TYPE OF LICENSE (Check all that apply)

	<u>License Type</u>	Fee	License Type	<u>Fee</u>
	Off-Sale Intoxicating	\$ 0.00	Brewery Off-Sale	\$ 0.00
4	On-Sale Intoxicating	\$ 0.00	Brewery Taproom On-Sale	\$ 0.00
7	Sunday Liquor	\$ 0.00	Microdistillery Off-Sale	\$ 0.00
Ħ	Wine (Includes Sunday)	\$ 0.00	Microdistillery Cocktail Room	\$ 0.00
	3.2% Malt Liquor: On-Sale	\$ 0.00	Consumption and Display	\$ 0.00
	3.2% Malt Liquor: Off-Sale	\$ 0.00	Liquor License Transfer Only	\$ 0.00
	Special Club Liquor	Calculated by Clerk's Office	On Sale Theater	\$ 0.00
	Dancing	\$ 0.00	2:00 A.M. (Issued by State)	Calculated by State
	Additional Bar (each)	\$ 0.00	After Hours Entertainment \$ 0.00	
·			TOTAL DUE:	\$ 0.00

BUSINESS INFORMATION				jà				
Name of applicant (name of individual, partnership, corporation or association):								
Windward Restourant Concepts Jestiny Ken Zervas								
Applicant Address: 7517 Brighton Street								
City: DJuth	State: M	N	Zip: 55804					
Applicant Phone: 218-721-7071 Applicant Email Address: Jefferung @ Cymril Com								
Business Address: 37	ne Bridge Cockta	log City Du	WN Zip 658	302				
Business Phone: 218-72+-2071								
Minnesota Tax ID Number:	9374519	Federal Tax ID Num	ber: 93-2980560					
List, if corporation, all stockholders, directors, officers, and percentage or number of shares owned. If partnership or								
limited partnership, the name of each partner and percentage of ownership:								
Jeffry Ken Zervas 50%								
Cullin Robert Johns 50%								
State approximate distance of this establishment from nearest academy, college, university, church, or school:								
4 miles								
Who will direct the operation of the business or serve as a manager on the premises? Jeffry ken Zervers								
	Len Zervas	Phone Number:	218-721-2071					

BUILDING OWNER INFORMATION		
Full Name: Van Meierhoff	Phone Nur	mber: 218349-1972
Address: 325 S Lyke Au # 5		
Where the building is owned by someone other	than the applicant, state in summa	ry the conditions of the
lease arrangement, such as term of lease, month		
Term Lease - 3-years - R	eneual Murch 31st	2027
•		
DESCRIPTION OF PROPOSED BUSINESS:		
What is the seating capacity of the restaurant?		
Indoor Seating:	Outdoor Seating:	
Designated Serving Areas (i.e. ground floor, seco	ond floor, deck, etc.)	
Will serving of prepared food occur at this site?		Yes No
If yes, please attach license from MN Departme	ent of Health.	
List date you desire to start serving liquor:		
April 15th, 2024		
, 4, , , ,		
NOTE THE P. LEWIS CO.		
NOTE: The license period for all liquor licenses	is September 1 – August 31.	
Failure to answer all questions truthfully on th	nis application and attached "Pers	onal Supplemental Affidavit" which is
made a part thereof, will be just cause for revo	cation of your license.	
	1	
I (we) hereby certify that the applicant will be license and I (we) will notify the City Council in		
made, for the approval of the Alcohol, Gamblin		
questions, and answers to said questions ar	e true to the best of my (our) k	mowledge. I (we) will comply with al
provisions of the Alcoholic Beverage Code an		
that the giving of false information in this app		
required pertinent information constitutes ca issued hereunder and may be grounds for pros		or any and all licenses and/or permits
issued Hereunder and may be grounds for pros	ecution for perjury.	
Signature:	•	Date: 4/1/24
		Date: 4.1.24
Signature:		Date: 11/27

GOVERNMENT DATA PRACTICES ACT - CLASSIFICATION WARNING: The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license without it. Some of the data will be classified as public data if and when the license is granted. Private financial information is classified as private data and will be available to governmental personnel and other governmental agencies whose access is necessary to perform their official duties.