(App-191136)

License or Permit Type		
License or Permit Type	Length of License Requested	
Class E Retail Alcohol License	12 Month	
Tentative Effective Date	Tentative Expiration Date	
2024-01-01	2024-12-31	
Privileges / Sub-Permits Information		

Premises Information

Sub-Permits

Business Information

* (required) Name of Legal Entity (The name of the	* (required) Name of Business (D/B/A)
ndividual, partnership, corporation or other similar	super mart
egal entity that is receiving the income from the al-	
coholic beverages sold)	
VISION 786 LLC	
ndicate how the business will be operated	* (required) Federal Employer ID #
Corporation	88-3569764
* (required) Business Number of Secretary of State	Tentative Expiration Date
718903	Dec 31, 2024
Premises Information Please select here if your location is in an	
Please select here if your location is in an	
Please select here if your location is in an unincorporated town	
Please select here if your location is in an unincorporated town	ow to search for your operating location. If your
Please select here if your location is in an unincorporated town Address of Premises:	
Please select here if your location is in an unincorporated town Address of Premises: You must use the Address or location field below	st applicable address and then modify your
Please select here if your location is in an unincorporated town Address of Premises: You must use the Address or location field belower the does not populate, please find the closes	st applicable address and then modify your
Please select here if your location is in an unincorporated town Address of Premises: You must use the Address or location field belowered to the premises and populate, please find the closes premises street field to better identify the address.	est applicable address and then modify your ess of your event.
Please select here if your location is in an unincorporated town Address of Premises: You must use the Address or location field belowerent does not populate, please find the closes premises street field to better identify the address or location Address or location 701 South Frederick Avenue, Oelwand	est applicable address and then modify your ess of your event. yein,lowa,Fayette
Please select here if your location is in an unincorporated town Address of Premises: You must use the Address or location field belowerent does not populate, please find the closes premises street field to better identify the address or location Address or location 701 South Frederick Avenue, Oelw	est applicable address and then modify your ess of your event.

* (required) Premises City	Premises State
Oelwein	lowa
* (required) Premises Zip/Postal Code 50662	Premises County Fayette
	. ayotto
* (required)Local Authority	Control of Premises
City of Oelwein	lease
* (required) # of Floors:	Premises Type
1	Convenience Store
Does your premises conform to all local and state	Does or will your licensed location wholesale alco-
health, fire and building laws and regulation?	holic beverages to on-premises retail alcohol
health, fire and building laws and regulation?	
nealth, fire and building laws and regulation? Yes	holic beverages to on-premises retail alcohol licensees?
realth, fire and building laws and regulation? Yes * (required) The total square footage of the entire	holic beverages to on-premises retail alcohol licensees?
Yes * (required) The total square footage of the entire retail sales area plus any alcoholic beverage stor-	holic beverages to on-premises retail alcohol licensees? No Hours of Operation: Beginning
Yes * (required) The total square footage of the entire retail sales area plus any alcoholic beverage storage areas of the business. This includes areas of walk-in alcoholic beverage coolers that are acces-	holic beverages to on-premises retail alcohol licensees? No Hours of Operation: Beginning
* (required) The total square footage of the entire retail sales area plus any alcoholic beverage storage areas of the business. This includes areas of walk-in alcoholic beverage coolers that are accessible to the public.	licensees? No Hours of Operation: Beginning
* (required) The total square footage of the entire retail sales area plus any alcoholic beverage storage areas of the business. This includes areas of walk-in alcoholic beverage coolers that are accessible to the public.	holic beverages to on-premises retail alcohol licensees? No Hours of Operation: Beginning
Poes your premises conform to all local and state health, fire and building laws and regulation? Yes * (required) The total square footage of the entire retail sales area plus any alcoholic beverage storage areas of the business. This includes areas of walk-in alcoholic beverage coolers that are accessible to the public. 1,550 Hours of Operation: Ending	holic beverages to on-premises retail alcohol licensees? No Hours of Operation: Beginning

lours deliveries may be received: Ending	Are the hours	of deliveries flexible?
11:00 PM	Yes	
Contact Information		
(required) Contact Name	*	* (required) Business
valeed parvez	(required) Exte	ensi Bh one
		(319) 283-9337
(required) Email Address	*	* (required) Phone
unarmart706@hatmail.com	(required) Exte	unsian
upermart786@hotmail.com	(104000) = 1100	ensi ₍₁₉₎ 830-2729
Same as Premises Address		(349) 830-2729
Same as Premises Address		(349) 830-2729
Same as Premises Address Mailing Address:		
	ow to search for	your operating location. If your
Same as Premises Address Mailing Address: You must use the Address or location field bel	ow to search for sest applicable add	your operating location. If your dress and then modify your
Same as Premises Address Mailing Address: You must use the Address or location field belevent does not populate, please find the close	ow to search for sest applicable add	your operating location. If your dress and then modify your
Same as Premises Address Mailing Address: You must use the Address or location field belevent does not populate, please find the close premises street field to better identify the address.	ow to search for gest applicable add	your operating location. If your dress and then modify your t.
Same as Premises Address Mailing Address: You must use the Address or location field bel event does not populate, please find the close premises street field to better identify the address or location	ow to search for sest applicable address of your even	your operating location. If your dress and then modify your t.
Same as Premises Address Mailing Address: You must use the Address or location field belevent does not populate, please find the close premises street field to better identify the address or location Address or location 701 South Frederick Avenue, Oelv	ow to search for sest applicable address of your even	your operating location. If your dress and then modify your t. vette he address fields below (optional)

Mailing State

Mailing City

Oelwein	lowa
Mailing Zip/Postal Code	Mailing County
50662	Fayette

Ownership

waleed parvez

Position: owner

SSN: XXX-XX-7120

US Citizen: Yes

Ownership: 100%

DOB: 07/27/1990

Criminal History Information

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?

No

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)?

No

Local Authority Information * (required) Daytime Phone for Extension Sketch on File Local Authority Yes (319) 283-5440 **Proof of Control of Property (Deed / Final Sales Premise's Address Correct?** Contract / Lease / Written Agreement) Yes **Purchase agreements not accepted Yes **Premises Zoned Properly?** Fire Inspection Completed? Yes No **Health Inspection Completed?** Was a DCI background check run? No No **Previous License Number for this Location** * (required) Local Authority Email Address deputyclerk@cityofoelwein.org Comments **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

Midwest to vision 786 Lease

ADDITIONAL COMMENTS

DOCUMENT NAME

Sketch

UPLOADED DOCUMENTS

sketch for super mart

ADDITIONAL COMMENTS