

TAV-1970 19-0670

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.)

For the license period beginning: July 1, 2018 ending: June 30, 2020
(mm dd yyyy) (mm dd yyyy)

To the Governing Body of the: Town of } Manitowish
 Village of }
 City of }
 County of Manitowish Aldermanic Dist. No. _____
 (if required by ordinance)

Check one: Individual Limited Liability Company
 Partnership Corporation/Nonprofit Organization

Applicant's Wisconsin Seller's Permit Number <u>456-1026904743-03</u>	
FEIN Number <u>27-0661472</u>	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ <u>100</u>
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$ <u>500</u>
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ <u>25</u>
TOTAL FEE	\$ <u>625.00</u>

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)
Popp's Riverwalk Co. Inc., 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 full name and place of residence of each person.

President / Member Last Name <u>Popp</u>	(First) <u>Randall</u>	(Middle Name) <u>W.</u>	Home Address (Street, City or Post Office, & Zip Code) <u>6116 County Rd. LS Manitowish, WI 54220</u>
Vice President / Member Last Name <u>Popp</u>	(First) <u>Robert</u>	(Middle Name) <u>G.</u>	Home Address (Street, City or Post Office, & Zip Code) <u>1924 Friday St. Manitowish, WI 54220</u>
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name <u>Popp</u>	(First) <u>Randall</u>	(Middle Name) <u>W.</u>	Home Address (Street, City or Post Office, & Zip Code) <u>6116 County Rd. LS Manitowish</u>
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Riverwalk Pub Business Phone Number 920-652-9755
 2. Address of Premises 50 Maritime Drive Post Office & Zip Code Manitowish, WI 54220

3. 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.)
50 Maritime Drive - west side. Behind Bar + backroom of the kitchen.

4. Legal description (omit if street address is given above): _____
 5. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
 (b) If yes, under what name was license issued? Thai Cuisine & Tavern, LLC.

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? If yes, explain Yes No

7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
 If yes, explain. Popp's Riverwalk citgo - GAS Station

8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? If yes, explain Yes No

9. (a) Corporate/limited liability company applicants only: Insert state WI and date 9-2009 of registration.

(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? If yes, explain Yes 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? If yes, explain. Popp's Riverwalk citgo - GAS Station Yes No

10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] Yes No

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

12. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? 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 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. (Individual applicants, or one member of a partnership applicant must sign; one corporate officer, one member/manager 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.

Contact Person's Name (Last, First, MI.) <u>Popp Randall W.</u>	Title/Member <u>President</u>	Date <u>5-31-19</u>
Signature 	Phone Number <u>920-860-1253</u>	Email Address

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>5-31-19</u>	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued <u>TAV-1970</u>	

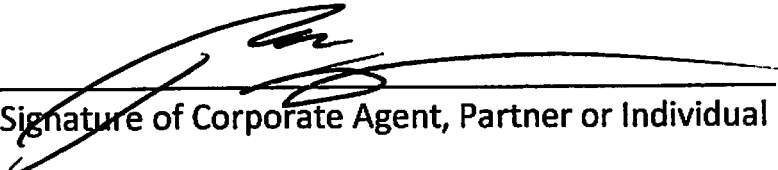
SUPPLEMENT TO LICENSING APPLICATION

1. Do you understand that a license may not be issued to any applicant with indebtedness for fermented malt beverages or intoxicating liquor pursuant to the timelines in Wisconsin law? Yes No
2. Do you understand that State Statutes do not provide for refunds of unused license fees? Yes No

Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of his/her knowledge.

Popp's Riverwalk Cider, Inc
Print Name of Corporation/Partnership/Individual

50 Maritime Drive Manitowoc, WI
Address of Licensed Premises


Signature of Corporate Agent, Partner or Individual

Date: 5-30-19

Honorable Mayor and Common Council of the City of Manitowoc:

I hereby surrender the following license:

- "Class A" Retail Intoxicating Liquor and Fermented Malt Beverage
- "Class B" Retail Intoxicating Liquor and Fermented Malt Beverage
- Class "A" Fermented Malt Beverage
- Class "B" Fermented Malt Beverage
- Class "C" Wine License

for the premises at 50 Maritime Drive
in favor of Popp's Riverwalk Cigo, Inc. effective July 1, 2019
or upon issuance of the license to the above.

