	upplicant's Wisconsin weller's Permit Number: 000165-139
Submit to municipal clerk. Read instructions on reverse side.	eller's Permit Number: 0000 100 100 100 100 100 100 100 100 1
For the license period beginning July 1 , 2008; ending June 30 , 2009	LICENSE REQUESTED
Town of .	TYPE FEE
TO THE GOVERNING BODY of the: Village of Madison	Class A beer \$
☑ City of	Class B beer \$
Pomp	Wholesate beer \$
County of Dane Aldermanic Dist. No. (if required by ordinance)	X Class C wine \$
CHECK ONE Individual Partnership Limited Liability Company	Class A liquor \$ Class B liquor \$
Corporation/Nonprofit Organization	Reserve Class B liquor \$
Complete A or B. All must complete C.	Publication fee \$
A. Individual or Partnership:	TOTAL FEE. \$
	Post Office & Zip Code
B. Full Name of Corporation/Nonprofit Organization/Limited Liability Company Pular Pheej 1	<u>LLC</u>
Address of Corporation/Limited Liability Company (if different from licensed premises) > 5310 Hv	apahoe Lone
All Officer(s) Director(s) and Agent of Corporation and Members/Managers and Agent of Limited Liability Co	
Title Name (Inc. Middle Name) Home Address President/Member Pena Her 5310 Arabahae	
Vice President/Member Mac Zona Vue	THE TIMENTAL OF 2) TO
Secretary/Member	
Treasurer/Member	
Agent PENG HER	
Directors/Managers	
C 1 Trade Name Daste at A Sta Business Phone	e Number <u>340-0762</u>
2 Address of Premises > 2817 E. Washington Aze Post Office & Zi	ip Code > _53704
3 Is agent of corporation/limited liability company subject to completion of the responsible beverage server tra	aining course
for this license period?	
4 Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and remay be sold and stored only on the premises described.) See attached Liquot/Beer Supplen	e applicant must include ecords. (Alcohol beverages
may be sold and stored only on the premises described) See attached Elquor/Beer Supplen	nemai roim.
 5. Legal description (omit if street address is given above): See street address given above. 6. a. Since filing of the last application, has the named licensee, any member of a partnership licensee, or any 	u mambar afficer director
manager or agent for either a limited liability company licensee, corporation licensee, or nonprofit organi	y member, onicer, unector, ization licensee heen
convicted of any offenses (excluding traffic offenses not related to alcohol) for violation of any federal I	laws, any Wisconsin laws,
any laws of other states, or ordinances of any municipality? If yes, complete reverse side	Yes No
b Are charges for any offenses presently pending (excluding traffic offenses not related to alcohol) again any other persons affiliated with this license? If yes, explain fully on reverse side	nst the named licensee or Yes No
/ Except for questions 6a and 6b, have there been any changes in the answers to the questions as submitted	by you on your
last application for this license?	Yes No
If yes, explain. Address change: 5310 Arapahoe Lane	
8 Was the profit or loss from the sale of alcohol beverages for the previous year reported on the Wisconsin Incretum of the licensee?	
If not, explain.	Yes No
9 Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name	e as that shown under
Section A or B above? [phone (608) 266-2776]	X Yes □ No
10. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630 5) before be	eainnina .
business? [phone 1-800-937-8864]	X Yes ☐ No
11 Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor?	No Yes No
READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions had the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limits	e license(s), if granted, will not be assigned to another.
SUBSCRIBED AND SWORN TO BEFORE ME	1/62
this 8 day of April , 20 08 (Officer of Ecoporation/Metriber	//Manager of Limited Liability Company /Partner/Individual)
I seem 1. Some of	
My commission expires (Clert/No so Public) (Officer of Corporation/Member	/Manager of Limited Liability Company /Partner)
	Manager of Limited Liability Company if Any)
TO BE COMPLETED BY CLERK	
Date received and filed with municipal clerk - Date Date reported to council/board Date	icense granted
T-18-18 8120108	
License number issued Date license issued Signal	ture of Clerk / Deputy Clerk

