## Form AB-200

## Alcohol Beverage License Application

For Municipal Use Only	
Municipality Water turn	
License Period	
2025-2026	

License(s) Requested: (up to two boxes may be checked)		ſ	Fees provated						
Class "A" Beer \$	Class "B" Beer	\$ <u>\</u> D	0	License Fe		\$ 52500	$\forall$		
☐ "Class A" Liquor \$	☑ "Class B" Liquor .	\$	100	Backgroup	d Check Fee	\$ 7.00	$\forall$		
☐ "Class A" Liquor (cider only) \$ ☐	Reserve "Class B"	Liquor \$	ŀ	Publication			+		
Glass C" Liquor (wine only) \$						\$300.00	$\dashv$		
			Į	Total Fees		\$ 832.00			
Part A: Premises/Business Information	1								
1. Legal Business Name (individual name if sole proprietorship)  ADM 207 LLC									
2. Business Trade Name or DBA  SILVER EAGLE SAL	DON SAME								
3. FEIN 4. Wisconsin Seller's				Permit Number 32 114985 - 04					
5. Entity Type (check one)  Sole Proprietor Partnership	Limited Liability	, Company	П со	rporation	□ Nonne	fit Organization			
6. State of Organization	7. Date of Organization				DFL Registration		$\dashv$		
WISCONSIN	6.10.2				032 114	The state of the s			
9. Premises Address 2017 S SECON	JD ST.			- grow J	AII	6923			
10. City				11. State	12. Zip Code		٦		
WATERTOWN				MI	530	94			
13. County JEFFERSON	14. Governing Municip of: WATERT	NWC			15. Aldermani	c District			
16. Premises Phone	17. Premises Email		TOLAM	18. Web	site		٦		
920.342.0031	SILVEREAGLE	SALDONIA	1010 .6	6M					
19. Premises Description - Describe the building or are kept. Describe all rooms within the building, only on the premises described in this application. 207 S. SECOND ST. WATERTOW BAR AREA, KITCHEN, OUTDOOK.	oulidings where alcohol including living quarters n. Attach a man or diag	Deverages are LAuthorized al ram and addition	e produced cohol beve anal sheets	, sold, stored rage activitie if necessary	, or consumed, s and storage o	f records may occur	00%		
20. Mailing Address (if different from premises addre	ss)		<del>Por alliminations and a</del>				-		
01.00					•				
21. City				22. State	23. Zip Code				
Part B: Questions									
Has the business (sole proprietorship, partner violating federal or state laws or local ordinal.)	ership, limited liabilit nces? Exclude traffic	y company, o offenses unl	r corporat ess relate	ion) been c d to alcoho	onvicted of beverages.	Yes No			
If yes, list the details of violation below. Attac	ch additional sheets i	f necessary.							
Law/Ordinance Violated	Location			Tri	al Date	-	٦		
Penalty Imposed  Was sentence completed? Yes No									
Law/Ordinance Violated	Location						_		
Ed., Statistics violated	Location			Ir	al Date				
Penalty Imposed			Was sent	ence comp	eted?	Yes No			

Are charges for any offenses pending a beverages.	against the business? Ex	clude traffic offe	nses unless related	to alcohol Yes	√ No
If yes, describe the nature and status of	of pending charges using	the space below	v. Attach additional	sheets as needed.	
3. Is the applicant business or any of its	officers, directors, memb	pers, agent, emp	oloyees, owners, or	other related	
individuals or entities a restricted investigation of the restrict	stor with any interest in ed investor and describe	an alcohol beve e the nature of t	rage producer or d he interest.	istributor? Yes	No
4. Is the applicant business owned by and	other business entity?			·····Yes	No
If yes, provide the name(s) and FEIN(s 4a. Name of Business Entity	) of the business entity o	4b. Business Er		ets as needed.	W
•			,		
5. Have the partners, agent, or sole propr this license period? Submit proof of cor	ietor satisfied the respor	sible beverage	server training requ	irement for	□ Na
6. Is the applicant business indebted to an				- Inches	☐ No
7. Does the applicant business owe past of		10		L	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 compared to the compared to th	s, and agent of a corporatio	n or nonprofit orga	ns in the applicant bu anization, all partners	siness or businesses liste of a partnership, and all n	d in Part B, nembers,
	•	•		AD 404	
Include Form AB-100 for each person listed bel	low. Corporations and LLC		agent by including Ec		
Include Form AB-100 for each person listed bel Last Name	First Name	s must appoint an		Phone	
		Title		Phone	2.0031
Last Name	First Name	Title	9	Phone	2-0031
Last Name	First Name	Title	9	Phone	2.0031
Last Name	First Name	Title	9	Phone	2-1031
Last Name	First Name	Title	9	Phone	1. 1031
Last Name  KOSTROSLI  Part D: Attestation One of the following must sign and attest in	First Name  AMANDA  to this application:	Title bw	9	Phone	2-10031
Part D: Attestation One of the following must sign and attest to sole proprietor • one general	First Name  AMAJOA  to this application: I partner of a partnership	by one co	PINER/MANAG	Phone  FR 920 · 344  • one member of an	LLC
Part D: Attestation One of the following must sign and attest to sole proprietor one general READ CAREFULLY BEFORE SIGNING: Undiam acting solely on behalf of the applicant but	to this application:  I partner of a partnership er penalty of law, I have ar usiness and not on behalf of	o • one co	rporate officer	Phone  Ph	LLC agree that
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Part D: Attestation One of the following must sign and attest to sole proprietor one general rights and responsibilities conferred by the lice according to the law, including but not limited to any portion of a licensed premises during in	to this application:  I partner of a partnership er penalty of law, I have ar usiness and not on behalf of ense(s), if granted, will not to, purchasing alcohol bev spection will be deemed a	o • one consisted and other individuals of the consistency of the constant of	rporate officer le above questions co lual or entity seeking other individual or en authorized wholesales	• one member of an ompletely and truthfully. It the license. Further, I agretity. I agree to operate the ers. I understand that lacity is a misdemeanor and only is a misdemea	LLC I agree that ree that the is business or counds for
Part D: Attestation  One of the following must sign and attest to sole proprietor one general READ CAREFULLY BEFORE SIGNING: Under 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 a understand that I may be prosecuted for submit	to this application: I partner of a partnership er penalty of law, I have an usiness and not on behalf of ense(s), if granted, will not to, purchasing alcohol bev spection will be deemed a ny license issued contrary titing false statements and	• one co aswered each of the of any other individe be assigned to and erages from state refusal to allow insto to Wis. Stat. Chap affidavits in conne	rporate officer le above questions co lual or entity seeking other individual or en authorized wholesale ster 125 shall be void ction with this applica	• one member of an ompletely and truthfully. It agree to operate the ars. I understand that lack a under penalty of state lation, and that any person	LLC l agree that ree that the is business of access grounds for two I further.
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