Item No. 7

Applicant License Application (

Name of Applicant: Farhat Firoz

Name of Business (DBA): Neighborhood Liquor and Smokes inc.

Address of Premises: 1410 Panoramic ct.

City Please Select County: lowa Zip: 50010

)

 Business
 (515) 509-0204

 Mailing
 1410 Panoramic ct.

City ames State  $\underline{IA}$  Zip:  $\underline{50010}$ 

## **Contact Person**

Name Humza Firoz

Phone: (515) 509-0204 Email f25humzanaeem@gmail.com

Classification Class E Liquor License (LE)

Term: 12 months

Expiration Date: <u>01/01/1900</u>

Privileges:

Class B Native Wine Permit

Class B Wine Permit

Class C Beer Permit (Carryout Beer)

Class E Liquor License (LE)

Sunday Sales

## **Status of Business**

BusinessType: Privately Held Corporation

Corporate ID Number: XXXXXXXXX Federal Employer ID XXXXXXXXX

## **Ownership**

**Farhat Firoz** 

First Name: Farhat Last Name: Firoz

City: <u>ames</u> State: <u>lowa</u> Zip: <u>50010</u>

Position: President

% of Ownership: <u>70.00%</u> U.S. Citizen: Yes

**Humza Firoz** 

First Name: <u>Humza</u> Last Name: <u>Firoz</u>

City: ames State: lowa Zip: 50010

Position: <u>Vice President</u>

% of Ownership: <u>30.00%</u> U.S. Citizen: Yes

## **Insurance Company Information**

Insurance Company: Allied Mutual Insurance Company

Policy Effective Date: 10/06/2020 Policy Expiration 01/01/1900

Bond Effective  $\underline{2}$  Dram Cancel Date:

Outdoor Service Expiration Outdoor Service Expiration

Temp Transfer Effective Temp Transfer Expiration Date: