## Checklist for obtaining a Liquor/Beer/Soda/Amusement License

Building Department - City Hall 730 Washington Ave. Room 304 (262) 636-9464
The Building Department MUST sign off on the Zoning Approval form before we can process your
application(s). (This form is for new applications not holding an existing license for the type of
business you are applying for).
City Clerk's Office - City Hall 730 Washington Ave. Room 103 (262) 636-9171
Turn in completed applications here. If you have any questions regarding applications, contact us.
furn in completed applications field. If you have any questions regarding applications, contact us.
Contact Alderman in the district where the business is located. This is to inform the Alderman that
there will be a new owner and/or a new type of business in his/her district.)
Alderman Name & Telephone :
Responsible Beverage Service Course must be completed if applicant has not held some type of alcoho
beverage license in the State of Wisconsin in the past <u>two</u> years.
Download the Wisconsin Alcohol Beverage and Tobacco Laws. This has information regarding alcohol laws and
hours of operation http://www.revenue.wi.gov/pubs/pb302.pdf
It is the applicants responsibility to call the departments listed below to setup appointments to have your premise inspected. By signing you acknowledge that the City Clerk's office has notified you of this:
Print name RICHARD M. ONYON Signature Date 3:33:3031
BUTCHER
Business Name CASTROAUS LU Business Address 300 GAN STREET LLC.
Your license(s) will NOT be released until the City Clerk's Office has received an "OKAY" from each of these departments
Environmental Health Department – City Hall 730 Washington Ave. Room 1 (262) 636-9203 (Inspection and Sanitation and/or Restaurant License/Permit)
Building Department – City Hall 730 Washington Ave. Room 307 (262) 636-9161 (Inspection and Occupancy Permit)
Fire Department – Fire 810 Eighth St. (262) 635-7915 (Inspection)

Applications must be filed and paid for by noon on the Friday before a Council meeting in order to be presented to the Council. The Council meets the first and third Tuesday of every month, except the 3<sup>rd</sup> Monday of April and 1<sup>st</sup> Monday of August. Applications are then referred to the Public Safety and License Committee for its next meeting, and it is mandatory that you appear at that meeting.

Clerks initials\_

#### **Schedule for Successor of Agent**

If there is a change in agent, each club, corporation, or limited liability company who holds a retail permit to sell fermented malt beverages and/or intoxicating liquor must appoint a successor agent pursuant to sec. 125.04(6), Wis. Stats. There is a \$10 change in agent processing fee due with this form. The following questions must be answered by the Agent. The appointment must be signed by an officer of the corporation/organization or one member of limited liability company (Only one signature is required). The appointment must be approved by the licensing authority.

					Wiscon	isin	20
	0	. 4		inicipality)		(Date)	
Name of agent	KICHARD	M. Or	YON				
Yes No	<u> </u>	.0					
	ou of legal drinking age			, ,			
	you been a resident of			inuous days prid	or to the date	of appointmen	it as agent?
	you ever been convict						
	you ever been convict						
6. Have	you ever been convicte	ed of a local ord	tinance violation	n?			
7. Have	you completed the req	uired responsib	le beverage se	rver program pe	r sec. 125.04	(5)(a)5, Wis. S	Stats.?
UNDER PENALTY O	F LAW, I declare that	all of the above	e information is	true and correc	t to the best	of my knowled	lge and belief.
Any person who know	ingly provides materia	lly false informat	tion in an applic	ation for a licen	emay be rec	quired to forfeit	not more than
\$1,000.				11			
				-70	(S) gnature	of Agenti	
				3040 MICH			NC 534
			o <del>l</del>	J 10 1 1.01	(Addr		
		01104	05000000000	- NT			
	2.01	w M	CESSOR AGE	1			
The undersigned appo	70		UNYOR	<u></u>			as agent
in accordance with se	c. 125.04(6), Wis. Stat	s. Name	e of Permittee	KRISTI	UA A.	ONYON	)
. 1	22			ih			
Date MARCH	2021		Ву		M		
					(Vignature of Of	ficer(/ Member)	
	ntment as agent for (	C	un de	A Zurcelan	£ 2000	Greganie	
							and assume
full responsibility of th	e conduct of the busin	ess relative to re	emienteo mait t	everages and ii	itoxicating liq	LIDIS,	
Date MARCH	20 21			_700	57		
					(Signature	of Agent)	
		OT DE ADDE	OVED BY T	UE LICENCINI	O ALITHOD	ITY TO BE	EFFECTIVE
THE AGENT APPO (See sec. 125.04(6), \	OINTED ABOVE MU Vis. Stats.)	IST BE APPR	KOVED BY II	HE LICENSIN	G AUTHUR	HY TO BE	EFFECTIVE.
						WI	20
			S <del>*</del>	(Municip	ality)	(Da	(e)
			79		(Signature o	of Official)	
						,	
			-		170	n!	

