

(App-183984)

License or Permit Type

License or Permit Type

Length of License Requested

Special Class C Retail Alcohol License

5 Day

Tentative Effective Date

Tentative Expiration Date

2023-07-14

2023-07-18

Privileges / Sub-Permits Information

Privileges

Sub-Permits

Premises Information

Business Information

*** (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)**

LUCKY WIFE WINE SLUSHIES LLC

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

Lucky Wife Wine Slushies llc

Indicate how the business will be operated

Limited Liability Company

*** (required) Federal Employer ID #**

88-1805835

*** (required) Business Number of Secretary of State**

708416

Tentative Expiration Date

Jul 18, 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

West Charles Street,Oelwein,Iowa,Fayette

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

*** (required) Premises Street**

West Charles Street

Premises Suite/Apt Number

*** (required) Premises City**

Oelwein

Premises State

Iowa

*** (required) Premises Zip/Postal Code**

50662

Premises County

Fayette

*** (required) Local Authority**

City of Oelwein

Control of Premises

lease

Is the capacity of your establishment over 200?

No

Equipped with tables and seats to accommodate a minimum of 25?

Yes

*** (required) # of Floors:**

0

Is your premises equipped with at least one adequate, conveniently located indoor or outdoor toilet facility for use by patrons?

Yes

Premises Type

Special Event

Does your premises conform to all local and state health, fire and building laws and regulation?

Yes

Contact Information

*** (required) Contact Name**

Jennifer Flick

*** (required) Business**

*** (required) Extension**

(515) 570-5160

*** (required) Email Address**

luckywifewineslushies@gmail.com

*

*** (required) Phone**

(required) Extension

(515) 570-5160

Same as Premises Address

Mailing Address:

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

5245 Elmore Avenue,Davenport,Iowa,Scott

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

Mailing Street

5245 Elmore Avenue

Mailing Suite/Apt Number

1004

Mailing City

Davenport

Mailing State

Iowa

Mailing Zip/Postal Code

52807

Mailing County

Scott

Ownership

Jennifer Flick

Position: Owner

SSN: XXX-XX-9828

US Citizen: Yes

Ownership: 100%

DOB: 05/14/1973

Criminal History Information

Has anyone listed on the Ownership page been charged or convicted of a felony offense in Iowa 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

Dramshop Verification Information

Dram Shop

Founders Insurance Company

Local Authority Information

Extension

*** (required) Daytime Phone for**

Local Authority

(319) 283-5440

Sketch on File

Yes

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

****Purchase agreements not accepted**

Yes

Premise's Address Correct?

Yes

Premises Zoned Properly?

Yes

Fire Inspection Completed?

Yes

Health Inspection Completed?

Yes

Was a DCI background check run?

No

Previous License Number for this Location

*** (required) Local Authority Email Address**

deputyclerk@cityofelwein.org

Comments

Amount Owed to Local Authority

28.13

Document Upload Information

DOCUMENT NAME

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

**Purchase agreements not accepted

UPLOADED DOCUMENTS

doc00038220230623124915

ADDITIONAL COMMENTS

DOCUMENT NAME

Sketch

UPLOADED DOCUMENTS

IMG_7811

ADDITIONAL COMMENTS