RESOLUTION OF THE COMMON COUNCIL			
Authorizing and directing the proper city official(s) to appoint Jennifer Wentela as the agent for Kwik Trip Inc., d/b/a Kwik Trip #738, located at 1231 E Main St.			
File Number:	R-43-2021	**Date Introduced:**	April 13, 2021

WHEREAS the City Clerk's office has received a Schedule for Successor of Agent and Schedule for Appointment of Agent for Kwik Trip #738, and

WHEREAS, the application was forwarded to the Police Chief for review, now therefore

BE IT RESOLVED the Common Council of the City of Stoughton that the proper city official(s) be hereby directed and authorized to appoint Jennifer Wentela as the agent for Kwik Trip #738.

Council Action: ☐ **Adopted** ☐ **Failed** **Vote** _____

Mayoral Action: ☐ **Accept** ☐ **Veto**

_____

Tim Swadley, Mayor Date

Council Action: _____ ☐ **Override** **Vote** _____

Pd. 4-7-21
HZ

KWIK TRIP INC.

Legal
PHONE 608-781-8988
FAX 608-793-6120

1626 Oak St., P.O. Box 2107
La Crosse, WI 54602
www.kwiktrip.com

March 30, 2020

City Clerk
City of Stoughton
381 E. Main St.
Stoughton, WI 53589

RE: Appointment of Agent
Kwik Trip 738
1231 E. Main St.

Dear City Clerk:

Matthew Hoks has accepted another position with our company. A new manager, Jennifer Wentela, been assigned to take over leadership responsibilities of Kwik Trip 738. Therefore, we would like to appoint Jennifer as the new agent of the store.

Enclosed, please find the completed Appointment of Agent, Auxiliary Questionnaire and Successor of Agent forms reflecting this change. In addition, enclosed is a $10.00 check to cover the administrative fee for this service. I respectfully request that you please include this item on the agenda of your next City council meeting for consideration.

If you require anything further, please contact me at (608) 793-6262 or DHafner@kwiktrip.com. Thank you for your assistance with this matter.

Yours truly,

Deanna

Deanna Hafner
Licensing Agent

Enclosures

Form **AT-200**

Appointment of Successor Agent – Retail Licenses

Submit this form to your licensing authority with a $10 processing fee.

If there is a change in agent, each club, corporation, or limited liability company that holds a retail license to sell fermented malt beverages and/or intoxicating liquor must appoint a successor agent and have the appointment approved by the licensing authority pursuant to sec. 125.04(6), Wis. Stats. The following questions must be answered by the agent, and the appointment must be signed by an officer of the corporation/organization or one member of the limited liability company (only one signature is required).

Section 1: Licensee Information and Acknowledgement

Licensee Name

Kwik Trip, Inc., DBA Kwik Trip 738

Reason for Cancellation of Appointed Agent

New manager took over responsibility of store.

The undersigned appoints Jennifer J. Wentela as agent in accordance with sec. 125.04(6), Wis. Stats.

Signature of President / Member

3-30-21

Date

Section 2: Agent Information and Acknowledgement

Agent Name

Jennifer J. Wentela

Mailing Address	City or Post Office	State	Zip Code
[redacted]	Stoughton	WI	53589

Agent Questions	Yes	No
1. Are you of legal drinking age?	☑	☐
2. Have you been a resident of Wisconsin for at least 90 continuous days prior to the date of appointment as agent?	☑	☐
3. Have you ever been convicted of a federal law violation?	☐	☑
4. Have you ever been convicted of a state law violation?	☐	☑
5. Have you ever been convicted of a local ordinance violation?	☐	☑
6. Have you completed the required responsible beverage server training course per sec. 125.04(5)(a)5, Wis. Stats.?	☑	☐

UNDER PENALTY OF LAW, I declare that my answers above are true and correct to the best of my knowledge and belief.

I hereby accept appointment as agent for Kwik Trip, Inc. DBA Kwik Trip 738 and assume full responsibility of the conduct of the business relative to fermented malt beverages and intoxicating liquors.

