

Form  
AT-106

Original Alcohol Beverage  
License Application

FOR CLERKS ONLY	
Municipality	City of Richland Center
License Period	- 06/30/2024

License(s) Requested

- Class "A" Beer ..... \$ \_\_\_\_\_     "Class A" Liquor ..... \$ \_\_\_\_\_  
 Class "B" Beer ..... \$ \_\_\_\_\_     "Class B" Liquor ..... \$ 160.27  
 "Class C" Wine ..... \$ \_\_\_\_\_     "Class A" Liquor (Cider Only) \$ \_\_\_\_\_  
 Reserve "Class B" Liquor \$ \_\_\_\_\_     "Class B" (Wine Only) Winery \$ \_\_\_\_\_

License Fees	\$160.27
Publication Fee	\$15.99
Background Check	\$15.00
<b>Total Fees</b>	<b>\$191.26</b>

Part A: Premises/Business Information

1. Legal Business Name (registered entity name or individual's name if sole proprietorship)  
RC Tacos LLC

2. Trade Name or DBA  
RC Tacos

3. Premises Address  
2320 US Hwy 14 E

4. County  
Richland

5. Municipality  
Richland Center

6. Aldermanic District

7. Mailing Address (if different from premises address)

8. FEIN  
88-0854438

9. Wisconsin Seller's Permit Number  
456-1030922928-04

10. Premises Phone  
608 383 1133

11. Premises Email  
CR948789@gmail.com

12. Entity Type (check one)  
 Sole Proprietor     Partnership     Limited Liability Company     Corporation     Nonprofit Organization

13. Premises Description - Describe the building or buildings where alcohol beverages are to be sold and stored. Describe all rooms including living quarters, if used, for the sales, service, consumption, and/or storage of alcohol beverages and records. Alcohol beverages may be sold and stored ONLY on the premises described in this application. Attach additional sheets if necessary.  
 one story building, dinning room, front counter (where bar will be located), 3 freezers, kitchen, break room, office space, & a back storage room where alcohol will be stored.

Part B: Questions

1. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit a copy of Responsible Beverage Server Training Course Certificate.....  Yes     No
2. Does the applicant business or its partners, officers, directors, managing members, or agent hold a direct or indirect interest in any alcohol beverage wholesaler or producer (e.g., brewer, brewpub, winery, distillery)?.....  Yes     No  
 If yes, please explain using the space below. Attach additional sheets if necessary.

<b>Part C: For Corporate/LLC Applicants Only</b>		
1. State of Registration <i>Wisconsin</i>	2. Date of Registration <i>3-04-2022</i>	
3. Is the applicant business owned by another corporation or LLC? If yes, please provide the name and FEIN of the parent company below, include parent company members in Part D, and attach Form AT-103 for all of the parent company's principal members, managers, officers, or directors ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Name of Parent Company	FEIN of Parent Company	
4. Does the parent company or any of its officers, directors, managing members, or agent hold any direct or indirect interest in any other alcohol beverage wholesaler or producer (e.g., brewer, brewpub, winery, distillery)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please explain using the space below. Attach additional sheets if necessary.		
5. Agent's Last Name	Agent's First Name	Phone

**Part D: Individual Information**

A Supplemental Questionnaire, Form AT-103, must be completed and attached to this application for each person involved in the applicant business and any parent company as indicated in Part C. Persons in the applicant business include: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all managing members and agent of a limited liability company.

List the full name, title, and phone number for each person below. Attach additional sheets if necessary.

Last Name	First Name	Title	Phone
<i>Carolina Rodriguez</i>	<i>Carolina</i>	<i>Owner</i>	<i>608 475 9322</i>

**Part E: Attestation**

Who must sign this application?  
 sole proprietor     one general partner of a partnership     one corporate officer     one managing member of an LLC

**READ CAREFULLY BEFORE SIGNING:** Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature *Carolina Rodriguez* Date *01/15/24*

Name (Last, First, M.I.) *Rodriguez Carolina*

Title *owner* Email *CR948789@gmail.com* Phone *608 475 9322*

**Part F: For Clerk Use Only**

Date application was filed with clerk <i>1/16/2024</i>	Date reported to governing body <i>3/5/24</i>	Date provisional license issued (if applicable)
Date license granted	License number	Date license issued
Signature of Clerk/Deputy Clerk		

# Schedule for Appointment of Agent by Corporation / Nonprofit Organization or Limited Liability Company

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of:  Town  Village of Richland Center County of Richland  
 City

The undersigned duly authorized officer/member/manager of RC Tacos LLC  
(Registered Name of Corporation / Organization or Limited Liability Company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as RC Tacos  
(Trade Name)

located at 2320 US hwy 14 E Richland center

appoints Carolina Rodriguez  
(Name of Appointed Agent)

2350 US hwy 14 E 53581  
(Home Address of Appointed Agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes  No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).  
Class B Beer, RC Tacos.

