ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION	Applicant's Wisconsin Seiler's Permit Number:	
Submit to municipal clerk	Federal Employer Identification Number (FEIN): 27-0795321	
For the license period beginning 20 ;	LICENSE REQUESTED	
ending JUNE 30 20 10	TYPE	FER
Town of ,	Class A beer	\$
TO THE GOVERNING BODY of the: Village of _MADISON	Class B beer	\$
☐ City of	X Wholesale beer	\$
·	Class C wine	\$
County of DANE Aldermanic Dist. No. (if required by ordinance)	Class A liquor	\$
A Thomas I INDUSTRIAL I I DISTRICTORIO I I I I I I I I I I I I I I I I I I	Class B liquor	\$
1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY	Reserve Class B liquor Publication fee	\$
CORPORATION/NONPROFIT ORGANIZATION hereby makes application for the alcohol beverage license(s) checked above.	TOTAL FEE	\$ \$
	<u></u>	φ
2 Name (individual/partners give last name, first, middle; corporations/limited liability companies give registe.	,	
An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a		
partnership, and by each officer, director and agent of a corporation or nonprofit organization, and liability company. List the name, title, and place of residence of each person		-
	Address Post Of FIELD CREST WAY	fice & Zip Code
Vice President Member TDC 17 DIPACE 4974	HAMMERSLEY RD	<u>53719</u> 53711
	HAMMERSCEY RD	<u> </u>
Treasurer/Member	MAMMEISCE, KD	> 3 //[
Agent TRENT KRAEMER		
Directors/Managers SCOTT MANNING, BRYAN MANNING, MIKE	BRIDGES	
3 Trade Name VINTAGE BREWING COMPANY Business Ph	one Number	
4. Address of Premises > 674 S. WHITNEY WAY Post Office 8	Zip Code ▶ 53711	
5. Is individual, partners or agent of corporation/limited liability company subject to completion of the respons		
training course for this license period?	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	▼Yes □ No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant?		Yes No
7 Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of the	is business?	Yes 🔀 No
8 (a) Corporate/limited liability company applicants only: Insert state and date		
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability		Yes 🔀 No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any n agent hold any interest in any other alcohol beverage license or permit in Wisconsin?	,	
(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8	ohovo l	Yes No
9 Premises description: Describe building or buildings where alcohol beverages are to be sold and stored Ti		
all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and in	ne applicant must include records (Alcohol hoversone	
may be sold and stored only on the premises described) Whole Building At 6.74 Whit	NEY WAY AND IZ'X40	VERANDA
10. Legal description (omit if street address is given above):		
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year?		Yes No
(b) If yes, under what name was license issued? J. T. WHITNEYS		
12 Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630 5) before beginning business? [phone 1-800-937-8864]	··· [5	Yes No
13 Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same nar	ne as that shown in	
Section 2, above? [phone (608) 266-2776]		Yes No
14. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?	and the second of the second o	Yes 🔀 No
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above question	ns has been truthfully answered to the	best of the knowledge
of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Lin	y the license(s), if granted, will not be	assigned to another
any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdem	mited Liability Companies must sign.) eanor and grounds for revocation of th	Any lack of access to
SUBSCRIBED AND SWORN TO BEFORE ME	same and grounds for revocation or a	iio licoliag
this Z5 day of JAN , 20 10 Byo	> M	
(Officer of Corporation/Me	mber/Manager of Limited Liability Compa	ny/Partner/Individual)
	/	
My commission expires (Omcer of Corporatio	n/Member/Manager of Limited Liability C	ompany/Partner)
	s)/Member/Manager of Limited Liability C	ompany if Any)
TO BE COMPLETED BY CLERK		
Date received and filed with municipal clerk (-25-(0) Date reported to council/board 2-(3-(0) Date provisional license issued Sign	ature of Clerk / Deputy Clerk	
Date license granted Date license issued License number issued		}
AT-106 (R. 4-09)		
vv	Wisconsin	Department of Revenue