



City of Appleton

100 North Appleton Street
Appleton, WI 54911-4799
www.appleton.org

Meeting Agenda - Final Safety and Licensing Committee

Wednesday, January 11, 2023

5:30 PM

Council Chambers, 6th Floor

1. Call meeting to order

2. Roll call of membership

3. Approval of minutes from previous meeting

[23-0014](#) Minutes from December 14th, 2022 meeting.

Attachments: [S & L Minutes 12-14-22.pdf](#)

4. **Public Hearings/Appearances**

5. **Action Items**

[23-0028](#) Resolution Changing the District 12 Polling Place

Attachments: [2023 Resolution Changing District 12 Polling Place.pdf](#)

[23-0013](#) Class "B" Beer and "Class B" Liquor License application for Appleton Souvenir & Cigar Co, Norman J Kopesky III, Agent, located at 415 W College Ave, contingent upon approval from all departments.

Attachments: [Appleton Souvenir & Cigar.pdf](#)

[23-0020](#) Cigarette License application for Appleton Souvenir & Cigar Co, Norman J Kopecky III, Applicant, located at 415 W College Ave.

Attachments: [Appleton Souvenir & Cigar S&L.pdf](#)

[23-0021](#) Cigarette License application for SK Gas Mart LLC d/b/a Badger Mobil, Satbir Singh, Applicant, located at 1201 N Badger Ave

Attachments: [Badger Mobil S&L.pdf](#)

6. **Information Items**

[23-0017](#) Director Reports

1. City Clerk
2. Fire Chief
3. Police Chief

7. Adjournment

Notice is hereby given that a quorum of the Common Council may be present during this meeting, although no Council action will be taken.

Reasonable Accommodations for Persons with Disabilities will be made upon Request and if Feasible.



City of Appleton

100 North Appleton Street
Appleton, WI 54911-4799
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Meeting Minutes - Final Safety and Licensing Committee

Wednesday, December 14, 2022

5:30 PM

Council Chambers, 6th Floor

1. Call meeting to order

The meeting was called to order by Chair Croatt at 5:30 p.m.

2. Roll call of membership

Present: 5 - Schultz, Hartzheim, Croatt, Alfheim and Wolff

3. Approval of minutes from previous meeting

[22-1580](#)

Approval of minutes from the October 26, 2022 meeting.

Attachments: [S & L Minutes 10-26-22.pdf](#)

Hartzheim moved, seconded by Alfheim, that the Minutes be approved. Roll Call. Motion carried by the following vote:

Aye: 5 - Schultz, Hartzheim, Croatt, Alfheim and Wolff

4. Public Hearings/Appearances

5. Action Items

[22-1586](#)

Request to purchase a UTV.

Attachments: [11-30-22 EMS Flex Grant UTV Quotes.pdf](#)

Hartzheim moved, seconded by Alfheim, that the Request be recommended for approval. Roll Call. Motion carried by the following vote:

Aye: 5 - Schultz, Hartzheim, Croatt, Alfheim and Wolff

[22-1505](#)

Class "B" Beer and "Class B" Liquor License application for Richmond Bar and Grill LLC d/b/a Richmond Bar, Tiffani Daul, Agent, located at 2611 N Richmond St, contingent upon approval from the Health, Inspections and Police departments.

Attachments: [Richmond Bar.pdf](#)

Hartzheim moved, seconded by Alfheim, that the License be recommended for approval. Roll Call. Motion carried by the following vote:

Aye: 5 - Schultz, Hartzheim, Croatt, Alfheim and Wolff

Balance of the action items on the agenda.

Hartzheim moved, Alfheim seconded, to approve the balance of the agenda.

The motion carried by the following vote:

Aye: 5 - Schultz, Hartzheim, Croatt, Alfheim and Wolff

[22-1493](#)

Class "B" Beer and "Class C" Wine License application for The Jerk Joint LLC d/b/a The Jerk Joint, Fay V Oliver, Agent, located at 1619 W College Ave Suite D, contingent upon approval from the Finance, Health and Inspections departments.

Attachments: [The Jerk Joint.pdf](#)

This Report Action Item was recommended for approval

[22-1528](#)

"Class A" Liquor License application for Sayash LLC d/b/a Wisconsin Ave Marathon, Yam Lamichhane, Agent, located at 1920 E Wisconsin Ave, contingent upon approval from the Fire, Health, Inspections and Police departments.

Attachments: [Wisconsin Ave Marathon.pdf](#)

This Report Action Item was recommended for approval.

