

#### City of Neenah Liquor Licensing Review Subcommittee

(of the Public Services & Safety Committee)

# Agenda Tuesday, July 29, 2025 at 4:30pm City Hall Council Chambers 211 Walnut Street

**NOTICE IS HEREBY GIVEN,** pursuant to the requirements of Wis. Stats. Sec. 19.84, that a majority of the Neenah Common Council may be present at this meeting. Common Council members may be present to gather information about a subject over which they have decision-making responsibility. This may constitute a meeting of the Neenah Common Council and must be noticed as such. The Council will not take any formal action at this meeting.

- I. Approval of minutes of October 8, 2024 Meeting.
- II. Public Appearances.
- III. Unfinished Business.
- IV. New Business.
  - A. Review and make a recommendation on the Original "Class B" Combination Alcohol Beverage Retail License Application for Sherrytown 3,LLC, d/b/a Sherrytown Station, 432 Sherry Street, Julie Becker, Agent.
  - B. Review and make recommendation on the Original "Class B" Combination Alcohol Beverage Retail License Application Charctails, LLC, d/b/a Town Council Kitchen & Bar, 133 W. Wisconsin Avenue, Alex Fehrenbach, Agent.
- VI. Any announcements/questions for the Committee.

#### VII. Adjournment

In accordance with the requirements of Title II of the Americans with Disabilities Act (ADA), the City of Neenah will not discriminated against qualified individuals with disabilities on the basis of disability in its services, programs, or activities. If you need assistance, or reasonable accommodation in participating in this meeting or event due to a disability as defined under the ADA, please call the Clerk's Office (920) 886-6100 or the City's ADA Coordinator at (920) 886-6110 or e-mail <a href="mailto:clerk@ci.neenah.wi.us">clerk@ci.neenah.wi.us</a> at least 48 hours prior to the scheduled meeting or event to request an accommodation.

## Minutes of the Liquor Licensing Review Subcommittee of the Public Services & Safety Committee Tuesday, October 8, 2024 at 4:00 p.m. City Hall, Council Chambers

**MEMBERS PRESENT**: Aldermen Weber, Borchardt, and Pollnow, Fire Chief Teesch, City Attorney Rashid, and City Clerk Nagel.

<u>ALSO PRESENT</u>: Erik Gialdella of Rev's Neenah, LLC, and Andrea Simonis of Grainworks Old + New, LLC

**EXCUSED:** Director of Community Development & Assessment Haese and Police Chief Olson

Chairman Weber called the meeting to order at 4:00 p.m.

- I. Approval of minutes of July 30, 2024 (minutes can be found on the city website).
  Clerk Nagel asked that this item be stricken from the agenda as the minutes were not included in the packet.
- II. <u>Public Appearances</u>: None.
- III. <u>Unfinished Business:</u> None.

#### IV. New Business:

A. Review and make a recommendation on the Original "Class B" Combination Alcohol Beverage Retail License Application and Plan of Operation for Revs Neenah, LLC. d/b/a Rolling Thunder Lanes, 934 Byrd Avenue, William Smith, Agent.

Erik Gialdella of Rev's Neenah, LLC, was present to answer any questions.

The Clerk's Office received a Transferring Licenses from Business to Business application, an Original "Class B" Combination Liquor License Application, and an Operations Plan from Rev's Neenah, LLC, who was purchasing the Rolling Thunder Lanes on at 834 Byrd Avenue. Part of the sale transaction is the transfer of the liquor license.

Clerk Nagel had a phone conversation with Mr. Giadella who stated that a closing date has not been established at this time but it is anticipated to be early November. With the closing date not confirmed, Clerk Nagel requested the motion include a contingency of a closing date being established.

A background check was successfully completed on Rolling Thunder Lanes, as well as on Erik Gialdella and William Smith with an approval recommendation from the Police Department and no monies owed to the city.

MSC by Pollnow/Rashid to recommend Public Services and Safety Committee recommend Council approve the Original "Class B" Combination Alcohol Beverage Retail License Application and Plan of Operation for Rev's Neenah, LLC, d/b/a Rolling Thunder Lanes, William Smith, agent, contingent upon a closing date being established, all voting aye.

B. Review and make recommendation on the Original "Class B" Intoxicating Liquor Retail License Application and Plan of Operation for Grainworks Old + New, LLC, d/b/a Grainworks Old + New, 200 Main Street, Brian Duncan, Agent.

