alcohol) Yes Yes Yes	⊘ N
violation of or municipal of yes, give status of cl. 3. Are charge for violation municipalital of yes, described beverage in the status of cl. 5. Do you hold member/municipal of yes, identifyes, i	law or ordinance violate harges pending. (If more as for any offenses present of any federal laws, any?	ed, trial court, trial date a room is needed, continue of the continue of the court is needed, cont	on reverse s u (other that was of other company meme, Location agent or eng or apply rectifier personal company) mployers.	imposed, and/or olde of this form.) an traffic unrelated or states or ordinary ctor or agent of a cholding or applying and Type of License/Permemploye of any pering for a wholesal ermit in the State of	to alcohol be nees of any corporation/no g for any other son or corpo e beer permit of Wisconsin?	overages; bunty or	Yes Yes	✓ N
violation of or municipalityes, give status of cl. 3. Are charge for violation municipality if yes, described beverage in the status of cl. 4. Do you hold organization beverage in the status of cl. 5. Do you hold member/municipalityes, identification of the status	law or ordinance violate harges pending. (If more as for any offenses present of any federal laws, any?	ed, trial court, trial date a room is needed, continue of the pending against you by Wisconsin laws, any law the pending. Determine the pending against you by Wisconsin laws, any law the pending. Determine the pending against you are considered a limited liability. (No. (No. (No. (No. (No. (No. (No. (No.	on reverse s u (other that was of other company meme, Location agent or eng or apply rectifier personal company) mployers.	imposed, and/or olde of this form.) an traffic unrelated or states or ordinary ctor or agent of a cholding or applying and Type of License/Permemploye of any pering for a wholesal ermit in the State of	to alcohol be nees of any corporation/no g for any other son or corpo e beer permit of Wisconsin? (Address Employed From	overages; bunty or)	✓ N

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Maria Aquirre
(Signature of Named Individual)

Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official. Town To the governing body of: ☐ Village of KAUKAUNA County of OUTAGAMIE **✓** City The undersigned duly authorized officer/member/manager of AGUIRRE LLC (Registered Name of Corporation / Organization or Limited Liability Company) a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as LA PATRONA FAMILY RESTAURANT (Trade Name) located at 215 W WISCONSIN AVENUE KAUKAUNA WI 54130 appoints MARIA AGUIRRE (Name of Appointed Agent) 1641 W HOMESTEAD DR APPLETON WI 54914 (Home Address of Appointed Agent) to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/ organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin? Yes If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies). Is applicant agent subject to completion of the responsible beverage server training course? ✓ No How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 25 YEARS Place of residence last year 1641 W HOMESTEAD DRIVE APPLETON WI 54914 For: AGUIRRE LLC (Name of Corporation / Organization / Limited Liability Company) (Signature of Officer / Member / Manager) Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000. **ACCEPTANCE BY AGENT** MARIA AGUIRRE _, hereby accept this appointment as agent for the (Print / Type Agent's Name) corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company. Maria Aguirre Agent's age 38 (Signature of Agent) 1641 W HOMESTEAD DRIVE APPLETON WI 54914 Date of birth 07/01/1983 (Home Address of Agent) APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official) I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed. Approved on (Signature of Proper Local Official) (Town Chair, Village President, Police Chief) AT-104 (R. 4-18) Wisconsin Department of Revenue