REGULAR CITY COUNCIL MEETING August 27, 2024 7:00 PM City Hall



Mayor: Leah Juarez Council President: Sara McCarthy Council Members: Cherie Butcher Brad Neumiller Tim Sutherland

AGENDA

CALL TO ORDER

ROLL CALL

PLEDGE OF ALLEGIANCE

APPOINTMENT

1. Planning & Zoning Board - Robin Baye

PUBLIC HEARINGS

- 2. Community Development Block Grant
- 3. Liquor License Renewals FY25 -

Backwards Distilling Company, Bayou Liquors, Diesels Bar & Grill, Mountain View Sinclair, Maverik #547, Mountain View Discount Liquors, Hideaway Bar & Package, Uncorked Fine Wine and Spirits, Unlocked Vines, and Wyoming Downs

CONSENT AGENDA

Minutes

4. Council Meeting Minutes 8-13-24

City Licenses

5. New and Renewal Business/Contractors Licenses

Financial Approvals

- 6. Financial Breakdown
- 7. ACH Transactions
- 8. Transmittal Transactions
- 9. Payroll Fire 7-30-24 to 8-10-24
- 10. Payroll Fire 8-11-24 to 8-22-24
- 11. Payroll Regular/Police 8-12-24 to 8-25-24

12. Voided Checks

OPEN DISCUSSION

ORDINANCES AND RESOLUTIONS

<u>13.</u> <u>RESOLUTION NO 2024-33</u>

A RESOLUTION AUTHORIZING SUBMISSION OF AN LOCAL GOVERNMENT PROJECT ARPA GRANTS APPLICATION TO THE STATE LOAN AND INVESTMENT BOARD ON BEHALF OF THE GOVERNING BODY FOR THE CITY OF MILLS

ADJOURNMENT

AGENDA SUBJECT TO CHANGE WITHOUT NOTICE

NEXT MEETING - September 10, 2024 at 7:00pm / September 24, 2024 at 7:00pm

NEXT WORK SESSION - September 9, 2024 at 9:00am / September 10, 2024 at 6:00pm

In accordance with the Americans with Disabilities Act, persons who need accommodation in order to attend or participate in this meeting should contact City Hall at 307-234-6679 within 48 hours prior to the meeting in order to request such assistance.



City of Mills 704 Fourth Street / PO Box 789 Mills, WY, 82644 307-234-6679



AUG 0 8 2024

APPLICATION FOR CITY COUNCIL, COMMISSIONS & BOARDS

We appreciate your interest in wishing to serve your City. We ask your indulgence in completing this brief form so that the City Council can have sufficient information to make an appointment. Please add any other information that might be relevant.

Please check the box on which you would like to be considered for appointment:

🗌 City Council 2nd & 4th Tuesday, 6:00 pm Including Work Sessions 🛛 🗹 P&Z Board 1st Thursday every Month, 5:30 pm

Clean-up Committee (Meetings held as Needed) Park Committee (Meetings held as Needed) Other:

			APPL	ICANT II	FORMATION		
Last Name	Bay	0		First	Robin	Middle Wa	ayne
Street Addre	ess	566 West View Wa	у				
City Mills				State	Wyoming	Zip Code	82604
Phone #	95	1-764-8895	Email	robinba	ye@netscape.net		
Employer	Kro	ger-Retired					
Occupation	Gro	ocery Management					
Years living	in M	ills? 1.5 Are yo	ou a register	ed voter	? Y Have you	ever been convicted	of a felony? No

Attendance is important for <u>Mills City Council</u> work at least two meetings a month including work sessions are required plus significant time reading agenda material and gathering information when needed.

Why are you interested in serving on the Council/Board? Our city is one of the fastest growing in the state. Local residents need to participate in the decision

making process.

What qualifications, skills, or experiences would you bring to the Council/Board? I have a strong background in making decisions. I have forty-six years in management working in

many different communities. I understand the complex process when growth is the goal.

Please list community topics of particular concern to you that relate to this appointment: A growing community needs a well thought out plan. Our city has new and old areas that need

to be melded together.

Please give a brief description of your involvement in community groups or activities: Here are a few of the groups I have been active with: Friends of the NRA, Ducks Unlimited Friends of Wister, Wild Turkey Federation, Coached High School Trap and became a AIS Inspector.

If not appointed at this time, may we keep your name on file?

🛚 Yes 🛛 🗆 No

Date: 8-8:24

Signature:

The Mayor and Council will conduct interviews prior to making the appointment.

3

DENEM			FORLIOUOR	IVISION USE ONLY	Item # 3.
		Cus	tomer #: U6930	IVISION USE ONET	
			from:		1
LIQUOR LIC		Re	viewer: Initials	Date	1
PERMIT APP	PLICATIC	DN Ag	ent:	/ /	1
		Mg	r:	/ /	
To be completed by City / Tow	n / County Clerk	Local License #:	U6930		
License Fees Annual Fee: \$	00 00	Date filed with c	erk:	26124	
Prorated Fee: \$	·	Advertising Date	s: (2 Consecutive	Weeks Prior to Hearing)	
Transfer Fee: \$	·	8 13 2	<u>A 8 8</u>	3/20/24	
Publishing Fee: \$	30.00	Public Hearing [Date: 8	12712024	
Publishing Fee Direct Billed to Appli	cant:				
License Term: 10/1	5/2024	Through	10	14/2025	
Month	Day Year	_	Month	Day Year	
LICENSING AUTHORITY: Begin publi OR DENY THE APPLICATIO	ishing promptly. As W.S. N UNTIL THE LIQUOR	12-4-104(d) specifi DIVISION HAS CE	es: NO LICENSING A	CATION IS COMPLETE.	DVE
Applicant (Business Na	me): BACKWARD	S DISTILLING (COMPANY LLC		
Doing Business As (DBA) / Trade Na	ame: BACKWARD	S DISTILLING	COMPANY SATE	LLITE MILLS	
Building to be licensed / Buil	Iding 158 PROGRE	ESS CIR			
Addr	ress:	2644 NATRO			
Local Mailing Add					
Local Maining Add	MILLS, WY 8				
Local Business Telephone Num			mbor	<u>(307) 472-1719</u>	
		rax Nu	mber.		
Business E-Mail Add		dsdistilling.com			
Business Primary Con	itact: Bill First Name		Porock Last Nam		
	, not realize				_
FILING IN: TOWN OF MILLS		FILING AS:	LIMITED LIABILI	TY COMPANY (LLC)	
FILING IN: TOWN OF MILLS TYPE OF LICENSE OR PERMIT:				TY COMPANY (LLC)	
	SATELLITE MANUFA	ACTURER PERM	Ш		-
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7/23)	U-\$930					
2. L	IQUOR BUSINESS CONTROL: W.S. 12-4-601(b)					_
(a) To operate the liquor business, has the business of or contracted with any other person (entity) to oper control of the license or permit or the licensed build	🗌 YES 🕅 NO				
(b) If the answer was YES to 2(a) above, explain fully a	and submit any documents in conr	ection	n there	withi	n.
3. I	NTEREST IN LICENSE OR PERMIT: W.S. 12-5-401,	12-5-402, 12-5-403				
C	Does any alcohol manufacturer, brewer, rectifier, whol nember of any such firm:		iliate,	officer,	direc	ctor
	(a) Hold any interest in the license/permit applied for?			YES	X	N
	(b) Furnish by way of loan or any other money or finance the business?			YES		N
	(c) Furnish, give, rent or loan any equipment, fixtures, in standard brewery or manufacturer's signs?			YES		N
	(d) If the answer was YES to any of the above, explain f		nectio			•
4. I			П	YES		N
	Is the licensed building within five (5) miles of an incorpora					
	RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE Will food and beverage services be contracted or subcor		ית) ויו רו	YES	П	N
(a)	1. If YES to (a), is a copy of the current food and beve		, 🗆	YES		N
	authority and Liquor Division?					
	2. If NO to (a) (1.), please attach a copy of the current				-	
	RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4	• •		(
(a)	Gross sales figures and percentages of income derived	(Line 2) Food Sales: \$		(
	(Line 1 + Line 2 must = Line 3)	(Line 3) Gross Sales: \$				
(b)	Is a copy of the valid food service permit or the approved			YES		N
(5)						
	BAR AND GRILL LICENSE LIQUOR LICENSE ONL		13(h),	(j),(k)		
(a)	Gross sales figures and percentages of income derived from:	(Line 1) Liquor Sales: \$		(_		%
		(Line 2) Food Sales: \$ (Line 3) Entertainment Sales: \$		(9 9
	(Line 1 + Line 2 + Line 3 must = Line 4)	(Line 4) Gross Sales: \$		(′ %
(b)	Is a copy of the valid food service permit or the approved			YES		, N
8.	MICROBREWERY PERMIT ONLY: PRODUCTION A				<u> </u>	
(a)	Did the microbrewery at this location produce at least 5 50,000 barrels (1, 550,000 gallons) during the previous I	0 barrels (1,550 galions) but less tha		YES		N
(b)	(W.S. 12-1-101(a)(xix)) Are microbrewery products from this location being distri Wyoming? (W.S. 12-2-201(a))	ibuted to other alcohol retailers in		YES		N
	If YES, a wholesale malt beverage license from the	Liquor Division will be required.				
9. 1	RESORT LIQUOR LICENSE: W.S. 12-4-401 through	–– h W.S. 12-4-403(b)		······		
I	Does the resort complex:					
(a)	Have an actual valuation of at least one million dollars, or h million dollars (\$1,000,000.00) on the complex, excluding th			YES		N
(b)	Include a restaurant and a convention facility; a convention (100) persons? W.S. 12-4-401(b)(ii)	facility that will seat at least one hundred	1	YES		N
(c)	Include motel, hotel or privately owned condominium, town approved for short term occupancy with at least one hundr W.S. 12-4-401(b)(iii)			YES		N
(d)	If no on question (c), have a ski resort facility open to the g committed or expended not less than 10 million dollars (\$1	0,000,000.00)? W.S. 12-4-401(b)(iv		YES		N
(e)	Will food and beverage services be contracted or subcontr			YES		N
	 If YES to (e), is a copy of the current food and beverage co and Liquor Division? If NO to (c) (1) places attach a copy of the current sector. 		/ 🗆	YES		N
2	2. If NO to (e) (1.), please attach a copy of the current contract	CI				

ltem # 3.

·(7/23)	U-6930				li	ten
10.1	LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)				
(a)	Has the fraternal organization been actively operating in at least thirty-six (36) states?		YES		NO	
(b)	Has the fraternal organization been actively in existence for at least twenty (20) years?		YES		NO	
	LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(Δ)				
		Π	YES		NO	
(a)	Does the Veteran's organization hold a charter by the Congress of the United States?		YES	Π	NO	
(b)	Is the membership of the Veteran's organization comprised only of Veterans and Its Duly organized auxiliary?					
42	LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W	I.S. 1	2-4-30)1(e)		
	Does the golf club have more than fifty (50) bona fide members?		YES		NO	
(a) (b)	Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse?		YES		NO	
(b)	Is the Applicant a Political Subdivision of the state that owns, maintains, or operates		YES		NO	
(C)	this golf course?			_		
	1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e)		YES		NO	
	If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division?		YES		NO	
	3. If NO to (c) (1.), please attach a copy of the current contract.					
13.	LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) /	W.S	5. 12-4	-301(b)	
(a)	Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located?		YES		NO	
(b)	Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state?		YES		NO	
(C)	Is the club qualified as a tax-exempt organization under the Internal Revenue Service?		YES	\Box	NO	
(d)	Has the club been in continuous operation for a period of not less than one (1) year?		YES		NO	
(e)	Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues?		YES		NO	
(f)	Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club?		YES		NO	
(g)	Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?		YES		NO	
	1. If NO to (g), please attach a current copy the club bylaws.					

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(h) Is a detailed statement with itemized expenditures of the club's activities during the last year YES NO attached?

14. If the Applicant is Filing As an <u>Individual, Partnership, Political Subdivision, Organization or Other</u> W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application.)

		Residence Address		Have you been a DOMICILED		onvicted within the 0 years of:
True and Correct Name	Date of Birth	No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	resident for at least 1 year and not claimed residence in any other state in the last year?	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES 🗌	YES 🗌	YES 🗌
				NO 🗌	NO 🗌	
				YES 🗖	YES 🗌	YES 🗌
				NO 🗌	NO 🗌	
				YES 🗌	YES 🔲	YES 🗋
					NO 🗌	NO 🗌
				YES 🗋	YES 🗖	YES 🗆
				NO 🗆	NO 🗌	NO 🗌

15. If the Applicant is Filing As a <u>Corporation, Limited Liability Company, Limited Liability Partnership</u> or <u>Limited Partnership</u> W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of	Residence Address No. & Street City, State & Zip	Residence Phone Number	No. of Years in Corp or	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:		
	Birth	DO NOT LIST PO BOXES		LLC		a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?	
	57/22	1244 5. WOLCOTT ST.	(307)			YES 🗌	YES 🗌	
WILLIAM Poulock	1958	CASPER WY 82601	234-1061	111/2	25	NO 🗹	NO 🛛	
	62/14	1244 S. WOLLOTT ST.				YES 🗌	YES 🗌	
KATHY Powock	145	CASPEL, WY 82601		11/2	25	NO 🔀	NO 🕱	
/	52/10		(307)			YES 🗌	YES 🗌	
AMBER Poulock	920	CASPER, Wy 82601		11/2	25	NO 🖾	NO 🔀	
	1/05	1244 S. WOLCOTT ST.				YES 🗌	YES 🗌	
CHAD POLLOCK	-	CASPER, WY 8260,		11/2	25	NO 🛛	NO 🗖	

REQUIRED ATTACHMENTS

A copy of any lease agreements. W.S. 12-4-103(a)(iii)

Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)

If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by ALL Individuals, ALL Partners, ONE (1) LLC Member, or TWO (2) Corporate Officers or Directors except that if all the stock of the corporation is owned by ONE (1) individual then that individual may sign and verify the application upon his oath, or TWO (2) Club Officers. W.S. 12-4-102(b)

STATE OF WYOMING)		
countrof Nettrong,) ss.		
Signed and sworn to before me on this	day of JUly	, 20 2 U that the facts alleged
in the foregoing instrument are true by the following:		
1) Anien Parloch	William Poucock	MEMBER /OWNEL Title
(Signature)	(Printed Name)	Title
2)		
(Signature)	(Printed Name)	Title
3)		
(Signature)	(Printed Name)	Title
4)		
(Signature)	(Printed Name)	Title
5)		
(Signature)	(Printed Name)	Title
Witness my h	and and official seal:	
Jessessessessessessesses	1111	non
TADE ZIMMER	in a consign	ature of Notary Public
SEAL) STATE OF WYOMING My comm	hission expires: $\frac{12}{09/202}$	-1
COMMISSION ID: 166353 MY COMMISSION EXPIRES: 12/09/2027		
A STATE OF THE STA		

(7/23) B-435			FOR LIQUOR	DIVISION USE ONLY	Item # 3
RENEW	AL OF	Cust	omer #: B435		
LIQUOR LIC	ENSE OF	Trf	from:		
		l Rev	iewer: Initials	Date	
PERMIT APP	PLICATIO	N Age	ent:	1 1	_
		Mg	r:		
To be completed by City / Tow	n / County Clerk	Local License #:	B435		
License	IGOS MA		-	118 12024	-
Fees Annual Fee: \$	1500.00	Date filed with cl		Weeks Pripr to Hearing)	
Prorated Fee: \$	·	Advertising Date	24 &	8/20/24	
Transfer Fee: \$			8	127 12024	
Publishing Fee: \$	30.00	Public Hearing D	late: 0		
Publishing Fee Direct Billed to Appl	icant:				
License Term: <u>10/1</u> Month	5/2024 Day Year	Through	<u>10</u> Month	<u>/14/2025</u> Day Year	
LICENSING AUTHORITY: Begin publ	ishing promptly. As W.S.	2-4-104(d) specifie	s: NO LICENSING	AUTHORITY SHALL APPR	ROVE
OR DENY THE APPLICATIO	ON UNTIL THE LIQUOR D	IVISION HAS CEP	RTIFIED THE APPL	ICATION IS COMPLETE.	
Applicant (Business Na	ame): BAYOU LIQU	ORS INC			
Applicant (Business Ne	BATCO LIQO				
Doing Business As (DBA) / Trade N	ame: BAYOU LIQU	ORS			
Building to be licensed / Building to be lic					
Add	ress: MILLS, WY 82	644 NATRO	A		
Local Mailing Add					
	MILLS, WY 82	644			
Local Business Telephone Nur		Fax Nu	mber:		
Business E-Mail Add					
	TOIL		(ALCS	00	
Business Primary Cor	naci _ In VIO	a			
Business Primary Co	First Name	4	Last Nam	the second s	
	First Name	1	Last Nam	e	
FILING IN: TOWN OF MILLS	First Name	FILING AS:		e	
FILING IN: TOWN OF MILLS TYPE OF LICENSE OR PERMIT:	First Name	FILING AS:	Last Nam	(INC)	
FILING IN: TOWN OF MILLS TYPE OF LICENSE OR PERMIT: RETAIL LIQUOR LICENSE HOLDER	First Name	FILING AS: ENSE USINESS TYPE	CORPORATION	(INC) ONE)	
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FILING IN: TOWN OF MILLS TYPE OF LICENSE OR PERMIT: RETAIL LIQUOR LICENSE HOLDER	First Name RETAIL LIQUOR LICE RS ONLY: PRIMARY B FF-PREMISE PACKAGE	FILING AS: ENSE USINESS TYPE STORE	CORPORATION	(INC) ONE)	RE
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FILING IN: TOWN OF MILLS TYPE OF LICENSE OR PERMIT: RETAIL LIQUOR LICENSE HOLDER ON-PREMISE BAR ON-PREMISE BAR SPECIAL STATUTORY DESIGN OPERATIONAL STATUS (To Assist the	First Name RETAIL LIQUOR LICE RS ONLY: PRIMARY B FF-PREMISE PACKAGE ATIONS (NONE IF BLA Liquor Division with sched	FILING AS: ENSE USINESS TYPE STORE 9	Last Nam CORPORATION (CHOOSE ONLY ON & OFF PREMIS	(INC) ONE) SE BAR & PACKAGE STOP)(iv)))
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(7/23)		Item # 3
	IQUOR BUSINESS CONTROL: W.S. 12-4-601(b)	
	a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building?	
	b) If the answer was YES to 2(a) above, explain fully and submit any documents in connection there within	
3.	NTEREST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403	
	Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, direc nember of any such firm:	tor or
	(a) Hold any interest in the license/permit applied for?	NO
	(b) Furnish by way of loan or any other money or financial assistance for purposes hereof in YES the business?	NO
	(c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than YES standard brewery or manufacturer's signs?	NO
	(d) If the answer was YES to any of the above, explain fully and submit any documents in connection there within.	
4.	RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)	
	Is the licensed building within five (5) miles of an incorporated town or city?	NO
5.	RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)	
(a	Will food and beverage services be contracted or subcontracted?	NO
	1. If YES to (a), is a copy of the current food and beverage contract on file with the licensing YES authority and Liquor Division?	NO
	2. If NO to (a) (1.), please attach a copy of the current contract.	
6.	RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408	
(a	Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (%)
	(Line 2) Food Sales: \$ (_%)
	(Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ (_%)
(b	Is a copy of the valid food service permit or the approved permit application attached?	NO
7.	3AR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)	
(a	Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$540,119,02.19.	0 ⁴ − _%)
· ·	(Line 2) Food Sales: \$ 120,445.50 (18.4	1%)
	(Line 3) Entertainment Sales: \$ <u>17,242.40 (2.5</u>	`_%)
	(Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ <u>(84,467</u> ,42, <u>190</u>	_%)
(b	Is a copy of the valid food service permit or the approved permit application attached?	NO
8.	WICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION	
(a	Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than	NO
(b	(W.S. 12-1-101(a)(xix)) Are microbrewery products from this location being distributed to other alcohol retailers in YES YES Wyoming? (W.S. 12-2-201(a))	NO
	If YES, a wholesale malt beverage license from the Liquor Division will be required.	
9.	RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)	
	Does the resort complex:	
(a)	Have an actual valuation of at least one million dollars, or have committed or expended at least one YES million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i)	NO
(b)	Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii)	NO
(c)	Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii)	NO
(d)	If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv	NO
(e)	Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b)	NO
	I. If YES to (e), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division?	NO
	If NO to (e) (1.), please attach a copy of the current contract.	

(7/23)	B-435				Iten
10. L	IMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)			
(a)	Has the fraternal organization been actively operating in at least thirty-six (36) states?		YES		NO
(b)	Has the fraternal organization been actively in existence for at least twenty (20) years?		YES		NO
	LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)			
	Does the Veteran's organization hold a charter by the Congress of the United States?		YES		NO
(a) (b)	is the membership of the Veteran's organization comprised only of Veterans and its		YES		NO
(b)	Duly organized auxiliary?				
12.	LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W	/.S. 1	2-4-30)1(e)	
(a)	Does the golf club have more than fifty (50) bona fide members?		YES		NO
(b)	Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse?		YES		NO
(c)	Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course?		YES		NO
	1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e)		YES		NO
	If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division?		YES		NO
	3. If NO to (c) (1.), please attach a copy of the current contract.				
13.1	LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) /	W.S	. 12-4-	-301(b)
(a)	Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located?		YES		NO
(b)	Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state?		YES		NO
(c)	Is the club qualified as a tax-exempt organization under the Internal Revenue Service?		YES		NO
(d)	Has the club been in continuous operation for a period of not less than one (1) year?		YES		NO
(e)	Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues?		YES		NO
(f)	Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club?		YES		NO
(g)	Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?		YES		NO
	1. If NO to (g), please attach a current copy the club bylaws.				
(h)	Is a detailed statement with itemized expenditures of the club's activities during the last year attached?		YES		NO

#З.

14. If the Applicant is Filing As an <u>Individual, Partnership, Political Subdivision, Organization or Other</u> W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application.)

		Residence Address		Have you been a DOMICILED	Have you been co previous 1	
True and Correct Name	Date of Birth	No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	resident for at least 1 year and not claimed residence in any other state in the last year?	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violatlon Relating to Alcoholic Liquor or Malt Beverages?
				YES 🗌	YES 🗌	YES 🗌
				NO 🗆	NO 🗌	NO 🗆
				YES 🗌	YES 🛄	YES 🗖
					NO 🗌	NO 🗌
				YES 🗌	YES 🗌	YES 🗌
					NO 🔲	NO 🗖
				YES 🗌	YES 🗌	YES 🗌
				NO 🗖	NO 🗌	

.

15. If the Applicant is Filing As a <u>Corporation, Limited Liability Company, Limited Liability Partnership</u> or <u>Limited Partnership</u> W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application)

Date of	Residence Address No. & Street City. State & Zip	Residence Phone Number	No. of Years in Corp or	% of Corporate Stock or	the previous	convicted within s 10 years of:	
ne Date of City, State & Zip Number Corp of Stock of ULC Ownership Held	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?					
	pulp al Luncolo	200 797	m	1	YES 🗌	YES 🗌	
Pach	CLEARY INVERION	92.06	5545	100%	NO 🗗	NO E	
-	Cupper WI Szart	1000	1		YES 🗌	YES 🗌	
					NO 🗆	NO 🗆	
					YES 🗌	YES 🗌	
					NO 🗌	NO 🗌	
					YES 🗌	YES 🗌	
					NO 🗆	NO 🗌	
		No. & Street Date of Birth DO NOT LIST	No. & Street Phone Date of City, State & Zip Number Birth DO NOT LIST PO BOXES	No. & Street Phone Years in Date of City, State & Zip Number Corp or Birth DO NOT LIST PO BOXES LLC	No. & Street Phone Years in Corporate Date of City, State & Zip Number Corp or Stock or Birth DO NOT LIST PO BOXES Held	Date of Birth No. & Street City, State & Zip DO NOT LIST PO BOXES Phone Number Years in Corp or LLC Corporate Stock or Ownership Held the previous Birth DO NOT LIST PO BOXES Phone Number Years in Corp or LLC Corporate Stock or Ownership Held a Felony Violation Relating to Alcoholic Liquor or Malt Beverages? BHO N. Lincoln 301 - 797 - Cusper WY 82Lot 301 - 797 - 92.06 554/s 100 % YES [] NO [] Violation YES [] NO [] YES [] NO []	

REQUIRED ATTACHMENTS

- A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by ALL Individuals, ALL Partners, ONE (1) LLC Member, or TWO (2) Corporate Officers or Directors except that if all the stock of the corporation is owned by ONE (1) individual then that individual may sign and verify the application upon his oath, or TWO (2) Club Officers. W.S. 12-4-102(b)

STATE OF WYOMING)		
countrop () atrona) ss.		
	6 day of July	$, 20 \underline{\mathcal{H}}$ that the facts alleged
in the foregoing ustrument are true by the followir	ng:	O(1)
1)(Signatute)	Printed Name)	Title
2)(Signature)	(Printed Name)	Title
3)(Signature)	(Printed Name)	Title
4)		
(Signature)	(Printed Name)	Title
5)(Signature)	(Printed Name)	Title
Witness	my hand and official seal:	alysWalfor
(SEAL) My c	commission expires: $6/2/2030$	ature of Notary Public
KIMBERLY A WALKER NOTARY PUBLIC STATE OF WYOMING COMMISSION ID: 164119 MY COMMISSION EXPIRES: 06/02/2030		

