



License Committee

Regular Meeting

335 South Broadway
De Pere, WI 54115
<http://www.de-pere.org>

Agenda

Tuesday, May 7, 2019

7:00 PM

De Pere City Hall Riverview Room

Pursuant to Wisconsin Statutes 19.84, Notice is hereby given to the public that a meeting of the **License Committee** of the City of De Pere will be held on **May 7, 2019** at **7:00 PM** in the **De Pere City Hall Riverview Room, 335 S. Broadway, De Pere, WI 54115**.

Call to Order

1. Roll Call
2. Election of Chair and Vice-Chair.
3. Approval of the Minutes of the April 16, 2019 License Committee Meeting.
4. Public Comment Period and other Announcements.
5. Operator License Applications.*
6. Renewal applications for the licensing period of July 1, 2019 to June 30, 2020:*
 - A. Class "A" Fermented Malt Beverage/"Class A" Cider Licenses
 - B. Class "B" Fermented Malt Beverage Licenses
 - C. Class "B" Fermented Malt Beverage/"Class C" Wine Licenses
7. Adjournment.

Respectfully Submitted,

Carey Danen, Clerk

***Items with an asterisk require City Council approval.**

Agenda Sent To:

Alderspersons
City Administrator
Mayor
Department Heads
TV, Newspapers & Radio Stations
Kress Family Library
De Pere Chamber of Commerce
Zachary A. Crueger
Chelsea H. Anderson
Andrew W. Bussiere
Natalia Bussiere
Paul T. Mason
Lisa M. Shoemaker
Matt C. Tease
Thomas J. VanDeHei
Julie A. Wendlendt
Jay W. Wendt

Kathleen J. Wucherer
Angela J. Berg
Samuel J. Boyd
Annabelle R. Broeffle
Jessica L. Duquaine
Michael R. Hoffman
Kayla M. Mallo
Ivete C. Miller
Ryan W. Nelson
Amy C. Pagenkopf
Steve M. Schroeder
Allison R. Steiner
Kendra B. Szalkowski
Broderick R. VanDenHeuvel
Michael Schilawski
Jacob P. Anderson
Daniel J. Pamperin
Vicki Radue
Mohammad Mirhashemi
Timothy James Jelinski
Mark Patel

li



City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: May 7, 2019

DEPARTMENT: City Clerk

FROM: Carey Danen

SUBJECT: Election of Chair and Vice-Chair.



City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: May 7, 2019

DEPARTMENT: City Clerk

FROM: Carey Danen

SUBJECT: Approval of the Minutes of the April 16, 2019 License Committee Meeting.

ATTACHMENTS:

- 4-16-19 License Committee Minutes_Draft (PDF)



License Committee

Regular Meeting

335 South Broadway
De Pere, WI 54115
<http://www.de-pere.org>

Draft Minutes

Tuesday, April 16, 2019

7:00 PM

De Pere City Hall Riverview Room

1. Call to Order. The meeting was called to order at 7:00 PM by Alderperson James Boyd.

Attendee Name	Title	Status	Arrived
James Boyd	Alderperson	Present	
Dan Carpenter	Alderperson	Present	
Jonathon Hansen	Alderperson	Present	

2. Approval of the minutes of the April 3, 2019 License Committee meeting.

RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Dan Carpenter, Alderperson
SECONDER:	Jonathon Hansen, Alderperson
AYES:	James Boyd, Dan Carpenter, Jonathon Hansen

3. Public Comment Period and other Announcements.

None.

4. Operator License Applications.*

New Operator License Application #9 for Dean F. Milkie was presented. Alderperson Boyd moved, seconded by Alderperson Carpenter to open the meeting. Upon vote, motion carried unanimously. The applicant answered the Committee's questions. Alderperson Hansen moved, seconded by Alderperson Carpenter to close the meeting. Upon vote, motion carried unanimously. Alderperson Carpenter moved, seconded by Alderperson Hansen to table New Operator License Application #4 and to approve #1-3 and #5-11. Upon vote, motion carried unanimously.

Previously Tabled Operator License Application #1 for Ryan R. Barr was presented. Alderperson Boyd moved, seconded by Alderperson Carpenter to open the meeting. Upon vote, motion carried unanimously. The applicant answered the Committee's questions. Alderperson Carpenter moved, seconded by Alderperson Hansen to close the meeting. Upon vote, motion carried unanimously. Alderperson Boyd moved, seconded by Alderperson Carpenter to approve Previously Tabled Operator License Application #1. Upon vote, motion carried unanimously.

