Services <https://directory.iowa.gov/service/Index?

ga=1.101492737 1604613096.1488473035&ia_slv=1657892562363> App-164639) Agencies <https://directory.iowa.gov/?ia_slv=1657892562363>

Social <https://directory.iowa.gov/social/Index?ia_slv=1657892562363>

<https: <="" th=""><th>www.iowa</th><th>.gov/sear</th><th>ch/google?</th><th>ia_slv=165</th><th>7892562363></th></https:>	www.iowa	.gov/sear	ch/google?	ia_slv=165	7892562363>

License or Permit Type		
License or Permit Type	Length of License Requested	
Special Class C Liquor License	12 Month	
Tentative Effective Date	Tentative Expiration Date	
2022-09-10	2023-09-09	

Privileges / Sub-Permits Information	
Privileges	
Sub-Permits	

Premises Information

Business Information

* (required) Name of Business (D/B/A)

* (required) Name of Legal Entity (The name of the individual, partnership, corporation or other similar legal entity that is receiving the income from the alcoholic beverages sold)

Hua, Quyen

Indicate how the business will be operated

Sole Proprietor

Federal Employer ID #

First Garden

Tentative Expiration Date

Sep 9, 2023

Premises Information

Please select here if your location is in an

unincorporated town

Address of Premises:

You must use the Address or location field below to search for your operating location. If your event does not populate, please find the closest applicable address and then modify your premises street field to better identify the address of your event.

Address or location

21 South Frederick, Oelwein, Iowa, Fayette

Search by a location name or address to automatically populate the address fields below (optional)

* (required) Premises Street

Premises Suite/Apt Number

21 South Frederick

* (required) Premises City	Premises State
Oelwein	lowa
* (required) Premises Zip/Postal Code	Premises County
50662	Fayette
* (required)Local Authority	Control of Premises
City of Oelwein	Own
Is the capacity of your establishment over 200?	Are other liquor, wine or beer businesses accessi-
No	ble from the interior of your premises?
	No
Equipped with tables and seats to accommodate a	* (required) # of Floors:
minimum of 25?	1
Yes	
Is your premises equipped with at least one ade-	Premises Type
quate, conveniently located indoor or outdoor toilet	Restaurant
facility for use by patrons?	
Yes	
Does your premises conform to all local and state	
health, fire and building laws and regulation?	
Yes	

Contact Information

(required) Contact Name	*	* (required) Business
Quyen Hua	(required) ExtensiPhone	
	on	(319) 283-3700
(required) Email Address	*	* (required) Phone
smith@rfsw.com	(required)	Extēnsi (319) 238-2288
	on	
failing Address:		
You must use the Address or location event does not populate, please find t premises street field to better identify	the closest applicable	e address and then modify your
event does not populate, please find to premises street field to better identify Address or location	the closest applicable the address of your e	e address and then modify your
You must use the Address or location event does not populate, please find t premises street field to better identify	the closest applicable the address of your e n,lowa,	e address and then modify your event.
You must use the Address or location event does not populate, please find t premises street field to better identify Address or location 21 South Frederick,Oelwei	the closest applicable the address of your e n,lowa, to automatically popul	e address and then modify your event.
You must use the Address or location event does not populate, please find to premises street field to better identify Address or location 21 South Frederick,Oelwei Search by a location name or address to	the closest applicable the address of your e n,lowa, to automatically popul	e address and then modify your event. late the address fields below (option
You must use the Address or location event does not populate, please find to premises street field to better identify Address or location 21 South Frederick,Oelwei Search by a location name or address to Mailing Street	the closest applicable the address of your e n,lowa, to automatically popul	e address and then modify your event. ate the address fields below (option
You must use the Address or location event does not populate, please find to premises street field to better identify Address or location 21 South Frederick,Oelwei Search by a location name or address to Mailing Street	the closest applicable the address of your e n,lowa, to automatically popul	e address and then modify your event. late the address fields below (option uite/Apt Number

Mailing Zip/Postal Code	Mailing County
50662	

Ownership

Quyen Hua	Bang Fu
Position: owner	Position: spouse
SSN: XXX-XX-2094	SSN: XXX-XX-2322
US Citizen: Yes	US Citizen: No
Ownership: 100%	Ownership: 0%
DOB: 03/11/1970	DOB: 09/17/1968

Criminal History Information

Since the license was last issued, has anyone listed	Since the license was last issued, has anyone listed
on the Ownership page been charged or convicted	on the Ownership page been convicted of any viola-
of a felony offense in lowa or any other state of the	tion of any state, county, city, federal or foreign law
United States?	(not including traffic violations, except those that
No	are alcohol related)?
	No

Dramshop Verification Information

Extension	* (required) Daytime Phone for	Sketch on File
	- Local Authority	Yes
	(319) 283-5440	
ease, Final \$	Sales Contract, or Warranty Deed	Premise's Address Correct?
n File (Purcl	hase agreements not accepted)	Yes
Premises Zor ⁄es	ned Properly?	Fire Inspection Completed?
lealth Inspec	ction Completed?	Was a DCI background check run?
10		Νο
Previous Lice	ense Number for this Location	* (required) Local Authority Email Address
		deputyclerk@cityofoelwein.org
Comments		Amount Owed to Local Authority

Document Upload Information

DOCUMENT NAME

Deed/Final Sales Contract or Lease

UPLOADED DOCUMENTS

ADDITIONAL COMMENTS

DOCUMENT NAME

Sketch

UPLOADED DOCUMENTS

ADDITIONAL COMMENTS