3/22/22, 11:46 AM New Permit

Services <a href="https://directory.iowa.gov/service/Index?\_ga=1.101492737.1604613096.1488473035&ia\_slv=1647967091207">https://directory.iowa.gov/service/Index?\_ga=1.101492737.1604613096.1488473035&ia\_slv=1647967091207</a>

Agencies <a href="https://directory.iowa.gov/?ia\_stv=1647967091207">https://directory.iowa.gov/?ia\_stv=1647967091207</a>

Social <a href="https://directory.iowa.gov/social/Index?ia\_slv=1647967091207">https://directory.iowa.gov/social/Index?ia\_slv=1647967091207</a>

(App-157182)

<a href="https://www.iowa.gov/search/google?ia\_slv=1647967091207">https://www.iowa.gov/search/google?ia\_slv=1647967091207</a>

License or Permit Type	
Livenac of Fernit 1790	Length of License Requested  12 Month
Tentative Effective Date 2022-06-01	Tentative Expiration Date 2023-05-31
Privileges / Sub-Permits Information	
Privileges	)
Outdoor Service	
Sunday Sales	•
Sub-Permits Please provide a description of the area you intend to use for the Outdoor  Deck attached to the upstairs Lounge.	r Service Privilege and explain its relationship to the currently-licensed premises
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)  Leo's Italian Restaurant, Inc.	* (required) Name of Business (D/B/A)  Leo's Italian Restaurant
Indicate how the business will be operated  Privately Held Corporation	* (required) Federal Employer ID # 42-1499549
* (required) Business Number of Secretary of State 235759	Tentative Expiration Date May 31, 2023

# **Premises Information**

Please select here if your location is in an unincorporated town

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$\Delta \alpha \alpha r$	200	ΩŤ	Uro	mico	
Addr	633	v	116	111136	Э.

Address or location		
29 S. Frederick Ave., Oelwein, Iowa, Iowa		
Search by a location name or address to automatically populate the address field	da halaw (a-4:D	
and the succession in the success to automatically populate the autoress lieu	as below (optional)	
* (required) Premises Street	Premises Suite/Apt Numb	er
29 S. Frederick Ave.		
* (required) Premises City	Premises State	
Oelwein	lowa	
* (required) Premises Zip/Postal Code	Premises County	
50662	•	
00002	lowa	
* (required)Local Authority	Control of Premises	
City of Oelwein		
	Own	
Is the capacity of your establishment over 200?	Are other liquor, wine or be	eer businesses accessible from the interior of your
No	premises?	
	No	
Equipped with tables and seats to accommodate a minimum of 25?	* (required) # of Floors:	
Yes	2	
Is your premises equipped with at least one adequate, conveniently located indoor	Premises Type	
or outdoor toilet facility for use by patrons?	Restaurant	
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 Phone
Michael Leo	(required) Extensio	(319) 283-1655

(319) 283-1655

\* (required) Email Address leosfoods@gmail.com \* (required) Phone (required) Extensio (319) 283-7020

n

Same as Premises Address

### Mailing Address:

Address or location

PO Box 468, Oelwein, Iowa, Fayette

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

Mailing Street
PO Box 468

Mailing Suite/Apt Number

Mailing City

Oelwein

Mailing State

lowa

Mailing Zip/Postal Code

50662

**Mailing County** 

Fayette

## Ownership

#### Michael Leo

Position: President SSN: XXX-XX-0342 US Citizen: Yes Ownership: 100% DOB: 07/08/1960

# 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?

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)?

ng name trene

No

Dramshop Verification Information

<sup>Dram Shop</sup> North Star Mutual	Insurance Company		
Local Authority Inforr	nation		
Outdoor Service Area App		Extension	* (required) Daytime Phone for Local Authority
Outdoor Service Area App	proved		(319) 283-5440
Sketch on File Yes		Lease, Final Sales Con accepted) No	stract, or Warranty Deed on File (Purchase agreements not
Premise's Address Correct	17	Premises Zoned Prope	rly?
Yes		Yes	
Fire Inspection Completed	?	Health Inspection Com	pleted?
Was a DCI background che	ck run?	Previous License Numl	per for this Location
* (required) Local Authority deputyclerk@cityofoelwein		Comments	
Amount Owed to Local Auti	hority		

Document Upload Information

3/22/22, 11:46 AM

New Permit

DOCUMENT NAME

Deed/Final Sales Contract or Lease

UPLOADED DOCUMENTS

Deed.pdf

ADDITIONAL COMMENTS

DOCUMENT NAME

Sketch

UPLOADED DOCUMENTS

sketch.png

ADDITIONAL COMMENTS