(202) P 7140						
	ΝΕΨΔΙ	OF				SE ONLY
					B/149	
LIQUO	R LICE	NSE OF			Initials	Date
DEDMI		ICATIO		1	Initials	/ /
PERIVI	IAFE			-		/ /
	City I Town 10	County Clork		12-2	149	
	y City / Town / C	County Clerk	Local License #	:D		20.2/
	ee: \$	<u>500.00</u>	Date filed with o	lerk:	[1 3]	12024
Prorated	Fee: \$	·	Advertising Dat	es: (2 Cons	ecutive Weeks P	rior to Hearing)
Transfer I	Fee: \$	··	8 13 7	1024	_88/2	20/2024
Publishin	n Fee [.] \$	30 00	Public Hearing	Date:	8127	12024
			Through		10/14/202	5
	Month Da	y Year		Month	Day	Year
LICENSING AUTHORI	TY: Begin publishing	g promptly. As W.S. 1	12-4-104(d) specif	ies: NO LIC	ENSING AUTHORI	TY SHALL APPROVE
OR DENY TH	E APPLICATION UP	TIL THE LIQUOR D			EATERATION	
Applicant	(Business Name):	HINDSITE INV	ESTMENTS			
Doing Business As (D	BA) / Trade Name		& GRILL			
Building to be						
	4			NA		
Loca	al Mailing Address:	PO BOX 1541				
			82602			
Local Business T	elephone Number	(307) 259-2382	Fax N	umber:		
Busine	ss E-Mail Address:	kenholloway12	07@gmail.com	L	11	
				11		
	s Primary Contact					
	s Primary Contact	Kennetin First Name				
Busines			FILING AS:	L	ast Name /	
Busines	VN OF MILLS	First Name		L	ast Name /	
Busines	<u>VN_OF MILLS</u> DR PERMIT: RET	First Name	ENSE	CORPOR	ast Name /	
Busines	<u>IN OF MILLS</u> OR PERMIT: RET NSE HOLDERS O	First Name	ENSE USINESS TYPE		AND (INC)	PACKAGE STORE
FILING IN: TOW TYPE OF LICENSE (RETAIL LIQUOR LICE \overline{A} ON-PREMISE BA	VN OF MILLS OR PERMIT: RET NSE HOLDERS O R OFF-PI	First Name			AND (INC)	PACKAGE STORE
FILING IN: TOW TYPE OF LICENSE (RETAIL LIQUOR LICE \overline{A} ON-PREMISE BA	VN OF MILLS OR PERMIT: RET NSE HOLDERS O R OFF-PI	First Name			AND (INC)	PACKAGE STORE
FILING IN: TOW TYPE OF LICENSE (RETAIL LIQUOR LICE \overline{A} ON-PREMISE BA	VN OF MILLS OR PERMIT: RET NSE HOLDERS O R OFF-PI	First Name			AND (INC)	PACKAGE STORE
FILING IN: TOM TYPE OF LICENSE (RETAIL LIQUOR LICE I ON-PREMISE BA SPECIAL STATUTOR	VN OF MILLS OR PERMIT: RET NSE HOLDERS O R OFF-PI RY DESIGNATIO	First Name	USINESS TYPE STORE NK)	CORPOF (CHOOSE ON & OFF (W.S. 12-1-1	ast Name / RATION (INC) E ONLY ONE) E PREMISE BAR & 01(a)(xxi) / 12-2-30	01(c) / 12-4-103(a)(iv)))
FILING IN: TOM TYPE OF LICENSE (RETAIL LIQUOR LICE I ON-PREMISE BA SPECIAL STATUTOR	IN OF MILLS	First Name	USINESS TYPE STORE NK)	CORPOF (CHOOSE ON & OFF (W.S. 12-1-1	ast Name / RATION (INC) E ONLY ONE) E PREMISE BAR & 01(a)(xxi) / 12-2-30	01(c) / 12-4-103(a)(iv)))
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FILING IN: TOM TYPE OF LICENSE (RETAIL LIQUOR LICE I ON-PREMISE BA SPECIAL STATUTOR OPERATIONAL STATUS I FULL TIME I SEASONAL	VN_OF_MILLS DR PERMIT: RET NSE HOLDERS O R _ OFF-PI RY DESIGNATIC _(To Assist the Liquo MC DA	First Name	I ENSE USINESS TYPE STORE NK) uling inspections ION PERATION:	(W.S. 12-1-1 from <u>MUN</u>	ast Name RATION (INC) E ONLY ONE) F PREMISE BAR & 01(a)(xxi) / 12-2-30	01(c) / 12-4-103(a)(iv))) All Year (Jan-Dec) Every Day (Mon-Sun)
FILING IN: TOM TYPE OF LICENSE OF COMERCIAL STATUTOR I ON-PREMISE BA SPECIAL STATUTOR OPERATIONAL STATUS I FULL TIME I SEASONAL I NON-OPERATIONAL	VN OF MILLS OR PERMIT: RET NSE HOLDERS O R [] OFF-PI RY DESIGNATIC (To Assist the Liquo [(To Assist the Liquo]] MC [(To ARKED] HC	First Name	ENSE USINESS TYPE STORE NK) uling inspections ION PERATION:	(W.S. 12-1-1 from <u>MUN</u>	ast Name RATION (INC) E ONLY ONE) F PREMISE BAR & 01(a)(xxi) / 12-2-30	01(c) / 12-4-103(a)(iv))) All Year (Jan-Dec) Every Day (Mon-Sun)
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RENEWAL OF LIQUOR LICENSE OR DERMIT APPLICATION Intermediate in						
2010-710 RENEWAL OF LIQUOR LICENSE OR PERMIT APPLICATION Image: 1000 (Mission Use ONLY (Mission #: 1014) 1 To be completed by City / Town / County Cierk (Mission #: 1014) Local License # Mission #: 1014) 1 Decompleted by City / Town / County Cierk (Mission #: 1014) Local License # Mission #: 1014) 1 Decompleted by City / Town / County Cierk (Mission #: 1014) Local License # Mission #: 1014) 1 Decompleted by City / Town / County Cierk (Mission #: 1014) Local License # Mission #: 1014) 1 Decompleted by City / Town / County Cierk (Mission #: 1014) Local License # Mission #: 1014) 1 Protated Fee: \$ Mission #: 1016) Date field with derk						
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Participant POR LAGOR DIVISION USE ONLY PERMIT APPLICATION Participant Permit Participant Permit Participant Permit Participant Protection Participant Participant Participant Participant Participant Paricipant Participant						
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ltem # 3.

7/23) C-13	225							lterr
r	UOR BUSINESS CONTROL: W.S. 12-4-601(b)							
(a)	To operate the liquor business, has the business o or contracted with any other person (entity) to oper control of the license or permit or the licensed build	rate an	se/permit been assigi d assert total or parti	ned, lea al		ransfei YES [)		
	If the answer was YES to 2(a) above, explain fully		ubmit any documents	in conn		•		
_								
	EREST IN LICENSE OR PERMIT: W.S. 12-5-401, es any alcohol manufacturer, brewer, rectifier, who			liarv affil	liate.	officer,	direc	tor or
	mber of any such firm:	, course	,			·		
(a)						YES	X	NO
(b)	Furnish by way of loan or any other money or finance the business?	cial ass	istance for purposes he	ereof in		YES	A	NO
(c)	Furnish, give, rent or loan any equipment, fixtures, in standard brewery or manufacturer's signs?	nterior d	lecorations or signs oth	er than		YES	X	NO
(d)) If the answer was YES to any of the above, explain f	fully and	d submit any document	s in conr	nectio	n there	within.	
RE	TAIL LIQUOR LICENSE-COUNTY LOCATIONS C	ONLY:	W.S. 12-4-201(f)(ii)					
ls	the licensed building within five (5) miles of an incorpora	ated tov	vn or city?			YES		NO
RE	TAIL LIQUOR LICENSE-COMMERCIAL SERVICE	E AIRF	PORTS ONLY: W.S.	12-4-20	1(m)			
	Will food and beverage services be contracted or subco					YES	凶	NO
	 If YES to (a), is a copy of the current food and beve authority and Liquor Division? 	verage c	ontract on file with the	licensing		YES		NO
	2. If NO to (a) (1.), please attach a copy of the current	t contra	ct.					
RE	STAURANT LIQUOR LICENSE ONLY: W.S. 12-4	l-407(a) / W.S. 12-4-408					
a) (Gross sales figures and percentages of income derived	from:	(Line 1) Liquor Sales:	\$		_ (_		%)
			(Line 2) Food Sales:	\$		(%)
	(Line 1 + Line 2 must = Line 3)		(Line 3) Gross Sales:	\$		(%)
b)	Is a copy of the valid food service permit or the approved	d permi	t application attached?			YES		NO
BA	R AND GRILL LICENSE LIQUOR LICENSE ONL	Y: W.S	5. 12-4-413(a) / W.S.	12-4-41	3(h),((j),(k)		
a) '	Gross sales figures and percentages of income derived from:	(Line	1) Liquor Sales:	\$		(%)
		(Line	2) Food Sales:	\$		_ (_		%)
		(Line	3) Entertainment Sales	: \$		(_		%)
	(Line 1 + Line 2 + Line 3 must = Line 4)	•	4) Gross Sales:	\$		_ (_		%)
b)	Is a copy of the valid food service permit or the approved	d permi	t application attached?			YES		NO
MIC	CROBREWERY PERMIT ONLY: PRODUCTION A		HOLESALE DISTRIE	BUTION				
1	Did the microbrewery at this location produce at least 5 50,000 barrels (1, 550,000 gallons) during the previous I (W.S. 12-1-101(a)(xix))	50 barre license	els (1,550 gallons) but l term?	ess than		YES		NO
	Are microbrewery products from this location being distri Wyoming? (W.S. 12-2-201(a))	ributed t	o other alcohol retailers	s in		YES		NO
·	f YES, a wholesale malt beverage license from the	e Liquo	r Division will be requ	lired.				
	SORT LIQUOR LICENSE: W.S. 12-4-401 through	h W.S.	12-4-403(b)					
	es the resort complex:						_	
a)	Have an actual valuation of at least one million dollars, or h million dollars (\$1,000,000.00) on the complex, excluding the	he value	e of the land? W.S. 12-4-	401(b)(i)		YES		NO
))	Include a restaurant and a convention facility; a convention (100) persons? W.S. 12-4-401(b)(ii)	a facility f	that will seat at least one	hundred		YES		NO
c)	Include motel, hotel or privately owned condominium, town approved for short term occupancy with at least one hundr W.S. 12-4-401(b)(iii)			ns		YES		NO
d)	If no on question (c), have a ski resort facility open to the g committed or expended not less than 10 million dollars (\$1	general 10,000,0	public in which has been 00.00)? W.S. 12-4-401(I	i b)(iv		YES		NO
e)	Will food and beverage services be contracted or subcontra	racted?	W.S. 12-4-403(b)			YES		NO
	If YES to (e), is a copy of the current food and beverage co and Liquor Division?		on file with the licensing	authority		YES		NO
2.	If NO to (e) (1.), please attach a copy of the current contract	ict.						

(7/23)	Q-99161				lte	em # 3.
10. L	_IMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(ii)(B)				
(a)	Has the fraternal organization been actively operating in at least thirty-six (36) states?		YES		NO	
(=) (b)	Has the fraternal organization been actively in existence for at least twenty (20) years?		YES		NO	
			_			
11. L	_IM!TED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)	(A)	_	_		
(a)	Does the Veteran's organization hold a charter by the Congress of the United States?		YES		NO	
(b)	Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary?		YES		NO	
12 I	LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / V	V.S. 1	2-4-30)1(e)		
(a)	Does the golf club have more than fifty (50) bona fide members?		YES		NO	
(a) (b)	Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse?		YES		NO	
(C)	Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course?		YES		NO	
	1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e)		YES		NO	
	 If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? 		YES		NO	
	3. If NO to (c) (1.), please attach a copy of the current contract.					
13. I	LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E)	W.S	5. 12-4·	-301(b)	
(a)	Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located?		YES		NO	
(b)	Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state?		YES		NO	
(C)	Is the club qualified as a tax-exempt organization under the Internal Revenue Service?		YES		NO	
(d)	Has the club been in continuous operation for a period of not less than one (1) year?		YES		NO	
(e)	Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues?		YES		NO	
(f)	Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club?		YES		NO	
(g)	Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?		YES		NO	
	1. If NO to (g), please attach a current copy the club bylaws.					
(h)	Is a detailed statement with itemized expenditures of the club's activities during the last year attached?		YES		NO	

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14. If the Applicant is Filing As an <u>Individual, Partnership, Political Subdivision, Organization or Other</u> W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application.)

		Residence Address		Have you been a DOMICILED		
True and Correct Name	Date of Birth	No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	resident for at least 1 year and not claimed residence in any other state in the last year?	a Felony Violation Relating to Alcoholic Liquor or Mait Beverages?	any Violation Relating to Alcoholic Liquor or Mait Beverages?
J. ,		· · ·		YES	YES 🗌	YES 🗋
	<u> </u>	1	idence Address DOMICILED previous 10 years of: No. & Street Residence resident for at least 1 year a Felony any y, State & Zip Residence and not claimed Violation Violation PO NOT LIST Number residence in any other state Alcoholic Liquor Alcoholic Liquor PO BOXES In the last year? Beverages? Beverages?			
		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		YES 🔲	YES 🗖
	[NO 🗖	
				YES 🗌	YES 🗌	YES 🗖
				NO 🗖		NO 🗌
				YES 🗆	YES 🗌	YES 🗋
				NO 🗆	NO 🗍	NO 🗌

15. If the Applicant is Filing As a <u>Corporation, Limited Liability Company, Limited Liability Partnership</u> or <u>Limited Partnership</u> W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of	Residence Address No. & Street City, State & Zip	Residence Phone Number	No. of Years in Corp or	% of Corporate Stock or	Have you been the previous	e you been convicted within he previous 10 years of:		
The and Conect Name	Date of City, State & Zip Birth DO NOT LIST PO BOXES		LLC	Ownership Held	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?			
Kenneth W	12.07	2750 Belmont	307-259		21	YES 🗌	YES		
Hollowoy	1183	Masper, WY 82001	2386	2	34	NO 🔀	NO 📈		
Joseph Campbell	9-6-	5313 Antelope Bor Nunn, W 82684	307-267 2932	2	33	YES 🗆 NO 🔀	YES 🔀 NO 🗌		
	1.2	6471 While Deer Tr	307-267		2.	YES 🗌	YES		
Steve	0.54	Cosper, WY 32604	7400	2	35	NO 🔽	NO 🗗		
						YES 🗌	YES		
						NO 🗆	NO 🗆		

REQUIRED ATTACHMENTS

- A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

COUNTY OF NOT) Signed and sworn to before me on this 31 day of July, 20 24 that the facts alle in the foregoing instrument are true by the following:	
in the foregoing instrument are true by the following:	
	eged
2) Joseph Cambell owner	
(Signature) (Printed Name) Title	
3)	
(Signature) (Printed Name) Ittle	
4) (Signature) (Printed Name) Title	
5)	
(Signature) (Printed Name) (Title	
Witness my hand and official seal:	
/ Must	
(SEAR) SARAH OSBORN (SEAR) NOTARY PUBLIC My commission expires: 124 29	
Signed and sworn to before me on this	
COMMISSION 1D: 152324	
WY COMMISSION EXPIRES: 01/24/2029	

					Item # 3
	OF	1		ON USE ONLY	L
			4: A7090		-
LIQUOR LICE	NSE OR		Initials	Date	-
ΡΕΡΜΙΤ ΔΡΡΙ	ICATION		Initials	/ /	1
		Mgr:		/ /]
To be completed by City / Town / C	County Clerk	al License #:	A 7090		
License			-11	9 12020	
FOR LIQUOR DIVISION USE ONLY Customer #: A7090 Trf from: Reviewer: Initials Date Agent: / / Mgr: / /					
The induction of the induc					
•		lic Hearing Date:			
-			40/44	0005	
			and the property of the proper		
LICENSING AUTHORITY: Begin publishing	n promptly As W.S. 12-4-	104(d) specifies: NO	LICENSING AUT	ORITY SHALL APPR	OVE
OR DENY THE APPLICATION UN	ATIL THE LIQUOR DIVISI	SION HAS CERTIFIE	D THE APPLICAT	ION IS COMPLETE.	
Applicant (Business Name):	HOMAX OIL SALE	ES INC		· · · · · · · · · · · · · · · · · · ·	
Pairs Pusieses As (DBA) (Trade Name)					
10					
Local Mailing Address:					
Level Pusinees Talaphone Number				(307) 237-6144	
Local business relephone Number.	(307) 237-3800	Fax Number.			
	\ .	.com	11	_	
Business Primary Contact:	First Name		Last Name	-	
				OMPANY (LLC)	
TYPE OF LICENSE OR PERMIT: RET	AIL LIQUOR LICENSE	<u>E</u>			
ON-PREMISE BAR IN LOFE PI	REMISE PACKAGE STOP		OFF OFFICE DA		
			OFF PREMISE BA	AR & PACKAGE STORI	
)NS (NONE IF BLANK)		OFF PREMISE BA	AR & PACKAGE STORI	
)NS (NONE IF BLANK)		OFF PREMISE BA	AR & PACKAGE STORI	:
SPECIAL STATUTORY DESIGNATIO					
SPECIAL STATUTORY DESIGNATIO	r Division with scheduling	inspections (W.S. 1	2-1-101(a)(xxi) / 12	-2-301(c) / 12-4-103(a)	iv)))
SPECIAL STATUTORY DESIGNATIO	r Division with scheduling	inspections (W.S. 1: from	2-1-101(a)(xxi) / 12 to	-2-301(c) / 12-4-103(a)(iv)))
SPECIAL STATUTORY DESIGNATIO	r Division with scheduling DNTHS OF OPERATION NYS OF WEEK OF OPER/	inspections (W.S. 12 from ATION: from	2-1-101(a)(xxi) / 12 to to	-2-301(c) / 12-4-103(a)(All Year (Jan-Dec)	iv)))
SPECIAL STATUTORY DESIGNATIO OPERATIONAL STATUS (To Assist the Liquol FULL TIME SEASONAL NON-OPERATIONAL / PARKED	T Division with scheduling ONTHS OF OPERATION AYS OF WEEK OF OPER DURS OF OPERATION	inspections (W.S. 12 from ATION: from	2-1-101(a)(xxi) / 12 to to	-2-301(c) / 12-4-103(a)(All Year (Jan-Dec)	iv)))
SPECIAL STATUTORY DESIGNATIO OPERATIONAL STATUS (To Assist the Liquor FULL TIME SEASONAL NON-OPERATIONAL / PARKED HO ALL APPLICANTS MUST COMPLETE	T Division with scheduling DNTHS OF OPERATION AYS OF WEEK OF OPERA DURS OF OPERATION	inspections (W.S. 12 from ATION: from	2-1-101(a)(xxi) / 12 to to	-2-301(c) / 12-4-103(a)(All Year (Jan-Dec)	iv)))
SPECIAL STATUTORY DESIGNATIO OPERATIONAL STATUS (To Assist the Liquol FULL TIME SEASONAL NON-OPERATIONAL / PARKED HO ALL APPLICANTS MUST COMPLETE BUILDING OWNERSHIP: W.S. 12-4	T Division with scheduling DNTHS OF OPERATION AYS OF WEEK OF OPERA DURS OF OPERATION EQUESTIONS 1- 3 4-103(a)(iii)	Tinspections (W.S. 1) from ATION: from from	2-1-101(a)(xxi) / 12 to to	-2-301(c) / 12-4-103(a)(All Year (Jan-Dec) Every Day (Mon-S	iv)))
Provide and the set of t		iv)))			
		iv)))			
SPECIAL STATUTORY DESIGNATIONAL STATUS (To Assist the Liquor) OPERATIONAL STATUS (To Assist the Liquor) FULL TIME SEASONAL NON-OPERATIONAL / PARKED HO ALL APPLICANTS MUST COMPLETE BUILDING OWNERSHIP: W.S. 12-4 Does the Applicant own or lease th (a) The Applicant OWNS the license (b) The Applicant LEASES the licen (c) The Lease is current and on file of the set o	T Division with scheduling DNTHS OF OPERATION AYS OF WEEK OF OPERATION OURS OF OPERATION EQUESTIONS 1-3 4-103(a)(iii) ne licensed building? ed building. used building. with the licensing author	ATION: from from from	2-1-101(a)(xxi) / 12 to to to toto rision.	-2-301(c) / 12-4-103(a) All Year (Jan-Dec) Every Day (Mon-S 2 24 Hours a Day YES (own) YES (lease) YES [lease]	iv)))
SPECIAL STATUTORY DESIGNATIONAL STATUS (To Assist the Liquon Full TIME FULL TIME SEASONAL NON-OPERATIONAL / PARKED HO ALL APPLICANTS MUST COMPLETE I. BUILDING OWNERSHIP: W.S. 12-4 Does the Applicant own or lease th (a) The Applicant OWNS the license (b) The Applicant LEASES the licen (c) The Lease is current and on file If the building is leased and the license	T Division with scheduling DNTHS OF OPERATION AYS OF WEEK OF OPERATION COURS OF OPERATION E QUESTIONS 1-3 4-103(a)(iii) The licensed building? The building. The building. The licensing author lease is not current, p	ATION: from from from from	2-1-101(a)(xxi) / 12 to to to toto vision. copy of the lease	-2-301(c) / 12-4-103(a) All Year (Jan-Dec) Every Day (Mon-S 2 24 Hours a Day YES (own) YES (lease) YES [lease]	iv)))
SPECIAL STATUTORY DESIGNATIONAL STATUS (To Assist the Liquor Full TIME FULL TIME SEASONAL NON-OPERATIONAL / PARKED HO ALL APPLICANTS MUST COMPLETE I. BUILDING OWNERSHIP: W.S. 12-4 Does the Applicant own or lease th (a) The Applicant OWNS the license (b) The Applicant LEASES the licen (c) The Lease is current and on file If the building is leased and the I (i) Lease term expiration date	r Division with scheduling DNTHS OF OPERATION AYS OF WEEK OF OPERATION CURS OF OPERATION EQUESTIONS 1- 3 4-103(a)(iii) ne licensed building? ed building. with the licensing author lease is not current, p re; located on page	Tinspections (W.S. 12 from ATION: from from from prity and Liquor Div please submit a coparagrap	2-1-101(a)(xxi) / 12 to to to to to to to to to to to	-2-301(c) / 12-4-103(a)(All Year (Jan-Dec) Every Day (Mon-S 2 24 Hours a Day YES (own) YES (lease) YES [lease) YES [] NO and indicate:	iv)))
SPECIAL STATUTORY DESIGNATIONAL STATUS (To Assist the Liquon Full TIME FULL TIME SEASONAL NON-OPERATIONAL / PARKED HO ALL APPLICANTS MUST COMPLETE I. BUILDING OWNERSHIP: W.S. 12-4 Does the Applicant own or lease th (a) The Applicant OWNS the license (b) The Applicant LEASES the licen (c) The Lease is current and on file If the building is leased and the license	The licensed building. The licensed building. The licensed building? The licensed building? The licensed building? The licensed building. The licensed building.	Tinspections (W.S. 12 from ATION: from from from please submit a c paragrap	2-1-101(a)(xxi) / 12 to to to toto rision. copy of the lease h erm of the liquo	-2-301(c) / 12-4-103(a) All Year (Jan-Dec) Every Day (Mon-S 2 24 Hours a Day YES (own) YES (lease) YES (lease) YES [] NO and indicate:	iv)))
SPECIAL STATUTORY DESIGNATION SPECIAL STATUS (To Assist the Liquon OPERATIONAL STATUS (To Assist the Liquon FULL TIME SEASONAL NON-OPERATIONAL / PARKED ALL APPLICANTS MUST COMPLETE BUILDING OWNERSHIP: W.S. 12-4 Does the Applicant own or lease th (a) The Applicant OWNS the license (b) The Applicant LEASES the licen (c) The Lease is current and on file of If the building is leased and the license (i) Lease term expiration data Note: The lease term	The licensed building. The licensed building? The licensed building? The licensed building? The licensed building? The licensed building? The licensed building? The licensed building. The licensed building.	Tinspections (W.S. 12 from ATION: from from ority and Liquor Div please submit a c paragrap east through the to s: located, on pag	2-1-101(a)(xxi) / 12 to	-2-301(c) / 12-4-103(a)(All Year (Jan-Dec) Every Day (Mon-S 2 24 Hours a Day 24 Hours a Day YES (own) YES (lease) YES [] NO e and indicate:	iv))) un)
SPECIAL STATUTORY DESIGNATION SPECIAL STATUS (To Assist the Liquon PULL TIME SEASONAL NON-OPERATIONAL / PARKED NON-OPERATIONAL / PARKED HO ALL APPLICANTS MUST COMPLETE (a) The Applicant own or lease th (a) The Applicant OWNS the license (b) The Applicant LEASES the licen (c) The Lease is current and on file If the building is leased and the I (i) Lease term expiration data Note: The lease term_ (ii) Sales provision for alcohom	The licensed building. The licensed building? The licensed building? The licensed building? The licensed building? The licensed building? The licensed building? The licensed building. The licensed building.	Tinspections (W.S. 12 from ATION: from from ority and Liquor Div please submit a c paragrap east through the to s: located, on pag	2-1-101(a)(xxi) / 12 to	-2-301(c) / 12-4-103(a)(All Year (Jan-Dec) Every Day (Mon-S 2 24 Hours a Day 24 Hours a Day YES (own) YES (lease) YES [] NO e and indicate:	iv))) un)

