COPY

ORIGINAL ALCOHOL BEVERAGE RETAIL LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning 3/14 20 14 ;
ending 6/30 20 14

TO THE GOVERNING BODY of the: ☐ Town of ☐ Village of ☒ City of } La Crosse

County of LA-CROSSE Aldermanic Dist. No. _____ (if required by ordinance)

Applicant's Wisconsin Seller's Permit Number:	
Federal Employer Identification Number (FEIN):	
LICENSE REQUESTED ▶	
TYPE	**FEE**
☐ Class A beer	$
☒ Class B beer	$ 33.36
☐ Class C wine	$
☐ Class A liquor	$
☒ Class B liquor	$ 1166.68
☐ Reserve Class B liquor	$
Publication fee	$ 20.00
TOTAL FEE	$

1. The named ☐ INDIVIDUAL ☐ PARTNERSHIP ☒ LIMITED LIABILITY COMPANY ☐ CORPORATION/NONPROFIT ORGANIZATION
   hereby makes application for the alcohol beverage license(s) checked above.
2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): ▶ Rohan Enterprises LLC

   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 by each member/manager and agent of a limited liability company.** List the name, title, and place of residence of each person.

Title	Name	Home Address	Post Office & Zip Code
President/Member	MAYA PARKASH	1932 S Village Dr	Rochester MN 55904
Vice President/Member			
Secretary/Member			
Treasurer/Member			
Agent ▶	OM Parkash	1424 Johnson St.	La Crosse WI 54601
Directors/Managers	FLAVORS		

3. Trade Name ▶ ~~FLAVOR~~ of thai Business Phone Number 507-319-9450
4. Address of Premises ▶ 1505 LOSEY BLVD S LACROSSE Post Office & Zip Code ▶ 54601
5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server 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 this business? ☐ Yes ☒ No
8. (a) **Corporate/limited liability company applicants only:** Insert state WIS and date 2/13/14 of registration.
   (b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? ☐ Yes ☒ No
   (c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? ☐ Yes ☒ No

   (NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)
9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) 2100 Sq ft Dining area of 1 story Bldg. Behind bar walk-in cooler in kitchen storage area North behind kitchen.
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? Chiraghdin LLC
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] ☒ Yes ☐ No
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] ☒ Yes ☐ No
14. Does the applicant understand that they must purchase alcohol beverages only from Wisconsin wholesalers, breweries and brewpubs? ☒ Yes ☐ No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions 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 the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME
this 24th day of Feb, 20 14

Mari Parkash
(Officer of Corporation/Member/Manager of Limited Liability Company/Partner/Individual)

Ili Lebahn
(Clerk/Notary Public)

(Officer of Corporation/Member/Manager of Limited Liability Company/Partner)

My commission expires _____

(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK

Date received and filed with municipal clerk 2/24/14	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

COPY

SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: ☐ Town ☐ Village ☒ City of LaCrosse County of La Crosse

The undersigned duly authorized officer(s)/members/managers of Rohan Enterprises LLC
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Flavors of Thai
(trade name)

located at 1505 Losey Blvd S La Crosse WI 54601

appoints Om Parkash
(name of appointed agent)

1424 Johnson St. La Crosse WI
(home address of appointed agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

☒ Yes ☐ No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).
New Taste of India Enterprises LLC

Is applicant agent subject to completion of the responsible beverage server training course? ☐ Yes ☒ No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? 2 1/2 yrs

Place of residence last year 1424 Johnson St, LaCrosse

For: Rohan Enterprises LLC
(name of corporation/organization/limited liability company)

By: [signature]
(signature of Officer/Member/Manager)

And: _____
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Om Parkash, hereby accept this appointment as agent for the
(print/type agent's name)

corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Om Parkash (signature of agent) 2/24/14 (date) Agent's age 50

1424 Johnson St La Crosse WI 54601 (home address of agent) Date of birth [redacted]

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY
(Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on _____ (date) by _____ (signature of proper local official) Title _____ (town chair, village president, police chief)

