

# **Applicant**

NAME OF LEGAL ENTITY NAME OF BUSINESS (DBA) BUSINESS

CHRISTIANI'S EVENTS, L.L.C. Christiani's Events (515) 360-8069

ADDRESS OF PREMISES PREMISES SUITE/APT NUMBER CITY COUNTY ZIP

2601 East 13th Street Ames Story 50010

MAILING ADDRESS CITY STATE ZIP

1150 East Diehl AvenueJordan Des Moines Iowa 50315

Park

#### **Contact Person**

NAME PHONE EMAIL

Peter Worsham (515) 360-8069 peter@christianiscatering.com

### **License Information**

LICENSE NUMBER LICENSE/PERMIT TYPE TERM STATUS

Special Class C Liquor License 5 Day Pending Dramshop

Review

EFFECTIVE DATE EXPIRATION DATE LAST DAY OF BUSINESS

SUB-PERMITS

Special Class C Liquor License



#### **Status of Business**

**BUSINESS TYPE** 

Limited Liability Company

# **Ownership**

#### Individual Owners

NAME	CITY	STATE	ZIP	POSITION	% OF OWNERSHIP	U.S. CITIZEN
Carol Christiani	Des Moines	Iowa	50321	LLC Member	100.00	Yes

# **Insurance Company Information**

**Founders Insurance Company** 

OUTDOOR SERVICE EFFECTIVE OUTDOOR SERVICE EXPIRATION DRAM CANCEL DATE

DATE DATE

BOND EFFECTIVE DATE TEMP TRANSFER EFFECTIVE

TEMP TRANSFER EXPIRATION DATE DATE