	(a) To operate the liquor business, has the business or license/permit been assigned, leased, transferror contracted with any other person (entity) to operate and assert total or partial assert total or partial YES							
		ontrol of the license or permit or the licensed building?		7				
	-	f the answer was YES to 2(a) above, explain fully and submit any documents in conne	ction	Inere	within	1.		
3.		REST IN LICENSE OR PERMIT: W.S. 12-5-401, 12-5-402, 12-5-403	ata a	fficor	direc	tor o		
	Does	s any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affili uber of any such firm:	ate, c	mcer,	unec			
	(a)	Hold any interest in the license/permit applied for?		YES	X	NO		
	(b)	Furnish by way of loan or any other money or financial assistance for purposes hereof in the business?		YES	R	NO		
	(c)	Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs?		YES	Þ	NO		
	(d)	If the answer was YES to any of the above, explain fully and submit any documents in conn	ection	there	within.			
4.	RET	AIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)						
	Is th	ne licensed building within five (5) miles of an incorporated town or city?		YES		NO		
5.	RET	AIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201	(m)					
(8	a) V	Vill food and beverage services be contracted or subcontracted?		YES		NO		
	1.	If YES to (a), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division?		YES		NO		
	2.							
6.	RES	TAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408						
(a	i) G	ross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$		_ (_		%)		
		(Line 2) Food Sales: \$		_ (_		%)		
		(Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$		_ (_		%)		
(b) Is	a copy of the valid food service permit or the approved permit application attached?		YES		NO		
_	DAD		3(h) (i) (k)				
7.		R AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413	3(h),(j),(k)		%)		
7 . (a		ross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$	3(h),(j	i),(k) (
		ross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (Line 2) Food Sales: \$	3(h),(j	i),(k) ((%)		
		irross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$	3(h),(j	i),(k) (((%) %)		
	a) G	ross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (Line 2) Food Sales: \$	3(h),(j	i),(k) (_ (_ (_ (_ YES		%)		
(a	a) G () Is	<pre>iross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$</pre>		(((%) %) %)		
(a	a) G b) Is MIC I a) D 50	<pre>iross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (Line 2) Food Sales: \$ (Line 3) Entertainment Sales: \$ (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ a a copy of the valid food service permit or the approved permit application attached?</pre> ROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION Ind the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 0,000 barrels (1, 550,000 gallons) during the previous license term?		(((%) %) %)		
(a (b 8 .	a) G b) Is MICI a) D 5((' b) A	<pre>iross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$</pre>		_ (_ _ (_ _ (_ _YES		%) %) %) NO		
(a (b 8. (a	a) G b) Is MICI a) D 50 (1) (1) (2) (2) (2) (2) (3) (3) (4) (4) (4) (4) (4) (5) (5) (5) (5) (5) (5) (5) (5	<pre>iross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (Line 2) Food Sales: \$ (Line 3) Entertainment Sales: \$ (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ s a copy of the valid food service permit or the approved permit application attached?</pre> ROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION Nid the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 0,000 barrels (1, 550,000 gallons) during the previous license term?		_ (_ _ (_ _ (_ YES		%) %) %) NO		
(a (t 8. (t	a) G) Is MICI a) D 50 (1) V If	<pre>iross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$</pre>		_ (_ _ (_ _ (_ YES		%) %) %) NO		
(a (t 8. (t	a) G b) Is MICI a) D 50 (1) V If RES	<pre>irross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$</pre>		_ (_ _ (_ _ (_ YES		%) %) %) NO		
(a (t 8. (t	a) G b) Is MICI a) D 5(0) A V If RES Does 0) F	<pre>iross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$</pre>		_ (_ _ (_ _ (_ YES		%) %) %) NO		
(a (k 8. (t 9.	a) G b) Is MICI a) D 50 (1) (1) RES Does 1) H n 11	ross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$		_ (_ _ (_ _ (_ YES YES		%) %) %) NO		
(a (t) (t) (t) (t) (t) (t) (t) (t) (t) (t)	a) G b) Is MICI a) D ('(b) A) ('(v) If RES Does)) H ('()) Ii (') Ii (')	ross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (Line 2) Food Sales: \$ (Line 3) Entertainment Sales: \$ (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ a a copy of the valid food service permit or the approved permit application attached? ROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION bid the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 0,000 barrels (1, 550,000 gallons) during the previous license term? W.S. 12-1-101(a)(xix)) are microbrewery products from this location being distributed to other alcohol retailers in Vyoming? (W.S. 12-2-201(a)) TYES , a wholesale malt beverage license from the Liquor Division will be required. BORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b) is the resort complex: Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) nclude a restaurant and a convention facility; a convention facility that will seat at least one hundred		_ (_ _ (_ _ (_ YES YES		%) %) NO NO		
(a (t 8. (t (t 9. (a (b	a) G b) Is MICI a) D 50 (1) (1) P) II a V (1) (1) (1) (1) (1) (1) (1) (1)	ross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (Line 2) Food Sales: \$ (Line 3) Entertainment Sales: \$ (Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ e a copy of the valid food service permit or the approved permit application attached? ROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION id the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 0,000 barrels (1, 550,000 gallons) during the previous license term? W.S. 12-1-101(a)(xix)) re microbrewery products from this location being distributed to other alcohol retailers in Vyoming? (W.S. 12-2-201(a)) 'YES , a wholesale malt beverage license from the Liquor Division will be required. GORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b) s the resort complex: Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) nclude a restaurant and a convention facility; a convention facility that will seat at least one hundred 100) persons? W.S. 12-4-401(b)(ii)		_ (_ _ (_ YES YES YES YES		%) %) NO NO NO		
(a (b (b) (c) (c)	a) G b) Is MICI a) D ((b) A) ((v) If RES Does () H () Ii ()	ross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (Line 2) Food Sales: \$ (Line 3) Entertainment Sales: \$ (Line 4) Cross Sales: \$ a copy of the valid food service permit or the approved permit application attached? ROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION id the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than 0,000 barrels (1, 550,000 gallons) during the previous license term? W.S. 12-1-101(a)(xix)) re microbrewery products from this location being distributed to other alcohol retailers in <i>Vyoming</i> ? (W.S. 12-2-201(a)) 'Y ES , a wholesale malt beverage license from the Liquor Division will be required. GORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b) is the resort complex: Have an actual valuation of at least one million dollars, or have committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) nclude a restaurant and a convention facility; a convention facility that will seat at least one hundred 100) persons? W.S. 12-4-401(b)(ii) nclude motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) f no on question (c), have a ski resort facility open to the general public in which has been		_ (_ _ (_ YES YES YES YES YES		%) %) NO NO NO		

2. If NO to (e) (1.), please attach a copy of the current contract.

-		DUDINECO	CONTROL	W/C	12 4 601/h)
2.	LIQUOR	BUSINESS	CONTROL	W.J.	12-4-601(b)

Item	# 3.	
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7/23) A	-7090								ltem
0. L	MITED RETAIL (CLUB) LIQU	OR LICENSE: FRATER	NAL CLUB	S W.S. 12-1-101(a)(i	ii)(B)				
(a)	Has the fraternal organization been					YES		NO	
(b)	Has the fraternal organization beer					YES		NO	-
1 1	IMITED RETAIL (CLUB) LIQU	OR LICENSE: VETERA	NS CLUBS	W.S. 12-1-101(a)(iii)(A)				
(a)	Does the Veteran's organization ho					YES		NO	
(b)	Is the membership of the Veteran's Duly organized auxiliary?					YES		NO	
2. L	IMITED RETAIL (CLUB) LIQU	OR LICENSE: GOLF CL	.UBS W.S.	12-1-101(a)(iii)(D) /	N.S. ^	2-4-30)1(e)		
(a)	Does the golf club have more than					YES		NO)
b)	Does the Applicant, maintain, or op			h a clubhouse?		YES		NO	1
(c)	Is the Applicant a Political Subdivis this golf course?					YES		NO)
	1. Will food and beverage service	s be contracted or subcontra	cted? W.S. 1	2-4-301(e)		YES		NO)
	 If YES to (c) (1), is a copy of the authority and Liquor Division? 					YES		NO)
	3. If NO to (c) (1.), please attach a	a copy of the current contract							
3. l (a)	IMITED RETAIL (CLUB) LIQU Does the club have more than o county in which the club is locate	ne hundred (100) bona fide				5. 12-4- YES	301(1	d) NO)
(b)	Is the social club incorporated an this state?	d operating solely as a non	profit organi:	zation under the laws o	f	YES		NO)
(c)	Is the club qualified as a tax-exer	mpt organization under the	Internal Rev	enue Service?		YES		NO)
d)	Has the club been in continuous	operation for a period of no	t less than o	one (1) year?		YES		NO)
(e)	Has the club received twenty-five recorded by the secretary of the application in good standing by h	club and are club members	at the time	of this		YES		NO)
(f)	Does the club hold quarterly meet carrying out the objectives of the	etings and have an actively				YES		NO)
(g)	is a true copy of the club bylaws	on file with the licensing au	thority and L	iquor Division?		YES		NO)
	1. If NO to (g), please attach a	current copy the club bylaw	S.						
(h)	Is a detailed statement with item attached?	ized expenditures of the clu	b's activities	during the last year		YES		NO)
		ndividual, Partnership, F artner or club officer must required, list on a separate	complete a	all of the information I	pelow.				-
		Residence Address			you bee	n convicto is 10 yea		in the	

		Residence Address		DOMICILED		0 years of:
True and Correct Name	Date of Birth	No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	resident for at least 1 year and not claimed residence in any other state in the last year?	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES 🗌	YES 🗌	YES 🗌
				NO 🗖	NO 🔲	NO 🗖
				YES 🗋	YES 🗌	YES 🗖
					NO 🗌	
				YES 🗌	YES 🗌	YES 🗖
					NO 🗌	NO 🔲
				YES 🗖	YES 🗖	YES 🗖

.

15. If the Applicant is Filing As a <u>Corporation, Limited Liability Company, Limited Liability Partnership</u>

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of	Residence Address No. & Street City, State & Zip	Residence Phone Number	No. of Years in Corp or	% of Corporate Stock or	Have you been the previous	
	Birth	DO NOT LIST PO BOXES		LLC	Ownership Held	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Davin W Homer	2-04	Cosper Uy Valo	357-262	20	(00)		
		Color and the				YES NO	
						YES 🗌 NO 🔲	YES

REQUIRED ATTACHMENTS

- A copy of any lease agreements. W.S. 12-4-103(a)(iii)
- Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)
- If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

STATE OF WYOMING)		
countrof Natrona)) ss.		
Signed and sworn to before me on this	24 day of June	, 20 <u>24</u> that the facts alleged
in the foregoing instrument are true by the followir	DANIN HOMEN	REAL
1) (Signature)	(Printed Name)	Title
2)		79.4
(Signature)	(Printed Name)	Title
(Signature)	(Printed Name)	Title
4)(Signature)	(Printed Name)	Title
5)	(,	
(Signature)	(Printed Name)	Title
Witness	my hand and official seal:	Kal LaDuke
(SEAL) My c	commission expires: $5 1 28$	gnature of Notary Public
REBEKAH LADUKE NOTARY PUBLIC STATE OF WYOMING COMMISSION ID: 167000 MY COMMISSION EXPIRES: 05/11/2028	, , , , , , , , , , , , , , , , , , ,	

				ION LISE ONLY	Iter
(23) A-3664	EWAL OF	Custom	FOR LIQUOR DIVIS	ION USE ONLY	
	LICENSE	I Keviev		Date	1
PERMIT	APPLICAT	ON Agent:		/ /]
		Mgr:		/ /	
To be completed by Ci	ity / Town / County Cler	Local License #:	A 3664		
License	\$ 1500.00	Date filed with clerk	713	8 12024	
Fees Annual Fee:				eks Prior to Hearing)	
Prorated Fee: Transfer Fee:		8/13/20		20 2024	
	20.00	- Dublic Locating Dat	81	27/2024	
Publishing Fe Publishing Fee Direct Bille		_ Public Hearing Date	3		
		Through	10/14	/2025	
	and and	ear	Month D	ay Year	
LICENSING AUTHORITY:	Begin publishing promptly. As N	V.S. 12-4-104(d) specifies:	NO LICENSING AUT	THORITY SHALL APPRC TION IS COMPLETE.	OVE
OR DENT THE AP	PEICATION ON THE THE EIGH				
Applicant (Bus	siness Name): MAVERIK	INC			
Doing Business As (DBA)	/ Trade Name: MAVERIK	#547			
Building to be licer		ELLOWSTONE HWY			
building to be need	Address				
		Y 82644 NATRONA			
Local Ma		ATE ST STE 800			
Local Business Telep		KE CITY, UT 84111 1886 Fax Numb		<u>(801) 936-1165</u>	
Local Busiliess Telep		Fax Num	er.	001/000 1100	
Business E		maverik.com			
		A 1	. 10		
	imary Contact: <u>Utah</u> First Name	na Arch	Last Name		
	imary Contact: <u>Utab</u> First Name	na Arch			
Business Pri	imary Contact: <u>Utab</u> First Name DF MILLS			C)	
Business Pri	First Name	FILING AS: C	Last Name	C)	
Business Pri	First Name DF MILLS PERMIT: RETAIL LIQUOR	FILING AS: C	Last Name		
FILING IN: TOWN C TYPE OF LICENSE OR F RETAIL LIQUOR LICENSE	First Name DF MILLS PERMIT: RETAIL LIQUOR	FILING AS: C LICENSE RY BUSINESS TYPE (C	Last Name	E)	
FILING IN: TOWN C TYPE OF LICENSE OR F RETAIL LIQUOR LICENSE ON-PREMISE BAR	First Name DF MILLS PERMIT: RETAIL LIQUOR HOLDERS ONLY: PRIMAI 🕰 OFF-PREMISE PACK	FILING AS: C LICENSE C RY BUSINESS TYPE (C AGE STORE _ 0	Last Name	E)	
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(7/23) A- 366	4					
		IOR BUSINESS CONTROL: W.S. 12-4-601(b)					_
	0	o operate the liquor business, has the business or r contracted with any other person (entity) to opera ontrol of the license or permit or the licensed build	ate and assert total or partial		transfei YES 🗗	-)
	(b) If	the answer was YES to 2(a) above, explain fully a	and submit any documents in conn	ectior	n there	withir	n.
3.	INTE	REST IN LICENSE OR PERMIT: W.S. 12-5-401,	12-5-402, 12-5-403				
	Does	s any alcohol manufacturer, brewer, rectifier, whole ber of any such firm:		liate,		direc	
	(a)	Hold any interest in the license/permit applied for?			YES	Å	NO
	(b)	Furnish by way of loan or any other money or financ the business?			YES	ŊΩ I	NO NO
	(c)	Furnish, give, rent or loan any equipment, fixtures, in standard brewery or manufacturer's signs?			YES	بلكم within	
	(d)	If the answer was YES to any of the above, explain f					
4.		AIL LIQUOR LICENSE-COUNTY LOCATIONS O			YES		NC
		ne licensed building within five (5) miles of an incorpora					
				/1(m) □	YES		NC
(a	i) Vi 1.	Jill food and beverage services be contracted or subcor If YES to (a), is a copy of the current food and bever			YES		NC
	1.	authority and Liquor Division?		_			
	2.	If NO to (a) (1.), please attach a copy of the current	contract.				
6.		TAURANT LIQUOR LICENSE ONLY: W.S. 12-4-					•••
(a	a) G	ross sales figures and percentages of income derived t			_ (%
			(Line 2) Food Sales: \$		(% %
		(Line 1 + Line 2 must = Line 3)	(Line 3) Gross Sales: \$		(^
(b) is	a copy of the valid food service permit or the approved			YES		NC
7.	BAR	RAND GRILL LICENSE LIQUOR LICENSE ONLY	/: W.S. 12-4-413(a) / W.S. 12-4-41	i 3(h) ,	(j),(k)		
(a	a) G	ross sales figures and percentages of income derived from:	(Line 1) Liquor Sales: \$		(_		%
			(Line 2) Food Sales: \$		_ (%
			(Line 3) Entertainment Sales: \$		_ (_		%
		(Line 1 + Line 2 + Line 3 must = Line 4)	(Line 4) Gross Sales: \$		(_		%
(b) Is	a copy of the valid food service permit or the approved	I permit application attached?		YES		NC
8.	MIC	ROBREWERY PERMIT ONLY: PRODUCTION A	ND WHOLESALE DISTRIBUTION	l			
(a	5	id the microbrewery at this location produce at least 5 0,000 barrels (1, 550,000 gallons) during the previous li W.S. 12-1-101(a)(xix))		n 🗆	YES		NC
(b		re microbrewery products from this location being distri Vyoming? (W.S. 12-2-201(a))	buted to other alcohol retailers in		YES		NC
	lf	YES, a wholesale malt beverage license from the	Liquor Division will be required.				
9.	RES	ORT LIQUOR LICENSE: W.S. 12-4-401 through	n W.S. 12-4-403(b)				
		s the resort complex:		_		_	
(a	ົຼາ	Have an actual valuation of at least one million dollars, or h nillion dollars (\$1,000,000.00) on the complex, excluding th	ne value of the land? W.S. 12-4-401(b)(i))	YES		NC
(b		nclude a restaurant and a convention facility; a convention (100) persons? W.S. 12-4-401(b)(ii)	facility that will seat at least one hundred		YES		NĈ
(C	່ ຄ	nclude motel, hotel or privately owned condominium, town approved for short term occupancy with at least one hundr W.S. 12-4-401(b)(iii)	house or home accommodations ed (100) sleeping rooms?		YES		NC
(d		f no on question (c), have a ski resort facility open to the g committed or expended not less than 10 million dollars (\$1			YES		NC
(e	•	Will food and beverage services be contracted or subcontra			YES		NC
	8	If YES to (e), is a copy of the current food and beverage co and Liquor Division?			YES		NC
	1	If NO to (e) (1) please attach a copy of the current contract	1				

ltem # 3.

e attach a copy of the current conti IL I **U** to (e) (1.), pie

). L	IMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)			
a)	Has the fraternal organization been actively operating in at least thirty-six (36) states?		YES		NO
b)	Has the fraternal organization been actively in existence for at least twenty (20) years?		YES		NO
1. L	IMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)((A)			
(a)	Does the Veteran's organization hold a charter by the Congress of the United States?		YES		NO
(b)	Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary?		YES		NO
2. L	LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W	V.S. ^	12-4-30)1(e)	
(a)	Does the golf club have more than fifty (50) bona fide members?		YES		NO
(b)	Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse?		YES		NO
(c)	Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course?		YES		NO
	1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e)		YES		NO
			VEC		NO
	2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division?		YES		NO
	authority and Liquor Division? 3. If NO to (c) (1.), please attach a copy of the current contract.				
3. L (a)	authority and Liquor Division? 3. If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) A Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located?	 / w.s	5. 12-4 YES	-301(b) NO
13. L	authority and Liquor Division? 3. If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) A Does the club have more than one hundred (100) bona fide members who are residents of the	 / w.s	5. 12-4		b) NO
3. L (a)	 authority and Liquor Division? If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) A Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of 	 / w.s	5. 12-4 YES YES YES	-301(b) NO NO
(a) (b)	 authority and Liquor Division? If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) A Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? Is the club qualified as a tax-exempt organization under the Internal Revenue Service? Has the club been in continuous operation for a period of not less than one (1) year?	 / w.s	5. 12-4 YES YES	-301(b) NO
I 3. L (a) (b) (c)	 authority and Liquor Division? If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) A Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? Is the club qualified as a tax-exempt organization under the Internal Revenue Service?	 / w.s	5. 12-4 YES YES YES	-301(b) NO NO
13. L (a) (b) (c) (d)	 authority and Liquor Division? If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) A Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? Is the club qualified as a tax-exempt organization under the Internal Revenue Service? Has the club been in continuous operation for a period of not less than one (1) year? Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this		5. 12-4 YES YES YES YES	- 301(b) NO NO NO
(a) (b) (c) (d) (e)	 authority and Liquor Division? 3. If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) A Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? Is the club qualified as a tax-exempt organization under the Internal Revenue Service? Has the club been in continuous operation for a period of not less than one (1) year? Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? Does the club hold quarterly meetings and have an actively engaged membership 		S. 12-4 YES YES YES YES YES	- 301(b) NO NO NO
3. L (a) (b) (c) (d) (e) (f)	 authority and Liquor Division? 3. If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) A Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? Is the club qualified as a tax-exempt organization under the Internal Revenue Service? Has the club been in continuous operation for a period of not less than one (1) year? Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club?		S. 12-4 YES YES YES YES YES YES	- 301(b) NO NO NO NO

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		Residence Address		Have you been a DOMICILED	Have you been co previous 1	onvicted within the 0 years of:
True and Correct Name	Date of Birth	No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	resident for at least 1 year and not claimed residence in any other state in the last year?	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES 🗌	YES 🗌	YES 🗍
					NO 🔲	NO 🗌
				YES 🗌	YES 🗌	YES 🗌
•				NO 🗖	NO 🔲	NO 🗌
				YES		YES_
				NO 🗖	NO 🗌	NO 🗖
				YES 🗌	YES 🗌	YES 🗌
				NO 🗌	NO 🗌	NO 🗌

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below.

(If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of	Residence Address No. & Street City, State & Zip	Residence Phone Number	No. of Years in Corp or	% of Corporate Stock or	Have you been the previous	convicted within 10 years of:
The and conect Name	Birth	DO NOT LIST PO BOXES		LLC	Ownership Held	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
	1					YES 🗌	YES 🗌
DIACO SUR						NO 🗆	NO 🗌
please sec						YES 🗌	YES 🗌
please see attached						NO 🗆	NO 🗆
						YES 🗌	YES 🗌
						NO 🗆	NO 🗌
						YES 🗌	YES
						NO 🗆	NO 🗆

REQUIRED ATTACHMENTS

VA D

A copy of any lease agreements. W.S. 12-4-103(a)(iii)

Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved JIA permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)

If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement N/A 🗆 W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by ALL Individuals, ALL Partners, ONE (1) LLC Member, or TWO (2) Corporate Officers or Directors except that if all the stock of the corporation is owned by ONE (1) individual then that individual may sign and verify the application upon his oath, or TWO (2) Club Officers. W.S. 12-4-102(b)

STAIL OF WIOMING)		
COUNTY OF SaltLake,) ss.		
Signed and sworn to before me on this	day of Jul-	2024 that the facts alleged
in the foregoing instrument are true by the following	ing:	
1) Mageli	Crystal Maggelet (Printed Name)	
2) (Signature)	(Printed Name)	<u>CFO/VP</u>
3)		
(Signature)	(Printed Name)	Title
4)		
(Signature)	(Printed Name)	Title
5)		
(Signature)	(Printed Name)	Title
UTAHNA M ARCHULETA A. tary Poulic Siste of Utah	my hand and official seal: $\frac{1}{5}$ Signa commission expires: $O_1 = \frac{3}{28} = \frac{3}{202}$	ture of Notary Public δ

Name	DOB	Address	Phone #	No. of years in Corp.	%Stock	Have you been convicted of a felony	Convicted of a violation relating to alcoholic liquor or malt beverages
M. Thomas Schofield		1527 W Lindsay Marie Circle, Riverton, UT 84065	801-494-3759	0	0.0%	No	No
John Hillam		1801 So. 200W. Kaysville, UT 84037	801-447-9065	12	0.0%	No	No
Crystal Maggelet		4 E. Dartmoor Lane Salt Lake City, UT 84103	801-624-3701	11 `	65.2%	No	No
Tyler Call		2269 W. 600 N. Kaysville, UT 83047	801-928-4305	4	0.0%	No	No
Other Stockholders >10%					34.8%		
					100.0%		

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1/23) B-70094						Item a
	RENEW			FOR LIQUOR DIV	SION USE ONLY	
				f from:		
LIG	UOR LIC	ENSE O		eviewer: Initials	Date	
PE	RMIT APF	PLICATIC		gent:	/ /	
			М	gr:	/ /	
To be com	oleted by City / Tow	n / County Clerk	Local License #	15 7000	34	
License		1600		7,	18 12024	
Fees A	nnual Fee: \$	1200.00	Date filed with o			
	rorated Fee: \$		Advertising Dat	es: (2 Consecutive We	eeks Prior to Hearing)	
т	ransfer Fee: \$		- 2112	124 & 01 Data: 8 /	27,2021	
P	ublishing Fee: \$	30 00	Public Hearing	Date:/	21 2000	
Publishing F	ee Direct Billed to Appli	cant:				
License Ter		<u>5/2024</u>	Through		<u>4/2025</u> Day Year	
	Month	Day Year	12-4-104(d) specif		THORITY SHALL APPRO	VE
OR	DENY THE APPLICATIO	N UNTIL THE LIQUOR	DIVISION HAS CE	RTIFIED THE APPLICA	TION IS COMPLETE.	
	Applicant (Business Na	me): THOLLHOUS	FILC			-
ĺ	Applicant (Dusiness Na					
Doing Busine	ss As (DBA) / Trade Na	ame: HIDEAWAY E	BAR AND PAC	KAGE		
Build	ing to be licensed / Buil		EW AVE			
	Addr		2644 NATRO	NA		
	Local Mailing Addr	ress: 1470 HAZEL	NOOD DR			
		CASPER, WY	82609			- 1
Local Bu	siness Telephone Num	nber: (307) 277-2760	Fax N	umber:		
	Business E-Mail Addr	ress: hideawaybara	ndpackage@gm	ail.com		
		1 .				
	Business Primary Con			Tholl		
	Business Primary Con	tact: <u>Keith</u> First Name		Tholl Last Name		
FILING IN:	Business Primary Con	First Name	FILING AS:	18 1911	COMPANY (LLC)	
		First Name		Last Name	COMPANY (LLC)	
TYPE OF LIC	TOWN OF MILLS	First Name	ENSE	Last Name		
TYPE OF LIC	TOWN OF MILLS ENSE OR PERMIT: DR LICENSE HOLDER	First Name RETAIL LIQUOR LIC S ONLY: PRIMARY B	ENSE BUSINESS TYPE	Last Name	IE)	
TYPE OF LIC	TOWN OF MILLS ENSE OR PERMIT: OR LICENSE HOLDER	First Name RETAIL LIQUOR LIC S ONLY: PRIMARY E F-PREMISE PACKAGE	BUSINESS TYPE	Last Name		
TYPE OF LIC	TOWN OF MILLS ENSE OR PERMIT: DR LICENSE HOLDER	First Name RETAIL LIQUOR LIC S ONLY: PRIMARY E F-PREMISE PACKAGE	BUSINESS TYPE	Last Name	IE)	
TYPE OF LIC	TOWN OF MILLS ENSE OR PERMIT: OR LICENSE HOLDER	First Name RETAIL LIQUOR LIC S ONLY: PRIMARY E F-PREMISE PACKAGE	BUSINESS TYPE	Last Name	IE)	
TYPE OF LIC	TOWN OF MILLS ENSE OR PERMIT: OR LICENSE HOLDER MISE BAR OF ATUTORY DESIGNA	First Name RETAIL LIQUOR LIC S ONLY: PRIMARY B F-PREMISE PACKAGE ATIONS (NONE IF BLA	BUSINESS TYPE STORE 🕅	Last Name	IE)))))
TYPE OF LIC	TOWN OF MILLS ENSE OR PERMIT: OR LICENSE HOLDER MISE BAR OF ATUTORY DESIGNA	First Name RETAIL LIQUOR LIC S ONLY: PRIMARY B F-PREMISE PACKAGE ATIONS (NONE IF BLA	BUSINESS TYPE STORE A	Last Name	IE) BAR & PACKAGE STORE))))
	TOWN OF MILLS ENSE OR PERMIT: OR LICENSE HOLDER MISE BAR OF ATUTORY DESIGNA	First Name RETAIL LIQUOR LIC S ONLY: PRIMARY B F-PREMISE PACKAGE ATIONS (NONE IF BLA iquor Division with sched	ENSE BUSINESS TYPE STORE 2 NK) duling inspections (Last Name LIMITED LIABILITY (CHOOSE ONLY ON ON & OFF PREMISE I ON & OFF PREMISE I W.S. 12-1-101(a)(xxi) / 1 from to	IE) BAR & PACKAGE STORE 12-2-301(c) / 12-4-103(a)(iv	
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2.		QUOR BUSINESS CONTROL: W.S. 12-4-601(b)					
	(a)	To operate the liquor business, has the business or	license/permit been assigned, I	eased,	transfe	rred	
		or contracted with any other person (entity) to operation control of the license or permit or the licensed building	ing?		YES 🌶		
	(b)	If the answer was YES to 2(a) above, explain fully a	and submit any documents in co	nnectio	n there	withir	n.
3.		TEREST IN LICENSE OR PERMIT: W.S. 12-5-401,					
		bes any alcohol manufacturer, brewer, rectifier, whole ember of any such firm:	esaler, or through a subsidiary a	affiliate,	officer,	direc	tor or
	(a				YES	P	NO
	(b	b) Furnish by way of loan or any other money or financi the business?	al assistance for purposes hereof i	n 🗆	YES	Ø	NO
	(C	c) Furnish, give, rent or loan any equipment, fixtures, int standard brewery or manufacturer's signs?	erior decorations or signs other tha	n 🗆	YES	(2 87	NO
	(0	d) If the answer was YES to any of the above, explain fu	ully and submit any documents in c	onnectio	on there	within.	
4.	RE	ETAIL LIQUOR LICENSE-COUNTY LOCATIONS O	NLY: W.S. 12-4-201(f)(ii)				
	Is	s the licensed building within five (5) miles of an incorporat	ted town or city?		YES		NO
5.	RE	ETAIL LIQUOR LICENSE-COMMERCIAL SERVICE	AIRPORTS ONLY: W.S. 12-4-	201(m)			
(8	a)	Will food and beverage services be contracted or subcon			YES		NO
		 If YES to (a), is a copy of the current food and beve authority and Liquor Division? 		ng 🗌	YES		NO
		2. If NO to (a) (1.), please attach a copy of the current	contract.				
6.	R	ESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-			,		
(8	a)	Gross sales figures and percentages of income derived f			(%)
			(Line 2) Food Sales: \$_		(%)
		(Line 1 + Line 2 must = Line 3)	(Line 3) Gross Sales: \$_		(%)
(1	b)	Is a copy of the valid food service permit or the approved	actmit application attached?		YES		NO
(1	-,	is a copy of the valid lood service permit of the approved	permit application attached?		TLO		
7.				-413(h)			
7.		AR AND GRILL LICENSE LIQUOR LICENSE ONLY Gross sales figures and percentages of income derived from:		413(h)			%)
7.	B	AR AND GRILL LICENSE LIQUOR LICENSE ONLY	/: W.S. 12-4-413(a) / W.S. 12-4	413(h)			
7.	B	AR AND GRILL LICENSE LIQUOR LICENSE ONLY	(: W.S. 12-4-413(a) / W.S. 12-4 (Line 1) Liquor Sales: \$_	-413(h)			%)
7.	B	AR AND GRILL LICENSE LIQUOR LICENSE ONLY	(: W.S. 12-4-413(a) / W.S. 12-4 (Line 1) Liquor Sales: \$_ (Line 2) Food Sales: \$_	-413(h)			%) %)
7 .	B	AR AND GRILL LICENSE LIQUOR LICENSE ONLY Gross sales figures and percentages of income derived from:	(: W.S. 12-4-413(a) / W.S. 12-4 (Line 1) Liquor Sales: \$_ (Line 2) Food Sales: \$_ (Line 3) Entertainment Sales: \$_ (Line 4) Gross Sales: \$_	413(h)	, (j),(k) ((%) %) %)
7 . (;	B / a) b)	AR AND GRILL LICENSE LIQUOR LICENSE ONLY Gross sales figures and percentages of income derived from: (Line 1 + Line 2 + Line 3 must = Line 4) Is a copy of the valid food service permit or the approved	(Line 1) Liquor Sales: \$,(j),(k) ((%) %) %)
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7. (; (, (, (, (, (, (, (, (, (, (, (, (, (,	B/ a) b) M(a) b) R(R(a)	AR AND GRILL LICENSE LIQUOR LICENSE ONLY Gross sales figures and percentages of income derived from: (Line 1 + Line 2 + Line 3 must = Line 4) Is a copy of the valid food service permit or the approved ICROBREWERY PERMIT ONLY: PRODUCTION AI Did the microbrewery at this location produce at least 50 50,000 barrels (1, 550,000 gallons) during the previous li (W.S. 12-1-101(a)(xix)) Are microbrewery products from this location being distril Wyoming? (W.S. 12-2-201(a)) If YES, a wholesale malt beverage license from the ESORT LIQUOR LICENSE: W.S. 12-4-401 through oes the resort complex: Have an actual valuation of at least one million dollars, or him million dollars (\$1,000,000.00) on the complex, excluding the Include a restaurant and a convention facility; a convention	7: W.S. 12-4-413(a) / W.S. 12-4 (Line 1) Liquor Sales: \$_ (Line 2) Food Sales: \$_ (Line 3) Entertainment Sales: \$_ (Line 4) Gross Sales: \$_ (Line 4) Gross Sales: \$_ a permit application attached? ND WHOLESALE DISTRIBUTION 0 barrels (1,550 gallons) but less to icense term? buted to other alcohol retailers in Liquor Division will be required. n W.S. 12-4-403(b) ave committed or expended at least on the value of the land? W.S. 12-4-401(b) facility that will seat at least one hund thouse or home accommodations	DN han	(j),(k) (%) %) _%) NO NO
7. (; () 8. () () 9. () () () ()	B/ a) b) M a) b) R R D a) b)	AR AND GRILL LICENSE LIQUOR LICENSE ONLY Gross sales figures and percentages of income derived from: (Line 1 + Line 2 + Line 3 must = Line 4) Is a copy of the valid food service permit or the approved ICROBREWERY PERMIT ONLY: PRODUCTION AI Did the microbrewery at this location produce at least 50 50,000 barrels (1, 550,000 gallons) during the previous li (W.S. 12-1-101(a)(xix)) Are microbrewery products from this location being distril Wyoming? (W.S. 12-2-201(a)) If YES, a wholesale malt beverage license from the ESORT LIQUOR LICENSE: W.S. 12-4-401 through oes the resort complex: Have an actual valuation of at least one million dollars, or hi million dollars (\$1,000,000.00) on the complex, excluding the Include a restaurant and a convention facility; a convention 1 (100) persons? W.S. 12-4-401(b)(ii) Include motel, hotel or privately owned condominium, town approved for short term occupancy with at least one hundred	(: W.S. 12-4-413(a) / W.S. 12-4-401 (Line 1) Liquor Sales: \$	one ()(i) red ((j),(k) (%) %) %) NO NO NO
7. (;; () 8. () () () () () () () () () () () () ()	B/ a) b) M(a) b) R(a) b) c)	AR AND GRILL LICENSE LIQUOR LICENSE ONLY Gross sales figures and percentages of income derived from: (Line 1 + Line 2 + Line 3 must = Line 4) Is a copy of the valid food service permit or the approved ICROBREWERY PERMIT ONLY: PRODUCTION AND Did the microbrewery at this location produce at least 50 50,000 barrels (1, 550,000 gallons) during the previous li (W.S. 12-1-101(a)(xix)) Are microbrewery products from this location being distril Wyoming? (W.S. 12-2-201(a)) If YES, a wholesale malt beverage license from the ESORT LIQUOR LICENSE: W.S. 12-4-401 through oes the resort complex: Have an actual valuation of at least one million dollars, or him million dollars (\$1,000,000.00) on the complex, excluding the Include a restaurant and a convention facility; a convention f (100) persons? W.S. 12-4-401(b)(ii) Include motel, hotel or privately owned condominium, town approved for short term occupancy with at least one hundred W.S. 12-4-401(b)(iii) If no on question (c), have a ski resort facility open to the g	(: W.S. 12-4-413(a) / W.S. 12-4: (Line 1) Liquor Sales: \$_ (Line 2) Food Sales: \$_ (Line 3) Entertainment Sales: \$_ (Line 4) Gross Sales: \$_ a permit application attached? ND WHOLESALE DISTRIBUTION 0 barrels (1,550 gallons) but less to icense term? buted to other alcohol retailers in Liquor Division will be required. n W.S. 12-4-403(b) ave committed or expended at least one hund on house or home accommodations ed (100) sleeping rooms? eneral public in which has been 0,000,000.00)? W.S. 12-4-401(b)(iv acted? W.S. 12-4-403(b)	one	(j),(k) (%) %) %) NO NO NO NO

