

Application for Cigarette and Tobacco Products Retail License

MUNICIPAL USE ONLY

Submit to municipal clerk.

Applicant's Wisconsin 15-digit Sales Tax Account Number
456-1029533754-02

← This must be issued in the same Legal Name of the licensee below.

License Number
Period Covered
Date of Issuance

Legal Name (corporation, limited liability company, partnership or sole proprietorship) Rasleen Gas & Food Mart Inc			Federal Employer Identification No. (FEIN) 82-3345605		
Trade or Business Name (if different than Legal Name)			Telephone Number (414) 581-5937		
Business Address (License Location) 4301 Washington Ave		Business Located In <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town		Business Telephone (262) 456-1884	
Municipality Racine	State WI	Zip Code 53405	of: Racine		County Racine
Mailing Address (if different than Business Address) 8747 S Bell Meadow Ct		Municipality Franklin		State WI	Zip Code 53132

Organization (check one)

Sole Proprietor Wisconsin Corporation – Enter date incorporated: _____
 Partnership Out-of-State Corporation – Are you registered to do business in Wisconsin? Yes No
 Other (describe) _____

- Yes No 1. Does the applicant understand that they must purchase cigarettes and tobacco products only from distributors, jobbers, or subjobbers, who hold a permit with the Wisconsin Department of Revenue?
- Yes No 2. Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-266-6701. See application form CTP-129, revenue.wi.gov/dor/forms/ctp-129.pdf.)
- Yes No 3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products from another retailer, including transferring existing stock to a new owner?
- Yes No 4. Does the applicant understand that they must provide employees with tobacco sales training approved by the Wisconsin Department of Health Services? (<https://witobaccocheck.org>)
- Yes No 5. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products and nicotine products to minors (including electronic cigarettes containing nicotine)?
- Yes No 6. Does the applicant understand that they may not sell single cigarettes?
- Yes No 7. Does the applicant understand that cigarette and tobacco products invoices must be kept on the licensed premises for two years from the date of the invoice and be available for inspection by the Wisconsin Department of Revenue/law enforcement and that failure to comply can result in criminal penalties, including loss of cigarettes/tobacco products?
- Yes No 8. Does the applicant understand that only cigarettes and roll-your-own (RYO) tobacco products listed on the Wisconsin Department of Justice's website labeled "Directory of Certified Tobacco Manufacturers and Brands" at www.doj.state.wi.us/dls/tobacco-directory may be sold in Wisconsin?

Cigarettes / Tobacco will be sold over counter through vending machine both

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 applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another. 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. Any person who knowingly provides false information on this application may be required to forfeit not more than \$1,000.

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

Applicable Laws and Rules

This document provides statements or interpretations of the following laws and regulations in effect as of September 19, 2019: Sections 134.65, 134.66, 139.321, 139.79, 139.76, 995.10, and 995.12, Wis. Stats.

The City Clerk's Office is updating our current licensing database. In order to move forward with only the most current information, please complete this contact form and return it with you license renewal.

CONTACT FORM

Business Owner/Owner Entity: __ Rasleen Gas & food mart INC

TradeName: AMOCO

Business Address: 4301 Washington ave, Racine, Wi 53405

Website: __ none _____

Business Email Address: __ rasleenfoodmartinc@yahoo.com

Regular Operating Days/Hours: __ 5am to 10pm

Agent Name: __ Gurjapbir S kahlon

Agent Home Address: 8747 S BELL MEDOW CT, FRANKLIN WI 53132

Agent Emergency Contact Number: 414-581-4024

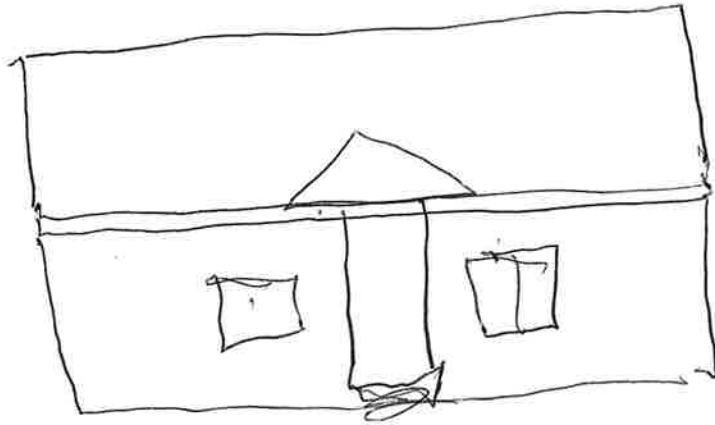
Agent Email Address: __ Rasleenfoodmartinc @ yahoo.com