Liquor/Beer Renewal Supplemental Form

Corporation or LLC

1.	Name of Corporation or LLC Pully Phely LLC
2.	Address of Licensed Premise 2817 E. Washington Ave
3.	State Seller's Permit Number 004 - 00 00 1 6 5 7 3 9 - 01
4.	Federal Employer Identification Number 20 - 1046524
5.	Approximate square footage of licensed premise 3780
6	Capacity 130
7.	Areas where alcohol beverages are sold/permitted (include outdoor seating, if applicable)
	alcohol-beer and wine-sold during dinner
	alcohol-beer and wine-sold during dinner or dine-in
8.	Areas where alcohol beverages are stored
9	Indicate the estimated percent of liquor/beer vs. food business, based on gross sales.
	(1) % Alcohol (9) % Food (9) Other
10.	Establishments with a capacity of 100 or more:
	(a) Do you offer or allow live music performances? Yes X No
	(b) Do you have a designated dance floor area? Yes Yo
	(c) Do you offer or allow the use of a disc jockey? Yes No
11.	Establishments that currently hold Nightclub Licenses:
	Does your approved Security Plan remain in force and unchanged? Yes No
12	Establishments that currently hold Centers for Visual & Performing Arts Licenses:
	Do your underage identification and security procedures remain in force and unchanged, as
	approved on your initial application? Yes No
13.	☐ Notify me when Tavern Safety Training sessions have been scheduled. 🂢 No notice needed.

14	How long has the Liquor/Beer A	gent resided in the State of Wisconsin?	3,
15.	Percentage of the business owner	l by the Liquor/Beer Agent _S() %	:
16.	Has the Agent completed the Bev	verage Server Training Course?Yes	No
17	person as your liquor/beer agent.	your Corporation or LLC This is not necessarily This is your corporation's agent for service of primitted by law to be served on the corporation. Lane Mad Son State 2	
18	List names and addresses of all d	irectors, stockholders, members, and managers be	elow.
	Names of Directors/Members Peng Hev Maizong Vue	Home Address, City, State, Zip 5310 Arapahae Lane Madison W1 53702	
	Names of Stockholders (Corporation Only)	Home Address, City, State, Zip	% of Ownership (must = 100%)
	Mai Zong Vue	Same as above	50:/.
	Name(s) of Manager(s)	Home Address, City, State, Zip	Phone#
	Peng Her	Same	240-0762
19.	Mai Zong Vac Who to contact 8 a.m) - 4:30 p.m. Mai Zong vac @ 56 c Contact E-mail Address, if possil	regarding problems with application Contact	7-7838 Phone Number
×	Meilongle Signature of Officer/Memb	£4/17/0	8
	Dignature of Officer/Michin	Date	

Liquor/Beer Agent Authorization
I, Peng Her , officer/member for Phay Pheej
(Corporation/LLC), doing business as Taste of 18ia, authorize and appoint
Pens Her (Name) as the liquor/beer agent for the premise
located at 2817 E. Washington Ave
MADISON/W53707
Subscribed and sworn to before me this
A. WEATH at the of Officer Member
Day of ARV Cherula week Notary Public Dane County, Wisconsin My Commission Expires 20, 20, 20, 20, 20, 20, 20, 20, 20, 20,
Acceptance of Liquor/Beer Agent Appointment
· lo
I, fing the appointed liquor/beer agent for
I, feng Her, appointed liquor/beer agent for Phar Pheej (name of Corporation or LLC), being first duly sworn
I, fraghter, appointed liquor/beer agent for Phase in the phase in t
say I have vested in me, by properly authorized and executed written delegation, full authority
say I have vested in me, by properly authorized and executed written delegation, full authority and control of the premise described in the license of such corporation or limited liability
say I have vested in me, by properly authorized and executed written delegation, full authority and control of the premise described in the license of such corporation or limited liability company, and I am involved in the actual conduct of the business as an employee, or have a
say I have vested in me, by properly authorized and executed written delegation, full authority and control of the premise described in the license of such corporation or limited liability company, and I am involved in the actual conduct of the business as an employee, or have a direct financial interest in the business of the licensee, therein relating to the intoxicating
say I have vested in me, by properly authorized and executed written delegation, full authority and control of the premise described in the license of such corporation or limited liability company, and I am involved in the actual conduct of the business as an employee, or have a direct financial interest in the business of the licensee, therein relating to the intoxicating liquor/fermented malt beverage. The interest I have in the business is \$\frac{1}{2} \cdot \%.
say I have vested in me, by properly authorized and executed written delegation, full authority and control of the premise described in the license of such corporation or limited liability company, and I am involved in the actual conduct of the business as an employee, or have a direct financial interest in the business of the licensee, therein relating to the intoxicating liquor/fermented malt beverage. The interest I have in the business is \$\frac{1}{2} \text{.} \t