ltem # 3.

2. If NO to (e) (1.), please attach a copy of the current contract.

(7/23) B-70094

(123)	B-70094				lter
0. L	LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(ii	i)(B)			
(a)	Has the fraternal organization been actively operating in at least thirty-six (36) states?		YES		NO
(b)	Has the fraternal organization been actively in existence for at least twenty (20) years?		YES		NO
11	LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)	(A)			
(a)	Does the Veteran's organization hold a charter by the Congress of the United States?		YES		NO
(u) (b)	Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary?		YES		NO
2.1	LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / V	v.s. [,]	12-4-30)1(e)	
(a)	Does the golf club have more than fifty (50) bona fide members?		YES		NO
(b)	Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse?		YES		NO
(c)			YES		NO
	1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e)		YES		NO
	and the second		YES		NO
	If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division?		TES		
	 If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division? If NO to (c) (1.), please attach a copy of the current contract. 				
3. (a)	authority and Liquor Division? 3. If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E)	/ W.S			
(a)	 authority and Liquor Division? If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? 	 / W.S	6. 12-4		 b)
(a) (b)	 authority and Liquor Division? 3. If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state?	 / W.S	5. 12-4 YES		b) NO
	 authority and Liquor Division? 3. If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? Is the club qualified as a tax-exempt organization under the Internal Revenue Service? 	 / W.S	6. 12-4 YES YES	- 301(b) NO NO
(a) (b) (c)	 authority and Liquor Division? 3. If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? Is the club qualified as a tax-exempt organization under the Internal Revenue Service? Has the club been in continuous operation for a period of not less than one (1) year?	 / W.S	5. 12-4 YES YES YES	- 301(b) NO NO NO
(a) (b) (c) (d)	 authority and Liquor Division? 3. If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? Is the club qualified as a tax-exempt organization under the Internal Revenue Service? Has the club been in continuous operation for a period of not less than one (1) year? Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this 	/ w.:	5. 12-4 YES YES YES YES	- 301(b) NO NO NO
(a) (b) (c) (d) (e)	 authority and Liquor Division? If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? Is the club qualified as a tax-exempt organization under the Internal Revenue Service? Has the club been in continuous operation for a period of not less than one (1) year? Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club?	/ w.:	5. 12-4 YES YES YES YES YES	- 301(b) NO NO NO NO
(a) (b) (c) (d) (e) (f)	 authority and Liquor Division? If NO to (c) (1.), please attach a copy of the current contract. LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located? Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state? Is the club qualified as a tax-exempt organization under the Internal Revenue Service? Has the club been in continuous operation for a period of not less than one (1) year? Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club?	/ w.s	5. 12-4 YES YES YES YES YES YES	- 301(b) NO NO NO NO NO

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Each individual, partner or club officer must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application.)

	Date of Birth	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES		Have you been a DOMICILED	Have you been co previous 1	
True and Correct Name			Residence Phone Number	resident for at least 1 year and not claimed residence in any other state in the last year?	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES 🗌	YES 🗌	YES 🗌
				NO 🗖	NO 🗌	NO 🔲
				YES 🗌	YES 🗌	YES 🗌
				NO 🔲	NO 🗌	NO 🗌
				YES 🗍	YES 🗌	YES 🗖
				NO 🗆	NO 🗖	NO 🗖
				YES 🗌	YES 🗖	YES 🗋
·				NO 🗌	NO 🗌	NO 🗖

15. If the Applicant is Filing As a <u>Corporation, Limited Liability Company, Limited Liability Partnership</u> Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of Birth		Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:		
						a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?	
Keith Andrew Tholl	GALINS	1470 Hozelwood Dr Casper, WY 82609	307-294-2066 2160	0	100 %	YES □ NO 🖉	YES 🗆 NO 📈	
		Concer, our sales (YES 🗌 NO 🔲		
						YES NO		

REQUIRED ATTACHMENTS

A copy of any lease agreements. W.S. 12-4-103(a)(iii)

Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)

If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by ALL Individuals, ALL Partners, ONE (1) LLC Member, or TWO (2) Corporate Officers or Directors except that if all the stock of the corporation is owned by ONE (1) individual then that individual may sign and verify the application upon his oath, or TWO (2) Club Officers. W.S. 12-4-102(b)

STATE OF WYOMING)		
COUNTY OF Natrona) SS.		
	8 day of July	_, 20 \mathcal{U} that the facts alleged
in the foregoing instrument are true by the following:		4
	Keith holl	Member
(Signature)	(Printed Name)	Title
2)		
(Signature)	(Printed Name)	Title
3)		
(Signature)	(Printed Name)	Title
4)(Signature)	(Printed Name)	Title
	(Third Func)	
5)(Signature)	(Printed Name)	Title
Witness my h	and and official seal:	21
	Signat	ure of Notary Public
(SEAL) NOTARY PUBLIC My comr	mission expires: $5/9/29^{11}$	are of rotary rubbe
COMMISSION ID: 168460 NY COMMISSION EXPIRES: 05/00/2029		

(7/23) B-1300		(marked and marked and			Item	
RENEW			FOR LIQUOR DIN stomer #: B1300	ISION USE ONLY		
			from:		-	
LIQUOR LIC	ENSE OF	K Re	viewer: Initials	Date	-	
PERMIT APP	DITADLIC		ent:	/ /		
	LIGATIO	M		/ /	_	
To be completed by City / Town	A County Clerk		B 130	Č.		
	Tr county olerk	Local License #				
License Fees Annual Fee: \$	1500.00	Date filed with c	lerk:/_/_	31 12024		
Prorated Fee: \$	·	Advertising Pate	es: (2 Consecutive W	eeks Prior to Hearing)		
Transfer Fee: \$	·	013	5/24 &	3/20/24	- I	
Publishing Fee: \$	30.00	Public Hearing	Date: <u>81</u>	2712024	-	
Publishing Fee Direct Billed to Applic					1	
		Through	10/1	4/2025		
Month	Day Year		Month	Day Year		
LICENSING AUTHORITY: Begin public OR DENY THE APPLICATIO	shing promptly. As W.S. 1	2-4-104(d) specif	es: NO LICENSING A RTIFIED THE APPLIC	UTHORITY SHALL APPR ATION IS COMPLETE.	OVE	
Applicant (Business Nat	me): CUNDYBIZ LL	.P				
Duine Ducing An (DDA) (Trade No	me: UNCORKED F				1	
Doing Business As (DBA) / Trade Na			DISFIRITS		- 1	
Building to be licensed / Buil Addr		SPIDER RD			- 1	
	MILLS, WY 82	644 NATRO	NA		1	
Local Mailing Addr	ess: PO BOX 2590					
	MILLS, WY 82	644				
Local Business Telephone Num	ber: (307) 473-8912	Fax N	umber:	(307) 472-1706		
Business E-Mail Addr	ess: spa@cundy.biz	,				
	2	<u></u>	Hogue			
Business Primary Contact:						
Sushess Finnary Con	First Name		LastName			
		FILING AS:	[Y PARTNERSHIP (LLF	·)	
FILING IN: TOWN OF MILLS	First Name	FILING AS:	[Y PARTNERSHIP (LLF	·)	
FILING IN: TOWN OF MILLS TYPE OF LICENSE OR PERMIT:	First Name	INSE	LIMITED LIABILIT		·)	
FILING IN: TOWN OF MILLS TYPE OF LICENSE OR PERMIT: RETAIL LIQUOR LICENSE HOLDER	RETAIL LIQUOR LICE	E NSE USINESS TYPE	CHOOSE ONLY O	NE)		
FILING IN: TOWN OF MILLS TYPE OF LICENSE OR PERMIT:	RETAIL LIQUOR LICE	E NSE USINESS TYPE	CHOOSE ONLY O			
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3.

7/23) B	-1300					h
2. LI	QUOR BUSINESS CONTROL: W.S. 12-4-601(b)					
(a	To operate the liquor business, has the business of or contracted with any other person (entity) to opera control of the license or permit or the licensed build	ate and assert total or partial		YES		
(b	b) If the answer was YES to 2(a) above, explain fully a	and submit any documents in conr	ectior	h there	withir	n.
	ITEREST IN LICENSE OR PERMIT: W.S. 12-5-401,					
D	oes any alcohol manufacturer, brewer, rectifier, whol bember of any such firm:		liate,	officer,	direc	tor or
	a) Hold any interest in the license/permit applied for?			YES		NO
((b) Furnish by way of loan or any other money or financ the business?			YES		NO
	(c) Furnish, give, rent or loan any equipment, fixtures, in standard brewery or manufacturer's signs?			YES		NO
	(d) If the answer was YES to any of the above, explain f		lection	in there	with hit.	
	ETAIL LIQUOR LICENSE-COUNTY LOCATIONS C			YES		NO
	Is the licensed building within five (5) miles of an incorpora			TLO		
			(m) רי	YES		NO
(a)	Will food and beverage services be contracted or subcor 1. If YES to (a), is a copy of the current food and beve			YES		NO
	authority and Liquor Division?					
	2. If NO to (a) (1.), please attach a copy of the current					
	ESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4			(%)
(a)	Gross sales figures and percentages of income derived	from: (Line 1) Liquor Sales: \$ (Line 2) Food Sales: \$		(%)
	(Line 1 + Line 2 must = Line 3)	(Line 3) Gross Sales: \$		(^() %)
(1.)				YES		NO
(b)	Is a copy of the valid food service permit or the approved			120		
7. B	AR AND GRILL LICENSE LIQUOR LICENSE ONL	Y: W.S. 12-4-413(a) / W.S. 12-4-4	l 3(h),	(j),(k)		
(a)	Gross sales figures and percentages of income derived from:	(Line 1) Liquor Sales: \$		(_		%)
		(Line 2) Food Sales: \$		(_		%)
	(1 in 4 + 1 in 2 + 1 in 2 must = 1 in 4)	(Line 3) Entertainment Sales: \$		(_		%) _%)
(b)	(Line 1 + Line 2 + Line 3 must = Line 4) Is a copy of the valid food service permit or the approved	(Line 4) Gross Sales: \$		YES		%) NO
(0)	is a copy of the valid lood service permit of the approved			TEO		
	ICROBREWERY PERMIT ONLY: PRODUCTION A		_			
(a)	Did the microbrewery at this location produce at least 5 50,000 barrels (1, 550,000 gallons) during the previous I (W.S. 12-1-101(a)(xix))		n 📋	YES		NO
(b)	Are microbrewery products from this location being distri Wyoming? (W.S. 12-2-201(a))	ibuted to other alcohol retailers in		YES		NO
	If YES, a wholesale malt beverage license from the	Liquor Division will be required.				
	ESORT LIQUOR LICENSE: W.S. 12-4-401 through boos the resort complex:	h W.S. 12-4-403(b)				
(a)	Have an actual valuation of at least one million dollars, or h million dollars (\$1,000,000.00) on the complex, excluding the			YES		NO
(b)	Include a restaurant and a convention facility; a convention (100) persons? W.S. 12-4-401(b)(ii)			YES		NO
(c)	Include motel, hotel or privately owned condominium, towr approved for short term occupancy with at least one hundr W.S. 12-4-401(b)(iii)			YES		NO
(d)	If no on question (c), have a ski resort facility open to the g committed or expended not less than 10 million dollars (\$1			YES		NO
(e)	Will food and beverage services be contracted or subcontr			YES		NO
1.	and Liquor Division?	-		YES		NO
2.	If NO to (e) (1.), please attach a copy of the current contract	Ct.				

ltem # 3.

2.	If NO	to	(e)	(1	.),	please	attach	а	copy	of	the	current	contrac	;t
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(7/23)	3-1300				lten							
10 1	IMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)	(B)										
	Has the fraternal organization been actively operating in at least thirty-six (36) states?		YES		NO							
(a) (b)	Has the fraternal organization been actively in existence for at least twenty (20) years?		YES		NO							
(b)	Thas the indicinial organization scent actively in clinical and the indicinial organization scent actively in clinical actively in clin											
11. L	IMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)		_								
(a)	Does the Veteran's organization hold a charter by the Congress of the United States?		YES		NO							
(b)	Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary?		YES		NO							
12.1	12. LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S. 12-4-301(e)											
(a)	Does the golf club have more than fifty (50) bona fide members?		YES		NO							
(b)	Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse?		YES		NO							
(c)	Is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course?		YES		NO							
	1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e)		YES		NO							
	2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division?		YES		NO							
	3. If NO to (c) (1.), please attach a copy of the current contract.											
13. I	IMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E) /	W.S	. 12-4-	301(b)							
(a)	Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located?		YES		NO							
(b)	Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state?		YES		NO							
(C)	Is the club qualified as a tax-exempt organization under the Internal Revenue Service?		YES		NO							
(d)	Has the club been in continuous operation for a period of not less than one (1) year?		YES		NO							
(e)	Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues?		YES		NO							
(f)	Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club?		YES		NO							
(g)	Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?		YES		NO							
	1. If NO to (g), please attach a current copy the club bylaws.											
(h)	Is a detailed statement with itemized expenditures of the club's activities during the last year attached?		YES		NO							

3.

14. If the Applicant is Filing As an <u>Individual, Partnership, Political Subdivision, Organization or Other</u> W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application.)

		Residence Address No. & Street		Have you been a DOMICILED	Have you been convicted within the previous 10 years of:		
True and Correct Name	Date of True and Correct Name Birth		Residence Phone Number	resident for at least 1 year and not claimed residence in any other state in the last year?	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?	
		291 Indian	307- 000	YES 🛃	YES 🗌	YES	
Bradley Lundy	8 27.50	Durntbrush Casper cel	680 9980	NO 🗌	NO 🖻	NO D	
T I C I		paintbast Caspon an 291 Indian Daintbash # 6 Capp	307.680-	YES 🗗	YES 🗌	YES 🗌	
Tapette Curdy	2100	Saintbrush # 6 (May	9981	NO 🗌	NO 🗗	NO I	
р <i>і</i>		r		YES 🗌	YES 🗌	YES 🗌	
				NO 🗆	NO 🗌	NO 🗌	
				YES 🗌	YES 🗌	YES 🗌	
				NO 🗌	NO 🗌	NO 🗌	

15. If the Applicant is Filing As a <u>Corporation, Limited Liability Company, Limited Liability Partnership</u> or <u>Limited Partnership</u> W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of	Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or Ownership Held	Have you been convicted within the previous 10 years of:		
	Date of Birth					a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?	
	1					YES 🗌	YES 🗌	
						NO 🗆	NO 🗌	
						YES 🗌	YES 🗌	
						NO 🗆	NO 🗆	
						YES 🗌	YES 🗌	
						NO 🗆	NO 🗌	
						YES 🗌	YES 🗌	
						NO 🗆	NO 🗌	

REQUIRED ATTACHMENTS

A copy of any lease agreements. W.S. 12-4-103(a)(iii)

Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)

If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING) SS. COUNTY OF Natrona 30th day of July , 20 24 that the facts alleged Signed and sworn to before me on this in the foregoing instrument are true by the following: und Janette brithe 1) (Printed Name) Title Signature) Certhe luna 2) Signature) Printed Name) Title 3) Title (Signature) (Printed Name) 4) (Printed Name) Title (Signature) 5) Title (Printed Name) (Signature) Witness my hand and official seal: Signature of Notary Public EMILY L BENTON My commission expires: Hug 19,202 NOTARY PUBLIC STATE OF WYOMING COMMISSION ID: 155623 Y COMMISSION EXPIRES: 08/19/2027

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Put	lishing Fee: \$	30.00	Public Hearing [Date:	127124	
	Direct Billed to Applic					
License Term:	10/1	5/2024	Through	10	0/14/2025	
	Month	Day Year	-	Month	Day Year	
LICENSING AU	THORITY: Begin publis	shing promptly. As W.S. 1	2-4-104(d) specifi	es: NO LICENSING RTIFIED THE APPL	AUTHORITY SHALL APPRO	OVE
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		MILLS, WY 82	604 NATRO	NA		
	Local Mailing Addr	ess: 485 WEST VIE	W WAY			
		MILLS, WY 82	604			
Local Busi	ness Telephone Num	ber: (307) 215-9215	Fax Nu	imber:		
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(7/23	23) O-70090		Item # 3.
	LIQUOD BUGINESS CONTROL W/S 12-4-601(b)		
2.	 (a) To operate the liquor business, has the business or license/permit been assigned, leased, transfer or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building? 		
	(b) If the answer was YES to 2(a) above, explain fully and submit any documents in connection there	within.	
3.			
υ.	Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer	, directo	or or
	member of any such firm:		NO
	(a) Hold any interest in the idense permit applied for a		NO
	(b) Furnish by way of loan of any other money of manetal decision for purposes way of loan of any other money of manetal decision for purposes way of loan of any other money of manetal decision for purposes way of loan of any other money of manetal decision for purposes way of the second		NO
	standard brewery or manufacturer's signs?		
_	(d) If the answer was YES to any of the above, explain fully and submit any documents in connection there	within.	
4.	RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)	_	
	Is the licensed building within five (5) miles of an incorporated town or city?		NO
5.	RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)		442 6
(a	(a) Will food and beverage services be contracted or subcontracted?		NO
	1. If YES to (a), is a copy of the current food and beverage contract on file with the licensing YES authority and Liquor Division?		NO
	2. If NO to (a) (1.), please attach a copy of the current contract.		-
6.	. RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408		
(a	(a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (_		_%)
	(Line 2) Food Sales: \$ (_		_%)
	(Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ (_		_%)
(b	(b) Is a copy of the valid food service permit or the approved permit application attached?		NO
7.	. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)		
(a	(a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (_%)
	(Line 2) Food Sales: \$ (_%)
	(Line 3) Entertainment Sales: \$		_%)
	(Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ (_%)
(b	(b) Is a copy of the valid food service permit or the approved permit application attached?		NO
8.	. MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION		
(a	 (a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than YES 50,000 barrels (1, 550,000 gallons) during the previous license term? (W.S. 12-1-101(a)(xix)) 		NO
(b	(b) Are microbrewery products from this location being distributed to other alcohol retailers in YES Wyoming? (W.S. 12-2-201(a))		NO
	If YES, a wholesale malt beverage license from the Liquor Division will be required.		
9.	. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)		
	Does the resort complex:		
(a	(a) Have an actual valuation of at least one million dollars, or have committed or expended at least one Test million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i)		NO
(b	(b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred YES (100) persons? W.S. 12-4-401(b)(ii)		NO
(C			NO
(d	(d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv		NO
(e	(e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b)		NO
	1. If YES to (e), is a copy of the current food and beverage contract on file with the licensing authority YES and Liquor Division?		NO
	2. If NO to (e) (1.), please attach a copy of the current contract.		

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1 0. L	LIMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101	(a)(III)(B)				
(a)	Has the fraternal organization been actively operating in at least thirty-six (36) states?		YES		NO	
(b)	the state of the second s		YES		NO	ı
	LIMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)				
			YES		NO	
(a)	the second se		YES		NO	
(b)	Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary?					
42 1	LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W.S.	12-4-30)1(e)		
	$u = u + v + u = u = \pi $		YES		NO	
(a)			YES		NO	
(b)	the second s		YES		NO	
(c)	this golf course?			_		
	1. Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e)		YES	Ц	NO	
	If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensin authority and Liquor Division?	g 🗆	YES		NO	
	3. If NO to (c) (1.), please attach a copy of the current contract.					
13.	LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(i	ii)(E) / W.	5. 12-4	-301(b)	
(a)	Does the club have more than one hundred (100) bona fide members who are residents county in which the club is located?	of the	YES		NO	
(b)	Is the social club incorporated and operating solely as a nonprofit organization under the la this state?	aws of 🗌	YES		NO	
(c)	Is the club qualified as a tax-exempt organization under the Internal Revenue Service?		YES		NO	
(d)) Has the club been in continuous operation for a period of not less than one (1) year?		YES		NO	
(e)) Has the club received twenty-five dollars (\$25.00) from each bona fide member as					
	recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues?		YES		NO	
(f)	Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club?		YES		NO	
(g)) Is a true copy of the club bylaws on file with the licensing authority and Liquor Division?		YES		NO	
	1. If NO to (g), please attach a current copy the club bylaws.					
(h)	Is a detailed statement with itemized expenditures of the club's activities during the last ye attached?	ar 🗌	YES		NO	

14. If the Applicant is Filing As an <u>Individual, Partnership, Political Subdivision, Organization or Other</u> W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application.)

