Form
AB-200

Alcohol Beverage License Application

For Municipal Use Only
Municipality
License Period

License(s) Requested: (up to two boxes may be checked)

- ☐ Class "A" Beer . . . . . $ _____
- ☐ Class "B" Beer . . . . . $ _____
- ☐ "Class A" Liquor . . . . . $ _____
- ☐ "Class B" Liquor . . . . . $ _____
- ☐ "Class A" Liquor (cider only) $ _____
- ☑ Reserve "Class B" Liquor $ 10,000
- ☐ "Class C" Liquor (wine only) $ _____

Fees	
License Fees	$
Background Check Fee	$
Publication Fee	$
Total Fees	$

Part A: Premises/Business Information

1. Legal Business Name (individual name if sole proprietorship)
Lion's Tail Brewing Co. LLC

2. Business Trade Name or DBA
Lion's Tail Brewing Co. LLC

3. FEIN
473013957

4. Wisconsin Seller's Permit Number
456-1028798512-02

5. Entity Type *(check one)*
☐ Sole Proprietor ☐ Partnership ☑ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization

6. State of Organization
WI

7. Date of Organization
05/20/2005

8. Wisconsin DFI Registration Number
389822729

9. Premises Address
8520 W. North Ave.

10. City
Wauwatosa

11. State
WI

12. Zip Code
53226

13. County
Milwaukee

14. Governing Municipality: ☑ City ☐ Town ☐ Village
of: Wauwatosa

15. Aldermanic District
6

16. Premises Phone
(920) 427-7009

17. Premises Email
alex@lionstailbrewing.com

18. Website
lionstailbrewing.com

19. Premises Description - Describe the building or buildings where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.
Beer and Liquor to be stored and sold on the 1st floor of the building inside. Consumption will occur in the entirety of the 1st floor of the building as well as the outdoor areas to the south of the building along North Ave.

20. Mailing Address (if different from premises address)

21. City

22. State

23. Zip Code

Part B: Questions

1. Has the business (sole proprietorship, partnership, limited liability company, or corporation) been convicted of violating federal or state laws or local ordinances? Exclude traffic offenses unless related to alcohol beverages. ☐ Yes ☑ No

If yes, list the details of violation below. Attach additional sheets if necessary.

Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No	
Law/Ordinance Violated	Location	Trial Date
Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No	

2. Are charges for any offenses pending against the business? Exclude traffic offenses unless related to alcohol beverages. . . ☐ Yes ☑ No

If yes, describe the nature and status of pending charges using the space below. Attach additional sheets as needed.

3. Is the applicant business or any of its officers, directors, members, agent, employees, owners, or other related individuals or entities a restricted investor with any interest in an alcohol beverage producer or distributor? . . ☐ Yes ☑ No
If yes, provide the name of the restricted investor and describe the nature of the interest.

4. Is the applicant business owned by another business entity? ☐ Yes ☑ No
If yes, provide the name(s) and FEIN(s) of the business entity owners below. Attach additional sheets as needed.

4a. Name of Business Entity	4b. Business Entity FEIN

5. Have the partners, agent, or sole proprietor satisfied the responsible beverage server training requirement for this license period? Submit proof of completion. ☑ Yes ☐ No

6. Is the applicant business indebted to any wholesaler beyond 15 days for beer or 30 days for liquor/wine? ☐ Yes ☑ No

7. Does the applicant business owe past due municipal property taxes, assessments, or other fees? ☐ Yes ☑ No

Part C: Individual Information

List the name, title, and phone number for each person or entity holding the following positions in the applicant business or businesses listed in Part B, Question 4: sole proprietor, all officers, directors, and agent of a corporation or nonprofit organization, all partners of a partnership, and all members, managers, and agent of a limited liability company. Attach additional sheets if necessary.

Include Form AB-100 for each person listed below. Corporations and LLCs must appoint an agent by including Form AB-101.

Last Name	First Name	Title	Phone
Wenzel	Alexander	owner/agent	[redacted]

Part D: Attestation

One of the following must sign and attest to this application:

• sole proprietor • one general partner of a partnership • one corporate officer • one member of an LLC

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the license. Further, I agree that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another individual or entity. I agree to operate this business according to the law, including but not limited to, purchasing alcohol beverages from state authorized wholesalers. I understand that lack of access to any portion of a licensed premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this license. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000 if convicted.

