Applicant	License Application (LC0038721)		
Name of Applic	ant: Whiskey River on Main, Inc.			
Name of Business (DBA): Whiskey River				
Address of Premises: <u>132 - 134 Main Street</u>				
City Ames	County: Story	Zip: <u>50010</u>		
Business	<u>(515) 250-6928</u>			
Mailing	2115 SW White Birch Dr.			
City Ankeny	State <u>IA</u>	Zip: <u>50023</u>		

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Contact Person

Name Nicole Romare			
Phone: (515) 250-6928	Email	drink@whiskeyriveronmain.com	

Classification Class C Liquor License (LC) (Commercial)

Term: 12 months

Effective Date: 09/29/2017

Expiration Date: 09/28/2018

Privileges:

Class C Liquor License (LC) (Commercial)

Outdoor Service

Status of Business

BusinessType: Privately Held Corporation							
Corporate ID N	umber:	XXXXXXXXXX	Federal Emp	bloyer ID XXXXXX	<u>(XX</u>		
Ownership							
nicole romare							
First Name:	<u>nicole</u>		Last Name:	romare			
City:	<u>Ankeny</u>		State:	<u>lowa</u>	Zip:	<u>50023</u>	
Position:	president						
% of Ownership:	<u>100.00%</u>		U.S. Citizen: Y	es			

Insurance Company Information

Insurance Company: Illinois Casualty Co			
Policy Effective Date:	Policy Expiration		
Bond Effective	Dram Cancel Date:		
Outdoor Service Effective	Outdoor Service Expiration		
Temp Transfer Effective	Temp Transfer Expiration Date:		