· · · · · · · · · · · · · · · · · · ·		Residence Address No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been convicted within the previous 10 years of:		
True and Correct Name	Date of Birth				a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?	
				YES 🗌	YES 🗖	YES 🗋	
						NO 🗌	
				YES 🗖	YES 🗖	YES 🗌	
					NO 🔲		
				YES 🗖	YES 🗌	YES 🗌	
				NO 🗌	NO 🗌		
				YES 🗌		YES 🗌	
					NO 🗌	NO 🗌	

,

15. If the Applicant is Filing As a <u>Corporation, Limited Liability Company, Limited Liability Partnership</u> <u>Limited Partnership</u> W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of	Residence Address No. & Street City, State & Zip	Residence Phone Number	No. of Years in Corp or LLC	% of Corporate Stock or	Have you been convicted within the previous 10 years of:		
	Birth	DO NOT LIST PO BOXES			Ownership Held	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?	
Christopher Volzke	121	485 West View Way Mills Wy 82604	605 281 9805	21	50		YES 🗆 NO 🗹	
Angela Volzke	ALC A		507 829 3576	21	50	YES 🗌 NO 🔀	YES 🗆 NO 🖾	
						YES 🗌 NO 🔲	YES	
						YES NO	YES	

REQUIRED ATTACHMENTS

A copy of any lease agreements. W.S. 12-4-103(a)(iii)

Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)

If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers. W.S. 12-4-102(b)

STATE OF WYOMING) COUNTY OF Natrona)		
		20 24 that the facts alload
Signed and aworn to before me on this	Christopher Volzke	20 <u>24</u> that the facts alleged CoFounding <u>Member</u> Title
2)(Signature)	(Printed Name)	Title
3)(Signature)	(Printed Name)	Title
4)(Signature) 5)	(Printed Name)	Title
(Signature)	(Printed Name)	Title
	and and official seal: Clusfal Signature mission expires: $5/11/28$	Brokken-Brakle of Notary Public

7/23) C-7188							Item
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To be comp	leted by City / Town	<u>n / County Clerk</u>	Local License	#:(2	88		
License Fees An	nual Fee: \$	1500.00	Date filed with	clerk:	7 1 1	8 12024	
	orated Fee: \qquad	10 00.00			utive Week	s Pripr to Hearing)	
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А	pplicant (Business Na	me): WYOMING D	OWNS OTB2	0 LLC			٦
Doing Busines	s As (DBA) / Trade Na	ame: <u>WYOMING D</u>	OWNS OTB2	<u>o</u>			
Buildir	ng to be licensed / Buil Addr		OWSTONE	IWY			
	Addi	MILLS, WY 8	2644 NATR	ONA			
	Local Mailing Addr	ress: 2905 LAKE E	AST DR STE	150			
		LAS VEGAS,	NV 89117				
Local Bu	siness Telephone Num	nber: (702) 425-5440	E Fax	Number:			
	Business E-Mail Addr	ress: tlacock@wydd	owns.com				
	Business Primary Con	tact: Traci		Laco	de		
	-	First Name		Last	Name		
			FILING AS			OMPANY (LLC)	
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(7/23	23) C-7788	ltem # 3.
2.	LIQUOR BUSINESS CONTROL: W.S. 12-4-601(b)	L
	(a) To operate the liquor business, has the business or license/permit been assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license or permit or the licensed building?	
	(b) If the answer was YES to 2(a) above, explain fully and submit any documents in connection there wit	hin.
<u> </u>		
ν.	Does any alcohol manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, dir	ector or
	member of any such firm:	
	(a) Hold any interest in the license/permit applied for?	
	(b) Furnish by way of loan or any other money or financial assistance for purposes hereof in D YES X the business?	
	(c) Furnish, give, rent or ioan any equipment, fixtures, interior decorations or signs other than 🔲 YES 🗹 standard brewery or manufacturer's signs?	-
	(d) If the answer was YES to any of the above, explain fully and submit any documents in connection there with	in.
4.	RETAIL LIQUOR LICENSE-COUNTY LOCATIONS ONLY: W.S. 12-4-201(f)(ii)	
	Is the licensed building within five (5) miles of an incorporated town or city?	
5.	RETAIL LIQUOR LICENSE-COMMERCIAL SERVICE AIRPORTS ONLY: W.S. 12-4-201(m)	
(2	a) Will food and beverage services be contracted or subcontracted?] NO
	1. If YES to (a), is a copy of the current food and beverage contract on file with the licensing] NO
	2. If NO to (a) (1.), please attach a copy of the current contract.	
6.	RESTAURANT LIQUOR LICENSE ONLY: W.S. 12-4-407(a) / W.S. 12-4-408	
(2	a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (%)
	(Line 2) Food Sales: \$ (%)
	(Line 1 + Line 2 must = Line 3) (Line 3) Gross Sales: \$ (%)
(t	(b) Is a copy of the valid food service permit or the approved permit application attached?	
7.	. BAR AND GRILL LICENSE LIQUOR LICENSE ONLY: W.S. 12-4-413(a) / W.S. 12-4-413(h),(j),(k)	
(2	(a) Gross sales figures and percentages of income derived from: (Line 1) Liquor Sales: \$ (%)
•	(Line 2) Food Sales: \$ (%)
	(Line 3) Entertainment Sales: \$ (%)
	(Line 1 + Line 2 + Line 3 must = Line 4) (Line 4) Gross Sales: \$ (%)
(1	(b) Is a copy of the valid food service permit or the approved permit application attached?	
8.	MICROBREWERY PERMIT ONLY: PRODUCTION AND WHOLESALE DISTRIBUTION	
	(a) Did the microbrewery at this location produce at least 50 barrels (1,550 gallons) but less than YES [50,000 barrels (1, 550,000 gallons) during the previous license term?] NO
(1	(W.S. 12-1-101(a)(xix)) (b) Are microbrewery products from this location being distributed to other alcohol retailers in YES [Wyoming? (W.S. 12-2-201(a))] NO
	-If YES, a wholesale malt beverage license from the Liquor Division will be required.	
9.	. RESORT LIQUOR LICENSE: W.S. 12-4-401 through W.S. 12-4-403(b)	
	Does the resort complex:	
(2	(a) Have an actual valuation of at least one million dollars, or have committed or expended at least one YES [million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i)	
(b	(b) Include a restaurant and a convention facility; a convention facility that will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii)] NO
(0	(c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii)] NO
(c	(d) If no on question (c), have a ski resort facility open to the general public in which has been committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv] NO
(6	(e) Will food and beverage services be contracted or subcontracted? W.S. 12-4-403(b)] NO
	1. If YES to (e), is a copy of the current food and beverage contract on file with the licensing authority [] YES [and Liquor Division?] NO
	2. If NO to (e) (1.), please attach a copy of the current contract.	

attach a copy to (e) (1.), p the current contra п NC е С

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(7/23)	C-7188				1	ltem # 3
10. L	IMITED RETAIL (CLUB) LIQUOR LICENSE: FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)				
(a)	Has the fraternal organization been actively operating in at least thirty-six (36) states?		YES		NO	
(<u>)</u> (b)	Has the fraternal organization been actively in existence for at least twenty (20) years?		YES		NO	
						-
11. L	_IMITED RETAIL (CLUB) LIQUOR LICENSE: VETERANS CLUBS W.S. 12-1-101(a)(iii)(A)				
(a)	Does the Veteran's organization hold a charter by the Congress of the United States?		YES		NO	
(b)	Is the membership of the Veteran's organization comprised only of Veterans and its Duly organized auxiliary?		YES		NO	
			2.4-31	1(0)		
12. L	LIMITED RETAIL (CLUB) LIQUOR LICENSE: GOLF CLUBS W.S. 12-1-101(a)(iii)(D) / W		YES		NO	
(a)	Does the golf club have more than fifty (50) bona fide members?			_	NO	
(b)	Does the Applicant, maintain, or operate a bona fide golf course together with a clubhouse?		YES			
(c)	is the Applicant a Political Subdivision of the state that owns, maintains, or operates this golf course?	L	YES		NO	
	 Will food and beverage services be contracted or subcontracted? W.S. 12-4-301(e) 		YES		NO	
	2. If YES to (c) (1), is a copy of the current food and beverage contract on file with the licensing authority and Liquor Division?		YES		NO	
	3. If NO to (c) (1.), please attach a copy of the current contract.					
			42 4	204/	—— h\	5
	LIMITED RETAIL (CLUB) LIQUOR LICENSE: SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E))1 VC·	NO	
(a)	Does the club have more than one hundred (100) bona fide members who are residents of the county in which the club is located?		YES	Ш	NU	
(b)	Is the social club incorporated and operating solely as a nonprofit organization under the laws of this state?		YES		NO	
(c)	Is the club qualified as a tax-exempt organization under the Internal Revenue Service?		YES		NO	
(d)	Has the club been in continuous operation for a period of not less than one (1) year?		YES		NO	
(e)	Has the club received twenty-five dollars (\$25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues?		YES	.	NO	
(f)	Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club?		YES		NO	
(g)	is a true copy of the club bylaws on file with the licensing authority and Liquor Division?		YES		NO	
	1. If NO to (g), please attach a current copy the club bylaws.					
(h)	Is a detailed statement with itemized expenditures of the club's activities during the last year attached?		YES		NO	

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14. If the Applicant is Filing As an <u>Individual, Partnership, Political Subdivision, Organization or Other</u> W.S. 12-4-102(a) (ii) & (iii)

Each individual, partner or club officer must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application.)

		Residence Address		Have you been a DOMICILED		onvicted within the 0 years of:
True and Correct Name	Date of Birth	No. & Street City, State & Zip DO NOT LIST PO BOXES	Residence Phone Number	resident for at least 1 year and not claimed residence in any other state – in the last year?	a Felony Violation Relating to Alcoholic Liquor or Malt - Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES 🗌	YES 📋	YES 🗌
					NO 🗌	
				YES 🗖	YES 🗖	YES 🗌
				NO 🗖	NO 🗌	NO 🗌
				YES 🗌	YES 🗌	YES 🗋
				NO 🗌		NO 🗖
				YES 🛄	YES 🗖	YES 🗌
					NO 🗖	NO 🗖

15. If the Applicant is Filing As a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership W.S. 12-4-102(a)(iv) & (v)

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock or ownership of the corporation, limited liability company, limited liability partnership, or limited partnership.

Each Officer, Director or LLC member must complete all of the information below. (If more information is required, list on a separate piece of paper and attach to this application)

True and Correct Name	Date of	Residence Address No. & Street City, State & Zip	Residence Phone Number	No. of Years in Corp or	% of Corporate Stock or		convicted within 10 years of:
	Birth	DO NOT LIST PO BOXES		LLC	Ownership Held	a Felony Violation Relating to Alcoholic Liquor or Malt Beverages?	any Violation Relating to Alcoholic Liquor or Malt Beverages?
Ron Winchell		42 Soaring Bird (1. Las Vegas, NV 89135	702-400-3670	Llyr	100%	YES 🗋 NO 😰	YES 🛄 NO 🖬
						YES □ NO □	
						YES 🗌 NO 🔲	YES 🗌 NO 🔲

REQUIRED ATTACHMENTS

A copy of any lease agreements, W.S. 12-4-103(a)(iii)

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Bar & Grill or Restaurant liquor license Applicants, attach a copy of the current Food Service Permit or the approved permit application for the Applicant and for the licensed building location. 12-4-413(a) / W.S. 12-4-407(a)

If food and beverage services will be contracted or subcontracted attach a copy of the contract or lease agreement W.S. 12-4-201(m) / W.S. 12-4-301(e) / W.S. 12-4-403(b)

OATH OR VERIFICATION

STATE OF WYOMING

Requires signatures by ALL Individuals, ALL Partners, ONE (1) LLC Member, or TWO (2) Corporate Officers or Directors except that if all the stock of the corporation is owned by ONE (1) individual then that individual may sign and verify the application upon his oath, or TWO (2) Club Officers. W.S. 12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate. Nevada

8day of July	$20 \cancel{3}$ that the facts alleged
ıg:	
Ron Winchell	Manager Tille
(Printed Name)	Tille
(Printed Name)	Title
(Printed Name)	Title
<u>-</u>	
(Printed Name)	Title
(Printed Name)	Title
my hand and official seal: commission expires: $4/26/27$	ature of Notary Public
	ng: <u>Ron Winchell</u> (Printed Name) (Printed Name) (Printed Name) (Printed Name) my hand and official seal: Sign

and the second second

REGULAR CITY COUNCIL MEETING August 13, 2024 7:00 PM City Hall



Mayor: Leah Juarez Council President: Sara McCarthy Council Members: Cherie Butcher Brad Neumiller Tim Sutherland

MINUTES

CALL TO ORDER

Mayor called the meeting to order at 7:01 pm

ROLL CALL

Present:

Mayor Juarez President McCarthy Council Butcher Council Neumiller Council Sutherland

PLEDGE OF ALLEGIANCE

PUBLIC HEARINGS

Mayor closed the Council Meeting at 7:02pm

Mayor opened the Public Hearing at 7:02pm

1. The Oregon Trail Liquor License Transfer

Mayor Juarez declared the Public Hearing open for consideration of the Liquor License transfer from D's Oregon Trail Bar to Klaus W. Conrad Jr. DBA The Oregon Trail Bar. The hearing will be conducted in accordance with state statue, Mills Council Procedures and other applicable laws. The hearing has been set and advertised in accordance with the statues. The Mayor asked those individuals who wish to address council on this issue to approach the lectern and state your name and for the record. The Mayor asked if we had a report from the staff on this item. The City Clerk stated that The Oregon Trail Bar is compliant with both the city and Wyoming Liquor Division. The Mayor asked three times if there was anyone in the audience who wishes to speak in favor of this item. No one came forward. The Mayor asked three times if there was anyone in the audience who wishes to speak for or against this item, The Mayor declared the public hearing closed at 7:06pm.

Mayor re-opened the Regular Council Meeting at 7:06pm

CONSENT AGENDA Brad Tim

Minutes

2. Council Meeting Minutes 7-23-24

City Licenses

3. New and Renewal Business and Contractors Licenses

Financial Approvals

- 4. Treasurer's Report
- 5. Investment Accounts
- 6. Court Income
- 7. Financial Breakdown
- 8. Transmittal Transactions
- 9. Payroll Regular/Police 7-15-24 to 7-28-24
- 10. Payroll Fire 7-18-24 to 7-29-24
- 11. Payroll Regular/Police 7-29-24 to 8-11-24
- 12. Voided Checks

Motion made by Council Member Neumiller to approve, Seconded by Council Member Sutherland. Voting Yea: Mayor Juarez, Council President McCarthy, Council Member Butcher, Council Member Neumiller, Council Member Sutherland

OPEN DISCUSSION

Harold Wahl – 522 Midwest Ave – Mr. Wahl came to council to complain about the dogs barking in his neighborhood. He said the dogs are barking all night long and wanted to know if we have a noise ordinance that would cover dog barking. He said he had called the police department over the weekend, they came out Sunday and took a report. He was unaware of how many dogs you could have in city limits. The Council confirmed you could have 5 animals total. He asked if we could change the ordinance to less dogs, 5 dogs is too many. The Mayor told Mr. Wahl we would look into how many dogs his neighbor has and we will also look into the current ordinance. President McCarthy asked the Police Chief about after hours barking. Chief responded that the dogs barking would be a breach of peace. The Mayor assured Mr. Wahl that we would look into the situation. In the meantime we would have officers put a little more emphasis on his area.

Scott Clamp – 720 Wasatch – Mr. Clamp asked about allowing business licenses to be renewed on a 3-5 year basis instead of 1 year. If a business leaves before the 5 years is up, the city could keep the money. The Mayor informed Mr. Clamp that the business licenses are free, the fire inspection is not free. Mr. Clamp recalls having to pay for his business license before the fire inspection was completed. The Mayor said Mr. Clamp was correct, but now with this council, the business license is free and we charge for the fire inspection. If you run a business and you are a fire hazard, the city needs to keep an eye on all hazards and make sure fire inspections are completed. Mr. Clamp explained that his business does not have foot traffic, they just sell stuff. He asked if there was any way to stretch the self-inspections from 1 to several years. President McCarthy responded that things tend to change within a year, our fire inspections need to be every year so we can make sure the public is safe. The Mayor explained to Mr. Clamp that we allowed a lawn company to store flammable fuels and mulch and no one checked on it in 3 years because they don't view that as flammable or hazardous.

Jim Sullivan – 5585 Poison Spider – Mr. Sullivan currently owns Sullivan Trucking at 5585 Poison Spider and is opening a new company Wyoming Tree Service. When he dropped the application off, the office wanted him to pay \$45, but he had already had a self-assessment fire inspection completed for his trucking company. The Mayor started by saying she was happy this came up and it helps us to better understand the situation and that the

Fire Chief addressed the issue and feels the same way, Mr. Sullivan should not have to pay twice. Both businesses are established under the same roof. It would be 1 application but the 2 businesses and 1 self-assessment fire inspection. She told Mr. Sullivan that he is correct and that we agree, the fire chief agrees and he does not need to pay the additional \$45. The Mayor told Mr. Sullivan she really appreciate him coming forward with his concern. Mr. Sullivan requests that the council approves his business application. The Mayor responded, that we already approved it.

The Mayor asked the City Clerk to make sure that the license gets completed.

John Gudger – 827 Fossil Butte – Wanted to know if the city could simplify a couple of things regarding the application process. Mr. Gudger had concerns about the Home Occupation Permit application and requested that the city provides clear documentation attached to the application. He was concerned about where to find the documentation for Home Occupation Permits. He asked that the city provide an easy search link on the website. He said there has been some confusion about whether there is a fee or not. His understanding is that there is an administration fee of \$25 or \$45, he would like it to be clarified that the fee is a separation from an inspection from the fire marshal. He said he had talked to the fire marshal and he does not need an inspection because he is not open to the public. Mr. Gudger also expressed concern about the front office and the information that is given is inconsistent. He questioned businesses and vendors at Summerfest and the Art Walk. Questioned if those businesses abide by the same rules. Stated that it should be clarified. He said there are concerns of unfair practices in regards to vendor events. President McCarthy asked Mr. Gudger to clarify his vendor question and their concerns. Mr. Gudger responded that there is confusion about vendors having to pay a fee and the requirements are not easily findable. Asked if Summerfest or Art Festival vendors have to pay or provide the same application to the city. President McCarthy responded that yes, the vendors do pay a fee for each festival and there is a form that they have to complete. Mr. Gudger continued on to ask the council, until things are clarified, a friend of his had been threatened that they would be blacklisted on Facebook. The Mayor explained that we identify businesses which are different than home occupancy as being non-compliant with the fire inspections. We feel the public deserves to know which businesses have not either passed or fulfilled their fire inspection requirements. Mr. Gudger said his friend's business doesn't even expire until next month and was concerned why she was threated with that. The Mayor responded that she is sorry if anyone has made that statement to her but that she has spoken to his friend and they are trying to figure out where she falls in this category and to better define where her home occupancy belongs. We are trying to clarify who needs a fire inspection and who doesn't. We don't think that she does need one. Mr. Gudger's last request is in the future if you can just educate those who speak to the public, they shouldn't encourage or say they are going to put them on Facebook and blacklist them unless the information is presented to them on how they can deal with and adequately comply with the city requirements. The Mayor told Mr. Gudger that everything in the front office is recorded on cameras. Wherever there is a claim we can pull the footage and hold that individual responsible. She would not ever encourage any of the staff here to say or make claim of that sort that is very serious and not taken lightheartedly. The Mayor also assured Mr. Gudger that we are working with the front office to better equip them to help ask the right questions so we can give the right paperwork. In this situation the confusion was more on our staff then the resident. Overall this situation opened up a lot of unknowns and a grand issue that we are working through to correct. Mr. Gudger kindly askes that the front office refrains from threatening or putting them on a non-compliance if they are trying to comply. The Mayor agreed.

ORDINANCES AND RESOLUTIONS

13. ORDINANCE 816 - THIRD AND FINAL READING

ORDINANCE REGARDING INTERFERENCE WITH EMERGENCY CALLS OR EMERGENCY REPORTING SYSTEM

Motion made by Council Member Neumiller to approve, Seconded by Council Member Sutherland. Voting Yea: Mayor Juarez, Council President McCarthy, Council Member Butcher, Council Member Neumiller, Council Member Sutherland

ltem # 4.

14. ORDINANCE 817 THIRD AND FINAL READING

ORDINANCE REGARDING CRIMINAL ENTRY

Motion made by Council Member Neumiller to approve, Seconded by Council President McCarthy. Voting Yea: Mayor Juarez, Council President McCarthy, Council Member Butcher, Council Member Neumiller, Council Member Sutherland

15. RESOLUTION NO 2024-30 - SETTING MUNICIPAL SALARIES

A RESOLUTION SETTING MUNICIPAL SALARIES

Motion made by Council Member Butcher to approve, Seconded by Council Member Neumiller. Voting Yea: Mayor Juarez, Council President McCarthy, Council Member Butcher, Council Member Neumiller, Council Member Sutherland

<u>16.</u> <u>RESOLUTION NO 2024-31</u>

HEALTH SAVINGS ACCOUNT SIGNATORIES

Motion made by Council Member Neumiller to approve, Seconded by Council Member Sutherland. Voting Yea: Mayor Juarez, Council President McCarthy, Council Member Butcher, Council Member Neumiller, Council Member Sutherland

<u>17.</u> <u>RESOLUTION NO 2024-32</u>

HOME BUSINESS OCCUPATION PERMIT FEES

Motion made by Council President McCarthy to approve, Seconded by Council Member Butcher. Voting Yea: Mayor Juarez, Council President McCarthy, Council Member Butcher, Council Member Neumiller, Council Member Sutherland

COUNCIL APPROVALS

18. Bayou Liquors Catering Permit #7 8-17-24

Motion made by Council Member Sutherland to approve, Seconded by Council Member Neumiller. Voting Yea: Mayor Juarez, Council President McCarthy, Council Member Butcher, Council Member Neumiller, Council Member Sutherland

NEW BUSINESS

19. Patrick Sweeney - Senior Citizen Mills Levy

Patrick Sweeney turned the floor over to Amy, the director of the senior center.

Amy wanted to address council about the proposed County Senior Service Citizen Service District will be on the primary ballot next week on August 20th. The item will be whether to establish or not to establish a district. Amy detailed the difficulties we will have is the district is not established. Currently they have been living on reserves for the past 6 years. Should it be established there would be 5 board members that will oversee the district. They will be voted by the public.

ADJOURNMENT

Council Member Sutherland as for a motion to adjourn Council Meeting at 7:27pm, Seconded by Council President McCarthy. Voting Yea: Mayor Juarez, Council President McCarthy, Council Member Neumiller, Council Member Butcher, Council Member Sutherland Item # 4.

AGENDA SUBJECT TO CHANGE WITHOUT NOTICE

NEXT MEETING - August 27, 2024 at 7:00pm / September 10, 2024 at 7:00pm

NEXT WORK SESSION - August 27, 2024 at 6:00pm / September 9, 2024 at 9:00am

In accordance with the Americans with Disabilities Act, persons who need accommodation in order to attend or participate in this meeting should contact City Hall at 307-234-6679 within 48 hours prior to the meeting in order to request such assistance.

Mayor, Leah Juarez

City Clerk, Sarah Osborn

Council Meeting August 27, 2024

Item	#	5
		-

NEW CONTRACTOR LICENSES

	BUSINESS NAME	CONTRACTOR ID	INSURANCE	FIRE
1	Icon Plumbing	Yes	NA	NA
2	Intermountain Carpentry	Yes	NA	NA

RENEWAL CONTR	ACTOR LICENSES	

BUSINESS NAME	CONTRACTOR ID	INSURANC	CE FIRE
1 7 Stones	Yes	NA	NA
2 Casper Tin Shop	Yes	NA	NA
3 Sharkey's AllPhase Electric, Inc.	Yes	NA	NA
4 Wayne Coleman Construction, Inc.	Yes	NA	NA

RECEIVED

AUG 1 5 2024



APPLICATION FOR Contractor License

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

License #: <u>99</u>37

Date: 08/15/2024

New	License	

Renewal License D Expired License

GENERAL INFORMATION				
Name of Business: Icon Plumbing, LLC				
Physical Address: 3580 Indian Scout Drive		Casper	WY	82604
Street		City	State	Zip
Mailing Address: 3580 Indian Scout Drive	(Casper	WY	82604
Street		City	State	Zip
Business Phone Number: 3072770403	Cell Number:			
Email Address: iconplumbingwy@gmail.com	Website:			
License Classifications:				
			- 1	
LICENSE ISSUED BY				
APPLICANT INFORMATION	ses must be attach	ed to this applic	cation	OT22770402
Applicant Name: Joshua McAuley		F	hone Number:	012110403
Mailing Address: 3580 Indian Scout Drive		Casper	WY	82604
Street		City	State	Zip
I certify that the above information is correct	and true to the be	st of my know	ledge.	
Applicants Signature: Joshua McAul	ey		F	PAID
There will be a \$35.00 License fee to be paid at the time	ne the license is iss	ued		AUG 2 2 2024
Return completed form to:		`		
Mills City Hall				USE ONLY
720 4 th Street 307-234-6679			This license v	
				was / was not neeting of the Mills n the
			City Council o	



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PC-36 Building Department

This is to certify that Icon Plumbing Can perform work in Natrona County as Plumbing Contractor

This license expires: 12/31 2024

Must be carried on person. Good only when signed by the Building Official

NATRONA Myoming

Building Department

PM-26



This is to certify that Joshua McAuley

Can perform work in Natrona County as Plumbing Master

This license expires: December 31, 2024

Must be carried on person. Good only when signed by the Building Official



City of Casper, Wyoming

JOSHUA MCAULEY has met the requirements set forth by the City of Casper and is competent to perform work as a

Plumbing Master MAST-001221-2022

This License Expires: 12/31/2024



City of Casper, Wyoming

Icon Plumbing

has met the requirements set forth by the City of Casper and is competent to perform work as a

Plumbing Contractor CONT-001315-2022

This License Expires: 12/31/2024



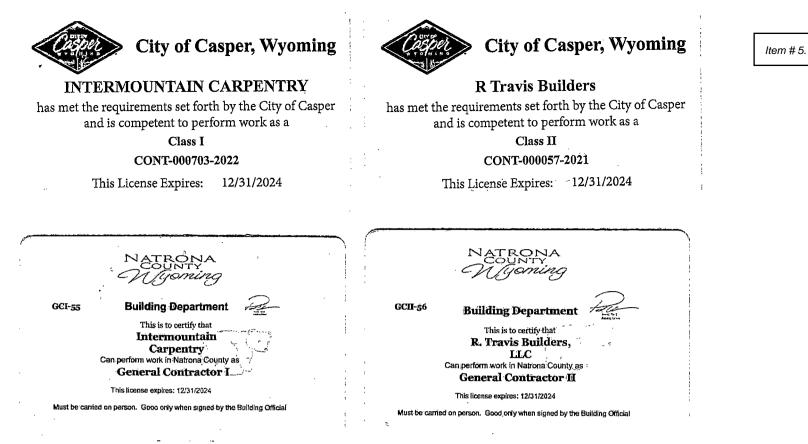
RECEIVED

AUG 2 2 2024

APPLICATION FOR Contractor License

ltem # 5.