Last Name	First Name	M.I.
Wenzel	Alexander	T

Title	Email	Phone
owner/agent	alex@lionstailbrewing.com	[redacted]

Signature	Date
[signature]	5/16/27

Part E: For Clerk Use Only

Date Application Was Filed With Clerk	License Number	Date License Granted	Date License Issued

Signature of Clerk/Deputy Clerk	Date Provisional License Issued (if applicable)

Form
AB-100

Alcohol Beverage Individual Questionnaire

Date
05/16/2024

All individuals involved in the alcohol beverage business must complete this form, including:

- sole proprietor
- all partners of a partnership
- all officers, directors, and agent of a corporation or nonprofit organization
- members and agent of a limited liability company

Your alcohol beverage application or renewal is not complete until all required Individual Questionnaires are submitted.

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)
Lion's Tail Brewing Co. LLC

2. Business Trade Name or DBA
Lion's Tail Brewing Co. LLC

3. Entity Type *(check one)*
☐ Sole Proprietor ☐ Partnership ☑ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization

Part B: Individual Information

1. Last Name	2. First Name	3. M.I.
Wenzel	Alexander	T

4. Relationship to Business (Title)	5. Email	6. Phone
owner/agent	[redacted]	[redacted]

7. Home Address
[redacted]

8. City	9. State	10. Zip Code	11. Date of Birth
[redacted]	[redacted]	[redacted]	[redacted]

12. Drivers License/State ID Number	13. Drivers License/State ID State of Issuance
[redacted]	[redacted]

Part C: Address History

1. Do you currently reside in Wisconsin? . . . . . ☑ Yes ☐ No

If yes to 1 above, how long have you continuously lived in Wisconsin prior to the date of application? . . . .

Years	Months
46	

2. List in chronological order all of your addresses within the last 5 years. Attach additional sheets if necessary.

Previous Address 1	City	State	Zip Code
Previous Address 2	City	State	Zip Code
Previous Address 3	City	State	Zip Code
Previous Address 4	City	State	Zip Code
Previous Address 5	City	State	Zip Code

3. List all states and counties you have lived in as an adult. Attach additional sheets if necessary.

State	County	State	County	State	County	State	County
WI	Outagamie	WI	Portage				
State	County	State	County	State	County	State	County

Continued →

Part D: Criminal History

1. Have you ever been convicted of any offenses (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or of any county or municipal ordinances? . . . . . ☐ Yes ☑ No

   If yes to question 1, please list details of each conviction below. Attach additional sheets as needed.

Law/Ordinance Violated	Location	Conviction Date

Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No

Law/Ordinance Violated	Location	Conviction Date

Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No

Law/Ordinance Violated	Location	Conviction Date

Penalty Imposed	Was sentence completed? . . . . . ☐ Yes ☐ No

2. Are charges for any offenses currently pending against you (excluding traffic offenses unless related to alcohol beverages) for violation of any federal, Wisconsin, or another state's laws or any county or municipal ordinances? . . . . . ☐ Yes ☑ No

   If yes to question 2, describe nature and status of pending charges using the space below. Attach additional sheets as needed.

Part E: Attestation

READ CAREFULLY BEFORE SIGNING: Under penalty of law, I have answered each of the above questions completely and truthfully. I certify that I am not prohibited from participating in this business due to any involvement in another tier of the alcohol beverage industry as a restricted investor. I understand that any license issued contrary to Wis. Stat. Chapter 125 shall be void under penalty of state law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000 if convicted.

Signature	Date
	05/16/2024

Form
AB-101

Alcohol Beverage Appointment of Agent

Date
05/16/2024

Agent Type *(check one)*

☑ Original (no fee) ☐ Successor ($10 fee for municipal licensees only)

Part A: Business Information

1. Legal Business Name (individual name if sole proprietor)
Lion's Tail Brewing Co. LLC

2. Business Trade Name or DBA
Lion's Tail Brewing Co. LLC

3. Entity Type *(check one)*
☑ Limited Liability Company ☐ Corporation ☐ Nonprofit Organization

4. Alcohol Beverage Business Authorization *(check one)*
☐ Municipal Retail License ☑ State Permit

5. If successor agent, provide State Permit or Municipal Retail License Number

6. Describe the reason for appointing a successor agent, if successor is checked above.

Part B: Agent Information

1. Last Name	2. First Name	3. M.I.
Wenzel	Alexander	T

4. Email	5. Phone
alex@lionstailbrewing.com	[redacted]

6. Home Address
[redacted]

7. City	8. State	9. Zip Code	10. Age
[redacted]			

11. Drivers License/State ID Number	12. Drivers License/State ID State of Issuance
[redacted]	

Part C: Agent Questions

1. Have you satisfied the responsible beverage server training requirement? ☑ Yes ☐ No
Submit proof of completion.

2. Have you completed Form AB-100, *Alcohol Beverage Individual Questionnaire?* ☑ Yes ☐ No
Submit a completed Form AB-100 with this form.

