Applicant L	icense Application (	)
Name of Applica	ant: Booze Cruzer Cocktail Co., LLC	
Name of Busine	ss (DBA): Booze Cruzer Cocktail Co., LLC	
Address of Prer	nises: 2508 Mortensen Rd	
City Ames	County: Story	Zip: <u>50011</u>
Business	<u>(515) 238-3063</u>	
Mailing	6216 Gordon Ave	
City Des Moines	State <u>IA</u>	<b>Zip:</b> <u>50312</u>

Item # 6

#### **Contact Person**

Name Lucas Smith			
Phone: (515) 238-3063	Email	boozecruzerdsm@gmail.com	

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

Term:5 days

Effective Date: 02/13/2019

Expiration Date: 01/01/1900

## Privileges:

Class C Liquor License (LC) (Commercial)

Sunday Sales

#### **Status of Business**

BusinessType	: <u>Limit</u>	ed Liability Comp	any			
Corporate ID I	Number:	XXXXXXXXXX	Federal Em	nployer ID 🖄	<u>XXXXXXXXXX</u>	
Ownership						
Lucas Smith						
First Name:	<u>Lucas</u>		Last Name:	<u>Smith</u>		
City:	<u>Des Moin</u>	ies	State:	<u>lowa</u>	Zip:	<u>50312</u>
Position:	<u>Owner</u>					
% of Ownership	: <u>50.00%</u>		U.S. Citizen:	Yes		
Easton Smith						
First Name:	Easton		Last Name:	<u>Smith</u>		
City:	<u>Des Moin</u>	ies	State:	<u>lowa</u>	Zip:	<u>50312</u>
Position:	<u>Owner</u>					
% of Ownership	: <u>50.00%</u>		U.S. Citizen:	Yes		

## **Insurance Company Information**

Insurance Company: Illinois Union Insurance Company

Policy Effective Date: 02/13/2019	Policy Expiration <u>02/17/2019</u>		
Bond Effective	Dram Cancel Date:		
Outdoor Service Effective	Outdoor Service Expiration		
Temp Transfer Effective	Temp Transfer Expiration Date:		