A Contractor License is required for ANY Contractor doing work within the City of		's License Applicat	ion must be
completed. Incomplete applications shall be License #: 9928	e returnea.	Date: 8	122/24
			,
🔀 New License 🛛 🗌 Renewal License	Expired Licer	ise	
GENERAL INFORMATION	1		
Name of Business: Intermention CARPENTE	4/R TR	AVIS BU	LDERS
Physical Address: 1634 MUCREER FD (ASPER L	NY 8 State	ZLOUL
Mailing Address: 2921 PLOVECREST DR. C	A SPER	_	2604
Street	City	State	Zip
Business Phone Number: 307 259-8708 Cell Number: 3	307 259-	8708	
Email Address: scheidincegrant.conwebsite:			
License Classifications: CLASS 1 GC , CLASS	260		
LICENSE ISSUED BY			
└── City of Mills	C State of Misor	ing 🔽 Othe	~
City of Mills K City of Casper K Natrona County A copy of all licenses must be attached			31
APPLICANT INFORMATION			
Applicant Name: Scitter	Phone	Number: 307	259-8708
Mailing Address: 2921 R. DUECREST B2	ISPER 1	my g	2604
Street	City	State	Zip
I certify that the above information is correct and true to the best	of my knowledge	€.	
Applicants Signature:			
There will be a \$35.00 License fee to be paid at the time the license is issued	4	PAI	D
	•	AUG 2 2 2	2024
Return completed form to:	·		
Mills City Hall 704 4 th Street		OFFICE USE	
Po Box 789 Mills, WY 82644		Granted at a meeting City Council on the _	
307-234-6679		Attest	
			······
50			



Expired License

APPLICATION FOR

Contractor License

Date: 8/14/2024

GENERAL INFORMATION			
Name of Business: 7 Stones Electric LLC			
Physical Address: 903 Washington Street	Douglas	WY	82633
Street	City	State	Zip
Mailing Address: 903 Washington Street	Douglas	WY	82633
Street	City	State	Zip,
Business Phone Number: 307-439-3306	Cell Number:		
Email Address: office@7stoneselectric.com	Website: 7StonesElectric.co	m	· · ·
License Classifications: Electrical Contractor			·
			:
LICENSE ISSUED BY			1 .
			5 - ₁₀
🗷 City of Mills 🛛 City of Casper 🔲 N	latrona County 🛛 🛱 State of Wyo	ming [] Other
A copy of all licens	es must be attached to this application	o n	
APPLICANT INFORMATION			
Applicant Name: Bryan Stone	Pho	ne Number:	307-351-3759
Mailing Address: 903 Washington Street			82633
Street	City	State	Zip
		1	
I certify that the above information is correct a	and true to the best of my knowled	lge.	
Applicants Signature:			
		P	AID
There will be a \$35.00 License fee to be paid at the tim	e the license is issued	P	
	e the license is issued		∽ I ⊡ JG 1 5 2024
Return completed form to:	e the license is issued		
Return completed form to: Mills City Hall 720 4 th Street	e the license is issued	OFFIC	E USE ONLY
Return completed form to: Mills City Hall	e the license is issued	OFFIC This license Granted at a	E USE ONLY e was / was not a meeting of the Mills
Return completed form to: Mills City Hall 720 4 th Street	e the license is issued	OFFIC This license Granted at a City Council	E USE ONLY e was / was not a meeting of the Mills I on the
Return completed form to: Mills City Hall 720 4 th Street	e the license is issued	OFFIC This license Granted at a	E USE ONLY e was / was not a meeting of the Mills

52

CITY OF MILLS

License #: 99210

A Contractor License is required for ANY Contractor doing work within the City of Mills, a Contractor's License Application must be completed. Incomplete applications shall be returned.

Renewal License

🗂 New License

RECEIVED

1313 1 4 2024

WY DEPT OF FIRE PREVENTION AND ELECTRICAL SAFETY

CONTRACTOR CERTIFICATE

AWARDS THIS CERTIFICATE TO

7 Stones Electric LLC

who has satisfactorily met the standards of the State of Wyoming as

administered by the Electrical Board and is hereby certified as

LEVEL: Electrical Contractor

ISSUE DATE: 06/13/2024

CONTRACTOR NUMBER: C-10182

EXPIRATION DATE: 07/01/2025

Issued by State of WY Dept of Fire Prevention and Electrical Safety

This certificate documents the successful completion of training and testing at the level identified on the certificate under the provisions identified.

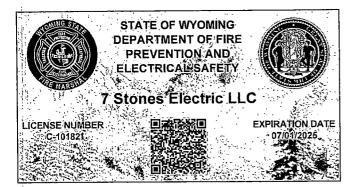
Item # 5.



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AUG 1 2 2024

APPLICATION FOR Contractor License

A Contractor License is req	uired for ANY Contractor do	oing work within the City	of Mills, a Contro	actor's License Ap	plication must be
License # <u>9935</u>	completed. Inco	mplete applications shal	l be returned.		: 8/12/24
				Dale	0110101
	🖾 New License	🕅 Renewal License	Expired I	_icense	
GENERAL INFORMATIO	<u>N</u>				
Name of Business:					
Physical Address:	Street	ngo Ct	Casper City	hy	82609
Mailing Address:	PO Box 57				Zip 82405
	Street		City	State	
Business Phone Number:					·
Email Address: Anjué	Carpertushop.com	Website: <u>Nv</u>	JW. Caspe	itinshop co	W
License Classifications:	HVAC.				
LICENSE ISSUED) BY				
City of Mills	€ City of Casper A copy of all lic	2 -Natrona County enses must be attache	State of Wy	roming 🔲 (Other
APPLICANT INFORMATIC	<u>2N</u>				
Applicant Name: Ang			Pho	one Number:	35-9020
Mailing Address:PD	Box 51351		Record	State	8710/15
	Street		City	State	Zip
I certify that the abo	ove information is corre	ct and true to the best	of my knowled		
Applicants Signature:	angie Le Don	4 - 9710	man	age.	
	ense fee to be paid at the t	00		0	AID
			-	Atti	G 1 4 2024
Return completed form to	o:			~~	J የቆ⊈ ርህደፋ
Mills City Hall 720 4 th Street				OFFICE US	
307-234-6679				This license was Granted at a mee City Council on th	/ was not ting of the Mills
				Attest	1

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OFFICIAL RESULTS REPORT

366 - Wyoming Journeyman HVAC



Name:	Sean Lijewski			Candidate ID:	ICNON130712
Address:	PO Box 51351			Date:	4/6/2017
	Casper	WY	82605		

EXAMINATION RESULT: PASS

Congratulations! You have passed the above-named examination. You will be able to verify your pass status on the ICC website within 48-72 business hours after your exam. Please contact your participating jurisdiction if you wish to pursue licensing.

A passing score on this examination satisfies the testing requirements for licensure only, and does not guarantee that licensing will be granted. The candidate must also satisfy all local ordinance requirements in each jurisdiction where licensing is desired.

It is extremely important that you notify Pearson VUE and ICC of any changes in name and/or address to avoid the possibility of future correspondence not being received. Please contact both Pearson VUE at 877-234-6082 and ICC at 888-422-7233 ext. 5524 with changes to your name and address.

ICC reserves the right to amend or withhold any examination scores if, in its sole opinion, there is adequate reason to question their validity.

The authenticity of this score report can be validated by using Pearson VUE's Online Score Report Authentication found at: www.PearsonVUE.com/authenticate Digital embossing eliminates the possibility of unauthorized embossing of counterfeit score reports.

Registration Number:

313799919

Validation Number:

799310611



STATE OF WYOMING

CERTIFICATE OF RESIDENCY



ltem # 5.

Contractor Number: 1788

CASPER TIN SHOP, LLC

HAS BEEN GRANTED RESIDENCY STATUS PURSUANT TO WYOMING STATUTE 16-6-101, AS AMENDED. FIVE PERCENT PREFERENCE SHALL BE ALLOWED WHEN BIDDING ON ANY PUBLIC WORKS CONTRACT FOR A PERIOD OF ONE (1) YEAR FROM THE DATE CERTIFICATION IS GRANTED. GRANTED THIS 2ND DAY of APRIL TWO THOUSAND AND 24

Michete Johnson, Program Manager

EXPIRATION DATE: 4/1/2025



To verify the authenticity of the certificate, please contact our office at 307-777-7261 or visit wyomingworkforce.org/businesses/labor/info

CERTIFICATE SERIAL NUMBER: 204202408

IPIC INTERNATIONAL CODE COUNCIL

OFFICIAL RESULTS REPORT

G29 - Master Mechanical



Name:	Jason LeDoux	Candidate ID:	ICNON195502
Address:	511 Durango Ct	Date:	1/18/2024

Casper

VV Y

EXAMINATION RESULT: PASS

82609

Congratulations! You have passed the above-named examination. You will be able to verify your pass status on the ICC website within 48-72 business hours after your exam. **Please contact your** participating jurisdiction if you wish to pursue licensing.

A passing score on this examination satisfies the testing requirements for licensure only, and does not guarantee that licensing will be granted. The candidate must also satisfy all local ordinance requirements in each jurisdiction where licensing is desired.

It is extremely important that you notify Pearson VUE and ICC of any changes in name and/or address to avoid the possibility of future correspondence not being received. Please contact both Pearson VUE at 877-234-6082 and ICC at 888-422-7233 ext. 5524 with changes to your name and address.

ICC reserves the right to amend or withhold any examination scores if, in its sole opinion, there is adequate reason to question their validity.

The authenticity of this score report can be validated by using Pearson VUE's Online Score Report Authentication found at: www.PearsonVUE.com/authenticate Digital embossing eliminates the possibility of unauthorized embossing of counterfeit score reports.

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Registration Number:

466853801

Validation Number:

257122849

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Building Department

This is to certify that

Casper Tin Shop,

This license expires: 12 31/2024

City of Casper, Wyoming NATRONA Wyoming CASPER TIN SHOP LLC has met the requirements set forth by the City of Casper MC-20 and is competent to perform work as a Can perform work in Natrona County as Mechanical Contractor Mechanical Contractor CONT-000864-2022 Must be carried on person. Good only when signed by the Building Official 12/31/2024 This License Expires:

СП	TY OF MILLS EST. 1921

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RECEIVED

AUG 13 2024

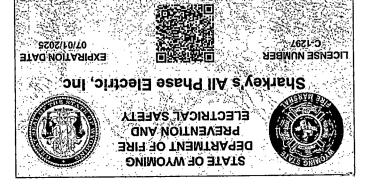
APPLICATION FOR Contractor License

ltem # 5.

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A Contractor License is required for ANY Contractor doing work within		or's License Ap	plication must be
completed. Incomplete applica	tions shall be returned.	Date	<u> </u>
	Il License 🗌 Expired Lic	ense	
GENERAL INFORMATION			
Name of Business: SHARKEY'S ALLTHASE ELEC	TRIC, INC.		
Physical Address: <u>54/ S. TACKGON St.</u> Street	CASPER	WY	 Zip
			21p 82601
Mailing Address: <u>541 S. TACKSON ST.</u> Street		State	Zip
Business Phone Number: <u>307-158-4440</u> Cell Nu	umber: <u>307-258-</u> 4	640	
Email Address: Websit	e:		
License Classifications: <u>ELECTRICAL</u> CONTRACTOR			
LICENSE ISSUED BY			
City of Mills City of Casper Natrona C A copy of all licenses must I APPLICANT INFORMATION	be attached to this application	n	Other
Applicant Name: <u>GEORGE SHARKEY</u> Mailing Address: <u>541 S. JACKSON</u> St.	~		07-258-46
Mailing Address: <u>34/ Argent Argent</u> Street	<u> </u>		ZLOT Zip
I certify that the above information is correct and true to Applicants Signature:	o the best of my knowled	ge.	
There will be a \$35.00 License fee to be paid at the time the licer	nse is issued	P	AID
Return completed form to:		AU	G 1 3 2024
Mills City Hall 704 4 th Street Po Box 789		This license w	
Mills, WY 82644 307-234-6679			eeting of the Mills the
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307-234-6679

RECEIVED

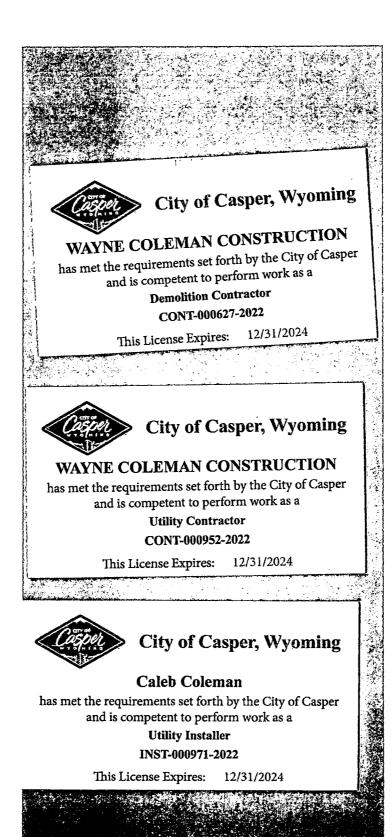
APPLICATION FOR

ltem # 5.

CITY OF MILLS EST. 1921	AUG 2 2 2019	Contractor L	license
A Contractor License is required for ANY Contractor			e Application must be
License #: 9172	ncomplete applications shall be i		Date: 8/19/24
T New License	e 📈 Renewal License 🛛	Expired License	·
GENERAL INFORMATION			
Name of Business: Wayne Colema	n Construction	, Inc.	
Physical Address: 1898 Melod; L Street	_ane (City State	
Mailing Address: P.O. Box 2440 Street	/	Mills WY City State	
Business Phone Number: 307-265-315	Cell Number:		—·P
Email Address: accounting & weoleman const	nution conWebsite:		
License Classifications: <u>heavy Civil</u>		<u> </u>	
LICENSE ISSUED BY			
City of Mills City of Casper	Natrona County In licenses must be attached to	State of Wyoming this application	☐ Other
APPLICANT INFORMATION			
Applicant Name: Elizabeth Milberge	27	Phone Number	: <u>307-265-3158</u>
Mailing Address: <u>P.O. Box 2440</u> Street	M	City State	82644 Zip
l certify that the above information is co	prrect and true to the best of	my knowledge.	
Applicants Signature:			
There will be a \$35.00 License fee to be paid at	the time the license is issued	P	AID
		A	IG 2 2 2024
Return completed form to: Mills City Hall			E USE ONLY
704 4 th Street Po Box 789 Mills, WY 82644		This licens	se was / was not a meeting of the Mills

Attest

7



Council Meeting August 27, 2024

NEW BUSINESS LICENSES							
BUSINESS NAME	FIRE INSPECTION	INSURANCE					
1 Rival Downhole Tools	Yes	NA					
2 The Oregon Trail Bar	Yes	NA					
3 Wyoming Bearing & Supply, LLC.	Yes	NA					
Wyoming Tree Service, LLC.	Yes	NA					
RENEWAL BUSINESS LICENSES							
BUSINESS NAME	FIRE INSPECTION	INSURANCE					
1 Belzona Rocky Mountain, Inc.	Yes	NA					
2 Bonander Properties	Yes	NA					
3 Casper Discount Storage	Yes	NA					
4 EJO Rink, LLC/ Wagon Wheel	Yes	NA					
5 JTeam Custom Engines	Yes	NA					
6 Millview Laundromat	Yes	NA					
7 National Oilwell Varco, LP	Yes	NA					



APPLICATION FOR Business License

A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.

License #: <u>____</u>DI

Date: 6/12/24

⊠ New Business □ Change of Ownership □ Change of	Location	Renewal 🛛 Exp	bired	
GENERAL INFORMATION				
Name of Business: Rival Downhole Tools				
	m'11	laur	8210	Ч
Physical Address: 1088 N RoBertson rd Street	City	State	Zip	/
Mailing Address: <u>Same</u>				
Street	City	State	Zip	
Business Phone Number: 367 ~ 265 - 7867 WY Tax ID Nu	ımber: <u>30-(</u>	1144542		
Email Address: MSTONEKING Q Kiva (Dt. Com Website:				
Description of Business: Oilfeild Service (mud motors.	2			
	<u> </u>			
APPLICANT INFORMATION				
			002- 250- J	0 J J
Applicant Name: <u>Matthew Stone King</u> Mailing Address: <u>See apove</u>	<u> </u>	Phone Number:	01-0030-00	
Mailing Address:See				
Street	City	State	Zip	م ^ر م م
I certify that the above information is correct and true to the b	best of my kn	owledge.		
Applicants Signature: Marca 6/12/a	24			
	۲.		-	
There will be a fire inspection fee to be paid at the time the Licer	ise is issued.			
Businesses that qualify for a Self-Assessment Fire Inspection Businesses between 1-5,000 Sq. Feet	\$45.00 \$75.00	PA	AID	
Businesses between 5,001-10,000 Sq. Feet	\$125.00	\$8.95.1	4 ആ~ വവവ	
Businesses greater than 10,000 Sq. Feet	\$250.00	JUN	172024	
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00			
Return completed form to:				

720 4th Street 307-234-6679

<u>المجامع</u>	i a	C		V	D

JEN 17 2024

66

OFFICE USE ONLY This license was / was not Granted at a meeting of the Mills City Council on the _____

Attest _

Raelyn Stoneking

From:no-reply@livsafe.comSent:Friday, August 16, 2024 9:45 AMTo:mstoneking@rivaldt.com; Raelyn Stoneking; infoCc:info@livsafe.comSubject:Inspection Report has been submitted

EXTERNAL EMAIL: This email originated from outside of the City of Mills. Do not click any links or open any attachments unless you trust the sender and know the content is safe.



Mills Fire Department (WY) c/o LIVSafe 445 E Chubbuck Rd, Ste A Chubbuck, ID 83202 300 Lakeview Dr Mills, Wyoming 82604

FIRE INSPECTION REPORT COMPLIANCE

August 16, 2024

Rival Downhole Tools 1088 North Robertson Road Casper, Wyoming 82604

Mills Fire Department (WY) has completed a Fire & Life Safety Inspection on this Premise. During the Inspection, **NO FIRE CODE VIOLATIONS** were observed.

We appreciate your efforts in keeping the business safe for employees and patrons.

Sincerely,

Wil Gay Mills Fire Department (WY)



APPLICATION FOR Business License

ltem # 5.

A Business License is required for ANY business to operate within the City of Mills, a Business License License #:	License Application must be Date: <u>6-21-2</u> 4
🕅 New Business 🖉 Change of Ownership 🗖 Change of Location 🗍 Rene	wal D Expired
GENERAL INFORMATION KINGS W. COnrod Jr Name of Business: The Oregon Trail Bars	
Physical Address: 4618 W. Vellowstone Hury Street City	<u>I Mills Wy 82604</u> State Zip
Mailing Address: 19 S. 4th Ave Mills U Street City	<u>) 4 82604</u> State Zip
Business Phone Number: 307-253-0479 WY Tax ID Number: 88-20	84067
Email Address: <u>the or egon trail Bara</u> Website:	,,,,,_,_,_,_,_,_,_,_,_,_,
Description of Business:Bar & Package	liguor
APPLICANT INFORMATION Applicant Name: Klaus W. Conract JR. Phone Mailing Address: 195.4th Ave Mills WY	ne Number: <u>307-253-04</u> 79 82604
Street	State Zip
I certify that the above information is correct and true to the best of my knowledg Applicants Signature:	ge.
There will be a fire inspection fee to be paid at the time the License is issued.	
Businesses that qualify for a Self-Assessment Fire Inspection\$45.00Businesses between 1-5,000 Sq. Feet\$75.00Businesses between 5,001-10,000 Sq. Feet\$125.00Businesses greater than 10,000 Sq. Feet\$250.00Businesses with Fire Alarm, Sprinkler System or Hood Suppression+ \$50.00	
Return completed form to: Mills City Hall 720 4 th Street 307-234-6679	OFFICE USE ONLY This license was / was not Granted at a meeting of the Mills City Council on the Attest

Raelyn Stoneking

From:no-reply@livsafe.comSent:Tuesday, August 20, 2024 4:42 PMTo:theoregontrailbar@outlook.com; Raelyn Stoneking; infoCc:info@livsafe.comSubject:Inspection Report has been submitted

EXTERNAL EMAIL: This email originated from outside of the City of Mills. Do not click any links or open any attachments unless you trust the sender and know the content is safe.



300 Lakeview Dr Mills, Wyoming 82604

Mills Fire Department (WY) c/o LIVSafe 445 E Chubbuck Rd, Ste A Chubbuck, ID 83202

FIRE INSPECTION REPORT COMPLIANCE

August 20, 2024

The Oregon Trail bar 4618 West Yellowstone Highway Casper, Wyoming 82604

Mills Fire Department (WY) has completed a Fire & Life Safety Inspection on this Premise. During the Inspection, NO FIRE CODE VIOLATIONS were observed.

We appreciate your efforts in keeping the business safe for employees and patrons.

Sincerely,

Wil Gay Mills Fire Department (WY)

70

License #: 9931					Dat	te: 07/30/2024	
XX New Busin	ess Change of Ownership	o	e of Location	Renew	al 🗆 Ex	kpired	
GENERAL INFORMA	TION						
Name of Business:	Wyoming Bearing & Sup	ply, LLC	·	<u>.</u> .			
Physical Address:	3416 Mid Way Road	-	Mills	, WY 82	601	·	
	Street		City		State	Zip	
Mailing Address:	206 S. College Dr.,		Chey	venne, W	Y 82007		
	Street		City		State		
Business Phone Num	ber: 307-462-4300	WY Tax IE	Number: 25	003352	EIN	27-07578	;80
Email Address: step	nanie@wyobs.com	Website:_	www.wyob	s.com	-		
Description of Busine	ss· Industrial Parts & Supr	ly Sales ba	sed in Cheve	enne, WY	' with loc	ations in	
Description of Dusine				<u> </u>			
• • • • • •							
APPLICANT INFORM		_LC		Phone	Number	307-634-9000	
			7				
Mailing Address:	Street	, VVT 0200	City		State	Zip	
l cartify that th	a above information is correct	and true to t	he best of my l	knowledge	`		
Applicants Signatu			and 11	monroagi			
						_	
				÷0.			
•	-	spection			P	AID	
Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet			-		ALIC	: n ว วกว <i>เ</i>	
Businesses greater than 10,000 Sq. Feet			-		MUU	0 2 2024	
—	•	l Suppression	+ \$50.00				
Return completed	form to:						
Mills City Hall				Г	OFFICE	USE ONLY	
704 4 th Street					This license	was / was not	
PO Box 789 Mills, WY 82644	s Change of Ownership Change of Location Renewal Expired Wyoming Bearing & Supply, LLC 3416 Mid Way Road Mills, WY 82601 Street City State Zip 206 S. College Dr., Cheyenne, WY 82007 Street City State Zip 307-462-4300 WY Tax ID Number: 25003352 E-1N 271-071572 Tie@wyobs.com Website: WWW.wyobs.com Industrial Parts & Supply Sales based in Cheyenne, WY with locations in Nebraska & Colorado TON ming Bearing & Supply, LLC Phone Number: 307-634-9000 S. College Dr., Cheyenne, WY 82007 Street City State Zip bove information is correct and true to the best of my knowledge. Tor a Self-Assessment Fire Inspection \$45.00 Street \$75.00 Other Assessment Fire Inspection \$45.00 Other Assessment						
307-234-6679					-		

RECEIVED

AUG 0 2 2024

A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.



APPLICATION FOR Business License

ltem # 5.

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Raelyn Stoneking

From:no-reply@livsafe.comSent:Thursday, August 22, 2024 10:28 AMTo:Stephanie@wyobs.com; Mason@wyobs.com; info; Raelyn StonekingCc:info@livsafe.comSubject:Inspection Report has been submitted

EXTERNAL EMAIL: This email originated from outside of the City of Mills. Do not click any links or open any attachments unless you trust the sender and know the content is safe.



300 Lakeview Dr Mills, Wyoming 82604

Mills Fire Department (WY) c/o LIVSafe 445 E Chubbuck Rd, Ste A Chubbuck, ID 83202

FIRE INSPECTION REPORT COMPLIANCE

August 22, 2024

Wyoming Bearing and Supply LLC 3416 Mid Way Road Casper, Wyoming 82601

Mills Fire Department (WY) has completed a Fire & Life Safety Inspection on this Premise. During the Inspection, **NO FIRE CODE VIOLATIONS** were observed.

We appreciate your efforts in keeping the business safe for employees and patrons.

Sincerely,

Wil Gay Mills Fire Department (WY)

	RECEIVED				Item
CITY OF MILLS	AUG 0 5 2024		APPLICATION FOR Business License		
A Business License is required for ANY business			License Applicat	ion must be	
License #: 993	ed. Incomplete applications sha	ll be returned.	Date:	7-1-24	
🕅 New Business 🛛 Change of	Ownership D Change of L	ocation D Rene	ewal 🛛 Exp	ired	
GENERAL INFORMATION					
Name of Business: Wyoming	Tree Service, LL	<u>.</u>			-
Physical Address: <u>5585</u> Street	Poison Spider	City	State	87644 Zip	-
Mailing Address:Po	Box 3634	Mills	wy	82644	-
Street Business Phone Number: <u>307-333-</u>	-SZZ7 WY Tax ID Nur	City nber:99-3	State	∠ıp	_
Email Address: Wyominy Tree Service LLC @					-
APPLICANT INFORMATION Applicant Name:	1 A. c.a.	Phc	no Numbor: 3	67-262-181	- 4
					_,
Mailing Address: <u> </u>	2212 101300 0 12100 000	City	State	Zip	-
I certify that the above information					
Applicants Signature:	0	him SI	<u> </u>		
There will be a fire inspection fee to b	e paid at the time the Licen	se is issued.	Co-located	1 mith	
Businesses that qualify for a Self-Assessn Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler Syst				spection,	<, ∕\ € \$
Return completed form to:					
Mills City Hall 720 4 th Street 307-234-6679			This license w Granted at a m	JSE ONLY as / was not eeting of the Mills the	
	72		Attest		

				· · · · · 90	ltem # 5.
	Mills F	Fire Depart	ment	\$ 45°	
STATION S		Sullivan Trucl			
FIRE	Occupancy ID:		•		
12 Com 1513	Address:	5585 Poison Sp	oider RD Mills WY 8260	94	
COP	Inspection Type:	Yearly inspectio	n		
EMB	Inspection Date:	1/29/2024	By: 2023, SAFI (44)		
Form: SAFI Annual	Time In:	15:30	Time Out: 15:50		
Inspection	Authorized Date:	01/31/2024	By: Gay, Wil (29)		_
Inspection Description:					-1
Self-Assessment Fire Inspection		····			7
Inspection Topics:					
Building Access and Outdoor	Premises		·		-
The building address can be clearly Responders and passerby's need to be able Status: PASS Notes:		-		ps of parked vehicles.	
The exterior access is not blocked of Firefighters and equipment need to be able f Status: PASS Notes:		afe and efficient mann	er		
The fire hydrants are easy to find an Minimum of three feet of clearance around h Status: PASS Notes:		pt clear by property ov	vner as well.		
Dumpsters must be kept a minimun	of five feet from the	building and over	nands		
Dumpster fires can lead to building fires if th		-	lango		
Status: PASS Notes:					
Check Exits and Escape Route	es				-
The exit doors are easy to identify, Means of egress out of a building is mandat Status: PASS Notes:			x		
The exit doors all open from the ins	ide without keys or s	pecialist knowledg	8		
Doors must remain unlocked during busines					
Status: PASS Notes:					
There are no obstructions in exits, a A clear means of egress is critical in an eme Status: PASS Notes:			hways leading to an emergency	exit.	

