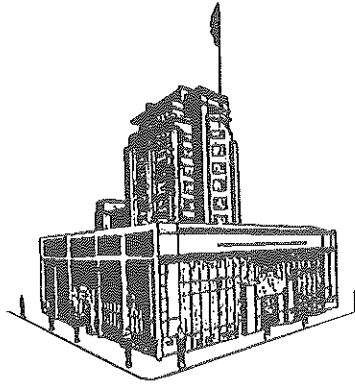


**Office Of The  
AUDITOR/RECORDER  
Of Woodbury County**

PATRICK F. GILL  
Auditor/Recorder



**#6**

Court House – Rooms 103  
620 Douglas  
Sioux City, Iowa 51101

Phone (712) 279-6702  
Fax (712) 279-6629

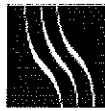
To: Board of Supervisors

From: Patrick F. Gill, Auditor & Recorder

Date: November 7, 2017

Subject: Liquor License Application for the Chet's Merville Market

Please approve an application for a 12-month, Class B  
Native Wine Permit with Sunday sales privileges, for  
Chet's Merville Market, 741 Frontage Rd, Merville, Iowa. The permit would  
be effective 11/12/2017 through 11/11/2018.



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## Applicant License BC0029492, Chet's Movable Market, Movable

After completion click on the NEXT link to continue to the next screen, or the BACK link to return to the previous screen.

The navigation links on the top may also be used to move around the application.

### LENGTH OF LICENSE REQUESTED:

(Choose one of the following):

- ☒ 12 month  
☐ 8 month  
☐ 6 month  
☐ 14 day  
☐ 5 day

License Status: Submitted to Local Authority

Original issue date of license: 11/12/2009 MM/DD/YYYY

Issue date of current license: MM/DD/YYYY

License effective date: 11/12/2017 MM/DD/YYYY

License expiration date: 11/11/2018 MM/DD/YYYY

Number of days notice: 0

70 day notice: 0

Cancel date: MM/DD/YYYY

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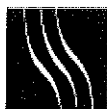


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## Privileges BC0029492, Chet's Movable Market, Movable

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Select one or more of the privileges you wish to have for your Class C Beer Permit (BC). If no privileges are applicable please leave all boxes unchecked and hit the next button.

### PRIVILEGES:

- ☒ Class B Native Wine Permit
- ☐ Class B Wine Permit (Carryout Wine - Includes Native Wine)
- ☐ Living Quarters
- ☐ Outdoor Service
- ☒ Sunday Sales

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**Applicant BC0029492, Chet's Movable Market, Movable**

After completion click on the NEXT link to continue to the next screen, or the BACK link to return to the previous screen.  
The navigation links on the top may also be used to move around the application.

Corporation Name/Sole Proprietor: **Chet & Linda, Inc.** (Sole Proprietorship, Partnership, Corporation, etc.)

Name/Partnership Name(s):

Name of Business (D/B/A): **Chet's Movable Market**Address of Premise: **741 Frontage Rd.**

Address Line 2:

City: **Movable**County: **Woodbury**Zip: **51039**Business Phone: **(712) 873-3777**Cell / Home Phone: **(712) 253-1829**☐ Same AddressMailing Address: **Box 636**

Mailing Address Line 2:

City: **Kingsley**State: **Iowa**Zip: **51028**Contact Name: **Floyd C. Davis**Phone: **(712) 873-3777**Email Address: **kingsleychetsfoods@wiatel.n**

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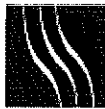
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## Status of Business BC0029492, Chet's Moville Market, Moville

After completion click on the NEXT link to continue to the next screen, or the BACK link to return to the previous screen.

The navigation links on the top may also be used to move around the application.