License Check-Off Sheet

Original / Renewal

Name: Rohan Enterprises LLC

Trade Name: Flavors of Thai

Address: 1505 Losey Blvd S

Council Meeting: 3-13-14

Type(s) of License: Class "B" Beer, ~~[illegible]~~ "Class B" Liquor
Full Combo

Fire: HOLD / OK

Health: HOLD / OK Inspect Sched. 3/4/14

Inspection: HOLD / OK

Water: HOLD / OK

Municipal Court: HOLD / OK

Police: HOLD / OK

Attorney: HOLD / OK

HOLD / OK Beer and/or Liquor Bills:

HOLD / OK Taxes - Personal Property ONLY and/or Room Tax

HOLD / OK Training Course Completed (Individual/Partnership/Agent)
Date: Current Agent @ New TASTE OF INDIA

HOLD / OK WI Seller's Permit Number: _____
Mailed from City Clerk's Office on: _____

Comments:

Christianson, Jay

From: Buddenhagen, Brenda
Sent: Tuesday, February 25, 2014 9:25 AM
To: Christianson, Jay
Subject: Approve: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor

Christianson, Jay

From: Erickson, Tina
Sent: Tuesday, February 25, 2014 9:08 AM
To: Christianson, Jay
Subject: Approve: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor

Christianson, Jay

From: Nederloe, Steven
Sent: Tuesday, February 25, 2014 9:21 AM
To: Christianson, Jay
Subject: Approve: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor

Christianson, Jay

From:	Padesky, Mark
Sent:	Wednesday, February 26, 2014 3:24 PM
To:	Christianson, Jay
Subject:	RE: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor
Attachments:	image003.gif; image004.jpg

Jay,

There are no PP delinquencies under the owner's name or new business address.

From: Christianson, Jay
Sent: Tuesday, February 25, 2014 9:00 AM
To: Buddenhagen, Brenda; Erickson, Tina; Gavrilos, Andrew; Padesky, Mark; Putz, Lisa; Rank, Randy; Rose, Sue; Schott, Avrie; ZZ Inspection; Amy Stevens; David Sawvell; Doug Schaefer; Jim Steinhoff; Katie Dempsey; Sam Welch; Snyder, Craig; Soden, Kyle; Xiong, B
Subject: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor

Please review the attached information and reply back to me by **Monday, March 3, 2014.**

If the license is "Rejected" please inform us as to why.

Please contact Om Parkash @ 507-319-9450 to make an appointment to inspect the premise.

Any questions please feel free to contact me.

Jay Christianson
License & Elections Clerk III
400 La Crosse Street, La Crosse, WI 54601
608-789-7553 phone
608-789-7510 main line
608-789-7552 fax
christiansonj@cityoflacrosse.org
www.cityoflacrosse.org

Christianson, Jay

From: Putz, Lisa
Sent: Friday, February 28, 2014 9:36 AM
To: Christianson, Jay
Subject: Approve: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor

Christianson, Jay

From: Rose, Sue
Sent: Tuesday, February 25, 2014 10:13 AM
To: Christianson, Jay
Subject: Approve: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor

Christianson, Jay

From: Sam Welch <sawelch@lacrossecounty.org>
Sent: Monday, March 03, 2014 11:10 AM
To: Christianson, Jay
Subject: RE: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor

Recommend Yes Comply No

Pre-inspection scheduled for tomorrow afternoon.

From: Christianson, Jay [mailto:ChristiansonJ@cityoflacrosse.org]
Sent: Tuesday, February 25, 2014 9:00 AM
To: Brenda Buddenhagen; Erickson, Tina; Andrew Gavrilos; Padesky, Mark; Putz, Lisa; Randy Rank; Rose, Sue; Schott, Avrie; ZZ Inspection; Amy Stevens; David Sawvell; Doug Schaefer; Jim Steinhoff; Katie Dempsey; Sam Welch; Snyder, Craig; Soden, Kyle; Xiong, B
Subject: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor

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608-789-7553 phone
608-789-7510 main line
608-789-7552 fax
christiansonj@cityoflacrosse.org
www.cityoflacrosse.org

Christianson, Jay

From: Snyder, Craig
Sent: Wednesday, February 26, 2014 7:51 AM
To: Christianson, Jay
Subject: Approve: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor

Christianson, Jay

From: Soden, Kyle
Sent: Tuesday, February 25, 2014 3:19 PM
To: Christianson, Jay
Subject: Approve: Rohan Enterprises LLC dba Flavors of Thai - ORIGINAL - Combo Class B Beer & Liquor