

Item No. 7

# **Applicant**

NAME OF LEGAL ENTITY NAME OF BUSINESS (DBA) BUSINESS

Hy-Vee, Inc. Hy-Vee #1 Clubroom (515) 292-5580

ADDRESS OF PREMISES PREMISES SUITE/APT NUMBER CITY COUNTY ZIP

3800 West Lincoln Way Clubroom Ames Story 50014

Area

MAILING ADDRESS CITY STATE ZIP

5820 Westown Pkwy West Des Moines Iowa 50266

#### **Contact Person**

NAME PHONE EMAIL

Kelly Palmer (515) 267-2949 kpalmer@hy-vee.com

### **License Information**

LICENSE NUMBER LICENSE/PERMIT TYPE TERM STATUS

LC0040412 Class C Retail Alcohol License 12 Month Submitted

to Local Authority

EFFECTIVE DATE EXPIRATION DATE LAST DAY OF BUSINESS

Oct 9, 2022 Oct 8, 2023

SUB-PERMITS

Class C Retail Alcohol License



**PRIVILEGES** 

Catering

#### **Status of Business**

**BUSINESS TYPE** 

Corporation

## **Ownership**

#### Individual Owners

NAME	CITY	STATE	ZIP	POSITION	% OF OWNERSHIP	U.S. CITIZEN
Andrew Schroeder	Johnston	lowa	50131	AVP, Assistant Controller	0.00	Yes
Michael Jurgens	Des Moines	Iowa	50312	Vice President, Secretary	0.00	Yes
Jeremy Gosch	Urbandale	Iowa	50323	CEO, President	0.00	Yes

# **Insurance Company Information**

INSURANCE COMPANY

POLICY EFFECTIVE DATE

POLICY EXPIRATION DATE

EMPLOYERS MUTUAL CASUALTY COMPANY



BOND EFFECTIVE DATE

TEMP TRANSFER EFFECTIVE DATE

TEMP TRANSFER EXPIRATION DATE