Indicate how the business will be operated (Choose one of the following):

- |   |   |
|---|---|
| <input type="radio"/> Sole Proprietorship                   | <input type="radio"/> Publicly Traded Corporation |
| <input type="radio"/> General Partnership                   | <input type="radio"/> Limited Liability Company   |
| <input type="radio"/> Limited Partnership                   | <input type="radio"/> Municipality                |
| <input checked="" type="radio"/> Privately-Held Corporation | <input type="radio"/> Non-Profit Association      |

Corporate ID  
Number: 218412

Federal Employer  
ID#: 41-1481039

Federal Employer ID Applied For: ☐

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## Ownership BC0029492, Chet's Movable Market, Movable

After completion click on the NEXT link to continue to the next screen, or the BACK link to return to the previous screen. The navigation links on the top may also be used to move around the application.

Corporate applicant's, list all shareholders having 10% or more interest in the corporation and all officers and directors of the corporation regardless of ownership interest. Sole Proprietors shall also include their spouse even if the spouse owns 0% interest. Non-profit corporations or associations need to list officers. Partnerships and Committees not registered with the Secretary of State office will need a trade name filing from their county recorder's office.

If you want to change ownership information at renewal time please finish the renewal with the current ownership listed. When you are finished please go to the Action List and submit an Ownership Update Application along with the license renewal.

### Owners:

Name	Address	Percentage	
Floyd Davis	419 Dover St., Kingsley, IA, 51028	100.00 %	<a href="#">View</a>

1

First Name:				Last Name:			
Address:							
Address Line 2:							
City:				State:	Please Select ▼		
Zip:							
Position:				SS#:			
Date of Birth:			MM/DD/YYYY	% of Ownership:			
<div>Add</div>							

Please make sure you press "Add" after each owner's information is listed above before pushing the next button.

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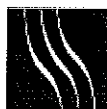


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## Criminal History BC0029492, Chet's Movable Market, Movable

After completion click on the NEXT link to continue to the next screen, or the BACK link to return to the previous screen.

The navigation links on the top may also be used to move around the application.

Since this license was last issued, has anyone listed in the ownership screen been convicted of a felony offense in Iowa or any other state of the United States? If yes, list on the next (Violations) screen.

Since the license was last issued, have any of the owners listed in the ownership screen been charged, arrested, indicted, convicted or received a deferred judgment for any violation of any state, county, city, federal or foreign law? All information shall be reported regardless of the disposition, even if dismissed or expunged. Include pending charges. DO NOT include traffic violations, except those that are alcohol related. If yes, list violations on the next (Violations) screen.

If no arrests, indictments, summons or convictions are applicable since the license was last issued, select 'NONE'.

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## Premises Information BC0029492, Chet's Movable Market, Movable

After completion click on the NEXT link to continue to the next screen, or the BACK link to return to the previous screen.

The navigation links on the top may also be used to move around the application.

Has the premises configuration changed since last year?

No

Control of  
premises:

Own ☐

Lease ☐

Other ☐

explain:

Premises  
type: Grocery Store

Local  
Authority: County

License City: Movable

City Population: 1618

License  
County: Woodbury

County Population: 102172

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## General Premises Information BC0029492, Chet's Movable Market, Movable

After completion click on the NEXT link to continue to the next screen, or the BACK link to return to the previous screen.

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Yes Sell groceries?

No Are other liquor, wine or beer businesses accessible from the interior of your premises?

60000 Square footage of the entire retail sales area of the business, including area of walk-in coolers that are accessible to the public. This includes all areas where non-alcohol products are also sold. Do not include areas that are not accessible to the public (offices, bathroom, kitchen, storage area etc.).

Yes Does your premises conform to all local and state health, fire and building laws and regulation?

Selling beer in a container other than the original container (growler):

☐ I will be filling, refilling, and selling beer in a growler. I have read and understand the rule, 185-4.6, and will abide by the filling, refilling, and sealing requirements. I understand that a failure to comply with applicable laws and rules will result in a fine, license suspension, and/or license revocation.

☐ Agree Food Permit Number:

To ensure compliance with Iowa food safety and licensing statutes and regulations, please visit <https://ia.foodprotectiontaskforce.com/library/> and review the Fact Sheet for Businesses Filling Growlers or contact your local food licensing agency.

☒ I will NOT be filling and selling beer in a growler.