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There is no storage of any kind beneath the exit stairs Stairways leading to an exit must remain free of combustible material. Status: PASS Notes:
The exit signs have a minimum of 6" high letters with a contrasting background and reflect/glow in the dark or are lighted. Lighted exit signs must work. Exit signs must be visible in the dark to aid in egress from the building. Status: PASS Notes:
Assess the Electrical System
The electrical receptacles all have covers. Plugs, switches, junction boxes. The terminals must be protected from accidental contact. Status: PASS Notes:
The circuits are all properly labelled on all panels Knowing which breaker leads to what area will protect occupants and firefighters in the event of an electrical emergency. Status: PASS Notes:
There is 30" wide, 36" deep and 78" high access/clearance in front of each electrical panel. In the event of an emergency crews need immediate access to the electrical panel Status: PASS Notes:
Extension cords are not used to power permanent fixtures Extension cords are for temporary use only Status: PASS Notes:
The extension cords are all grounded Carrying a ground conductor on portable equipment, if so equipped, offers protection for the end user. Status: PASS Notes:
All power strips in use have a built-in circuit breaker and are rated for such use. Power strips can be easily overloaded Status: PASS Notes:
All wiring is properly maintained in good condition and protected from damage. Wiring should be free from defects. Status: PASS Notes:

ltem # 5.

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Page 2 of 5

Heat Producing Devices and Appliances
Only UL listed heaters should be used, and not permanently UL verifies that equipment is rated for its intended use Status: PASS Notes:
Electrical portable heaters should have 36" of space on either side Air flow to the blower fan is critical to prevent overheating of the appliance Status: PASS Notes:
Gas-fired heat producing devices require a minimum of 36" clearance, or manufacturer recommended distance, whichever is greater, from combustibles Too close to combustibles, things will catch on fire. Status: PASS Notes:
Gas-fired heat producing devices should have vents Vents to the outside can help reduce/eliminate the build-up of carbon monoxide. Status: PASS Notes:
Light fixtures must be clear of any combustible materials Combustibles too close to a light fixture can heat up and ultimately catch on fire. Status: PASS Notes:
Inspect All Fire Extinguishers
There are fire extinguishers within 75' of all areas of the building One should not have to travel more than 75' to reach a fire extinguisher Status: PASS Notes:
The extinguishers are visible and readily accessible Where not readily seen, a fire extinguisher sign/sticker shall be placed high above the sticker to indicate its location. Status: PASS Notes:
The extinguishers meet the necessary standards and specialized ones are present also, if applicable (i.e., K for kitchen, CO2 for electronics) Most facilities will have dry chem extinguishers, but specialized businesses might need specialized extinguishers to protect their assets. Status: PASS Notes:
The extinguishers are stored off the floor but no higher than 5' off the floor, unless otherwise approved Extinguishers are to be mounted on a hanger or in a cabinet, that will indicate when an extinguisher is missing. Status: PASS Notes:

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All extinguishers have been inspected in the last 12-months. Annual inspections are required on fire extinguishers. Status: PASS Notes:
Assess The Maintenance of Building Areas
Trash and waste should be taken out daily A collection of trash and waste inside a building have led to unwanted fires or tripping hazards. Status: PASS Notes:
Oily rags or similar materials require disposal in approved metal containers Spontaneous combustion of mishandled oily rags can lead to fire Status: PASS Notes:
Combustible materials need to be stored securely and orderly The more orderly the storage area, the reduced chance of hidden/unwanted fire. Status: PASS Notes:
Exit paths do not have combustibles stored in their path A clean exit path is a safe exit path. Status: PASS Notes:
Storage height must be a minimum of 2 feet below ceiling height This aids the fire department when they must perform vertical ventilation to remove smoke from a building, to not only cut the hole without hitting product, but leaves room for the smoke to travel up and out. Status: PASS Notes:
Flammable liquids, greater than 5-gallons, are stored in an approved fire rated cabinet Protecting flammables will help prevent the unnecessary spread of fire, if one gets started. Status: PASS Notes:
Post and enforce "no smoking" signs in combustible or flammable areas (white lettering 3" tall on red backing). No smoking is necessary in areas where combustible or flammables are present. Status: PASS Notes:
Flammable liquids are all stored in approved containers There are specialized containers for flammable liquid storage. Status: PASS Notes:
Compressed gas cylinders are secured, standing up right, with cap in place Cylinders must be protected from falling Status: PASS Notes:

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Page 4 of 5

Additional Time Spent on Inspection:

3.94

Category

Summary:

Start Date / Time

Notes: No Additional time recorded

Total Additional Time: 0 minutes Inspection Time: 20 minutes Total Time: 20 minutes

End Date / Time

Overall Result: Pass

Passed all requirements

Inspector Notes: SAFI eligible

Inspector:

Name: 2023, SAFI Rank: Email(s): None on file

Printed on 01/31/24 at 11:46:26 Page 5 of 5



APPLICATION FOR Business License

ltem # 5.

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A Business License is required for ANY business to operate within the Cit completed. Incomplete applications sh	• •	ess License Appli	cation must be
License #: 1054		Da	te: <u>8-20-24</u>
☐ New Business ☐ Change of Ownership ☐ Change of		enewal Γ E	xpired
GENERAL INFORMATION			
Name of Business: Belzona Kocky Mountain	Inc.		
Physical Address: 4447 Charmers Stree	+ Mills	WУ	82604
Street		State	Zip
Mailing Address: PD Box 303	Mills City	State	82644
Business Phone Number: 307- 266-3644 WY Tax ID Nu	ımber: 10		—.P
Email Address: Office ObelzonarockyMountain.com Website:			in com
Description of Business: authorized distributor	ot Bel	zona	
Industrial coatings			
APPLICANT INFORMATION			
Applicant Name: Julie Grayson	F	hone Number:	307-266-3644
Mailing Address: 4447 Chalmers St.	Mills	ŴΫ	82604
Street	City	State	Zip
I certify that the above information is correct and true to the b	est of my know	vledge.	
Applicants Signature: Julie Agayse	-		
There will be a fire inspection fee to be paid at the time the Licen	ise is issued.		
Businesses that qualify for a Self-Assessment Fire Inspection	\$45.00		
Businesses between 1-5,000 Sq. Feet	\$75.00		
Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet	\$125.00 \$250.00		
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	\$250.00 + \$50.00		
Return completed form to:			
Mills City Hall		OFFICE	USEONLY
704 4 th Street Po Box 789		This license	was / was not
Mills, WY 82644		City Council	meeting of the Mills on the
307-234-6679		Attest	

Raelyn Stoneking

From:no-reply@livsafe.comSent:Thursday, August 22, 2024 6:42 PMTo:office@belzonarockymountain.com; Raelyn Stoneking; infoCc:info@livsafe.comSubject:Inspection Report has been submitted

EXTERNAL EMAIL: This email originated from outside of the City of Mills. Do not click any links or open any attachments unless you trust the sender and know the content is safe.



300 Lakeview Dr Mills, Wyoming 82604

Mills Fire Department (WY) c/o LIVSafe 445 E Chubbuck Rd, Ste A Chubbuck, ID 83202

FIRE INSPECTION REPORT COMPLIANCE

August 23, 2024

Belzona Rocky Mountain 4447 Chalmers St Mills, Wyoming 82604

Mills Fire Department (WY) has completed a Fire & Life Safety Inspection on this Premise. During the Inspection, **NO FIRE CODE VIOLATIONS** were observed.

We appreciate your efforts in keeping the business safe for employees and patrons.

Sincerely,

Wil Gay Mills Fire Department (WY)

RECEIVED

Item	#	5.

AUG 2 2 2024

CITY OF MILLS

APPLICATION FOR

Business License

A Business License is required for ANY business to oper		License Applicati	ion must be
License #: 9448	e applications shall be returned.	Deter	8/22/2024
License #: <u>1*1*10</u>		Date:	
☐ New Business ☐ Change of Ownership	☐ Change of Location X Ren	ewal 🗆 Expi	red
GENERAL INFORMATION			
Name of Business: Bonander Properties			
Physical Address: PO Box 1840 (935 Pendell Blvd	I - 2nd Floor) Mills, WY 8264	1	
Street	City	State	Zip
Mailing Address: PO Box 1840, Mills, WY 82644			
Street	City	State	Zĺp
Business Phone Number: 307-234-2058	WY Tax ID Number: 27-407934	41	
Email Address: accounting@inter-mountain.com	Website:		
Description of Business: Property management			
			<u> </u>
APPLICANT INFORMATION			
Applicant Name: Traci Young	Ph	one Number: <u>30</u>	7-234-2058
Mailing Address: PO Box 1840, Mills, WY 82644			
Street			
	City	State	Zip
l certify that the above information is correct a			Zip
I certify that the above information is correct a			Zip
I certify that the above information is correct and Applicants Signature:			Zip
	nd true to the best of my knowle		Zip
Applicants Signature:	nd true to the best of my knowle time the License is issued.		Zip
Applicants Signature: There will be a fire inspection fee to be paid at the Businesses that qualify for a Self-Assessment Fire Insp Businesses between 1-5,000 Sq. Feet	nd true to the best of my knowle time the License is issued. ection \$45.00 \$75.00		Zip
Applicants Signature: There will be a fire inspection fee to be paid at the Businesses that qualify for a Self-Assessment Fire Insp Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet	nd true to the best of my knowle time the License is issued. ection \$45.00 \$75.00 \$125.00		Zip
Applicants Signature: There will be a fire inspection fee to be paid at the Businesses that qualify for a Self-Assessment Fire Insp Businesses between 1-5,000 Sq. Feet	nd true to the best of my knowle time the License is issued. ection \$45.00 \$75.00 \$125.00 \$250.00		Zip
Applicants Signature: There will be a fire inspection fee to be paid at the Businesses that qualify for a Self-Assessment Fire Insp Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler System or Hood S	nd true to the best of my knowle time the License is issued. ection \$45.00 \$75.00 \$125.00 \$250.00		Zip
Applicants Signature: There will be a fire inspection fee to be paid at the Businesses that qualify for a Self-Assessment Fire Insp Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet	nd true to the best of my knowle time the License is issued. ection \$45.00 \$75.00 \$125.00 \$250.00	dge.	
Applicants Signature: There will be a fire inspection fee to be paid at the Businesses that qualify for a Self-Assessment Fire Insp Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler System or Hood S Return completed form to: Mills City Hall 704 4 th Street	nd true to the best of my knowle time the License is issued. ection \$45.00 \$75.00 \$125.00 \$250.00	dge.	ISE ONLY
Applicants Signature: There will be a fire inspection fee to be paid at the Businesses that qualify for a Self-Assessment Fire Insp Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler System or Hood S Return completed form to: Mills City Hall 704 4 th Street Po Box 789	nd true to the best of my knowle time the License is issued. ection \$45.00 \$75.00 \$125.00 \$250.00	dge. OFFICE U This license wa Granted at a me	ISE ONLY as / was not betting of the Mills
Applicants Signature: There will be a fire inspection fee to be paid at the Businesses that qualify for a Self-Assessment Fire Insp Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler System or Hood S Return completed form to: Mills City Hall 704 4 th Street	nd true to the best of my knowle time the License is issued. ection \$45.00 \$75.00 \$125.00 \$250.00	dge. OFFICE U This license wa	ISE ONLY as / was not eeting of the Mills the

FIRE B

Form: 2022 Annual Inspection

Mills Fire Department

Occupancy: Inter-Mountain Pipe & Threading Company Occupancy ID: 153 Address: 935 Pendell BLVD Mills WY 82604

Inspection Type: Yearly inspection Inspection Date: 4/18/2024 Time In: 13:30 Authorized Date: 04/18/2024

By: Dierenfeldt, John B (10) Time Out: **13:50** By: Dierenfeldt, John B (10)

Inspection Description:

2022 Annual Inspection

nspection Topics:	
xits	
Repair or maintain exit doors and hardware to operate properly.	
Vell maintained exit doors and panic hardware provide safe and easy egress from a building.	
Status: PASS Notes:	
Remove obstructions from exits, aisles, corridors, and stairways.	
Clear exit access is essential to prevent panic or accidental falling of occupants during evacuation.	
Status: PASS Notes:	
Remove storage from beneath exit stairs.	
tems stored beneath stairs present a fire risk that can endanger persons using that escape route.	
Status: PASS	
Notes:	

Unlock all exit doors during business hours.

Locked exit doors make it impossible for occupants to escape safely and quickly.

Status: PASS Notes:

Provide exit signs with letters at least 6 inches high on a contrasting background.

Clearly identified exits enable persons to quickly and safely leave the building in an emergency.

Status: PASS Notes:

Remove unapproved locks or latches from exit doors.

Exit doors must be free to open without delay in the event of an emergency.

Status: PASS Notes:

Exit Lighting

Repair lighted exit signs or emergency lighting.

Exit signs and emergency illumination are essential during evacuations. The exit sign will indicate to occupants the correct door to reach safely.

Status: PASS

Notes:

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Page 1 of 6

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81

Provide lighting for exits, aisles, corridors, and stairways. Table 1006.3.3(2) and occupancy classification Well lighted exit ways prevent panic, and provide safer egress for occupants. Status: PASS Notes:
Fire Extinguishers
Mount extinguishers where readily available, not more than 5 feet above floor. Extinguishers must be easily within reach of all occupants, but not where they will be subject to damage. Status: PASS Notes:
Post signs indicating location where extinguishers are not readily visible. Where extinguishers are not clearly visible, signs help occupants find the equipment in a hurry. Status: PASS Notes:
Portable fire extinguishers are due for annual maintenance on: Annual maintenance will provide for properly charge and serviced extinguishing devices, and assure proper operation if needed to fight a small fire. Status: PASS Notes:
Provideextinguisher(s), minimum size ofat location(s). Extinguishers provided need to be appropriate to the type of hazard. Status: PASS Notes:
Fire Protection Access and Equipment
KNOX Box verification Use KNOX key to open box and verify there is a key and it works Status: PASS Notes:
Install approved protective covers on fire department hose connection. Protective covers must be installed on the supply connection to prevent accumulations of debris that might inhibit the system feets effectiveness. Status: PASS Notes:
Provide and maintain smoke detectors in proper operating condition. The proper installation and maintenance of smoke detectors is of the utmost importance. In the event of a fire, they will notify occupants, and, in some cases, may automatically notify the Fire Department. Status: PASS Notes:
The X system(s) is/are due for confidence testing and certification. Please see the attached report. Life safety and fire protection equipment must be properly inspected and tested from time to time to assure its effective operation. Status: PASS Notes:

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ltem # 5.

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Maintain access to and operation of standpipes, fire hose, sprinkler valves, fire hydrants, fire extinguishers, and other fire protection equipment Fire protection equipment must have clear access and be operational at all times to be effective in an emergency. Status: PASS Notes:
Provided minimum 4 inches high address numbers so they are visible from the street. Address numbers are critical to help emergency personnel find people who may need some sort of aid. The numbers must contrast with their background for greatest visibility. Status: PASS Notes:
Remove obstructions and provide access in fire lanes. Large fire apparatus need room to effectively maneuver in the event of an emergency. Status: PASS Notes:
Fire Separations
Keep attic and scuttle covers closed, and ceiling tiles in place. Ceilings are an integral part of the building feets fire protection. If kept in place, the ceiling will protect roof structures from premature collapse. Status: PASS Notes:
Remove obstructions from fire doors and maintain to operate properly. Fire and smoke doors should not be blocked open or obstructed or fire and smoke will easily travel through the opening and cause excessive risk to life and property. Status: PASS Notes:
Seal unapproved openings with approved material. Flame, smoke, and hot gases can easily travel through holes and pipe chases, thus creating more damage and a hazard to occupants. Status: PASS Notes:
Housekeeping
6 month inspection record for hood/duct suppression system Need to provide the inspection sticker for having the hood maintained every 6 months. Status: PASS Notes:
Arrange storage in orderly manner to provide for exiting and fire department access. Good housekeeping makes an area safer for occupants and contributes less fuel to a fire. When storage is orderly, fire fighters can get fast access to minimize fire damage. Status: PASS Notes:
Remove or store rubbish, waste material, oily rags in closed metal containers. Safety containers for oily and greasy rags are designed to prevent spontaneous ignition of their contents. Other highly flammable wastes must be separated from sources of ignition. Status: PASS Notes:

ltem # 5.

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nem	#	υ.

Clean grease filters and hood/duct system over cooking equipment. Regular cleaning of the hood, duct, and filters will eliminate flammable grease build-up and provide proper ventilation of head through the exhaust outlet. Status: PASS Notes:
Provide approved waste containers for combustible waste. Heavy duty or metal containers are necessary to confine a fire in the receptacle to prevent if spreading to the building. Status: PASS Notes:
Remove storage to at least 18 inches below level of sprinklers (36 inches for storage piled over 12 feet high) Storage too close to a sprinkler will not allow the water spray to properly penetrate the fire and extinguish it. Status: PASS Notes:
Chain all compressed gas cylinders in an upright position and provide protective caps. Compressed gas cylinders, empty or full, can take off like a rocket in any direction if they fail and rupture. Nesting is allowed in certain occupancies Status: PASS Notes:
Boiler, mechanical, and electrical panel rooms shall not be used for storage. Combustible materials in these equipment rooms often get put too close to sources of heat and a fire will likely result. Status: PASS Notes:
Post and enforce 'No Smoking' signs. 'No Smoking' areas are designated because the use of smoking materials in those areas could cause a fire. Status: PASS Notes:
Reduce storage height to at least 2 feet below ceiling. In the even of a fire, fire fighters may need to open a hole in the roof to let heat and smoke out. Storage and other obstructions will prevent rapid ventilation efforts. Status: PASS Notes:
Move the dumpster at least 5 feet from the building or overhangs. Dumpsters are a common fire target of vandals. Moving the dumpster away will reduce the risk of a fire spreading to the building. Status: PASS Notes:
Flammable Liquids
Discontinue use of Class 1 liquids (gasoline, etc.) for cleaning. These liquids are highly volatile and can be easily ignited by sparks, pilot lights, or other sources of heat. Status: PASS Notes:
Storage in excess of 5 gallons shall be in an approved fire cabinet. In the event of a fire, flammable liquids can readily accelerate its spread. Confining the stored liquids to secure cabinets will limit this fire exposure. Status: PASS Notes:

Discontinue pouring from containers exceeding 5 gallons or provide pump taking suction from top. Larger flammable liquid containers are difficult to handle, and their contents are easily spilled. Pumps taking suction from the top restrict the amount likely to be discharged accidentally. Status: PASS Notes:
Store liquids away from exits, aisles, corridors, or stairways. The accelerating effect of flammable liquids in a fire can quickly make safe exit impossible. Status: PASS Notes:
Use only approved safety can for portable dispensing of flammable liquids. Safety containers for flammable or combustible liquids are designed to prevent flammable fumes from escaping or accidental spills. Status: PASS Notes:
Electrical
Discontinue use of extension cords in lieu of permanent wiring. Temporary wire does not afford the durability, safety, and protection from shock or fire that is found in the construction of an enclosed electrical system. Status: PASS Notes:
Maintain a minimum of 30 inches wide, 36 inches deep, and 78 inches high clearance in front of electrical panel. Access to electrical panels must be cleared to allow for general inspection and emergency shutdown. Status: PASS Notes:
Each outlet box shall have a cover faceplate or fixture canopy. Covers protect people from being shocked by exposed wires, prevent spread of electrical current, and heat and flame during short circuits. Status: PASS Notes:
Discontinue use of non-approved multi-plug adapters. Multi-plug adapters invite the overuse of the circuit that can result in overheating and a fire. Status: PASS Notes:
Maintain wiring in good condition and protect from damage. Worn or broken wires and plugs present a fire hazard and risk of electrical short circuit that can result in a fire. Status: PASS Notes:
Additional lime Spent on Inspection: Start Date / Time End Date / Time Category Start Date / Time End Date / Time
Notes: No Additional time recorded
Total Additional Time: 0 minutes Inspection Time: 20 minutes

Total Time: 20 minutes

ltem # 5.

Summary:

Overall Result: Pass

Passed all requirements

Inspector Notes:

Printed on 04/18/24 at 14:45:38

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APPLICATION FOR Business License

A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.

License #: 9405

Date:

🗋 New Business 🛛 Change of Ownership 🔲 Change of Location 🎾 Renewal 🔲 Expired

GENERAL INFORMATION	~		
Name of Business: CASPER DISCOUN	T STORA	6E	
Physical Address: 620 SALT CREE		_ WY_	82601
Street	City	State	Zip
Mailing Address:SAME		_	
Street	City	State	Zip
Business Phone Number (307) 767-2345 WY Tax II	D Number: NA		
Email Address: Cacer 7755 @HornAll.conWebsite:	CASPER DISCON	INT STOR	RE, COM
Description of Business: MINI 5CORAGE			
— ,			
	<u></u>		
APPLICANT INFORMATION			
Applicant Name: MARVIN CHRISTOPHERSON	Pi	none Number:_	
Mailing Address: 620 SALT CREEK	CASPER	w	82601
Street	City	State	Zip
I certify that the above information is correct and true to t	he best of my knowl	edge.	
Applicants Signature:		·	_
There will be a fire inspection fee to be paid at the time the L	icense is issued.		
Businesses that qualify for a Self-Assessment Fire Inspection	\$45.00		
Businesses between 1-5,000 Sq. Feet	\$75.00	PA	A I D

Businesses that quality for a Self-Assessment Fire Inspection\$45.00Businesses between 1-5,000 Sq. Feet\$75.00Businesses between 5,001-10,000 Sq. Feet\$125.00Businesses greater than 10,000 Sq. Feet\$250.00Businesses with Fire Alarm, Sprinkler System or Hood Suppression+ \$50.00

Return completed form to: Mills City Hall 720 4th Street 307-234-6679

OFFICE USE ONLY
This license was / was not
Granted at a meeting of the Mills
City Council on the
Attest

AUG 1 4 2024

Raelyn Stoneking

From:no-reply@livsafe.comSent:Tuesday, August 20, 2024 4:05 PMTo:racer77ss@hotmail.com; Raelyn Stoneking; infoCc:info@livsafe.comSubject:Inspection Report has been submitted

EXTERNAL EMAIL: This email originated from outside of the City of Mills. Do not click any links or open any attachments unless you trust the sender and know the content is safe.



300 Lakeview Dr Mills, Wyoming 82604

Mills Fire Department (WY) c/o LIVSafe 445 E Chubbuck Rd, Ste A Chubbuck, ID 83202

FIRE INSPECTION REPORT COMPLIANCE

August 20, 2024

Casper Discount Storage 620 Salt Creek Highway Casper, Wyoming 82601

Mills Fire Department (WY) has completed a Fire & Life Safety Inspection on this Premise. During the Inspection, **NO FIRE CODE VIOLATIONS** were observed.

We appreciate your efforts in keeping the business safe for employees and patrons.

Sincerely,

Wil Gay Mills Fire Department (WY)

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RECEIVED

JUL 18 2024

APPLICATION FOR Business License

ltem # 5.

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A Business License is required fo	r ANY business to operate with completed. Incomplete applic		s License Applica	tion must be
.icense #: <u>9823</u>			Date	PELLIL
		N .		
□ New Business □ 0	Change of Ownership 🛛 Ch	nange of Location 🛛 🖄 Rer	newal 🖾 Exp	bired
GENERAL INFORMATION				
lame of Business: ETO F	LINK LLC	·		
Physical Address: <u>305</u> Stre	an Horn Au	e Mills city		8 alocht
Aailing Address: <u>PO_ROX</u> Stre	QQ	<u> </u>	State	Salary
Business Phone Number	165-4214 WYT	ax ID Number: 93-11	78639	
Email Address: <u>WACDWW</u>	neelskaten webs	ite: toto WL	NSKat	e. com
Description of Business: Rol	ier skating	rink		
	۷ 	······································		
			27	57 21 7 21 6
pplicant Name: <u>L.L.S.C. Q</u>	na bo calin	Pho	one Number)1'001902
lailing Address: <u>+O_(+)</u> Stre	220	 City	U	Salouty_
		-		Zip ′
	$\sum_{n=1}^{\infty} \sum_{i=1}^{\infty} \sum_{j=1}^{\infty} \sum_{i=1}^{\infty} \sum_{i$	to the best of my knowled	age.	
Applicants Signature:	w Calim)	···.		
There will be a fire inspection	•	he License is issued.		
Businesses that qualify for a Self Businesses between 1-5,000 Sq. I	-	\$45.00 \$75.00	PA	ID
Businesses between 5,001-10,000		\$125.00	1111 4	0 1011
Businesses greater than 10,000 S	-	\$250.00	JUL 1	8 2024
Businesses with Fire Alarm, Sprin	kler System or Hood Suppres	sion + \$50.00		
Return completed form to:				
Mills City Hall 720 4 th Street				JSE ONLY
307-234-6679				eeting of the Mills
			City Council on	
~ ·	-		Attest	[
	89		L	

Raelyn Stoneking

From:	no-reply@livsafe.com
Sent:	Friday, August 16, 2024 3:12 PM
To:	info
Cc:	info@livsafe.com
Subject:	Inspection Report has been submitted
Follow Up Flag:	Follow up
Flag Status:	Flagged

EXTERNAL EMAIL: This email originated from outside of the City of Mills. Do not click any links or open any attachments unless you trust the sender and know the content is safe.



300 Lakeview Dr Mills, Wyoming 82604

Mills Fire Department (WY) c/o LIVSafe 445 E Chubbuck Rd, Ste A Chubbuck, ID 83202

FIRE INSPECTION REPORT COMPLIANCE

August 16, 2024

Wagon Wheel 305 Van Horn Ave Mills, Wyoming 82604

Mills Fire Department (WY) has completed a Fire & Life Safety Inspection on this Premise. During the Inspection, **NO FIRE CODE VIOLATIONS** were observed.

We appreciate your efforts in keeping the business safe for employees and patrons.

Sincerely,

Wil Gay Mills Fire Department (WY)

TECEIVED	• ·	
CITYOF MILLS EST. 1921	APPLICATION FOR Business License	ltem # 5.
A Business License is required for ANY business to operate within the City completed. Incomplete applications sho License #: 1039	Date: 723/24	
GENERAL INFORMATION Name of Business: JTEAM CASTOM SUGINES Physical Address: 621 JOH NSON DVE Street Mailing Address: POBOX 2526 Street Business Phone Number: 307 237 0939 WY Tax ID Nu Email Address: J2GOOD TOT OG MALLOM Website: M Description of Business: SNEWE REBUILDING	MILLS WY 82644 City State Zip MILLS WY 82644 City State Zip mber: 01006353	
APPLICANT INFORMATION Applicant Name: JERRY 1000000 Mailing Address: POBOX 2536 Street I certify that the above information is correct and true to the box Applicants Signature: JWOGOCO	Phone Number: <u>3072370</u> MULS WY 82644 City State Zip est of my knowledge.	€€€
There will be a fire inspection fee to be paid at the time the Licens Businesses that qualify for a Self-Assessment Fire Inspection Businesses between 1-5,000 Sq. Feet Businesses between 5,001-10,000 Sq. Feet Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler System or Hood Suppression	se is issued. \$45.00 \$75.00 \$125.00 \$250.00 + \$50.00	
Return completed form to: Mills City Hall 720 4 th Street 307-234-6679	OFFICE USE ONLY This license was / was not Granted at a meeting of the Mills City Council on the Attest	

91

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Raelyn Stoneking

From: Sent: To: Cc: Subject: no-reply@livsafe.com Friday, August 16, 2024 9:13 AM Raelyn Stoneking; info info@livsafe.com Inspection Report has been submitted

EXTERNAL EMAIL: This email originated from outside of the City of Mills. Do not click any links or open any attachments unless you trust the sender and know the content is safe.



