

61

# ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning 05 14 20 12 ;  
ending 06 30 20 12

TO THE GOVERNING BODY of the:  Town of } HOWARD  
 Village of }  
 City of }

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

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): GCS BELLEVUE CROSSING, 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	MEMBER DANIEL J. PAMPERIN	396 TALUS COURT	DEPERE, 54115
Vice President/Member	MEMBER LORI A. PAMPERIN	396 TALUS COURT	DEPERE, 54115
Secretary/Member			
Treasurer/Member			
Agent	DANIEL J. PAMPERIN		
Directors/Managers			

3. Trade Name LINEVILLE TRAVEL MART Business Phone Number 920-336-8983  
4. Address of Premises 1575 LINEVILLE RD Post Office & Zip Code GREEN BAY, 54313

- 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 10/08/12 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.) C-STORE, GAS STATION

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? LINEVILLE 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. 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 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 officer(s), 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 2 day of May, 20 12

Lori A. Pamperin  
(Clerk/Notary Public)

Daniel J. Pamperin  
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)  
Lori A. Pamperin  
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

My commission expires 7-1-2012

(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	

**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 Howard County of Brown  
 City

The undersigned duly authorized officer(s)/members/managers of GCS Bellevue Crossing, LLC  
(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 Lineville Travel Mart  
(trade name)

located at 1575 Lineville Rd, Green Bay, WI 54313

appoints Daniel J. Pamperin  
(name of appointed agent)  
396 Talus Ct Ne Pere, WI 54115  
(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).  
See Attached

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? 52

Place of residence last year 396 Talus Ct Ne Pere, WI 54115

For: GCS Bellevue Crossing, LLC dba Lineville Travel Mart  
(name of corporation/organization/limited liability company)

By: Daniel J. Pamperin  
(signature of Officer/Member/Manager)

And: \_\_\_\_\_  
(signature of Officer/Member/Manager)

**ACCEPTANCE BY AGENT**

I, Daniel Pamperin  
(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 of agent) \_\_\_\_\_ (date) Agent's age 52  
396 Talus Ct Ne Pere, WI 54115 Date of birth 4/20/60  
(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)

GCS AIRPORT SHELL	-	ASHWAUBENON
GCS STADIUM SHELL	-	ASHWAUBENON
GCS BELLEVUE	-	BELLEVUE
GCS BELLEVUE CROSSING	-	BELLEVUE
GCS COLLEGE COURT	-	GRAND CHUTE
GCS JAGUAR SHELL	-	ASHWAUBENON
GCS HOWARD BP	-	GREEN BAY
GCS MENASHA SHELL	-	MENASHA
GREENVILLE BP	-	GREENVILLE

# AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Pamperin Daniel		John			
Home Address (street/route)		Post Office	City	State	Zip Code
396 Talus Ct		De Pere	De Pere	WI	54115
Home Phone Number		Age	Date of Birth	Place of Birth	
920-338-8453				Green Bay	

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 of GCS Bellevue Crossing LLC  
(Officer/Director/Member/Manager/Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)  
 which is making application for an alcohol beverage license. dba Lineville Travel Mart

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? 52 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. See Attached  
(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
Titletown Gil Corp	1275 Gborg Rd, GB	1998	Present
Airport Shell, Inc	2530 Babcock Rd, GB	1986	1998

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 2 day of May, 2012  
Lori Acker Pamperin  
(Clerk/Notary Public)

[Signature]  
(Signature of Named Individual)

My commission expires 7-1-2012



Printed on Recycled Paper

GCS AIRPORT SHELL	-	ASHWAUBENON
GCS STADIUM SHELL	-	ASHWAUBENON
GCS GOLDEN SHELL	-	ASHWAUBENON
GCS WEST SHELL	-	GREEN BAY
GCS BELLEVUE	-	BELLEVUE
GCS BELLEVUE CROSSING	-	BELLEVUE
GCS COLLEGE COURT	-	GRAND CHUTE
GCS UNIVERSIRT SHELL	-	GREEN BAY
GCS JAGUAR SHELL	-	ASHWAUBENON
GCS HOWARD BP	-	GREEN BAY
GCS BAY BEACH	-	GREEN BAY
GCS MENASHA SHELL	-	MENASHA
GREENVILLE BP	-	GREENVILLE
GCS MENOMINEE SHELL	-	MENOMINEE, MI

# AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

Individual's Full Name (please print) (last name)		(first name)		(middle name)	
Pamperin		Lori		A.	
Home Address (street/route)		Post Office	City	State	Zip Code
396 Tolus Ct		De Pere	De Pere	WI	54115
Home Phone Number		Age	Date of Birth	Place of Birth	
920-338-8453		[REDACTED]	[REDACTED]	Green Bay	

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 of GCS Bellvue Crossing, LLC  
(Officer/Director/Member/Manager/Agent) (Name of Corporation, Limited Liability Company or Nonprofit Organization)  
which is making application for an alcohol beverage license. dba Lineville Travel Mart

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? 51 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. See Attached  
(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
T. Hometown Oil Corp	1275 Glory Rd, GB	1998	Present
Airport Shell, Inc	2530 Babcock Rd, GB	1994	1998

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 2nd day of May, 2012  
Lynn K. Kobas  
(Clerk/Notary Public)

Lori A. Pamperin  
(Signature of Named Individual)

My commission expires 7/5/2012



GCS AIRPORT SHELL	-	ASHWAUBENON
GCS STADIUM SHELL	-	ASHWAUBENON
GCS GOLDEN SHELL	-	ASHWAUBENON
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GCS JAGUAR SHELL	-	ASHWAUBENON
GCS HOWARD BP	-	GREEN BAY
GCS BAY BEACH	-	GREEN BAY
GCS MENASHA SHELL	-	MENASHA
GREENVILLE BP	-	GREENVILLE
GCS MENOMINEE SHELL	-	MENOMINEE, MI