Very truly yours,



Signature

PETER XIONG

Print Signature

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) <i>Popp</i> (last name)		<i>Randall</i> (first name)		<i>William</i> (middle name)	
Home Address (street/route) <i>6116 CHY LS</i>		Post Office <i>Manitowish</i>	City <i>Manitowish</i>	State <i>WI</i>	Zip Code <i>54220</i>
Home Phone Number <i>920-860-1253</i>		Age <i>42</i>	Date of Birth <i>9-1-76</i>	Place of Birth <i>Manitowish</i>	

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.
- Officer / Agent* of *Popp's Riverwalk Cigar, Inc*
(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? *42 years*
- 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. *Popp's Riverwalk Cigar - GAS Station*
(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.

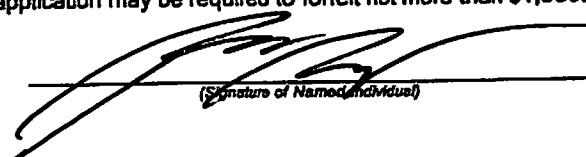
(Name of Wholesale Licensee or Permittee)

(Address By City and County)

6. Named individual must list in chronological order last two employers.

Employer's Name <i>Popp Builders, Inc</i>	Employer's Address <i>2911 So. 10th Street</i>	Employed From <i>1985</i>	To <i>Present</i>
Employer's Name	Employer's Address	Employed From	To

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 Named Individual)

Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name) Popp		(first name) Robert		(middle name) G.	
Home Address (street/route) 1924 Friday St.		Post Office Manitowish	City Manitowish	State WI	Zip Code 54220
Home Phone Number 920-242-3903		Age	Date of Birth	Place of Birth Manitowish	

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.

Officer of Popp's Riverwalk Club, Inc.
(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:

1. How long have you continuously resided in Wisconsin prior to this date? 39 Years
2. 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.)
3. 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.
4. 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. Popp's Riverwalk Club - Gas State
(Name, Location and Type of License/Permit)
5. 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 Popp Building, Inc.	Employer's Address 2711 So. 1st St.	Employed From 1998	To Present
Employer's Name	Employer's Address	Employed From	To

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 Named Individual)

Handwritten header text, possibly a title or address, located at the top center of the page.

Handwritten text in the upper section, including a date "1991" and a name "Robert".

Handwritten text in the middle section, including a date "1991" and a name "Robert".

Handwritten text in the middle section, possibly a name or address.

Vertical handwritten text on the left side of the page, possibly a list or index.

Handwritten text in the lower middle section, including a date "1991" and a name "Robert".

Handwritten text in the lower section, including a date "1991" and a name "Robert".

Handwritten signature or name at the bottom of the page.

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 of Manitowish County of Manitowish
City

The undersigned duly authorized officer(s)/members/managers of Poppi's Riverwalk Ctrgo, 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
The Riverwalk Pub
(trade name)

located at 50 Maritime Drive

appoints Randall W. Popp
(name of appointed agent)
6116 CHY LS Manitowish, WI 54220
(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).
Poppi's Riverwalk Ctrgo - 60th Station

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? 42 years

Place of residence last year Wisconsin

For: Poppi's Riverwalk Ctrgo, Inc
(name of corporation/organization/limited liability company)

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

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

ACCEPTANCE BY AGENT

I, Randall W. Popp
(print/type agent's name), hereby accept this appointment as agent for the

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] 5-30-11 Agent's age 42
(signature of agent) (date)
6116 CHY LS Manitowish, WI 54220 Date of birth 9-1-76
(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)

Handwritten notes at the top of the page, including the word "Handwritten" and a circled number "10".

The Riverside Park
24th Avenue Drive
Riverside, N.J.
Will call to Mountain, N.J. 2.10.11

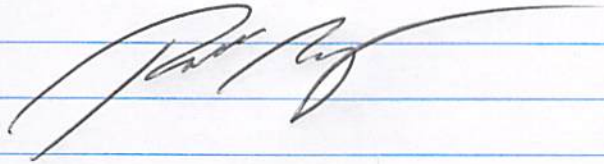
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Handwritten notes at the bottom, including "Riverside, N.J." and "2.10.11".

We plan on re opening it up until we find a new tenant to take over the business. At this time we have a possible new tenant in mind to take it over and have other interested Parties.

A handwritten signature in black ink, appearing to be 'Pattley', with a long, sweeping flourish extending to the right.

RECEIVED

MAY 31 2019

CITY CLERKS OFFICE

BRITISH

MAY 3 1919

OTYU... ..