

**Applicant License Application ( )**

<b>Name of Applicant:</b>	<u>New Stream II LC</u>		
<b>Name of Business (DBA):</b>	<u>Cornbred BBQ</u>		
<b>Address of Premises:</b>	<u>526 Main Street Ste 106</u>		
<b>City</b>	<u>Ames</u>	<b>County:</b>	<u>Story</u>
		<b>Zip:</b>	<u>50010</u>
<b>Business</b>	<u>(515) 715-1066</u>		
<b>Mailing</b>	<u>526 Main Street Ste 106</u>		
<b>City</b>	<u>Ames</u>	<b>State</b>	<u>IA</u>
		<b>Zip:</b>	<u>50010</u>

**Contact Person**

<b>Name</b>	<u>Ryan Newstrom</u>		
<b>Phone:</b>	<u>(515) 451-3582</u>	<b>Email</b>	<u>ryan@cornbredbbq.com</u>

**Classification** Class C Liquor License (LC) (Commercial)**Term:** 12 months**Effective Date:** 05/01/2019**Expiration Date:** 01/01/1900**Privileges:**Class C Liquor License (LC) (Commercial)Outdoor ServiceSunday Sales**Status of Business**

<b>BusinessType:</b>	<u>Limited Liability Company</u>		
<b>Corporate ID Number:</b>	<u>XXXXXXXXXX</u>	<b>Federal Employer ID</b>	<u>XXXXXXXXXX</u>

**Ownership****Ryan Newstrom****First Name:** Ryan**Last Name:** Newstrom**City:** Ames**State:** Iowa**Zip:** 50010**Position:** Owner-Manager**% of Ownership:** 100.00%**U.S. Citizen:** Yes**Insurance Company Information**

<b>Insurance Company:</b>	<u>Le Mars Insurance Company</u>		
<b>Policy Effective Date:</b>	<u>05/01/2019</u>	<b>Policy Expiration</b>	<u>05/01/2020</u>
<b>Bond Effective</b>		<b>Dram Cancel Date:</b>	
<b>Outdoor Service Effective</b>		<b>Outdoor Service Expiration</b>	
<b>Temp Transfer Effective Date</b>		<b>Temp Transfer Expiration Date:</b>	