Agent Date of Birth: 09-20-1985

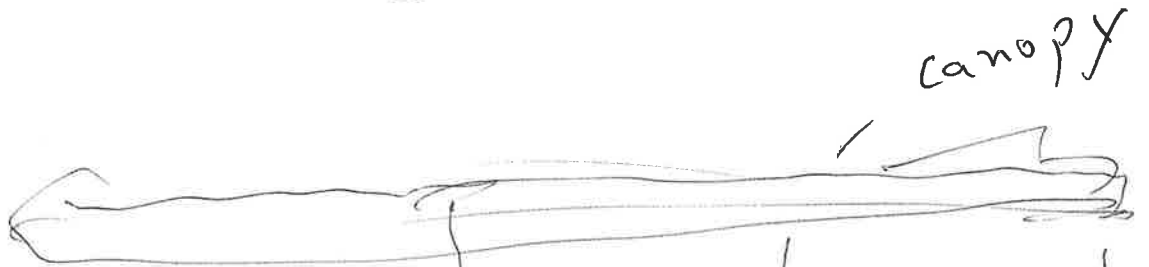
Name of additional members of Business: Date of Birth of additional members:

<u>GURJAPBIR S KAHLON</u>	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

This form is required to be turned in with your renewal application, for your application to be considered complete. If you have any questions, please contact the City Clerk's Office at (262) 636-9171.



Building



canopy



pump



pump

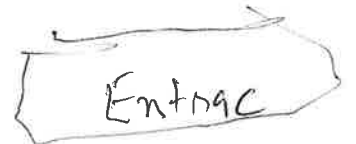


pump

price sign

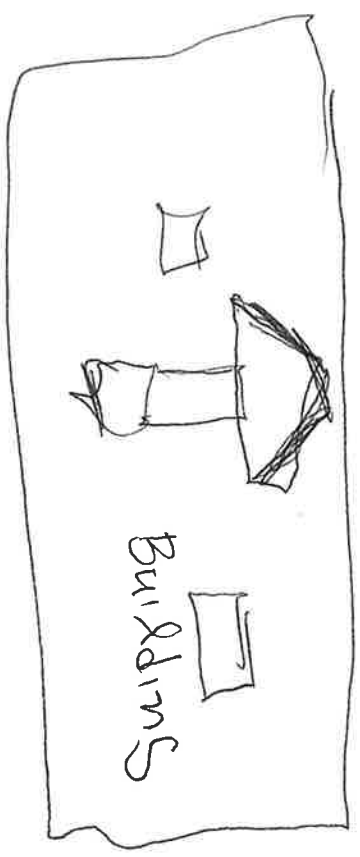


Entrance

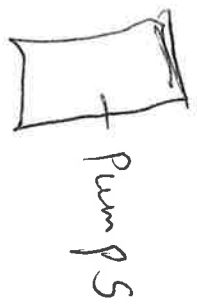
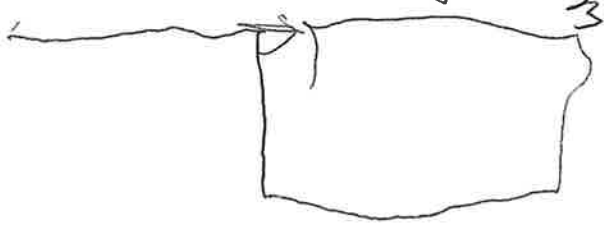


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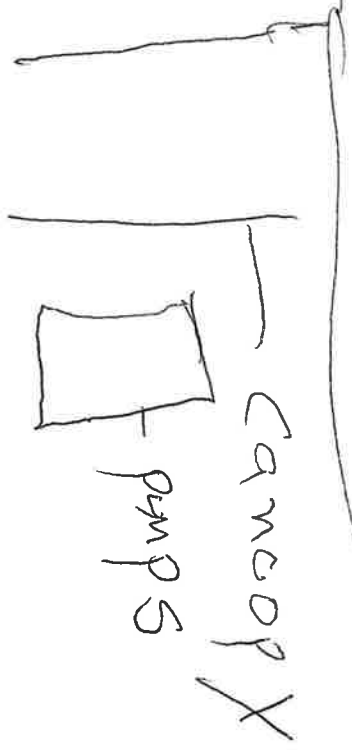
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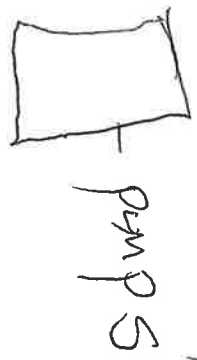
Price sign



Pumps



Canopy



pumps



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