(App-188468)

se or Permit Type	Length of License Requested
ass E Retail Alcohol License	12 Month
tative Effective Date	Tentative Expiration Date
3-11-16	2024-11-15

Privileges / Sub-Permits Information

Privileges

Sub-Permits

Premises Information

Business Information

legal entity that is receiving the income from the alcoholic beverages sold) Fareway Stores, Inc. Indicate how the business will be operated * (required) Corporation * (required) Business Number of Secretary of State 253 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 event does not populate, please find the closest applicable as premises street field to better identify the address of your event does not populate, please find the closest applicable as premises street field to better identify the address of your event does not populate, please find the closest applicable as premises street field to better identify the address of your event does not populate, please find the closest applicable as premises street field to better identify the address of your event does not populate. 102 2nd Street SE,Oelwein,lowa,Fayette Search by a location name or address to automatically populate.	Name of Business (D/B/A)
coholic beverages sold) Fareway Stores, Inc. Indicate how the business will be operated * (required) Corporation * (required) Business Number of Secretary of State 253 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 event does not populate, please find the closest applicable as premises street field to better identify the address of your event Address or location 102 2nd Street SE,Oelwein,lowa,Fayette Search by a location name or address to automatically populate	tores, Inc. #412
* (required) Corporation * (required) Business Number of Secretary of State * (required) Business Number of Secretary of State 253 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 event does not populate, please find the closest applicable as premises street field to better identify the address of your event Address or location 102 2nd Street SE,Oelwein,lowa,Fayette Search by a location name or address to automatically populate	
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102 2nd Street SE,Oelwein,Iowa,Fayette Search by a location name or address to automatically populat	ent.
Search by a location name or address to automatically populat	
* (required) Promises Street	e the address fields below (optional)
(required) Fremises Street Fremises St	uite/Apt Number
102 2nd Street SE	

* (required) Premises City	Premises State
Oelwein	lowa
* (required) Premises Zip/Postal Code	Premises County
50662	Fayette
* (required)Local Authority City of Oelwein	Control of Premises Own
Premises Type	Does your premises conform to all local and state
Grocery Store	health, fire and building laws and regulation? Yes
Does or will your licensed location wholesale alcoholic beverages to on-premises retail alcohol licensees?	* (required) The total square footage of the entire retail sales area plus any alcoholic beverage stor- age areas of the business. This includes areas of
Yes	
	walk-in alcoholic beverage coolers that are accessible to the public.
	-
Hours of Operation: Beginning	sible to the public.
Hours of Operation: Beginning 8:00 AM	sible to the public.
Hours of Operation: Beginning 8:00 AM Hours deliveries may be received: Beginning	sible to the public. 13,775 Hours of Operation: Ending
8:00 AM	sible to the public. 13,775 Hours of Operation: Ending 9:00 PM

Are the hours of deliveries flexible?		
Contact Information		
(required) Contact Name	*	* (required) Business
Fracey Wilson	(required)	Extensi 8h one
		(319) 283-2872
r (required) Email Address	*	* (required) Phone
	(required)	Extonsian
storelicenses@farewaystores.com Same as Premises Address	(required)	Extension 433-5336
<u> </u>	(required)	Laterisi (545) 433-5336
Same as Premises Address		
Same as Premises Address Mailing Address:	below to search	for your operating location. If your
Same as Premises Address Mailing Address: You must use the Address or location field	below to search	for your operating location. If your address and then modify your
Same as Premises Address Mailing Address: You must use the Address or location field event does not populate, please find the clean	below to search	for your operating location. If your address and then modify your
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Boone	lowa
Mailing Zip/Postal Code	Mailing County
50036	

Ownership

Various

Individuals &

Trust each

holding less than

5%

Position: Stockholders

SSN: XXX-XX-6789

US Citizen: Yes

Ownership: 33.25%

DOB: 01/01/1930

Fred E. Vitt

Control Trust

Position: Trust

SSN: XXX-XX-4543

US Citizen: Yes

Ownership: 10.87%

DOB: 01/01/1930

Garrett S Piklapp

Position: Secetary

SSN: XXX-XX-4541

US Citizen: Yes

Ownership: 0%

DOB: 06/04/1981

Fareway Control

Trust

Position: Trust

SSN: XXX-XX-4547

US Citizen: Yes

Ownership: 55.88%

DOB: 01/01/1930

Criminal History Information Since the license was last issued, has anyone listed on the Ownership page been charged or convicted of a felony offense in lowa or any other state of the United States? United States? Since the license was last issued, has anyone listed on the Ownership page been convicted of any violation of any state, county, city, federal or foreign law (not including traffic violations, except those that are alcohol related)?

Is this License eligible for enrollment in the Automatic Renewal Program?	* (required) Daytime Phone Local Authority	
Eligible	(319) 283-5440	
Sketch on File	Proof of Control of Property (Deed / Final S	
Yes	Contract / Lease / Written Agreement)	
	**Purchase agreements not accepted	
	Yes	
Premise's Address Correct?	Premises Zoned Properly?	
Yes	Yes	
Fire Inspection Completed?	Health Inspection Completed?	
No .	No	

Was a DCI background check run? No	Previous License Number for this Location
* (required) Local Authority Email Address	Comments
deputyclerk@cityofoelwein.org	
Amount Owed to Local Authority	
0.00	

Document Upload Information

DOCUMENT NAME

Proof of Control of Property (Deed / Final Sales Contract / Lease / Written Agreement)

**Purchase agreements not accepted

UPLOADED DOCUMENTS

ADDITIONAL COMMENTS

DOCUMENT NAME

Sketch

UPLOADED DOCUMENTS

412 - Oelwein.pdf

ADDITIONAL COMMENTS

DOCUMENT NAME

TTB Basic Permit

UPLOADED DOCUMENTS

#412.pdf

ADDITIONAL COMMENTS