Andrea Simonis of Grainworks Old + New, LLC, was present to answer any questions.

Clerk Nagel walked the committee through her memo which was included in the packet. A background check was successfully completed on Grainworks Old + New, as well as on partners Brian and Chad Duncan with an approval recommendation from the Police Department and no monies owed to the city.

Clerk Nagel answered the question that if the store decides to become a restaurant in the future, does this license allow them to serve cocktails and beer. The license is for intoxicating liquor only, therefore Grainworks would have to apply for a fermented malt Class B to sell beer. Grainworks would also have to work with Community Development for building inspections as well as the Winnebago County Health Department for a food service license.

Grand Chute struggled making this decision because they did not want all the Class A Liquor Stores to apply for a Class B Retail license. Essentially, this is a bar within a liquor store and Grand Chute did not want all their regular or reserve licenses used in this application.

Ms. Simonis commented that its is not the intention of Grainworks to become a bar. Local businesses have approached Grainworks to host private events and social gatherings. It would allow Grainworks to do private taskings outside of store hours and expand it to the community as well. Customers would be able to purchase a large sample while they are shopping. There is also an opportunity to expand the business by forming special groups which is popular in the bourbon world. Grainworks would like to create a business that is more than a liquor store.

MSC by Pollnow/Borchardt to recommend Public Services and Safety Committee approves the Original "Class B" Intoxicating Liquor Retail License Application and Plan of Operation for Grainworks Old + New, LLC, d/b/a Grainworks Old + New, 200 Main Street, Brian Duncan, Agent. Motion carried in a voice vote, 4-0-2 with Rashid and Nagel voting present.

- V. <u>Any announcements/questions for the Subcommittee</u> None.
- VI. Adjournment

MSC by Pollnow/Teesch to adjourn at 4:14 p.m., all voting aye.

Respectfully submitted,

Charlotte Nagel, City Clerk

Sharlotte K. Nazel

## Form AB-200

#### Alcohol Beverage License Application

	For Municipal Use Only	
Munic	ipality	
Licen	se Period	

License(s) Requested: (up to two boxes ma		Fees			
☐ Class "A" Beer \$	X Class "B" Beer \$ _ <b></b> .	License Fees	\$ 500.00		
☐ "Class A" Liquor \$		Background (	Check Fee \$		
"Class A" Liquor (cider only) \$	Reserve "Class B" Liquor \$	—— Publication F	ee \$ 65. °°		
Class C" Liquor (wine only) \$		Total Fees	\$ 565.°°		
Part A: Premises/Business Information	nn	*			
Legal Business Name (individual name if sole page)					
Sherry town 3, LL 2. Business Trade Name or DBA	С				
Sherry town Station		eller's Permit Number			
33-4979101	7, 11300013111	103208365	4-04		
5. Entity Type (check one)	130	10)20000			
Sole Proprietor Partnership	Limited Liability Company	Corporation	Nonprofit Organization		
6. State of Organization	7. Date of Organization	S 743	FI Registration Number		
9 Premises Address	5-6-2025	3101	5644		
432 Sherry St.					
10. City		11. State 1	2. Zip Code		
Neenah		WI	54956		
13. County	14. Governing Municipality: X City	Town Village 1	5. Aldermanic District		
Winnebago	of: Neenah  17. Premises Email	18. Websi	to .		
16. Premises Phone	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
920-215-3465  19. Premises Description - Describe the building of	Sherry townstation	produced sold, stored, o	or consumed, and related records		
are kept. Describe all rooms within the building	g, including living quarters. Authorized all	conoi beverage activities i	and storage of records may occur		
only on the premises described in this applica	tion. Attach a map or diagram and addition	nai sneets ii necessary.			
Tavern - Main level	(first Floor) / Bas	sement Stor	age		
			3		
20. Mailing Address (if different from premises add	lress)				
21. City		22. State	23. Zip Code		
Part B: Questions					
Has the business (sole proprietorship, par violating federal or state laws or local ordi	tnership,  limited liability company, o nances? Exclude traffic offenses unl	r corporation) been cor ess related to alcohol t	nvicted of Deverages. Yes X No		
If yes, list the details of violation below. At	tach additional sheets if necessary.				
Law/Ordinance Violated	Location	Trìa	l Date		
Penalty Imposed		Was sentence comple	ted? Yes No		
Law/Ordinance Violated	Location	Tria	I Date		
Daneth Imposed					
Penalty Imposed		Was sentence comple	eted? Yes No		

