From: David Malcolm
Sent: Monday, May 18, 2020 10:28 AM
To: Debbie Baenen
Cc: Abigail Malcolm
Subject: Request to amend liquor license

When I filled our our liquor license renewal application I forgot to include that alcohol will be consumed on our front patio. Can we amend our liquor license to include it?

Renewal Alcohol Beverage License Application

(Submit to municipal clerk. **Read instructions on page 3.)**

For the license period beginning: 07/01/2020 (mm dd yyyy) ending: 06/30/202 (mm dd yyyy)

To the Governing Body of the: ☐ Town of ☒ Village of ☐ City of } Allouez

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

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

Applicant's Wisconsin Seller's Permit Number	
456-1029800820-02	
FEIN Number 82-1938670	
TYPE OF LICENSE REQUESTED	**FEE**
☐ Class A beer	$
☐ Class B beer	$
☐ Class C wine	$
☐ Class A liquor	$
☐ Class A liquor (cider only)	$ N/A
☒ Class B liquor	$ 60.00
☐ Reserve Class B liquor	$
☐ Class B (wine only) winery	$
Publication fee	$
TOTAL FEE	$ 60.00

Complete A or B. All must complete C.

A. Individual or Partnership:

Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Full Name (Last)	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

B. LLC or Corporation (and Agent):

Full Legal Name of Corporation / Nonprofit Organization / Limited Liability Company	Address of Corporation / Limited Liability Company (if different from licensed premises)
Zambaldi Beer LLC	~~1649 S. Webster Avenue Green~~

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent.

Agent Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Malcolm	Abigail	Zander	1442 Grignon Street Green Bay WI 54301

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

President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Malcolm	Abigail	Zander	1442 Grignon St. Green Bay WI 54301
Vice President / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Malcolm	David	William	1442 Grignon St. Green Bay WI 54301
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Zander	Wade	Andrew	4029 Upton Ave. S. Minneapolis, MN 55410
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Directors / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

C. Business Information

1. Trade Name Zambaldi Beer Business Phone Number 920-455-0473
2. Address of Premises 1649 S. Webster Avenue 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.) Building located at 1649 S. Webster Ave. Including, taproom, walk-in cooler, brewing space, exterior cooler.

AT-115 (R. 5-19) Wisconsin Department of Revenue