Alderperson Carpenter moved, seconded by Alderperson Hansen to approve Temporary Operator License Applications #1-6. Upon vote, motion carried unanimously.

5. Application for a Class "A" Fermented Malt Beverage/"Class A" Intoxicating Liquor License for Kwik Trip, Inc. (DBA Kwik Trip #1060), 1620 Lawrence Dr. Submitted by Kwik Trip, Inc., Agent: Daniel J. Schmidt, Wrightstown, WI.*

RESULT:	ADOPTED [UNANIMOUS]
MOVER:	Dan Carpenter, Alderperson
SECONDER:	Jonathon Hansen, Alderperson
AYES:	James Boyd, Dan Carpenter, Jonathon Hansen

6. Review of Ordinance #18-18, Regarding Online Ordering and Curbside Pick-up of Alcohol Beverages.

City Clerk Carey Danen obtained information from the agent for Festival Foods. He shared that less than 10% of their online orders have included alcohol beverages. They have had no attempts by underage individuals to purchase alcohol using this method. He stated that initially Festival had to turn away a few shoppers because the person picking up wasn't the same person who placed the order, as required by the ordinance. Since making this stipulation more visible on their website, they have not had any further occurrences. The Clerk stated that Police Chief Derek Beiderwieden reported no issues with either location utilizing curbside pick-up. Committee members concluded that there is no reason to bring this item back unless complaints are received.

7. Adjournment.

Aldersperson Hansen moved, seconded by Aldersperson Carpenter to adjourn the meeting at 7:14 PM. Upon vote, motion carried unanimously.

Respectfully Submitted,

Carey Danen, Clerk



City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: May 7, 2019
DEPARTMENT: City Clerk
FROM: Carey Danen
SUBJECT: Operator License Applications.*

ATTACHMENTS:

- 5-7-19 (PDF)

CITY OF DE PERE
License Committee - May 7, 2019

Previously Tabled Operator License Applications	
1	CRUEGER, ZACHARY A.
2	PAGENKOPF, AMY C.

Temporary Operator License Applications	
1	ANDERSON, CHELSEA H.
2	BUSSIERE, ANDREW W.
3	BUSSIERE, NATALIA
4	MASON, PAUL T.
5	SHOEMAKER, LISA M.
6	TEASE, MATT C.
7	VAN DE HEI, THOMAS J.
8	WENDLENDT, JULIE A.
9	WENDT, JAY W.
10	WUCHERER, KATHLEEN J.

New Operator License Applications	
1	BERG, ANGELA J.
2	BOYD, SAMUEL J.
3	BROEFFLE, ANNABELLE R.
4	DUQUAINE, JESSICA L.
5	HOFFMAN, MICHAEL R.
6	MALLO, KAYLA M.
7	MILLER, IVETE C.
8	NELSON, RYAN W.
9	SCHROEDER, STEVE M.
10	STEINER, ALLISON R.
11	SZALKOWSKI, KENDRA B.
12	VAN DEN HEUVEL, BRODERICK R.

Attachment: 5-7-19 (8175 : Operator License Applications.*)



City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: May 7, 2019

DEPARTMENT: City Clerk

FROM: Carey Danen

SUBJECT: Renewal applications for the licensing period of July 1, 2019 to June 30, 2020:*

ATTACHMENTS:

- License Renewal List (PDF)

MAY 7, 2019 LICENSE COMMITTEE MEETING

Renewal Applications for Class “A” Fermented Malt Beverage Licenses, “Class A” Cider Licenses, Class “B” Fermented Malt Beverage Licenses, and “Class C” Wine Licenses for the licensing period of July 1, 2019 to June 30, 2020.

CLASS “A” BEER & “CLASS A” CIDER

- 1) De Pere Shell Inc (DBA De Pere Shell), 841 Main Av. Submitted by De Pere Shell Inc, Agent: Michael Schilawski, Green Bay, WI.
- 2) GCS Landing LLC (DBA GCS Landing Shell), 1063 N Broadway. Submitted by GCS Landing LLC, Agent: Jacob P. Anderson, Green Bay, WI.
- 3) GCS Operations LLC (DBA Riverside Shell), 1010 S Broadway. Submitted by GCS Operations LLC, Agent: Daniel J. Pamperin, De Pere, WI.
- 4) GCS Holdings of De Pere LLC (DBA Scheuring Shell), 1511 Lawrence Dr. Submitted by GCS Holdings of De Pere LLC, Agent: Daniel J. Pamperin, De Pere, WI.

