Form

AB-200

Alcohol Beverage License Application

For Municipa	al Use Only
Municipality C. NoteN	5ut/
License Period	
1024-202	รั

License(s) Requested: (up to two boxes may				Fees				
☐ Class "A" Beer	Class "B" Beer \$ <u> 2</u>	.20	License Fee	es	\$ 75.01			
Gass A" Liquor	Class B" Liquor \$	2.51	Background	I Check Fee	\$			
Glass A" Liquor (cider only) \$	Reserve "Class B" Liquor \$		Publication	Fee	\$ 300 -			
Class C" Liquor (wine only) \$			Total Fees		\$375.01			
Part A: Premises/Business Information	n							
1. Legal Business Name (individual name if sole proprietorship)								
2. Business Trade Name or DBA								
Wolfaram	•							
3. FEIN / 33 - 4172545	4. Wisconsin S			3-134				
5. Entity Type (check one)	1930 1			09				
Sole Proprietor Partnership	Limited Liability Company		rporation		fit Organization			
6. State of Organization (1) (SCONS) (Y)	7. Date of Organization 2,-24. 25		Wo X	DFI Registration	n Number			
9. Premises Address 301 E Main St			0					
10. City			11. State	12. Zip Code				
13. County	14. Governing Mynicipality: 🔽 City	□ Tourn	WI	530 15. Alderman	24 c District			
Jefferson	of: Water town		village	10.7 adolman	o Biotilot			
16. Premises Phone	17. Premises Email	,	18. Web	site				
920-318-4269 19. Premises Description - Describe the building or	hullers cellar and buildings where alcohol beverages are	noo.co	sold, stored	or consumed	and related records			
are kept. Describe all rooms within the building, only on the premises described in this application	including living quarters. Authorized al	cohol beve	rage activitie	s and storage of	of records may occur			
The bar, basement, Kite	hen , hall	orial shock	ii iicocoodi y					
20. Mailing Address (if different from premises addre	ess)							
•								
21. City			22. State	23. Zip Code				
Part B: Questions								
Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. Yes								
If yes, list the details of violation below. Atta	ach additional sheets if necessary.							
Law/Ordinance Violated	Location		Tr	ial Date				
Penalty Imposed		Was sen	tence comp	leted?	Yes No			
Law/Ordinance Violated	Location		Tr	ial Date				
Penalty Imposed		Was sen	tence comp	leted?	Yes No			

beverages. If ves. describe the nature and status o			cohol Yes No
	f pending charges using the space be	elow. Attach additional sheets	s as needed.
	9,		
Is the applicant business or any of its of individuals or entities a restricted investif yes, provide the name of the restricted.	stor with any interest in an alcohol be	everage producer or distribu	related tor? Yes No
Is the applicant business owned by and If yes, provide the name(s) and FEIN(s)	other business entity?) of the business entity owners below	. Attach additional sheets as	Yes No needed.
4a. Name of Business Entity	4b. Business	s Entity FEIN	
Have the partners, agent, or sole propri this license period? Submit proof of cor			
6. Is the applicant business indebted to ar			•
7. Does the applicant business owe past of	due municipal property taxes, assess	ments, or other fees?	Yes No
Part C: Individual Information			
List the name, title, and phone number for each Question 4: sole proprietor, all officers, directors managers, and agent of a limited liability comparation.	s, and agent of a corporation or nonprofit		
Include Form AB-100 for each person listed bel			
Last Name	First Name	Title	Phone
Heller	JETTY	Mybrat	920-318-4269
	·		
		3	
Part D: Attestation			
Part D: Attestation One of the following must sign and attest	to this application:		
One of the following must sign and attest		e corporate officer • on	ne member of an LLC
One of the following must sign and attest	I partner of a partnership er penalty of law, I have answered each isiness and not on behalf of any other incomes(s), if granted, will not be assigned to, purchasing alcohol beverages from sometics will be deemed a refusal to allow in license issued contrary to Wis. Stat. Outling false statements and affidavits in co	of the above questions complet dividual or entity seeking the lico another individual or entity. I atte authorized wholesalers. I uwinspection. Such refusal is a rechapter 125 shall be void under nnection with this application, a	tely and truthfully. I agree that the ense. Further, I agree that the agree to operate this business understand that lack of access misdemeanor and grounds for penalty of state law. I further nd that any person who know-
One of the following must sign and attest of sole proprietor one general READ CAREFULLY BEFORE SIGNING: Und I am acting solely on behalf of the applicant burights and responsibilities conferred by the lice according to the law, including but not limited to any portion of a licensed premises during in revocation of this license. I understand that an understand that I may be prosecuted for submit	I partner of a partnership er penalty of law, I have answered each isiness and not on behalf of any other incomes(s), if granted, will not be assigned to, purchasing alcohol beverages from sometics will be deemed a refusal to allow in license issued contrary to Wis. Stat. Outling false statements and affidavits in co	of the above questions complet dividual or entity seeking the lico another individual or entity. I atte authorized wholesalers. I uwinspection. Such refusal is a rechapter 125 shall be void under nnection with this application, a	tely and truthfully. I agree that the ense. Further, I agree that the agree to operate this business understand that lack of access misdemeanor and grounds for penalty of state law. I further nd that any person who know-
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