3. Have you been a Wisconsin resident for at least 90 continuous days? ☑ Yes ☐ No
See instructions for exceptions.

Continued →

Part D: Business Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Undersigned**, authorize the above-named individual to act for the above-named corporation, nonprofit organization, or limited liability company with full authority and control of the premises and of all alcohol beverage activities on such premises. I certify that I am authorized by the above-named entity to authorize this individual to act on behalf of the entity. If I am appointing a successor agent, I rescind all previous agent appointments for this premises. Further, I understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000 if convicted.

Last Name	First Name	M.I.
Wenzel	Alexander	T

Title	Email	Phone
owner/agent	alex@lionstailbrewing.com	[redacted]

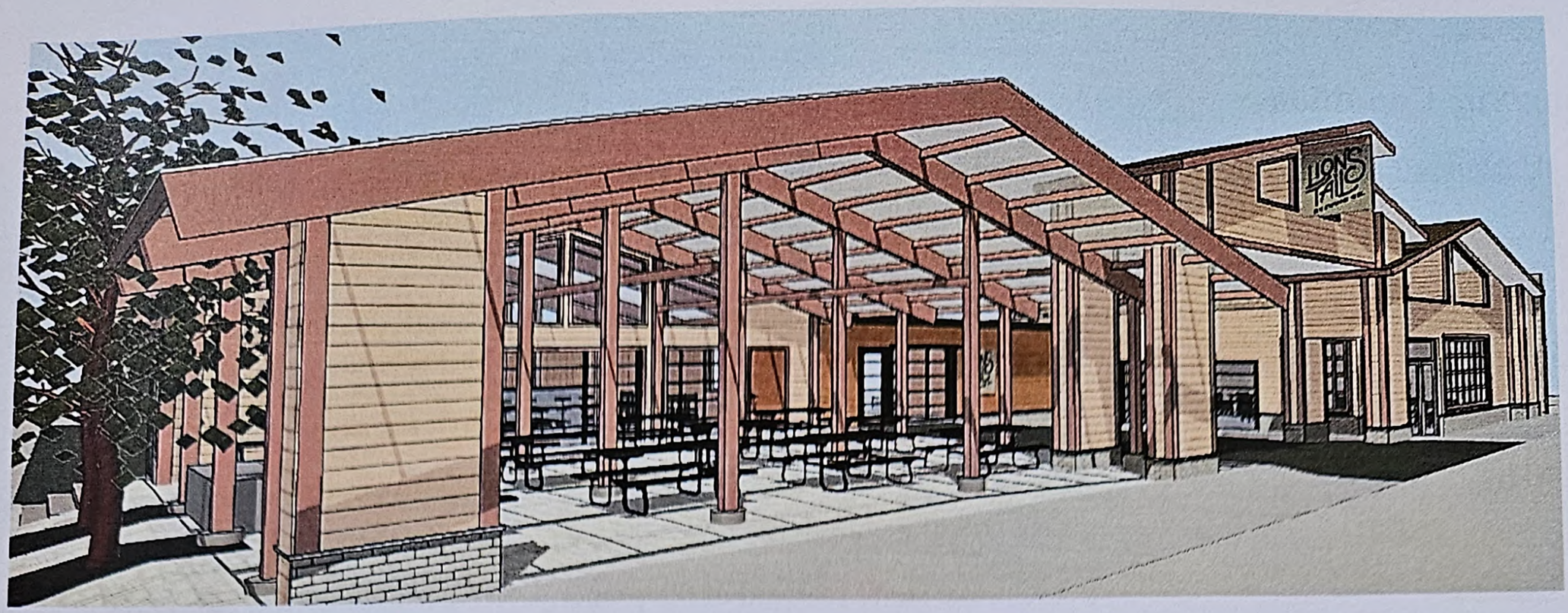
Signature	Date
	05/16/24

Part E: Agent Attestation

READ CAREFULLY BEFORE SIGNING: I, the **Agent**, hereby accept this appointment as agent for the above-named corporation, nonprofit organization, or limited liability company and assume full responsibility for the conduct of all alcohol beverage activities on the premises for the above-named business. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000 if convicted.