Signature of Agent

03/29/2021

Date

Section 3: Licensing Authority Approval

Municipality Name

Signature of Official

Date

Title of Official

Auxiliary Questionnaire
Alcohol Beverage License Application

Submit to municipal clerk.

WI Dr. Lic. #W534-4309-0595-03

Individual's Full Name *(please print)* *(last name)*	*(first name)*	*(middle name)*
Wentela	Jennifer	Joyce

Home Address *(street/route)*	Post Office	City	State	Zip Code
[redacted]	Stoughton		WI	53589

	Age	Date of Birth	Place of Birth
[redacted]	3[redacted]		

The *above named individual* provides the following information as a person who is (check one):

☐ Applying for an alcohol beverage license as an **individual**.

☐ A member of **a partnership** which is making application for an alcohol beverage license.

☒ Agent of Kwik Trip, Inc.
(Officer / Director / Member / Manager / Agent) *(Name of Corporation, Limited Liability Company or Nonprofit Organization)*

which is making application for an alcohol beverage license.

The *above named individual* provides the following information to the licensing authority:

1. How long have you continuously resided in Wisconsin prior to this date? All my life.
2. Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any county or municipality? ☐ Yes ☑ No
   If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending. *(If more room is needed, continue on reverse side of this form.)*
3. Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any county or municipality? ☐ Yes ☑ No
   If yes, describe status of charges pending.
4. Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? ☐ Yes ☑ No
   If yes, identify. *(Name, Location and Type of License/Permit)*
5. Do you hold and/or are you an officer, director, stockholder, agent or employee of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer permit, brewery/winery permit or wholesale liquor, manufacturer or rectifier permit in the State of Wisconsin? ☐ Yes ☑ No
   If yes, identify. *(Name of Wholesale Licensee or Permittee)* *(Address By City and County)*
6. Named individual must list in chronological order last two employers.

Employer's Name		Employed From	To
Burger King	1287 N Main St, River Falls, WI 54022	9/11	4/12
Residence Hall Assn.	410 S 3rd St, River Falls, WI 54022	4/10	4/11

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the undersigned states that each of the above questions has been truthfully answered to the best of the knowledge of the signer. The signer agrees that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application. Any person who knowingly provides materially false information on this application may be required to forfeit not more than $1,000.

X *(Signature of Named Individual)*

Jennifer J. Wentela

City of Stoughton
County of Dane
State of Wisconsin
Licenses

WHEREAS, the City of Stoughton, Dane County, State of Wisconsin, has, upon application duly made, granted and authorized the issance of the following Licenses:

Issued to:

KWIK TRIP, INC.

1626 OAK ST
LA CROSSE, WI 54603

JENNIFER J. WENTELA, Agent

Trade Name:

KWIK TRIP #967

2400 ROBY ROAD
STOUGHTON, WI 53589

License Type	License No	Effective	Expires	Fee
Cigarette	CIG 11	7/01/2018	6/30/2019	100.00
Location:	ONE STORY FRAME CONSTRUCTION WTIH STORAGE IN COOLERS AND ON SALES FLOOR - 2400 ROBY RD			
Class A Liquor - Cider Only	CIDER 5	7/01/2018	6/30/2019	
ONE STORY FRAME CONSTRUCTION WTIH STORAGE IN COOLERS AND ON SALES FLOOR - 2400 ROBY RD				
Class A Retail - Beer	A BEER 6	7/01/2018	6/30/2019	100.00
Publication fee:				20.00
Location:	ONE STORY FRAME CONSTRUCTION WTIH STORAGE IN COOLERS AND ON SALES FLOOR - 2400 ROBY RD			

WHEREAS, this license is subject to all resolutions, ordinances, regulations, and provisions as may be at any time imposed by the local governing body or any laws of the State of Wisconsin, and is subject to revocation as provided by law.

Given under my hand and the Great Seal of the City of Stoughton, County of Dane, this 14th day of June, 2018.

CORPORATE SEAL CITY OF STOUGHTON, WI

Total fee:

$220.00

Holly Licht

Holly Licht

This document must be framed and posted on the premises.