CLASS “B” BEER

- 1) Radue Cinemas Inc (DBA De Pere Cinema), 417 George St. Submitted by Radue Cinemas Inc, Agent: Vicki Radue, Green Bay, WI.
- 2) Gyro Kabobs III LLC (DBA Gyro Kabobs), 337 Main Av. Submitted by Gyro Kabobs III LLC, Agent: Mohammad Mirhashemi, Greenville, WI.

CLASS “B” BEER & “CLASS C” WINE

- 1) Aunt Ethel’s LLC (DBA Aunt Ethel’s), 377 Main Av. Submitted by Aunt Ethel’s LLC, Agent: Timothy James Jelinski, De Pere, WI.
- 2) Luna Coffee LLC (DBA Luna Café and Roastery), 330 Main Av. Submitted by Luna Coffee LLC, Agent: Mark Patel, De Pere, WI.



City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: May 7, 2019

DEPARTMENT: City Clerk

FROM: Carey Danen

SUBJECT: A. Class "A" Fermented Malt Beverage/"Class A" Cider Licenses

ATTACHMENTS:

- Class A Beer-Class A Cider Renewals_5-7-19 (PDF)

CLASS "A" FERMENTED MALT BEVERAGE/

"CLASS A" CIDER ONLY

LICENSE RENEWALS

FOR THE 2019-2020 LICENSING PERIOD

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: ☐ Town of }
☐ Village of } DE PERE
☒ City of }

County of BROWN Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE ☐ Individual ☐ Partnership ☐ Limited Liability Company
☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company DE PERE SHELL INC

Address of Corporation/Limited Liability Company (if different from licensed premises) 1275 GLORY RD GREENBAY WI54304

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	CHARLES PANURE		
Vice President/Member	MICHAEL SCHILAWSKI		
Secretary/Member	DANIEL J. PAMPERIN		
Treasurer/Member			
Agent	MICHAEL SCHILAWSKI		
Directors/Managers			

C. 1. Trade Name DE PERE SHELL

Business Phone Number 920-336-9787

2. Address of Premises 841 MAIN AVENUE

Post Office & Zip Code DE PERE WI 54115

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include 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.) C-STORE, GAS STATION, CAR WASH

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side ☐ Yes ☒ No

b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

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.

(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-12-19</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

R# 141

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: ☐ Town of } DE PERE
☐ Village of }
☒ City of }

County of BROWN Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE ☐ Individual ☐ Partnership ☒ Limited Liability Company
☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company GCS LANDING LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) 1275 GLORY RD GREENBAY WI54304

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title Name (Inc. Middle Name) Home Address Post Office & Zip Code

President/Member JACOB P. ANDERSON

Vice President/Member ASHLEY M PAMPERIN-SEXAUER

Secretary/Member _____

Treasurer/Member _____

Agent JACOB P. ANDERSON

Directors/Managers _____

C. 1. Trade Name GCS LANDING SHELL

Business Phone Number 920-336-8293

2. Address of Premises 3630 RIVERSIDE DR/1063N Broadway Post Office & Zip Code GREEN BAY WI 54301

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include 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.) C-STORE AND GAS STATION

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side ☐ Yes ☒ No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

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.

(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-12-19</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.: <u>456000319418502</u>	FEIN Number: <u>77-0676044</u>
LICENSE REQUESTED	
TYPE	FEE
☒ Class A beer	\$
☐ Class B beer	\$
☐ Class C wine	\$
☐ Class A liquor	\$
☒ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ 30
TOTAL FEE	\$ 30

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020

(MM DD YYYY)

(MM DD YYYY)

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☒ City of DE PERE

County of BROWN Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE ☐ Individual ☐ Partnership ☒ Limited Liability Company
☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company GCS OPERATIONS, LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) 1275 GLORY RD GREENBAY WI 54304

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	DANIEL J. PAMPERIN		
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent	DANIEL J. PAMPERIN		
Directors/Managers			

C. 1. Trade Name RIVERSIDE SHELL Business Phone Number 920-983-9786

2. Address of Premises 1010 SOUTH BROADWAY Post Office & Zip Code DE PERE WI 54115

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include 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.) C-STORE, GAS STATION, CAR WASH

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side ☐ Yes ☒ No

b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

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.