beverages.	ding against the business					X No
If yes, describe the nature and st	atus of pending charges u	sing the space be	elow. Attach	additional sheets	as needed.	
3. Is the applicant business or any	of its officers directors m	embers agent o	employees o	wners, or other	related	
individuals or entities a restricted lf yes, provide the name of the re	I investor with any interes	t in an alcohol be	everage prod	lucer or distribut	or? Yes	<b>⋈</b> No
4. Is the applicant business owned	by another business entity	?		tional sheets as	Yes	<b>⋈</b> No
If yes, provide the name(s) and F  4a. Name of Business Entity	EIN(s) of the business em		s Entity FEIN	lional sheets as	nocucu.	
4a. Name of business Entity		13, 343,113				
5. Have the partners, agent, or sole	proprietor satisfied the re-	sponsible bevera	ge server tra	ining requiremer	nt for	
this license period? Submit proof	of completion				165	No No
6. Is the applicant business indebte	d to any wholesaler beyon	nd 15 days for be	er or 30 days	for liquor/wine?	Yes	X No X No
7. Does the applicant business owe	past due municipal prope	erty taxes, assess	ments, or oth	ner rees?		Z 110
Part C: Individual Information				production is said.	es husely according to	Lin Port B
List the name, title, and phone number f Question 4: sole proprietor, all officers, of managers, and agent of a limited liability	lirectors, and agent of a corpo	oration or nonprofit	organization, a	all partners of a par	rtnership, and all m	embers,
Include Form AB-100 for each person lis		LLCs must appoin		ncluding Form AB-		
Last Name	First Name		Title		Phone	
Becker	Julie		OWNer			
					1	
Part D: Attestation	Mark W. C. Branch					
One of the following must sign and	attest to this application:					
- colo proprietor - one (	eneral nartner of a nartne	rship • one	e corporate o	officer • on	e member of an I	LC
DEAD CAREELL LY REFORE SIGNIN	eneral partner of a partne G: Under penalty of law. I ha	ve answered each	e corporate of	questions complete	ely and truthfully.	agree that
READ CAREFULLY BEFORE SIGNIN	G: Under penalty of law, I ha	ve answered each	of the above of	questions complete	ely and truthfully. I ense. Further, I agr	agree that ee that the
READ CAREFULLY BEFORE SIGNIN I am acting solely on behalf of the appli rights and responsibilities conferred by	G: Under penalty of law, I ha cant business and not on be the license(s), if granted, wil	ve answered each half of any other in I not be assigned to I beverages from s	of the above of dividual or ento another individual or ento another individual tate authorize	questions complete ity seeking the lice ridual or entity. I a d wholesalers. I u	ely and truthfully. I ense. Further, I agr agree to operate thi nderstand that lack	agree that ee that the s business of access
READ CAREFULLY BEFORE SIGNIN I am acting solely on behalf of the appli rights and responsibilities conferred by according to the law, including but not to any portion of a licensed premises d	G: Under penalty of law, I ha cant business and not on be the license(s), if granted, wil imited to, purchasing alcoho uring inspection will be deem	ve answered each half of any other in I not be assigned to I beverages from seled a refusal to allotrary to Wis Stat.	of the above of dividual or ento another indivitate authorized with inspection.	questions complete ity seeking the lice vidual or entity. I a d wholesalers. I u Such refusal is a r hall be void under	ely and truthfully. I ense, Further, I agr agree to operate thi nderstand that lack misdemeanor and of penalty of state la	agree that ee that the s business of access grounds for w. I further
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READ CAREFULLY BEFORE SIGNIN I am acting solely on behalf of the applirights and responsibilities conferred by according to the law, including but not to any portion of a licensed premises d revocation of this license. I understand understand that I may be prosecuted foingly provides materially false informational Last Name  Decker Title  Signature  Part E: For Clerk Use Only	G: Under penalty of law, I ha cant business and not on be the license(s), if granted, wil imited to, purchasing alcohouring inspection will be deem that any license issued control submitting false statements on on this application may be mail	ve answered each half of any other in I not be assigned to I beverages from set a refusal to allot trary to Wis. Stat. (and affidavits in compared to forfeit First Name	of the above of dividual or endo another indivitate authorizes we inspection. Chapter 125 sonnection with not more that	questions complete ity seeking the lice idual or entity. I a d wholesalers. I u Such refusal is a r hall be void under this application, an 1 \$1,000 if convict	ely and truthfully. I ense, Further, I agree to operate thinderstand that lack misdemeanor and or penalty of state land that any person ed.  M.I. S. Phone	agree that ee that the s business of access grounds for w. I further who know-
READ CAREFULLY BEFORE SIGNIN I am acting solely on behalf of the applirights and responsibilities conferred by according to the law, including but not to any portion of a licensed premises d revocation of this license. I understand understand that I may be prosecuted foingly provides materially false informational Last Name  Becker Title  Signature  Signature  Becker	G: Under penalty of law, I ha cant business and not on be the license(s), if granted, wil imited to, purchasing alcohouring inspection will be deem that any license issued control submitting false statements on on this application may be mail	ve answered each half of any other in I not be assigned to I beverages from set a refusal to allot trary to Wis. Stat. (and affidavits in compared to forfeit First Name	of the above of dividual or endo another indivitate authorizes we inspection. Chapter 125 sonnection with not more that	questions complete ity seeking the lice vidual or entity. I a d wholesalers. I u Such refusal is a r hall be void under this application, ar \$1,000 if convict	ely and truthfully.  ense. Further, I agree to operate thi nderstand that lack penalty of state land that any person ed.  Phone	agree that ee that the s business of access grounds for w. I further who know-

