



# Change of Officers

City of Madison Clerk  
 210 MLK Jr Blvd, Room 103  
 Madison, WI 53703  
[licensing@cityofmadison.com](mailto:licensing@cityofmadison.com)  
 608-266-4601

Class A:  Beer,  Liquor,  Cider  
 Class B:  Beer,  Liquor,  
 Class C Wine

\_\_\_\_\_  
 (Agenda Item Number)

\_\_\_\_\_  
 (Legistar file number)

\_\_\_\_\_  
 (License number)

\_\_\_\_\_  
 (Alder District # and Name)  
**Office Use Only**

- o This application is to inform the city of any changes in corporate structure.
- o **The fee** for filing this application is \$25.00.
- o Please include a completed a **Background Investigation Form** and copy of a **picture ID** for each **new** officer/member/director with this application (not necessary for title changes).

## Licensed Premises Information

This application modifies existing alcohol license number: LICLIA-2014-01155

Business dba Name: CP Mart West

Licensed Address: 6702 Mineral Point Road, Madison, WI 53705

Liquor/Beer Agent Name: Asad Shahzad Alder, District #: 19

## Corporate Information

Business Legal Name (as on WI State Sellers Permit): Capitol Petroleum, LLC

Business Mailing Address: 2570 Rimrock Road, Madison, WI 53704

Business Contact Name, Position: Asad Shahzad

Business Phone: (608) 442-0000 Business Email: officemgr1957@gmail.com

List New Officers/Members/Directors, if applicable (attach background check form for each):	
Name	Title
Asad Shahzad	Member
Officers/Members/Directors who will no longer hold their positions:	
Name	Former Title
Gohar Shahzad	Member

Do any of the officers/members/directors possess any interest or control in any other Class A, B or C license?

No  Yes, explain: There are 7 licenses in Madison, 1 in the Town of Madison, and 1 in Fitchburg.  
See the attached list.

After this change, how many total officers/members/directors will be in the organization?: 1

Will this change alter your business plan?  No  Yes, please attach new business plan with application.

*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.*

  
\_\_\_\_\_  
Authorized Signature

9-14-22  
\_\_\_\_\_  
Date

Form submitted by mail/e-mail  
Office Use Only