#5d

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning March 26 20 13 ;
ending June 30 20 13

TO THE GOVERNING BODY of the: ☐ Town of ☑ Village of ☐ City of } Howard

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

Applicant's Wisconsin Seller's Permit Number: 456-0002794289-02	
Federal Employer Identification Number (FEIN): 204391309	
LICENSE REQUESTED ▶	
TYPE	**FEE**
☑ Class A beer	$ 500
☐ Class B beer	$
☐ Wholesale beer	$
☐ Class C wine	$
☑ Class A liquor	$ 500—
☐ Class B liquor	$
☐ Reserve Class B liquor	$
Publication fee	$ 5—
TOTAL FEE	$ 1005—

1. The named ☐ INDIVIDUAL ☐ PARTNERSHIP ☑ LIMITED LIABILITY COMPANY ☐ CORPORATION/NONPROFIT ORGANIZATION hereby makes application for the alcohol beverage license(s) checked above.
2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): ▶ AMERICAN PETROLEUM 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.

Title	Name	Home Address	Post Office & Zip Code
President/Member	HIMANSHU GOEL	2811 E NEWBERRY STREET	APPLETON, WI 54915
Vice President/Member	SUSHANT GOEL	2811 E NEWBERRY STREET	APPLETON WI 54915
Secretary/Member			
Treasurer/Member			
Agent ▶	HIMANSHU GOEL	2811 E NEWBERRY STREET	APPLETON, WI 54915
Directors/Managers			

3. Trade Name ▶ HOWARD CENTRAL BP Business Phone Number 9204340400
4. Address of Premises ▶ 2002 VELP AVE Post Office & Zip Code ▶ GREEN BAY, WI 54303
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? ☐ Yes ☑ No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? ☐ Yes ☑ No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? ☑ Yes ☐ No
8. (a) **Corporate/limited liability company applicants only:** Insert state WI and date FEB 2006 of registration.
   (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? ☐ 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? ☑ Yes ☐ No

   (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)
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, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) CONVENIENCE STORE, HALL, WALKING COOLER
10. Legal description (omit if street address is given above): _____
11. (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? HOWARD CENTRAL BP
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] ☑ Yes ☐ No
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] ☑ Yes ☐ No
14. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? ● 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 signers. Signers agree 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 and each member of a partnership applicant must sign; corporate officers/members/managers 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.

SUBSCRIBED AND SWORN TO BEFORE ME
this 6th day of March, 2013

Mary Scheerhamm
(Clerk/Notary Public)

My commission expires March 16, 2014

MARY SCHEERHAMM NOTARY PUBLIC STATE OF WISCONSIN

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

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

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name *(please print)* *(last name)*	*(first name)*	*(middle name)*		
GOEL	SUSHANT			
Home Address *(street/route)*	Post Office	City	State	Zip Code
2811 E NEWBERRY STREET		APPLETON	WI	54915
Home Phone Number	Age	Date of Birth	Place of Birth	
9204759411	29	[redacted]	[redacted]	

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.

☑ MEMBER *(Officer/Director/Member/Manager/Agent)* of AMERICAN PETROLEUM LLC *(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? 8.5 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. AMERICAN PETROLEUM, WINNEBAGO,FOND DULAC CO, CLASS A BEER & LIQUOR *(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	Employer's Address	Employed From	To
AMERICAN PETROLEUM	2811 E NEWBERRY STREET	12/01/2004	PRESENT
Employer's Name	Employer's Address	Employed From	To

The undersigned, being first duly sworn on oath, deposes and says 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.

Subscribed and sworn to before me

this 6th day of March, 20 13

Mary Schellhamer *(Clerk/Notary Public)*

My commission expires March 16, 2014

MARY SCHELLHAMER NOTARY PUBLIC STATE OF WISCONSIN

(Signature of Named Individual)

Printed on Recycled Paper

AUXILIARY QUESTIONNAIRE
ALCOHOL BEVERAGE LICENSE APPLICATION

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Individual's Full Name *(please print)* *(last name)*	*(first name)*	*(middle name)*		
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Home Phone Number	Age	Date of Birth	Place of Birth	
9204754030	28	[redacted]	[redacted]	

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   If yes, identify. AMERICAN PETROLEUM, CITY OF STURGEON BAY, CLASS A BEER & LIQUOR
   (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
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Subscribed and sworn to before me

this 6th day of March, 20 13

Annette L. Dietz *(Clerk/Notary Public)*

My commission expires Annette L. Dietz 8/2/15

(Signature of Named Individual)

Printed on Recycled Paper