(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-12-19</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 07 01 2019 ending: 06 30 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☒ City of DE PERE

County of BROWN Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE ☐ Individual ☐ Partnership ☒ Limited Liability Company
☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company GCS HOLDINGS OF DE PERE LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) 1275 GLORY RD GREENBAY WI 54304

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	DANIEL J. PAMPERIN		
Vice President/Member	LORI A. PAMPERIN		
Secretary/Member	DAVID J. KRAUSE		
Treasurer/Member			
Agent	DANIEL J. PAMPERIN		
Directors/Managers			

C. 1. Trade Name SCHEURING CHELL Business Phone Number 920-347-3700

2. Address of Premises 1511 LAWRENCE DRIVE Post Office & Zip Code DE PERE WI 54115

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include 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.) C-STORE AND GAS STATION

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been **convicted of any offenses** (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side ☐ Yes ☒ No

b. Are **charges for any offenses** presently **pending** (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

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 Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-12-19</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk



City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: May 7, 2019
DEPARTMENT: City Clerk
FROM: Carey Danen
SUBJECT: B. Class "B" Fermented Malt Beverage Licenses

ATTACHMENTS:

- Class B Beer Renewals_5-7-19 (PDF)

CLASS "B" FERMENTED MALT BEVERAGE

LICENSE RENEWALS

FOR THE 2019-2020 LICENSING PERIOD

RENEWAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 7/1/2019 ending: 6/30/2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: ☐ Town of De Pere
☐ Village of De Pere
☒ City of De Pere

County of Brown Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE ☐ Individual ☐ Partnership ☐ Limited Liability Company
☒ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company

Address of Corporation/Limited Liability Company (if different from licensed premises) 905 George St #191 De Pere WI

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title Name (Inc. Middle Name)

Home Address

Post Office & Zip Code

President/Member Michael Radue

Vice President/Member

Secretary/Member Urich Radue

Treasurer/Member Urich Radue

Agent Urich Radue

Directors/Managers

C. 1. Trade Name De Pere Cinema

Business Phone Number 920-371-1585

2. Address of Premises 417 George St

Post Office & Zip Code De Pere 54115

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include 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.) Theater auditorium, concession area

5. Legal description (omit if street address is given above):

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side ☐ Yes ☒ No

b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

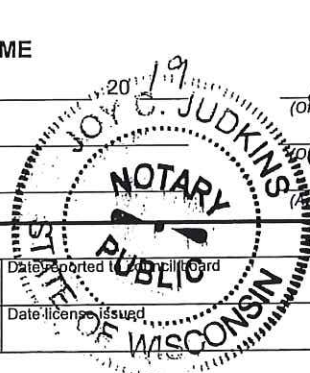
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.)

SUBSCRIBED AND SWORN TO BEFORE ME

this 15th day of April

[Signature]
(Clerk/Notary Public)

My commission expires 5/18/2020



(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)

(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-16-19</u>	Date reported to Municipal Board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: 7-1-2019 ending: 6-30-2019
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☒ City of De Pere

County of Brown Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE ☐ Individual ☐ Partnership ☒ Limited Liability Company
☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Gyro Kabobs III LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) _____

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title Name (Inc. Middle Name)

Home Address

Post Office & Zip Code

President/Member Mohammad Mirhashemi

Vice President/Member Laura Mirhashemi

Secretary/Member _____

Treasurer/Member _____

Agent Mohammad Mirhashemi

Directors/Managers _____

C. 1. Trade Name Gyro Kabobs Business Phone Number 920-339-0048

2. Address of Premises 337 Main Ave Post Office & Zip Code 54115

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☐ Yes ☐ No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include 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.) Seating area & Kitchen

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side ☐ Yes ☒ No

b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] ☒ Yes ☐ No

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

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.