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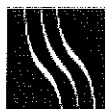


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## History

**Applicant Signature** BC0029492, Chet's Moville  
Market, Moville

Complete the information below and click Finish to complete the application  
Note that the license fees will only be withdrawn from accounts after the ABD approves the license.

**This application must be completed by a person listed in the Ownership Section.**

I hereby declare that all information contained in the Application is true and correct. I understand that misrepresentation of material facts in the Application is a crime and grounds for denial of the license or permit under Iowa law. I further understand that, as a condition of receiving a license, the licensed premises is subject to inspection during business hours by appropriate local, state and federal officials.

**NOTE:** The Applicant's Name must match one of the owner's names from the Ownership screen.

Owner's Signature: Floyd Davis

Date: 11/06/2017

MM/DD/YYYY

Tentative effective date: 11/12/2017 MM/DD/YYYY

Licensees are required to submit a bi-annual report of shipment to Iowa consumers due January 10th and July 10th for the previous six months of shipment. This report can be found on the "Action List" under "Complete a Tax Report".

**Amount to be transferred from your account: \$ 385.00**

Please notify your Financial Institution to allow ACH debits by our agency's ACH ID number, 142-6004553.

Funds will be pulled from your account 2 days after ABD approves the license. You are ready to submit the application for your license to sell alcoholic beverages in the State of Iowa. By providing the bank information requested and clicking on "finish" you are indicating that you are an owner or authorized user of the bank account listed and that you hereby authorize ABD to debit the account in the amount indicated above.

NAME		0123	
ADDRESS			
CITY, STATE, ZIP		01-23456789	
		DATE	
PAY TO THE ORDER OF		\$	
BANK NAME		DOLLARS	
ADDRESS			
CITY, STATE, ZIP			
FEE			
⑆012345678⑆		01234567890123⑆	
0123			
Bank Routing Number	Bank Account Number	Check Number	

**Applicant's Bank Name:** XXXXXXXXXXXXXXXXXXXX

Applicant's Bank Routing  
Number: XXXXXXXXXXXXXXXXXXXX

Repeat Bank Routing Number:

The routing number will ALWAYS be 9 digits long. If you are unsure of your routing or account number, call your bank.

Applicant's Account Number: XXXXXXXXXXXXXXXXXXXX

Repeat Account Number:

Credit cards are not accepted. Your bank information is transferred over a secure connection and is completely confidential.

BY CLICKING ON THE "FINISH" BUTTON, I AGREE TO THE TERMS AND CONDITIONS OF USING MY BANK ACCOUNT AS A PAYMENT METHOD, WHICH ARE LISTED BELOW, AND AUTHORIZE THE STATE OF IOWA TO DEBIT MY BANK ACCOUNT FOR THE LICENSING FEE LISTED ABOVE.

1. Bank Account Payments. By choosing to use a bank account as your payment method

Please print a copy of this page for your records before clicking the "FINISH" button.

**Finish**

If you are not taken to a confirmation screen after clicking on "Finish", please see the notes at the top of the applicant signature screen to find out why the application was not submitted.

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## Local Authority Endorsement BC0029492, Chet's Movable Market, Movable

Complete the information below and click **SUBMIT** to endorse the Renewal.

### LICENSE INFORMATION

Local Authority: *County of Woodbury*

Daytime Phone for Local Authority: (712) 279-6702

☐ License Approved

☐ License Denied

☐ License Timely Filed

Reason For Denial:

Reason For Timely Filing:

Effective Date: 11/12/2017

Expiration Date: 11/11/2018

### CHECK LIST

Fire inspection completed:

Yes ☐ No ☐

Health inspection completed

Yes ☐ No ☐

Was a DCI background check run

Yes ☐ No ☐

Fee Amount: \$385.00

Local Authority Share: \$300.00

### E-MAIL

Please provide the local authority email address below. Once the application has been reviewed and approved, a copy of the license will be emailed to this address.

Local Authority E-mail Address

### COMMENTS

Signature:

Date:

MM/DD/YYYY

**Submit**

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