[22-1516](#)

Class "A" Beer and "Class A" Liquor License application for SK Gas Mart LLC d/b/a Badger Mobil, Satbir Singh, Agent, located at 1201 N Badger Ave, contingent upon approval from the Health and Inspections departments.

Attachments: [Badger Mobil - Singh.pdf](#)

This Report Action Item was recommended for approval.

[22-1555](#)

Class "A" Beer and "Class A" Liquor License Change of Agent application for Ultimate Mart LLC d/b/a Pick N' Save #123, Sara Hopkins, New Agent, located at 2700 N Ballard Rd, contingent upon approval from the Police department.

Attachments: [Sara J Hopkins S&L.pdf](#)

This Report Action Item was recommended for approval.

[22-1544](#)

2023 Secondhand Article, Secondhand Jewelry and Pawnbroker License renewal applications, contingent upon approval from all departments.

Attachments: [2023 Renewals.pdf](#)

This Report Action Item was recommended for approval.

[22-1506](#) Cigarette License application for Richmond Bar and Grill LLC d/b/a Richmond Bar, located at 2611 N Richmond St.

Attachments: [Richmond Bar and Grill LLC S&L.pdf](#)

This Report Action Item was recommended for approval.

[22-1510](#) Temporary Class "B" Beer License application for Ice Dog Booster Club, Nick Laird, Person in Charge, located at Appleton Family Ice Center, 1717 E Witzke Blvd, on February 17 & 25, 2023 and March 11 & 24, 2023, contingent upon approval from the Health and Inspections departments.

Attachments: [2023 - Ice Dogs Booster Club S&L.pdf](#)

This Report Action Item was recommended for approval.

6. Information Items

[22-1583](#) Request to Overhire for Front Desk Police Communication Specialist .

Attachments: [front desk overhire S&L.docx](#)

[22-1585](#) Threat Assessment Officer move from Special Investigation Unit to Community Resource Unit.

Attachments: [TAO move from SIU to CRU \(002\).pdf](#)

[22-1587](#) Special Events:
Festival Foods Turkey Trot, Downtown Appleton, November 24, 2022
Vigil for All Victims of Gun Violence, Houdini Plaza, December 7, 2022

[22-1581](#) Director Reports

1. City Clerk
 - November Election Audit
 - 2023 Alderperson Candidate Information
2. Fire Chief
 - Firefighter Hiring Update
 - Battalion Chief Promotion Process
 - Assistance to Firefighter Grant
3. Police Chief

7. Adjournment

Hartzheim moved, seconded by Alfheim, that the meeting be adjourned at 5:49 p.m. Roll Call. Motion carried by the following vote:

Aye: 5 - Schultz, Hartzheim, Croatt, Alfheim and Wolff

CITY OF APPLETON
RESOLUTION

**Resolution declaring polling places in the City of Appleton pursuant to
Wis. Stat. § 5.25**

WHEREAS, City of Appleton Aldermanic District 12 is comprised of Wards 35, 36, 37 & 52 and;

WHEREAS, the current polling place for District 12, St. John United Church of Christ has relocated and sold their building and;

WHEREAS, it is in the best interest of the City of Appleton to change the District 12 polling place to a facility that is amenable to adequately accommodate voters and Election Day operations;

NOW THEREFORE BE IT RESOLVED that the City of Appleton District 12 Polling place be changed to **Saint Pius X Catholic Church, 500 W Marquette St, Appleton, WI 54911** effective beginning with the February 21st, 2023 Spring Primary Election.

Adopted: _____

Published: _____

Jacob A. Woodford, Mayor

Kami Lynch, City Clerk

FYI - click mouse in "for the license period beginning" field to begin and tab throughout. Use mouse to check appropriate boxes, spacebar or enter.

Save Print

Original Alcohol Beverage Retail License Application

(Submit to municipal clerk.) 07/01/2022 06/30/2023
 For the license period beginning ~~07/01/2022~~ ending: ~~06/30/2023~~
(mm dd yyyy) (mm dd yyyy)

Applicant's Wisconsin Seller's Permit Number ●●●●●●●●●●	
FEIN Number ●●●●●●●●	
TYPE OF LICENSE REQUESTED	FEE
<input type="checkbox"/> Class A beer	\$
<input checked="" type="checkbox"/> Class B beer	\$ 100
<input type="checkbox"/> Class C wine	\$
<input type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class A liquor (cider only)	\$ N/A
<input checked="" type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
<input type="checkbox"/> Class B (wine only) winery	\$
Publication fee	\$ 60
TOTAL FEE	\$

To the Governing Body of the: Town of } Appleton
 Village of }
 City of }

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

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

Name (individual / partners give last name, first, middle; corporations / limited liability companies give registered name)
Appleton Souvenir + Cigar Co

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 full name and place of residence of each person.