M. Mirhashemi
(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>9-24-19</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk



City of De Pere, Wisconsin

Request For License Committee Action

MEETING DATE: May 7, 2019

DEPARTMENT: City Clerk

FROM: Carey Danen

SUBJECT: C. Class "B" Fermented Malt Beverage/"Class C" Wine Licenses

ATTACHMENTS:

- Class B Beer-Class C Wine Renewals_5-7-19 (PDF)

CLASS "B" FERMENTED MALT BEVERAGE/

"CLASS C" WINE

LICENSE RENEWALS

FOR THE 2019-2020 LICENSING PERIOD

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: July 1, 2019 ending: June 30, 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☒ City of De Pere

County of BROWN Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE ☐ Individual ☐ Partnership ☒ Limited Liability Company
☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

AUNT ETHEL'S LLC

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company

Address of Corporation/Limited Liability Company (if different from licensed premises)

All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title Name (Inc. Middle Name) Home Address Post Office & Zip Code

President/Member TIMOTHY JAMES JELINSKI

Vice President/Member CASEY ERIN JELINSKI

Secretary/Member

Treasurer/Member

Agent Timothy James Jelinski

Directors/Managers

C. 1. Trade Name AUNT ETHEL'S LLC

Business Phone Number 920 370 5212

2. Address of Premises 377 MAIN AVE

Post Office & Zip Code De Pere 54115

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include 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.) 2000 sq ft space, front room + back room, siteline

5. Legal description (omit if street address is given above):

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side ☐ Yes ☒ No

b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776]

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

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.

(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-15-19</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.: <u>456-1029998527-02</u>		FEIN Number: <u>83-1595038</u>	
LICENSE REQUESTED			
TYPE	FEE		
☐ Class A beer	\$		
☒ Class B beer	\$		
☒ Class C wine	\$		
☐ Class A liquor	\$		
☐ Class A liquor (cider only)	\$ N/A		
☐ Class B liquor	\$		
☐ Reserve Class B liquor	\$		
☐ Class B (wine only) winery	\$		
Publication fee	\$		
TOTAL FEE	\$		

R#
1414

Renewal Alcohol Beverage License Application

Submit to municipal clerk. Read instructions on reverse side.

For the license period beginning: JULY 1, 2019 ending: JUNE 30, 2020
(MM DD YYYY) (MM DD YYYY)

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☒ City of DE PERE

County of BROWN Aldermanic Dist. No. _____ (if required by ordinance)

CHECK ONE ☐ Individual ☐ Partnership ☒ Limited Liability Company
☐ Corporation/Nonprofit Organization

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name(s) (Last, First and Middle Name)

Home Address

Post Office & Zip Code

B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company LUNA COFFEE LLC

Address of Corporation/Limited Liability Company (if different from licensed premises) _____
All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Company:

Title	Name (Inc. Middle Name)	Home Address	Post Office & Zip Code
President/Member	<u>MARK PATEL</u>		
Vice President/Member	<u>ANGELA J PATEL</u>		
Secretary/Member			
Treasurer/Member			
Agent	<u>MARK PATEL</u>		
Directors/Managers			

C. 1. Trade Name LUNA CAFE AND ROASTERY Business Phone Number 920-336-1557

2. Address of Premises 330 MAIN AVE. Post Office & Zip Code DE PERE 54115

3. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

4. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include 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.) CAFE AND OUTDOOR SEATING, BASEMENT STOR

5. Legal description (omit if street address is given above): _____

6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any member, officer, director, manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organization licensee been convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal laws, any Wisconsin laws, any laws of other states, or ordinances of any county or municipality? If yes, complete reverse side ☐ Yes ☒ No

b. Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) against the named licensee or any other persons affiliated with this license? If yes, explain fully on reverse side ☐ Yes ☒ No

7. Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted by you on your last application for this license? If yes, explain. ☐ Yes ☒ No

8. Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Income or Franchise Tax return of the licensee? If not, explain. ☒ Yes ☐ No

9. Does the applicant understand they must hold a Wisconsin Seller's Permit? ☒ Yes ☐ No
[phone (608) 266-2776] _____

10. Does the applicant understand that alcohol beverage invoices must be kept at the licensed premises for 2 years from the date of invoice and made available for inspection by law enforcement? ☒ Yes ☐ No

11. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ☐ Yes ☒ No

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.

M. Patel

(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>4-24-19</u>	Date reported to council/board	Date license granted
License number issued	Date license issued	Signature of Clerk / Deputy Clerk

Applicant's WI Seller's Permit No.: <u>456-0000000486-02</u> FEIN Number: <u>39-1979364</u>	
LICENSE REQUESTED	
TYPE	FEE
☐ Class A beer	\$
☒ Class B beer	\$
☒ Class C wine	\$
☐ Class A liquor	\$
☐ Class A liquor (cider only)	\$ N/A
☐ Class B liquor	\$
☐ Reserve Class B liquor	\$
☐ Class B (wine only) winery	\$
Publication fee	\$ <u>30.00</u>
TOTAL FEE	\$