

☐ Class C Wine

Liquor/Beer Agent

City of Madison Clerk 210 MLK Jr Blvd, Room 103

Madison, WI 53703 Class A: x Beer, x Liquor, □ Cider Class B: ☐ Beer, ☐ Liquor,

licensing@cityofmadison.com 608-266-4601

(Agenda	Item Number) -if change-
	r file number) -if change-
401	19-2014-00310 number)
(License	number)
(Alder D	istrict # and Name)
	Office Use Only

- This application is for Liquor/Beer Agents for new alcohol licenses and for a change of Liquor/Beer Agent to an existing alcohol license.
 - o If you are a **new** agent for a **new** license, there is no charge.
 - If this is a **change of agent**, there is a \$10.00 charge.
- Please include a **background check form** and copy of your **picture ID** with this application.
- Please include documentation that you have taken Beverage Server Training or have held an Operator's License within the last two years.

To be completed by Corporate Officer or Member of LLC

I, Donald P. Zietlow	_, officer/member forKwik T	rip, Inc. (Corp/LLC),		
doing business as Kwik Trip 268	, authorize and appoint Nar	Rebecca A. Ellingson		
as the liquor/beer agent for the premise	ocated at 1421 Monroe St., Mad	ison, WI 53711		
Penalty for materially false application intinformation on this application may be re Consultation Signature of corporate officer/member	quired to forfeit not more than \$			
To be completed by appointed Liquor/Beer Agent				
I, Rebecca A. Ellingson , appo	inted liquor/beer agent forK	wik Trip, Inc. (Corp/LLC),		
being first duly sworn, affirm that I have	full authority and control of the p	premise described		
in this license, and I am involved in the a	ctual conduct of the business as	an employee, or have a direct		
financial interest in the business of the lic	ensee. The percent of the busine	ess I own is <u>0</u> %.		
I have included a copy of my photo ID	and Beverage Server Training of	ertificate/Operator's license.		
Penalty for materially false application information on this application may be rec				
RC	4/29/21			
Signature of corporate Agent Rebecca A. Ellingson	Date			
REV 09/2018		☐ Form submitted by mail/e-mail Office Use Only		