Form AB-101

#### Alcohol Beverage Appointment of Agent

Date	

Agent Type (check one)					
☑ Original (no fee)	Successor (\$10 fee for mu	nicipal licen	sees only)		
Part A: Business Information	1				
Legal Business Name (individual na					
Sherry town 3, L 2. Business Trade Name or DBA	.LC				
Sherrytown Sta	tion				
3. Entity Type (check one)	Limited Liability Company		Corporation	☐ Nonprofit Organiz	zation
4. Alcohol Beverage Business Authoriz	ration (check one)	5. If successo	agent, provide State F	Permit or Municipal Retail L	icense Number
Municipal Retail License  6. Describe the reason for appointing a		is checked ah	ove.		
b. Describe the reason for appointing a	a successor agent, it successor t	is officially	J+U.		
D 4D 8 41-f					
Part B: Agent Information  1. Last Name		2. First Name			3. M.I.
		Julie			S
Becker 4. Email		JUNE		5. Phone	1
sherry town station	nlla @ amail.	om			
6. Home Address	The e girmin				
N8635 Firelane	10				
7. City		8. State	9. Zip Code	10. Date of Bi	irth
Menasha		MI	54952		
11. Drivers License/State ID Number				e/State ID State of Issuand	ce
			IW		
Part C: Agent Questions					
Have you satisfied the respons     Submit proof of completion.	sible beverage server trainin	g requireme	nt?		Yes No
2. Have you completed Form AB- Form AB-300, Alcohol Beverag	100, Alcohol Beverage Indiq ge Personal Questionnaire (	vidual Quesi permittee)?	ionnaire (licensee)	or	Yes No
Have you been a Wisconsin re     See instructions for exceptions	sident for at least 90 continu	uous days?.		<u>X</u>	Yes No

Part D: Business Attestation		
corporation, nonprofit organization beverage activities on such premon behalf of the entity. If I am apply the prosection of the prosectio	GNING: I, the <b>Undersigned</b> , authorize the above-name on, or limited liability company with full authority and courses. I certify that I am authorized by the above-named pointing a successor agent, I rescind all previous agent accuted for submitting false statements and affidavits in compared to the submitting false statements and affidavits in compared to the submitting false information on this application may be	entity to authorize this individual to act appointments for this premises. Further, connection with this application, and that required to forfeit not more than \$1,000
Last Name	First Name	M.I.
Becker	Julie	S
Title	Email	Phone
Owner	sherry town station 1/c@g	mail.com
Part E: Agent Attestation		
nonprofit organization, or limited on the premises for the above-nand affidavits in connection with t	GNING: I, the <b>Agent</b> , hereby accept this appointment as liability company and assume full responsibility for the camed business. I further understand that I may be protein application, and that any person who knowingly protein the more than \$1,000 if convicted.	secuted for submitting false statements
Last Name	First Name	M.I.
Becker	Julie	S
Signature D. Becke	ar	6 15 2025
71		• .

