

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning 8/16 20 16; ending 6/30 20 17

TO THE GOVERNING BODY of the: [] Town of [] Village of [x] City of WISCONSIN DELLS

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

- 1. The named [x] INDIVIDUAL [] PARTNERSHIP [] LIMITED LIABILITY COMPANY [x] CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

- 2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): Edyta Kapusta EDYKA'S POLISH RESTAURANT INC.

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

Table with columns: Title, Name, Home Address, Post Office & Zip Code. Includes entries for President/Member, Vice President/Member, Secretary/Member, Treasurer/Member, Agent (EDYTA KAPUSTA), and Directors/Managers.

- 3. Trade Name: Edy+Ka's Polish Restaurant Business Phone Number: 630 439-5701
4. Address of Premises: 221 Broadway, Wis Delles Post Office & Zip Code: 53965

- 5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? [x] Yes [] No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? [] Yes [x] No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? [x] Yes [] No
8. (a) Corporate/limited liability company applicants only: Insert state Wisconsin and date 7/2016 of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? [] Yes [x] No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? [] Yes [x] No

(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

- 9. 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.) walk in cooler in rear, front counter

- 10. Legal description (omit if street address is given above):
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? [] Yes [x] No
(b) If yes, under what name was license issued?

- 12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] [x] Yes [] No

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

- 14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? [x] 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.) 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.

SUBSCRIBED AND SWORN TO BEFORE ME, this 19th day of July, 2016. [Signature] (Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual) My commission expires 10/25/2017

TO BE COMPLETED BY CLERK. Table with columns: Date received and filed with municipal clerk (7-19-2016), Date reported to council/board, Date provisional license issued, Signature of Clerk / Deputy Clerk, Date license granted, Date license issued, License number issued.

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 the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village City of Wisconsin Dells County of Columbia

The undersigned duly authorized officer(s)/members/managers of Edytka's Polish Restaurant INC
(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 Edytka's Polish Restaurant
(trade name)

located at 221 Broadway, Wis. Dells WI

appoints Edyta Kapusta
(name of appointed agent)

1590 Lenox Ct. Bartlett IL 60103
(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).
Edytka's Polish Restaurant

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? 12 months

Place of residence last year Holiday Shores Camp Resort

For: Edytka's Polish Restaurant
(name of corporation/organization/limited liability company)

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

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Edyta Kapusta, 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] 7/11/16 Agent's age 42
(signature of agent) (date)

1590 Lenox Ct. Bartlett IL 60103 Date of birth 5/1/16
(home address of agent)

**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 _____ by _____ Title _____
(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)	
Kapusta		Edyta			
Home Address (street/route)		Post Office	City	State	Zip Code
1590 Lenox Ct			Barlett	IL	60103
Home Phone Number		Age	Date of Birth	Place of Birth	
6304395701		42	5/1/1974	Poland	

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.
- _____ of _____
(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? 12 months
- 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. _____
(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.

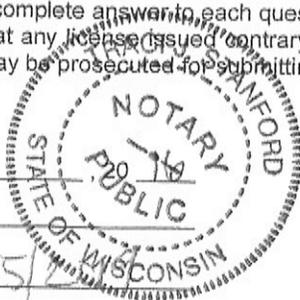
Employer's Name	Employer's Address	Employed From	To

The undersigned, being first duly sworn on oath, deposes and says 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.

Subscribed and sworn to before me

this 19th day of July

(Clerk/Notary Public)



[Signature]
(Signature of Named Individual)

My commission expires 10/25/12



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18.03(2) Definitions. In this section the following terms shall have the following meanings:

(a) "Public Place" means any public street, highway, alley, sidewalk, parking lot, government building, park, or other public property.

18.03(3) Alcoholic Beverages in Public Places.

(a) Consumption of Alcoholic Beverages in Public Places. No person shall consume any intoxicating liquor, wine, or fermented malt beverage while in or upon any public place.

(b) Consumption of Alcoholic Beverages to be on Premises. No person who purchases wine, alcoholic or fermented malt beverages by the glass or in open containers shall consume the same other than upon the premises where served, and they shall not remove the same to public places in the City of Wisconsin Dells.

(c) Possession of Alcoholic Beverages in Public Places. No person shall be in possession of any glass or open container containing wine, alcoholic or fermented malt beverages in any public place.

(d) Permits Issued. Fraternal and service organizations and clubs may apply for a permit to have meetings, festivals, and activities held in a public place so that alcoholic and fermented malt beverages may be consumed during the time permitted as designated on the permit and within the area specified in the permit.

(e) Notices to be Posted. All premises licensed for the sale of fermented malt beverages, wine, or intoxicating liquor shall post a notice at each exit stating that "No beer, liquor or wine may be carried in an open container out of this building."