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License or Permit Type

License or Permit Type	Length of License Requested
Class E Liquor License	12 Month
Tentative Effective Date	Tentative Expiration Date
2022-11-16	2023-11-15

Privileges / Sub-Permits Information

Privileges

Sub-Permits

Class B Wine Permit

Class C Beer Permit

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)**

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

Indicate how the business will be operated

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

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

Tentative Expiration Date

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

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

*** (required) Premises Street**

Premises Suite/Apt Number

102 2nd Street SE

*** (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

Own

Premises Type

Grocery Store

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

Yes

Does or will your licensed location wholesale alcoholic spirits to on-premises liquor control licensees?

Yes

*** (required) Square footage of the entire retail sales area of the business, including area of walk-in coolers that are accessible to the public. This includes all areas where non-alcohol products are also sold. Do not include areas that are not accessible to the public (offices, bathroom, kitchen, storage area etc.).**

13,775

Do you sell gasoline?

No

*** (required) Square footage of the entire interior area of the building, including, but not limited to, all areas used in the storage, distribution, whole-sale and retail sale of merchandise, offices, bathrooms, break rooms etc.**

21,536

Hours of Operation: Beginning

8:00 AM

Hours of Operation: Ending

9:00 PM

Hours deliveries may be received: Beginning

6:00 AM

Hours deliveries may be received: Ending

4:00 PM

Are the hours of deliveries flexible?

Yes

Contact Information

*** (required) Contact Name**

Tracey Wilson

*** (required) Business**

(required) ExtensiPhone

on

(319) 283-2872

*** (required) Email Address**

twilson@farewaystores.com

*** (required) Phone**

(required) Extensi

on

(515) 433-5336

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

2300 Industrial Park Road PO Box 70,Boone,Iowa,

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

Mailing Street

2300 Industrial Park Road PO Box 70

Mailing Suite/Apt Number

Mailing City

Boone

Mailing State

Iowa

Mailing Zip/Postal Code

50036

Mailing County

Ownership

**Various
Individuals &
Trust each**

**Fred E. Vitt
Control Trust
Position: Trust
SSN: XXX-XX-4543
US Citizen: Yes**

**Garrett S Piklapp
Position: Secretary
SSN: XXX-XX-4541
US Citizen: Yes
Ownership: 0%**

holding less than 5%

Ownership: 10.87%
DOB: 01/01/1930

DOB: 06/04/1981

Position: Stockholders

SSN: XXX-XX-6789

US Citizen: Yes

Ownership: 33.25%

DOB: 01/01/1930

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 Iowa or any other state of the United States?

No

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)?

No

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?

No

Health Inspection Completed?

No

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

300.00

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