## AB-200

### Alcohol Beverage License Application

For Municipal Use	Only
funicipality	
icense Period	

License(s) Requested: (up to two boxes may be checked)			Fees				
☐ Class "A" Beer \$ 🗹	Class "B" Beer	\$		License F	ees	\$	
☐ "Class A" Liquor \$	"Class B" Liquor .	\$		Backgrou	nd Check Fee	\$	
"Class A" Liquor (cider only) \$	Reserve "Class B"	Liquor \$		Publication Fee		\$	
Class C" Liquor (wine only) \$	only) \$			Total Fee	5	\$	
Part A: Premises/Business Information				0			× 2,
1. Legal Business Name (individual name if sole prop	rietorship)						
Charctails LLC							
2. Business Trade Name or DBA							
Town Council Kitchen & Bar							
3. FEIN		4. Wisconsin S	Seller's Pe	rmit Number	-		
47-3639793		456-102	288088	31-02			
5. Entity Type (check one)							
☐ Sole Proprietor ☐ Partnership	✓ Limited Liability	y Company	☐ Co	rporation	☐ Nonpro	fit Organizat	ion
6. State of Organization	7. Date of Organization	on		8. Wiscons	in DFI Registration	on Number	
WI	03/22/2015			C0906	68		
9. Premises Address							
133 W Wisconsin Ave							
10. City				11. State	12. Zip Code		
Neenah				WI	54956		
13. County	14. Governing Municip	pality: City	Town	☐ Village	15. Aldermani	c District	
Winnebago	of: Neenah				1		
16. Premises Phone	17. Premises Email			18. We	ebsite		
(920) 558-3500	towncounciln	eenah@gm	ail.co	om			
19. Premises Description - Describe the building or be are kept. Describe all rooms within the building, in only on the premises described in this application. Two-story, restaurant and kitchen and dining, back kelloor, storage in basement.	ncluding living quarter n.Attach a map or diag bar 1700 sc itchen, sep	s. Authorized al gram and addition of ft on	lcohol beve onal sheet first	erage activiti s if necessa floor	es and storage o y. , combin	of records may ed	ecords / occur
20. Mailing Address (if different from premises addres	is)						
21. City				22. State	23. Zip Code		
Part B: Questions							
Has the business (sole proprietorship, partner violating federal or state laws or local ordinal control of the control of	nces? Exclude traffic	c offenses un	or corpora less relate	ition) been ed to alcoh	convicted of ol beverages.	Yes [	☑ No
If yes, list the details of violation below. Attac		ir necessary.					
Law/Ordinance Violated	Location				Frial Date		
Penalty Imposed	3		Was ser	ntence com	pleted?	Yes [	☐ No
Law/Ordinance Violated	Location				rial Date		
Penalty Imposed			Was ser	ntence com	pleted?	☐ Yes [	] No

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol Yes volume No beverages.								
If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.								
Is the applicant business or any of individuals or entities a restricted in If yes, provide the name of the rest	vestor with any	interes	st in an alcohol b	ever	age prod	lucer or distribute	related or?  Yes	s 🗹 No
<ol> <li>Is the applicant business owned by If yes, provide the name(s) and FEII</li> </ol>	another busines N(s) of the busi	ss entity ness en	y?	 v. <b>At</b> t	ach addit	tional sheets as i	needed.	S No
4a. Name of Business Entity			4b. Busines	s En	tity FEIN			
5. Have the partners, agent, or sole pr this license period? Submit proof of	oprietor satisfie completion	d the re	esponsible bevera	ge s	erver trai	ining requiremen	it for ✔ Yes	s 🗌 No
6. Is the applicant business indebted to	any wholesale	er beyor	nd 15 days for be	er or	30 days	for liquor/wine?	Tes	s 🗹 No
7. Does the applicant business owe pa								s 🗹 No
Part C: Individual Information								
List the name, title, and phone number for a	ach person or en	tity hold	ing the following po	sition	ns in the a	pplicant business o	or businesses list	ed in Part B,
Question 4: sole proprietor, all officers, direct managers, and agent of a limited liability co	ctors, and agent of	of a corp	oration or nonprofit	orga	nization, a	all partners of a par	tnership, and all	members,
Include Form AB-100 for each person listed	below. Corporat	ions and	d LLCs must appoin	t an a	agent by ir	ncluding Form AB-	101.	
Last Name	First Name			Title	•		Phone	
Fehrenbach	Alex			Ow	ner			
				-				
2								
Part D: Attestation	-							
One of the following must sign and atte	est to this applic	cation:						
Ţ Ţ	eral partner of a		ership • on	e co	rporate o	fficer • one	e member of an	LLC
READ CAREFULLY BEFORE SIGNING:	Inder penalty of	law, I ha	eve answered each	of th	e above q	uestions complete	ely and truthfully.	I agree that
I am acting solely on behalf of the applicar rights and responsibilities conferred by the	t business and n license(s), if gra	ot on be nted, wi	shalf of any other in Il not be assigned to	idivid o and	lual or enti other indiv	ity seeking the lice idual or entity. I a	ense. Furtner, I ag gree to operate t	gree that the
according to the law, including but not limit	ed to, purchasin	a alcoho	of beverages from s	state	authorized	d wholesalers. I ur	nderstand that la	ck of access
to any portion of a licensed premises durin revocation of this license. I understand that	g inspection will t anv license iss	be deen ued con	ned a refusal to allo itrary to Wis, Stat, (	ow ins Chap	spection. s iter 125 sh	such refusal is a fi nall be void under	penalty of state	law. I further
understand that I may be prosecuted for su	bmitting false sta	tements	s and affidavits in co	onne	ction with t	this application, an	nd that any perso	n who know-
ingly provides materially false information	on this applicatio	n may b	e required to forreit	t not	more than	1 \$1,000 if convicte		l.l.
Last Name Fehrenbach			Alex				"	P
Title		Email	AICA				Phone	
Owner			enbach.alex	x@a	mail.	com		
					Date			
Signature / Signature						07/2	24/20 <b>25</b>	
Part E: For Clerk Use Only	Saugal II.							
Date Application Was Filed With Clerk Lie	ense Number				Date Lic	ense Granted	Date License	ssued
Signature of Clerk/Deputy Clerk						Date Provisional	License Issued (i	f applicable)