Last Name	First Name	M.I.
Wenzel	Alexander	T

Signature	Date
	05/16/24



Lion's Tail Brewing Co. – Plan of Operation

Originally Submitted Aug 2021, Updated 5/16/2024

Plan of Operation:

Business Name: Lion's Tail Brewing Co. (Property will be under separate business name of AK Wenzel Properties LLC)

Own or Lease: Owned. Purchased in 2021.

Services Offered: Following the model of our original location (which will continue to operate) in Neenah WI, we plan to brew 1,000 to 2,500 barrels/year of high-quality, small-batch craft beer in many different styles. We will have several different taproom and beer garden-style spaces where customers can enjoy our beers and malt beverages (hard seltzer), and liquor/mixed drinks in an interesting yet relaxing environment. We will offer some snacks to enjoy with our beers, but rely more on partnership with a variety of food truck operators for our customers to enjoy a more significant dining experience to accompany our beers, along with a partnership with Sendiks Foods to satisfy our need to serve as a restaurant with the State of Wisconsin (we currently hold a limited restaurant license with City of Wauwatosa). We plan to welcome impromptu visits by customers but also accommodate groups for small to medium size gatherings. As allowed by the Wisconsin Department of Revenue (Brewpub license) we will also offer our products for sale in packaged (can/bottle) format to be enjoyed off-premise. The brewery will also supply kegged beer to other bars/restaurants in the Milwaukee area.

Hours of Operation:

The taproom / customer spaces are open: Mon-Thurs 3pm-10pm. Fri 3pm-11pm. Sat Noon-11pm. Sun Noon-7pm

Employees: We employ 2 full-time employees as well as 12 to 20 part-time employees (bartenders/servers) depending on the season.

Square Footage: Total of 4,615 square feet of indoor space including renovated versions of the existing garden center (1333 sqft), the existing pet center (2228 sqft) and a concourse connector with restrooms (1054 sqft) which will be new construction.

Outdoor Seating: We have an outdoor beer garden with seating in the existing "covered greenhouse" as well as the courtyard formed between the two buildings and the connector.

Neighbor Issues: We have had no issues to date with 19 months of operation.

Law Enforcement Issues: We have had no issues to date with 19 months of operation. We had 1 false fire alarm in 12/23 where the WFD responded automatically due to the link to our auto monitoring system.

Parking/Site Conditions:

Customer/Employee Parking:	12 stalls in the existing paved space to the rear (north) end of the property with access to N 86th St. Additional 4 parking spaces to the rear (northeast corner) of the property with access from N 85th St. Customers can also utilize street parking.
Delivery Area:	The rear (north) end paved area will allow deliveries to both buildings via rear entrances. Deliveries will be made only during typical M-Fri business hours.
Landscaping:	Maintained according to plan approved by City of Wauwatosa in 2021
Refuse Location:	Dumpster for waste and recycling is contained by a corral near the storage garage in the East end of the property.
Fencing:	Along the entire rear end of the property. Replaced with brand new fence in 2022.

ph: 608-266-2776 fax: 608-264-6884
email: DORBusinessTax@revenue.wi.gov
website: revenue.wi.gov

Letter ID L0921610336

LIONS TAIL BREWING CO
W6283 ROCKY MOUNTAIN DR
GREENVILLE WI 54942

Wisconsin Department of Revenue Seller's Permit

Legal/real name: LIONS TAIL BREWING CO

Business name: LION'S TAIL BREWING CO.
116 SOUTH COMMERCIAL ST.
SUITE 116
NEENAH WI 54956

- This certificate confirms you are registered with the Wisconsin Department of Revenue and authorized in the business of selling tangible personal property and taxable services.
- You may not transfer this permit.
- This permit must be displayed at the place of business and is not valid at any other location.
- If your business is not operated from a fixed location, you must carry or display this permit at all events.

Tax Type	Account Type	Account Number
Sales & Use Tax	Seller's Permit	456-1028798512-02