Is applicant agent subject to completion of the responsible beverage server training course?  Yes  No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 23 years

Place of residence last year 2350 US hwy 14 E 53581

For: RC Tacos LLC  
(Name of Corporation / Organization / Limited Liability Company)

By: [Signature]  
(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

### ACCEPTANCE BY AGENT

I, \_\_\_\_\_, hereby accept this appointment as agent for the

(Print / Type Agent's Name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

\_\_\_\_\_  
(Signature of Agent) \_\_\_\_\_  
(Date) Agent's age \_\_\_\_\_

\_\_\_\_\_  
(Home Address of Agent) Date of birth \_\_\_\_\_

### APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on 2-1-2021 by [Signature] Title Police Chief  
(Date) (Signature of Proper Local Official) (Town Chair, Village President, Police Chief)

# Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Rodriguez		Carolina			
Home Address (street/route)		Post Office	City	State	Zip Code
2350 US hwy 14			Richland Centr	WI	53581
Home Phone Number		Age	Date of Birth	Place of Birth	
608 475 9322		46	11/4/1977	MEXICO	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
  - A member of a **partnership** which is making application for an alcohol beverage license.
  - Carolina Rodriguez of RC Tacos LLC  
(Officer / Director / Member / Manager / Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)
- which is making application for an alcohol beverage license.

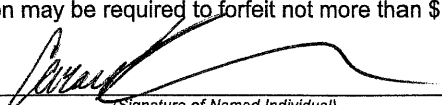
The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 23 years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality?  Yes  No  
If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality?  Yes  No  
If yes, describe status of charges pending.
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit?  Yes  No  
If yes, identify. CLASS B Beer license RC Tacos  
(Name, Location and Type of License/Permit)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin?  Yes  No  
If yes, identify.  
(Name of Wholesale Licensee or Permittee) (Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Maribel Rodriguez	2350 US hwy 14 E	03/4/22	present
Rodolfo Rodriguez	2350 US hwy 14 E	03/4/22	present

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

  
(Signature of Named Individual)

**Application for Transfer of Retail Licenses for Sale of Fermented Malt Beverages and/or Intoxicating Liquor From One Premises to Another**

FEE \$ 10.00

Richland center, Wisconsin

January 15, 20 24

To the governing body of the  City  Village  Town of Richland center  
County of Richland Wisconsin.

The undersigned hereby applies for a transfer of Class B license from \_\_\_\_\_  
202 S. Orange St (Present Location) to 2320 US hwy 14 E (Proposed Location)  
on or about March 11<sup>th</sup> (Date)

1. APPLICANT: (print name and address plainly)
  - (a) Full name of applicant Carolina Rodriguez (RC Tacos)
  - (b) Address 2350 US hwy 14 E Richland center
2. LOCATION AND DESCRIPTION OF PREMISES TO WHICH APPLICATION FOR TRANSFER IS MADE:  
Describe building or buildings where alcohol beverages are to be sold, served, consumed, and stored.
  - (a) Street number 2320 US hwy 14 E
  - (b) Trade name of establishment RC Tacos
  - (c) Physical description of building, buildings and/or land area comprising licensed premises.  
A house by the building, owners home, parking lot, drive thru, ~~and~~ dumpsters.
  - (d) Legal description (omit if street address is given above.) \_\_\_\_\_
  - (e) Is any other business conducted on same premises?  Yes  No If so, what? \_\_\_\_\_
  - (f) Was this location licensed for beer or liquor during the past year?  Yes  No
  - (g) Give name and address of previous licensee. 202 S. orange st  
RC Tacos
  - (h) Will the previous licensee surrender its license?  Yes  No

**ALL APPLICANTS FOR TRANSFER OF CLASS B LICENSES MUST ANSWER THE FOLLOWING:**

3. If granted, state any interest, directly or indirectly, that any brewer, bottler, wholesaler, manufacturer, or rectifier will hold in the premises for which you are applying

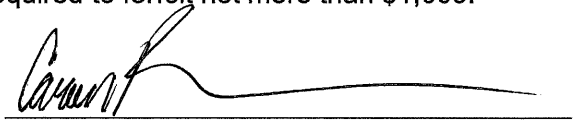
NO

4. If you do not own the fixtures, state the manner, terms and conditions under which said fixtures are held

N/A

**READ CAREFULLY BEFORE SIGNING:** Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another.

Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

  
(Signature)

**CLASS OF BUSINESS**

Name RC Tacos

Original Location 201. sorange st.

Ward \_\_\_\_\_

Proposed Location 2320 US hwy 14 E

Ward \_\_\_\_\_

License No. \_\_\_\_\_

Treasurer's Receipt No. \_\_\_\_\_

Filed 1/16/2024

Submitted to Council or Board  
\_\_\_\_\_

Approved \_\_\_\_\_ Date \_\_\_\_\_

Denied \_\_\_\_\_ Date \_\_\_\_\_