Form AB=101

#### Alcohol Beverage Appointment of Agent

Date			

Agent Type (check one)			
☐ Original (no fee) Successor (\$10 fee for n	nunicipal licensees only	)	
Original (no loo)	,		
Part A: Business Information			
Legal Business Name (individual name if sole proprietor)			
Charctails 11c			
2. Business Trade Name or DBA			
Town Council Kitchen & Bar			
3. Entity Type (check one) Limited Liability Compan	y Corpora	tion Nonprofit Or	ganization
4. Alcohol Beverage Business Authorization (check one)	5. If successor agent, pro	ovide State Permit or Municipal R	etail License Number
Municipal Retail License	456-102880	1831-02	
6. Describe the reason for appointing a successor agent, if successor	or is checked above.		
sale of business			
are or porto			
Part B: Agent Information	2. First Name		3. M.I.
1. Last Name	Alex		P
tehrenbach 4. Email	/-/CX	5. Phone	e l
fehren bech. alex@gmail.com 6. Home Address			
312 Smith St			
7. City	8. State 9. Zip Coo	le 1 <u>0. Date</u>	of Birth
Neeral	W 549	56	
11. Drivers License/State ID Number		ivers License/State ID State of Is	suance
F651 0158 9187 05	l N		
Part C: Agent Questions	THE KON THE TO	7 1 1 7 1 1	
	i		. Yes No
<ol> <li>Have you satisfied the responsible beverage server train Submit proof of completion.</li> </ol>	ling requirement?		. Pies [] No
2. Have you completed Form AB-100, Alcohol Beverage In-	dividual Questionnaire	(licensee) or	
Form AB-300, Alcohol Beverage Personal Questionnaire	(permittee)?		Yes No
O II L Milesensia sesidentifes at least 00 sesti	inuoue daye?		DYPS DNO
3. Have you been a Wisconsin resident for at least 90 continuous See instructions for exceptions.	inuous days?		Yes No
Have you been a Wisconsin resident for at least 90 continuous for exceptions.	inuous days?		Yes No

READ CAREFULLY BEFORE SIGNING: I, the <b>Undersigned</b> , authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I 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.					
Last Name	First Name		M.I.		
HORAN	JONATIANOZ		R		
Title	Email	Phone	Э		
OMNER	town council number a	mall.com			
Signature B 7	,	7/28/20	525		
Part E: Agent Attestation	TO THE RESERVE OF THE PARTY OF				
READ CAREFULLY BEFORE SIGNING: I, the <b>Agent</b> , hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. 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.					
Last Name	First Name		M.I.		
Fehrenbach	Alex				
Signature Adulhant		7/24/25	2		

Part D: Business Attestation