President / Member Last Name <u>Kopesky III</u>	(First) <u>Norman</u>	(Middle Name) <u>John</u>	Home Address (Street, City or Post Office, & Zip Code) <u>741 Woodfield Rd Neenah, WI 54956</u>
Vice President / Member Last Name <u>Habela</u>	(First) <u>Wesley</u>	(Middle Name) <u>Gene</u>	Home Address (Street, City or Post Office, & Zip Code) <u>528 Ryan Rd Roseville MN 55113</u>
Secretary / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code) <u>TAKE W</u>
Treasurer / Member Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)
Agent Last Name <u>Kopesky III</u>	(First) <u>Norman</u>	(Middle Name) <u>J</u>	Home Address (Street, City or Post Office, & Zip Code) <u>741 Woodfield Rd. Neenah, WI 54956</u>
Director / Managers Last Name	(First)	(Middle Name)	Home Address (Street, City or Post Office, & Zip Code)

1. Trade Name Appleton Souvenir + Cigar Co. Business Phone Number 920 830 8349
 2. Address of Premises 415 W College Ave Post Office & Zip Code 54911

3. 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.)
415 W. College Ave. First floor + 2nd floor for service + consumption. Basement for storage only. Sq ft. approx. 2000.

4. Legal description (omit if street address is given above): _____
 5. (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? Appleton Souvenir + Cigar Co.

6. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? **If yes, explain** Yes No
Need to complete Responsible Beverage Course
7. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
If yes, explain.
8. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? **If yes, explain** Yes No
9. (a) **Corporate/limited liability company applicants only:** Insert state WI and date 12/23/2002 of registration.
- (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? **If yes, explain** 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? **If yes, explain.** Yes No
10. Does the applicant understand they must register as a Retail Beverage Alcohol Dealer with the federal government, Alcohol and Tobacco Tax and Trade Bureau (TTB) by filing (TTB form 5630.5d) before beginning business? [phone 1-877-882-3277] Yes No
11. Does the applicant understand they must hold a Wisconsin Seller's Permit? [phone (608) 266-2776] Yes No
12. 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 signer. Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000. Signer agrees 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, or one member of a partnership applicant must sign; one corporate officer, one member/manager 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.

Contact Person's Name (Last, First, M.I.) <u>Kopesky III Norman J</u>	Title/Member <u>President</u>	Date <u>12/18/22</u>
Signature <u>N. Kopsky III</u>	Phone Number <u>[REDACTED]</u>	Email Address <u>[REDACTED]@gmail.com</u>

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk <u>12-19-22</u>	Date reported to council / board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	



City of Appleton

Alcohol License Questionnaire

1. Name of Applicant: Norman J. Kopesky III

2. Name of Business: Appleton Souvenirs + Cigar Inc.
 (Check Applicable Box(s) to identify primary business activity)

- Restaurant
- Tavern/Night Club/Wine Bar
- Microbrewery/Brewpub
- Painting/Craft Studio
- Other (describe) _____

3. Address of Business: 4115 W College Ave Appleton, WI 54911

4. Have you or any member of your organization ever been convicted of a misdemeanor or ordinance violation? Yes _____ No X
 AND/OR been convicted of a felony? Yes _____ No X
 If yes to either question, please explain in detail below:

5. List all partners, shareholders or investors of your business. Include full name, middle initial and date of birth. Please use additional sheets if necessary.

<u>Norman</u>	<u>J</u>	<u>Kopesky III</u>	●	●	●	●
First name	M.I.	Last name	Date of Birth			
<u>Wesley</u>	<u>G</u>	<u>Kalula</u>	●	●	●	●
First name	M.I.	Last name	Date of Birth			
First name	M.I.	Last name	Date of Birth			
First name	M.I.	Last name	Date of Birth			

6. Name of person/corporation you are buying the premise and equipment from?

Name: Robert J Zima
 First name Middle Initial Last name

Address: 1625 Canary Lane Green Bay WI 54304
 City State ZIP

7. What was the previous name and primary nature of the business operating at this location?

Name: Appleton Souvenir + Cigar Inc

(Check Applicable Box(s) to identify primary business activity)

- Restaurant
 Tavern/Night Club/Wine Bar
 Microbrewery/Brewpub
 Painting/Craft Studio
 Other (describe) _____

8. Was this premise licensed for alcohol sales/consumption during the past license year?

Yes If yes, please contact the Community and Economic Development Department at 832-6468 about obtaining a copy of an existing Special Use Permit and related requirements that may run with property.

