License Application (

Applicant 29

Name of Applicant: <u>nicole romare</u>

Name of Business (DBA): whiskey river

Address of Premises: 134 main street

City: Ankeny County: Story Zip: 50010

 Business Phone:
 (515) 250-6928

 Mailing Address:
 1115 sw 46th street

 City: ankeny
 State: IA
 Zip: 50023

Contact Person

Name: nicole romare

Phone: (515) 250-6928 Email Address: nbernholtz@hotmail.com

Classification: Class C Liquor License (LC) (Commercial)

Term: 12 months

Expiration Date: 08/24/2011 **Expiration Date:** 08/23/2012

Privileges:

Class C Liquor License (LC) (Commercial)

Sunday Sales

Status of Business

BusinessType: Privately Held Corporation

Corporate ID Number: 11111111 Federal Employer ID # 26-3742479

Ownership

nicole romare

First Name: nicole Last Name: romare

City: ankeny State: lowa Zip: 50023

Position president

% of Ownership 100.00 % U.S. Citizen

Insurance Company Information

Insurance Company: Auto Owners Insurance Company

Policy Effective Date: Policy Expiration Date:

Bond Effective Continuously: Dram Cancel Date:

Outdoor Service Effective Date: Outdoor Service Expiration Date:

Temp Transfer Effective Date: Temp Transfer Expiration Date: