

## Liquor/Beer Agent

| Class A: M Beer, □ Liquor, M Cider<br>Class B: □ Beer, □ Liquor,<br>□ Class C Wine  | City of Madison Clerk 210 MLK Jr Blvd, Room 103 Madison, WI 53703  licensing@cityofmadison.com 608-266-4601  | (License number)  (Alder District # and Name) Office Use Only  |
|---|--|--|
| Liquor/Beer Agent to an existi  If you are a new agent  If this is a change of a  Please include a background  Please include documentation  an Operator's License within | t for a <b>new</b> license, there is no chargagent, there is a \$10.00 charge. <b>check form</b> and copy of your <b>pictu</b> that you have taken <b>Beverage Ser</b> the last two years. | ge.  Ire ID with this application.  Ver Training or have held  |
|   | y Corporate Officer or, officer/member forKwik Ti  |  |
| doing business as Kwik Trip 951   |  |  |
|   |  |  |
| as the liquor/beer agent for the prem   | ise located at6702 Raymond Rd.,  | Madison, WI 53/19  |
| Penalty for materially false application information on this application may be application of corporate officer/member   | n information: Any person who know<br>e required to forfeit not more than \$   | vingly provides materially false   |
| Signature of corporate officer/member   | Date   | Approximation (Approximately Approximately A |
| To be complete  | ed by appointed Liquor/  | Beer Agent   |
| I, Spencer Streight, a  | ppointed liquor/beer agent for Kw  | ik imp, inc. (Corp/LLC)  |
| being first duly sworn, affirm that I ha  | ave full authority and control of the  | premise described  |
| in this license, and I am involved in t   | he actual conduct of the business as   | an employee, or have a direct  |
| financial interest in the business of th  |  |  |
| I have included a copy of my phot   | o ID and Beverage Server Training o  | ertificate/Operator's license.   |

Penalty for materially false application information: Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.

Signature of corporate Agent

9/14/20

Date

REV 09/2018

Form submitted by mail/e-mail Office Use Only

(Agenda Item Number) -if change-

(Legistar file number) -if change-