No _____ If no, please contact the Community and Economic Development Department at 832-6468 about obtaining a Special Use Permit. A Special Use Permit may be required for your business activity prior to the issuance of a Liquor License, pursuant to the City of Appleton Zoning Ordinance.

9. If alcohol sales were a previous use in this building, when did the operation cease?

Ongoing months ago.

10. Seating capacity: Inside _____ Outside _____

11. Operating hours (Inside the building): 11am 10pm Mon-Sat
Operating hours (Outdoor seating areas): N/A

12. Employees/Staff
Number of floor personnel 2 Number of door checkers 2

13. In general, state the size and operational details of the proposed establishment:

a. Gross floor building area of the premises to be licensed: 2000 square feet.

b. Gross outdoor seating areas of the premises to be licensed: 0 square feet.

c. Below, identify the operational details of the proposed establishment:

The First + second Floor are available for
the consumption of Alcohol, the First Floor is
the only area where alcohol is sold,
Basement is for storage only

M. Kyjtu
Signature

12/18/22
Date

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 an officer of the corporation/organization or one member/manager of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town Village City of Appleton County of Ontonagon

The undersigned duly authorized officer/member/manager of Appleton Souvenir + Cigar Co.
(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 Appleton Souvenir + Cigar Co
(Trade Name)

located at 415 W College Ave Appleton, WI 54911

appoints Norm Kopesky III
(Name of Appointed Agent)
741 Woodfield Rd Neenah, WI 54956
(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).
No

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? 25 yrs

Place of residence last year 724 Main St Neenah, WI 54956

For: Appleton Souvenir + Cigar Inc.
(Name of Corporation / Organization / Limited Liability Company)

By: N. Kopesky III
(Signature of Officer / Member / Manager)

Any person who knowingly provides materially false information in an application for a license may be required to forfeit not more than \$1,000.

ACCEPTANCE BY AGENT

I, Norm Kopesky III, hereby accept this appointment as agent for the
(Print / Type Agent's Name)

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.

N. Kopesky III 12/14/22 Agent's age 39
(Signature of Agent) (Date)
741 Woodfield Rd Neenah, WI 54956 Date of birth 03/03/83
(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)

Application for Cigarette and Tobacco Products Retail License

Submit to municipal clerk.

MUNICIPAL USE ONLY

License Number
Period Covered
Date of Issuance

Applicant's Wisconsin 15-digit Sales Tax Account Number
 [Redacted]

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

Legal Name (corporation, limited liability company, partnership or sole proprietorship) Appleton Souvenir & Cigar Inc			Federal Employer Identification No. (FEIN) [Redacted]		
Trade or Business Name (if different than Legal Name)			Telephone Number [Redacted]		
Business Address (License Location) 415 W College Ave		Business Located In <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town		Business Telephone (920) 8308349	
Municipality Appleton	State WI	Zip Code 54911	of: <u>Appleton</u>		County Outagamie
Mailing Address (if different than Business Address)		Municipality		State	Zip Code

Organization (check one)

Sole Proprietor Wisconsin Corporation – Enter date incorporated: 12/23/2002

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 materially false information on this application may be required to forfeit not more than \$1,000.

[Signature]
(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.

Application for Cigarette and Tobacco Products Retail License

MUNICIPAL USE ONLY

Submit to municipal clerk.

License Number
Period Covered
Date of Issuance

Applicant's Wisconsin 15-digit Sales Tax Account Number
 [Redacted]

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

Legal Name (corporation, limited liability company, partnership or sole proprietorship) SK GAS MART LLC			Federal Employer Identification No. (FEIN) [Redacted]		
Trade or Business Name (if different than Legal Name) BADGER MOBIL			Telephone Number () [Redacted]		
Business Address (License Location) 1201 N Badger Ave		Business Located In <input checked="" type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town		Business Telephone ()	
Municipality APPLETON	State WI	Zip Code 54914	of: Appleton		County Outagamie
Mailing Address (if different than Business Address)			Municipality	State WI	Zip Code 54915

Organization (check one)

Sole Proprietor Wisconsin Corporation – Enter date incorporated: 11/1/2022
 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 only from distributors or jobbers 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/forms/excise/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

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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 materially false information on this application may be required to forfeit not more than \$1,000.

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