

TAV-1867

Amended



ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning 20 ending JUNE 30 2019

TO THE GOVERNING BODY of the: Town of Village of City of MANITOWOC

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

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

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): True Endeavors, LLC

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.

President/Member: Brennan W. Seehafer, 822 S. 8th St., 1113 54221
Vice President/Member:
Secretary/Member:
Treasurer/Member:
Agent: Brennan W. Seehafer
Directors/Managers:

3. Trade Name: The Wharf Business Phone Number:
4. Address of Premises: 606 Quay Street Post Office & Zip Code: 1113 54221

- 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?
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant?
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business?
8. (a) Corporate/limited liability company applicants only: Insert state Wisconsin and date 5/22/18 of registration
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company?
(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?

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.) Entire fenced-in lot at 606 Quay St. with storage of

- 10. Legal description (omit if street address is given above): alcohol in steel structure.
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? SHIPPING CONTAINER
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5530.5) before beginning business?
13. Does the applicant understand they must hold a Wisconsin Seller's Permit?
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs?

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 signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees 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.

Brennan W. Seehafer
(Director/Officer/Member/Manager of Limited Liability Company/Partner/Individual)

TO BE COMPLETED BY CLERK

Table with 4 columns: Date received and filed with municipal clerk, Date reported to council/board, Date provisional license issued, Signature of Clerk/Deputy Clerk. Includes date 2-15-19.



606 QUAY STREET, MANTOWOC