## Auxiliary Questionnaire Alcohol Beverage License Application

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)			(middle name)			
Onyon	R	ichar	:hard		Michael			
Home Address (street/route)	Post Office		City		State	Zip Code		
3040 Michigan Blvd			Racine		WI	53402		
Home Phone Number		Age	Date of Birth		Place of B	Birth		
408-772-8000				Jolie	et, IL			
The above named individual provides the	following information	as a pers	son who is (check o	nne):				
Applying for an alcohol beverage licer	nse as an i <b>ndividua</b> l							
A member of a partnership which is a	making application fo	r an alcoi	nol beverage licen	se.				
✓ Member		tropu						
(Officer / Director / Member / Manager / Ag	gent)	(Na	ame of Corporation, Limite	ed Liability Company	or Nonprofit	t Organization)		
which is making application for an alc	ohol beverage licens	e.						
The <i>above named individual</i> provides the	following information	to the lice	ensing authority:					
How long have you continuously reside								
2. Have you ever been convicted of any of				everages) for				
violation of any federal laws, any Wisco					county			
or municipality?	i - 5	-		•	•	🔽 Yes	□No	
If yes, give law or ordinance violated, to						🗀		
status of charges pending. (If more room DUI in Santa Clara, C	m is needed, c <mark>ontinue</mark> d	n reverse	side of this form.)	•		y Servic	e	
3. Are charges for any offenses presently	pending against you	(other th	an traffic unrelated	to alcohol be	verages)			
for violation of any federal laws, any W								
municipality?	,					Yes	✓ No	
If yes, describe status of charges pend	ing					<u> </u>		
I. Do you hold, are you making application	n for or are you an o	fficer, dire	ector or agent of a	corporation/no	nprofit			
organization or member/manager/ager	=							
beverage license or permit?						🗹 Yes	No	
If yes, identify. Amos Los Taco					lassB	Beer+L	iquor	
•			and Type of License/Pern	·				
5. Do you hold and/or are you an officer, o		-		•				
member/manager/agent of a limited lia		-						
brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin?								
If yes, identify.								
	olesale Licensee or Permittee			(Address I	By City and C	County)		
Named individual must list in chronolog		nployers.						
	mployer's Address	<b></b>		Employed From		Pare	,	
~,	9 N San Ped	ro St.	. San Jose	05/01/20	108	1 CESCON	7	
	mployer's Address	~ .		Employed From		Plescas ***********************************	1	
Martini Brothers LLC 6	9 N San Ped	ro St	•	10/01/20	)04	TILLIGHT	/	

**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 Nagled Individual)

# **Serving Alcohol**

is proud to present this certificate to

### **Richard Onyon**

for successful completion of the online course



#### Wisconsin Alcohol Seller/Server Course

PERSONS COMPLETING THIS COURSE HAVE AGREED TO EXECUTE THE FOLLOWING POLICIES TO THE BEST OF THEIR ABILITIES.

- \* CARD ANY PERSON 35 YEARS OF AGE OR YOUNGER
- \* OBSERVE AND REPORT ANY CUSTOMER SHOWING SIGNS OF POSSIBLE IMPAIRED BEHAVIOR TO MANAGEMENT
- \* RESPOND IMMEDIATELY TO ANY POSSIBLE PROBLEM SITUATION
- \* DETERMINE THE PEOPLE ENTERING THE PREMISES TO CONSUME ALCOHOL ARE OF LEGAL ALCOHOL DRINKING AGE AND RECARD THEM IF THERE IS ANY QUESTION ABOUT THEIR AGE
- \* ENSURE A PERSON MATCHES THEIR VALID LEGAL IDENTIFICATION

This is a Wisconsin Department of Revenue approved
Responsible Beverage Server Training Course in compliance
with Sec. 125.17 (6), 134.66 (2m), and 125.04 (5) (a) 5. Wis. Stats.

Verify online at servingalcohol.com

**Verification Code** 

AeTrpiVAVB

Date Issued

Feb 1st, 2021

**VALID FOR 2 YEARS** 

This is not a Wisconsin operators/bartenders license.

This certificate will be requested to obtain a Wisconsin operators/bartenders license from the Wisconsin city clerk's office in the municipality where you are working. Find your city clerk's office here: https://elections.wi.gov/clerks/directory

Wisconsin Alcohol Seller/Server Course

Name: Richard Onyon

Certification Date: Feb 1st, 2021

Certificate Code: AeTrpiVAVB

Verify Online: servingalcohol.com

125.17(6), 134.66 (2m), 125.04(5)(a)5 Wis. Stats.

SERVING ALCOHOL INC VALID FOR 2 YEARS