300 Lakeview Dr Mills, Wyoming 82604

Mills Fire Department (WY) c/o LIVSafe 445 E Chubbuck Rd, Ste A Chubbuck, ID 83202

FIRE INSPECTION REPORT COMPLIANCE

August 16, 2024

J Team Custom Engines 621 Johnson Avenue Mills, Wyoming 82604

Mills Fire Department (WY) has completed a Fire & Life Safety Inspection on this Premise. During the Inspection, **NO FIRE CODE VIOLATIONS** were observed.

We appreciate your efforts in keeping the business safe for employees and patrons.

Sincerely,

Wil Gay Mills Fire Department (WY)

*	RECEIVED			
CITY OF MILLS EST. 1921	JUL 16 2024		ICATION FOR ness License	Item # 5.
A Business License is required for ANY busines	ss to operate within the Cit	y of Mills, a Business L	icense Application must b	е
License #: 9798	Incomplete applications sh	all be returned.	Date: 7-15	.24
☐ New Business ☐ Change of Ov	wnership 「Change of	Location IXRene	wal Expired	
GENERAL INFORMATION				
Name of Business:	es landros	nat		
Physical Address: 520 54	WY Slud	<u>M.[/s</u> City	<u>LY 826</u> State Zip	44
Mailing Address: <u>PO Sox A</u> Street	<u>633</u> C	<u>as fer</u> City	<u>Ley 826</u> State Zip	02
Business Phone Number: <u>301. 472. C</u>	<u> パク</u> WY Tax ID Nu	mber:88	· · ·	
Email Address: <u>Fresh duds 307 e.g</u>	Mail Website:	nillview lau	ndramat.com	n
Description of Business:	mat			
APPLICANT INFORMATION				
Applicant Name: Shawn	Patten	Phon	e Number:	513
Mailing Address: Po Sox 2	1633 C	esper	WY 82600	A
Street		/ City	State Zip	
I certify that the above information is of Applicants Signature:		est of my κποwledg	je.	
There will be a fire inspection fee to be pa	aid at the time the Licen	se is issued		
Businesses that qualify for a Self-Assessment		\$45.00	PAID	
Businesses between 1-5,000 Sq. Feet		\$75.00		
Businesses between 5,001-10,000 Sq. Feet		\$125.00	JUL 16 2024	
Businesses greater than 10,000 Sq. Feet Businesses with Fire Alarm, Sprinkler System	or Hood Suppression	\$250.00 + \$50.00		
Return completed form to:				ř
Mills City Hall		آ	OFFICE USE ONLY]
704 4 th Street Po Box 789			This license was / was not	
Mills, WY 82644			Granted at a meeting of the N City Council on the	
307-234-6679			A444	-

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Attest

Raelyn Stoneking

From:no-reply@livsafe.comSent:Monday, August 19, 2024 4:22 PMTo:freshduds307@gmail.com; Raelyn Stoneking; infoCc:info@livsafe.comSubject:Inspection Report has been submitted

EXTERNAL EMAIL: This email originated from outside of the City of Mills. Do not click any links or open any attachments unless you trust the sender and know the content is safe.



300 Lakeview Dr Mills, Wyoming 82604

Mills Fire Department (WY) c/o LIVSafe 445 E Chubbuck Rd, Ste A Chubbuck, ID 83202

FIRE INSPECTION REPORT COMPLIANCE

August 19, 2024

Millview Laundromat 520 Wyoming Boulevard Southwest Mills, Wyoming 82644

Mills Fire Department (WY) has completed a Fire & Life Safety Inspection on this Premise. During the Inspection, **NO FIRE CODE VIOLATIONS** were observed.

We appreciate your efforts in keeping the business safe for employees and patrons.

Sincerely,

Wil Gay Mills Fire Department (WY)



APPLICATION FOR Business License

A Business License is required for ANY business to operate within the City of Mills, a Business License Application must be completed. Incomplete applications shall be returned.

License #: 9902

Date: 06/17/2024

A New Business □ Change of Ownership □ Change of Location ☑ Renewal □ Expired

GENERAL INFORMATION

Name of Business: National Oilwell Varco, LP

Physical Address: 1080 N Robertson Road	Casper,	WY	82604-2105
Street	City	State	Zip
Mailing Address: 10353 Richmond Ave.	Houston,	ТΧ	77042-4103
Street	City	State	Zip
Business Phone Number: (307) 473-8888	WY Tax ID Number:01012477		<u> </u>
Email Address: NOVtax@nov.com	Website: WWW.NOV.COM		

Description of Business:

NAICS 333131 - Mining Machinery and Equipment Manufacturing

NAICS 333132 - Oil and Gas Field Machinery and Equipment Manufacturing

APPLICANT INFORMATION

Applicant Name:	Latonya S. Chase,	Manager/Sales	Tax Phor	ne Number:	(713) 634-3149
Mailing Address:	10353 Richmond Ave).	Houston,	ТХ	77042-4103
inaling / laar oool	Street		City	State	Zip
-	nat the above information is a		est of my knowled	ge.	

There will be a fire inspection fee to be	paid at the time the License is issued.

Businesses that qualify for a Self-Assessment Fire Inspection	\$45.00	PAID
Businesses between 1-5,000 Sq. Feet	\$75.00	FAIL
Businesses between 5,001-10,000 Sq. Feet	\$125.00	AUG 1 2 2024
Businesses greater than 10,000 Sq. Feet	\$250.00	AUU 1 2 2021
Businesses with Fire Alarm, Sprinkler System or Hood Suppression	+ \$50.00	

Return completed form to: Mills City Hall 720 4th Street 307-234-6679

OFFICE USE ONLY This license was / was not Granted at a meeting of the Mills City Council on the _____

|D

Attest .

ltem # 5.

Raelyn Stoneking

From:	no-reply@livsafe.com
Sent:	Tuesday, July 9, 2024 1:19 PM
То:	Raelyn Stoneking; John.holbrook@nov.com
Cc:	info@livsafe.com
Subject:	Inspection Report has been submitted
-	

Follow Up Flag: Flag Status: Follow up Flagged

EXTERNAL EMAIL: This email originated from outside of the City of Mills. Do not click any links or open any attachments unless you trust the sender and know the content is safe.



300 Lakeview Dr Mills, Wyoming 82604

Mills Fire Department (WY) c/o LIVSafe 445 E Chubbuck Rd, Ste A Chubbuck, ID 83202

FIRE INSPECTION REPORT COMPLIANCE

July 9, 2024

NOV Tuboscope 1080 Robertson Road Casper, Wyoming 82604

Mills Fire Department (WY) has completed a Fire & Life Safety Inspection on this Premise. During the Inspection, **NO FIRE CODE VIOLATIONS** were observed.

We appreciate your efforts in keeping the business safe for employees and patrons.

Sincerely,

Wil Gay Mills Fire Department (WY) NEVELVEL

AUG 0 6 2024



APPLICATION FOR

Business License

ltem # 5.

A Business License is required for ANY business to operate within the City of Mills, a Business completed. Incomplete applications shall be returned.	License Application must be
License #: <u>9849</u>	Date: 7.17.2024
☐ New Business ☐ Change of Ownership ☐ Change of Location K Rene	ewal F Expired
GENERAL INFORMATION	
Name of Business: USA Trucking, UC	
Physical Address: 5370 W. POISON Spieler Rol Card Street City	per, by 82600
Mailing Address: <u>PO BOK 40 Mills L</u> Street City	State Zip
Business Phone Number: 307. 266.3094 WY Tax ID Number:	
Email Address: CInita Quesatrucking Mullebsite:N/A	
Description of Business: Trucking & Warehawing of d	rilling myd
products.	0
Mailing Address: PO Box 40 mills Wy	ne Number <u>307, 266</u> , 3094
	State Zip
I certify that the above information is correct and true to the best of my knowled Applicants Signature: Diaman Anguation	ge.
There will be a fire inspection fee to be paid at the time the License is issued.	
Businesses that qualify for a Self-Assessment Fire Inspection \$45.00	
Businesses between 1-5,000 Sq. Feet \$75.00	PAID
Businesses between 5,001-10,000 Sq. Feet\$125.00Businesses greater than 10,000 Sq. Feet\$250.00	AUG 0 7 2024
Businesses with Fire Alarm, Sprinkler System or Hood Suppression + \$50.00	
Return completed form to:	2
Mills City Hall 704 4 th Street	OFFICE USE ONLY
Po Box 789	This license was / was not Granted at a meeting of the Mills
Mills, WY 82644 307-234-6679	City Council on the
97	Attest
51	

Raelyn Stoneking

From:no-reply@livsafe.comSent:Friday, August 9, 2024 3:33 PMTo:Raelyn Stoneking; Laramielegerski@gmail.com; infoCc:info@livsafe.comSubject:Inspection Report has been submitted

EXTERNAL EMAIL: This email originated from outside of the City of Mills. Do not click any links or open any attachments unless you trust the sender and know the content is safe.



300 Lakeview Dr Mills, Wyoming 82604

Mills Fire Department (WY) c/o LIVSafe 445 E Chubbuck Rd, Ste A Chubbuck, ID 83202

FIRE INSPECTION REPORT COMPLIANCE

August 9, 2024

USA Trucking 5370 Poison Spider Road Casper, Wyoming 82604

Mills Fire Department (WY) has completed a Fire & Life Safety Inspection on this Premise. During the Inspection, NO FIRE CODE VIOLATIONS were observed.

We appreciate your efforts in keeping the business safe for employees and patrons.

Sincerely,

Wil Gay Mills Fire Department (WY) Payment Approval Report - Mills WY Report dates: 8/14/2024-8/23/2024

Item # 6.

Aug 23, 2024 12:26PM

Report Criteria:

Detail report.

Invoices with totals above \$0.00 included.

Only paid invoices included.

[Report].Vendor Number = {<>} {AND} 380 {AND} 4910 {AND} 790 {AND} 1310 {AND} 1340 {AND} 2080 {AND} 4200 {AND} 4210 {AND} 5470 {AND} 5480 {AND} 5950 {AND} 6480 {AND} 7040 {AND} 7280 {AND} 6450 {AND} 7170 [Report].Vendor Number = {OR} {IS NULL}

Vendor	Vendor Name	Invoice Number	Invoice Date	Net Invoice Amount	Amount Paid	Date Paid	Last Check Date	Last Check Number	_
Advance Cas									
1040 Adva	nce Casper	01-154	08/02/2024	13,920.00	13,920.00	08/23/2024	08/23/2024	33097	
Total Ac	lvance Casper:			13,920.00	13,920.00				
All Out Fire, I	nc								
310 All O	ut Fire, Inc	MPD296	07/08/2024	47.00	47.00	08/23/2024	08/23/2024	33098	
Total Al	l Out Fire, Inc:			47.00	47.00				
ALSCO, Inc									
350 ALS0	CO, Inc	LCAS1611930	07/31/2024	75.55	75.55	08/23/2024	08/23/2024	33099	
Total AL	SCO, Inc:			75.55	75.55				
AMBI Mail & I	Marketing, Inc								
140 AMB	I Mail & Marketing, Inc	24-07-397	07/31/2024	54.03	54.03	08/23/2024	08/23/2024	33100	
140 AMB	I Mail & Marketing, Inc	MPD260	06/28/2024	97.28	97.28	08/23/2024	08/23/2024	33100	
Total AM	MBI Mail & Marketing, Inc:			151.31	151.31				
Atlas Office P	roducts, Inc								
620 Atlas	Office Products, Inc	012676-01	08/09/2024	79.80	79.80	08/23/2024	08/23/2024	33101	
	Office Products, Inc	012731-00	08/13/2024	119.23	119.23	08/23/2024	08/23/2024	33101	
620 Atlas	Office Products, Inc	012797-00	08/16/2024	50.38	50.38	08/23/2024	08/23/2024	33101	
Total At	las Office Products, Inc:			249.41	249.41				
Axon Enterpr	ise, Inc								
6080 Axon	Enterprise, Inc	00088872	08/01/2024	425.83	425.83	08/23/2024	08/23/2024	33102	
Total Ax	con Enterprise, Inc:			425.83	425.83				
B & B Rubber	· Stamp								
650 B&B	3 Rubber Stamp	124690	08/15/2024	88.64	88.64	08/23/2024	08/23/2024	33103	
Total B	& B Rubber Stamp:			88.64	88.64				
Banner Healtl	h								
7120 Bann	er Health	0724 MILLS FI	07/31/2024	172.87	172.87	08/23/2024	08/23/2024	33104	
Total Ba	anner Health:			172.87	172.87				
Big Horn Tire	, Inc.								
7983 Big H	lorn Tire, Inc.	76627	07/30/2024	311.15	311.15	08/23/2024	08/23/2024	33105	
Total Bi	g Horn Tire, Inc.:			311.15	311.15				
Bound Tree N									
840 Bour	d Tree Medical	85434413	07/30/2024	221.15	221.15	08/23/2024	08/23/2024	33106	

CITY OF MILLS

Payment Approval Report - Mills WY

Report dates: 8/14/2024-8/23/2024

Page: 2

Aug 23, 2024 12:26PM

Vendor	Vendor Name	Invoice Number	Invoice Date	Net Invoice Amount	Amount Paid	Date Paid	Last Check Date	Last Check Number
Tc	otal Bound Tree Medical:			221.15	221.15			
Casper 9	Star Tribune Inc							
-	Casper Star Tribune Inc	FD150BD1-001	07/29/2024	107.66	107.66	08/23/2024	08/23/2024	33107
1270	Casper Star Tribune Inc	FD150BD1-001	07/30/2024	95.04	95.04	08/23/2024	08/23/2024	33107
1270	Casper Star Tribune Inc	FD150BD1-001	08/02/2024	295.21	295.21	08/23/2024	08/23/2024	33107
1270	Casper Star Tribune Inc	FD150BD1-001	08/16/2024	41.79	41.79	08/23/2024	08/23/2024	33107
Tc	otal Casper Star Tribune Inc:			539.70	539.70			
City of C	Casper							
1510	City of Casper	5495	07/31/2024	1,740.00	1,740.00	08/23/2024	08/23/2024	33108
1510	City of Casper	626339	05/29/2024	1,303.50	1,303.50	08/23/2024	08/23/2024	33108
1510	City of Casper	627700	07/29/2024	748.50	748.50	08/23/2024	08/23/2024	33108
1510	City of Casper	627738	07/30/2024	1,137.00	1,137.00	08/23/2024	08/23/2024	33108
1510	City of Casper	627782	07/31/2024	886.50	886.50	08/23/2024	08/23/2024	33108
1510	City of Casper	627826	08/01/2024	735.75	735.75	08/23/2024	08/23/2024	33108
1510	City of Casper	627859	08/02/2024	555.00	555.00	08/23/2024	08/23/2024	33108
1510	City of Casper	627903	08/05/2024	788.25	788.25	08/23/2024	08/23/2024	33108
1510	City of Casper	627947	08/06/2024	1,197.00	1,197.00	08/23/2024	08/23/2024	33108
	City of Casper	627979	08/07/2024	945.00	945.00	08/23/2024	08/23/2024	33108
1510	City of Casper	628014	08/08/2024	717.75	717.75	08/23/2024	08/23/2024	33108
1510	City of Casper	628048	08/09/2024	672.00	672.00	08/23/2024	08/23/2024	33108
	City of Casper	628086	08/12/2024	701.25	701.25	08/23/2024	08/23/2024	33108
		628141	08/13/2024			08/23/2024	08/23/2024	33108
	City of Casper			1,111.50	1,111.50			
	City of Casper	628179	08/14/2024	941.25	941.25	08/23/2024	08/23/2024	33108
1510 1510	City of Casper City of Casper	628217 628245	08/15/2024 08/16/2024	685.50 570.75	685.50 570.75	08/23/2024 08/23/2024	08/23/2024 08/23/2024	33108 33108
Tc	otal City of Casper:			15,436.50	15,436.50			
Calling	Communications Inc							
	Communications, Inc Collins Communications, Inc	671227	08/01/2024	275.00	275.00	08/23/2024	08/23/2024	33109
Tc	otal Collins Communications, Inc:			275.00	275.00			
	nity First National Bank Community First National Bank	64297	07/03/2024	59,020.47	59,020.47	08/23/2024	08/23/2024	33110
Tc	otal Community First National Bank:			59,020.47	59,020.47			
Compute	er Professionals Unlimted							
7450	Computer Professionals Unlimted	INV126547	07/31/2024	209.97	209.97	08/23/2024	08/23/2024	33111
To	otal Computer Professionals Unlimted	d:		209.97	209.97			
Court Bo	ond							
7866	Court Bond	22534-1	08/23/2024	1,720.00	1,720.00	08/23/2024	08/23/2024	1901
7866	Court Bond	23018	08/14/2024	860.00	860.00	08/14/2024	08/23/2024	1901
Tc	otal Court Bond:			2,580.00	2,580.00			
CY Ace I	Hardware							
8185	CY Ace Hardware	070224	07/02/2024	58.46	58.46	08/23/2024	08/23/2024	33112
	CY Ace Hardware	071224						
8185		071224	07/12/2024	15.99	15.99	08/23/2024	08/23/2024	33112

Payment Approval Report - Mills WY

Report dates: 8/14/2024-8/23/2024

Page: 3

Aug 23, 2024 12:26PM

Vendor	Vendor Name	Invoice Number	Invoice Date	Net Invoice Amount	Amount Paid	Date Paid	Last Check Date	Last Check Number
	CY Ace Hardware CY Ace Hardware	3169/1 3183/1	07/22/2024 07/23/2024	65.94 202.96	65.94 202.96	08/23/2024 08/23/2024	08/23/2024 08/23/2024	33112 33112
Т	otal CY Ace Hardware:			409.29	409.29			
Fergus	on Enterprises LLC #3007							
-	Ferguson Enterprises LLC #3007	2870546	07/31/2024	26.61	26.61	08/23/2024	08/23/2024	33113
Т	otal Ferguson Enterprises LLC #3007:			26.61	26.61			
First St	ate Bank							
8097	First State Bank	081424	08/14/2024	1,036.35	1,036.35	08/14/2024	08/14/2024	33096
8097	First State Bank	081424	08/14/2024	10,000.00	10,000.00	08/14/2024	08/14/2024	33096
т	otal First State Bank:			11,036.35	11,036.35			
Hach C	ompany							
2950	Hach Company	14119589	07/24/2024	677.24	677.24	08/23/2024	08/23/2024	33114
Т	otal Hach Company:			677.24	677.24			
Hawkin	s Inc							
3040		6783915	06/15/2024	60.00	60.00	08/23/2024	08/23/2024	33115
3040		6837240	08/15/2024	30.00	30.00	08/23/2024	08/23/2024	33115
Т	otal Hawkins Inc:			90.00	90.00			
Homax								
3120	Homax	0682441-IN	08/15/2024	248.26	248.26	08/23/2024	08/23/2024	33116
3120	Homax	CL28722	07/31/2024	2,957.99	2,957.99	08/23/2024	08/23/2024	33116
3120	Homax	CL28722-1	07/31/2024	122.46	122.46	08/23/2024	08/23/2024	33116
3120	Homax	CL28723	07/31/2024	767.66	767.66	08/23/2024	08/23/2024	33116
Т	otal Homax:			4,096.37	4,096.37			
InstaCa	re Center of Casper, Inc							
3320	InstaCare Center of Casper, Inc	2808	07/31/2024	135.00	135.00	08/23/2024	08/23/2024	33117
Т	otal InstaCare Center of Casper, Inc:			135.00	135.00			
Law Of	fice of Stephanie M Arrache							
	Law Office of Stephanie M Arrach	MILLS06	08/22/2024	8,392.50	8,392.50	08/23/2024	08/23/2024	33118
т	otal Law Office of Stephanie M Arrach	e:		8,392.50	8,392.50			
MES M	unicipal							
4290		IN2088487	07/22/2024	1,474.11	1,474.11	08/23/2024	08/23/2024	33119
4290	MES Municipal	IN2095124	08/01/2024	360.00	360.00	08/23/2024	08/23/2024	33119
Т	otal MES Municipal:			1,834.11	1,834.11			
	Auto Parts							
	NAPA Auto Parts	072924	07/29/2024	45.48	45.48	08/23/2024	08/23/2024	33120
4600	NAPA Auto Parts	080524	08/05/2024	9.77	9.77	08/23/2024	08/23/2024	33120
4600	NAPA Auto Parts	148743	07/24/2024	10.44	10.44	08/23/2024	08/23/2024	33120

ltem # 6.

CITY OF MILLS

Payment Approval Report - Mills WY

Report dates: 8/14/2024-8/23/2024

Page: 4

Aug 23, 2024 12:26PM

Vendor	Vendor Name	Invoice Number	Invoice Date	Net Invoice Amount	Amount Paid	Date Paid	Last Check Date	Last Check Number
Tota	al NAPA Auto Parts:			65.69	65.69			
Natrona C	ounty Sheriffs Office							
	latrona County Sheriffs Office	5158	07/30/2024	17,684.10	17,684.10	08/23/2024	08/23/2024	33121
Tota	al Natrona County Sheriffs Office:			17,684.10	17,684.10			
Norco, Inc	:							
4760 N	lorco, Inc	41250924	07/29/2024	153.57	153.57	08/23/2024	08/23/2024	33122
4760 N	lorco, Inc	41293667	07/31/2024	14.26	14.26	08/23/2024	08/23/2024	33122
Tota	al Norco, Inc:			167.83	167.83			
Quadient,	Inc							
	Quadient, Inc	61263633	08/04/2024	297.11	297.11	08/23/2024	08/23/2024	33123
Tota	al Quadient, Inc:			297.11	297.11			
-	untain Drug Testing							
	Rocky Mountain Drug Testing	6687	08/06/2024	470.00	470.00	08/23/2024	08/23/2024	33124
7495 R	Rocky Mountain Drug Testing	6687	08/06/2024	250.00	250.00	08/23/2024	08/23/2024	33124
Tota	al Rocky Mountain Drug Testing:			720.00	720.00			
Rocky Mo	untain Power							
-	Rocky Mountain Power	073124	07/31/2024	2.19	2.19	08/23/2024	08/23/2024	33125
5560 R	Rocky Mountain Power	082224	08/01/2024	3,586.96	3,586.96	08/23/2024	08/23/2024	33125
5560 R	Rocky Mountain Power	082224	08/01/2024	9,479.31	9,479.31	08/23/2024	08/23/2024	33125
5560 R	Rocky Mountain Power	082224	08/01/2024	8,437.29	8,437.29	08/23/2024	08/23/2024	33125
Tota	al Rocky Mountain Power:			21,505.75	21,505.75			
Shirts & M	lore, Inc							
5820 S	hirts & More, Inc	43461	08/21/2024	188.00	188.00	08/23/2024	08/23/2024	33126
Tota	al Shirts & More, Inc:			188.00	188.00			
Sutherland	ds							
6050 S	Sutherlands	032478	07/19/2024	42.99	42.99	08/23/2024	08/23/2024	33127
6050 S	outherlands	032821	07/30/2024	23.46	23.46	08/23/2024	08/23/2024	33127
Tota	al Sutherlands:			66.45	66.45			
Trans Unio	on Risk & Alternative							
	rans Union Risk & Alternative	233312-20240	08/01/2024	75.00	75.00	08/23/2024	08/23/2024	33128
Tota	al Trans Union Risk & Alternative:			75.00	75.00			
-	neering Inc	2024-10521	08/08/2024	10 101 60	10 101 60	08/23/2024	08/23/2024	33129
	VLC Engineering Inc VLC Engineering Inc	2024-10521 2024-10523	08/08/2024	12,191.63 3,069.00	12,191.63 3,069.00	08/23/2024	08/23/2024	33129
	VLC Engineering Inc	2024-10525	08/08/2024	1,456.00	1,456.00	08/23/2024	08/23/2024	33129
	VLC Engineering Inc	2024-10535	08/08/2024	2,254.75	2,254.75	08/23/2024	08/23/2024	33129
	VLC Engineering Inc	2024-10536	08/08/2024	1,924.00	1,924.00	08/23/2024	08/23/2024	33129



ltem # 6.

TY OF MILL	S			Approval Report - N ates: 8/14/2024-8/2				Page: 5 Aug 23, 2024 12:26PM	
endor	Vendor Name	Invoice Number	Invoice Date	Net Invoice Amount	Amount Paid		Last Check Date	Last Check Number	
Total W	/LC Engineering Inc:			20,895.38	20,895.38	_			
Grand T	rotals:			182,087.33	182,087.33	-			
Dated:									
	:								
City Council:	:								
-	:								
	:								
City Council:	:								
epartment H	leads:								
									-
Report Criteria Detail repo Invoices w		luded.							

5950 {AND} 6480 {AND} 7040 {AND} 7280 {AND} 6450 {AND} 7170 [Report].Vendor Number = {OR} {IS NULL}



ACH TRANSACTIONS

8-27-24

Date	Payor	AMOUNT
8/28/2024	Hub International Mountain State Limited	\$ 62,064.00
8/28/2024	307 Billing Services, LLC	\$ 2,000.00
	Total:	\$ 64,064.00



PAYROLL

Meeting Date:	Au	gust 27, 2024
Payroll Type:		Fire
Date Range:	7-3	0-24 to 8-10-24
Net:	\$	19,929.04
Deductions:	\$	5,398.15
Federal Taxes:	\$	1,509.00
Medicare:	\$	273.65
Retirement:	\$	2,241.02
Union Dues	\$	192.50
Child Support:	\$	-
Insurance:	\$	1,073.36
Supplemental Retirement:	\$	81.42
Supplemental Insurance:	\$	27.20
TOTAL PAYROLL:	\$	14,530.89

City Clerk, Sarah Osborn

Mayor, Leah Juarez





PAYROLL

Meeting Date:	Aug	gust 27, 2024
Payroll Type:		Fire
Date Range:	8-1	1-24 to 8-22-24
Net:	\$	19,808.39
Deductions:	\$	5,399.92
Federal Taxes:	\$	1,503.00
Medicare:	\$	271.88
Retirement:	\$	2,227.45
Union Dues	\$	192.50
Child Support:	\$	-
Insurance:	\$	1,073.36
Supplemental Retirement:	\$	81.42
Supplemental Insurance:	\$	27.20
TOTAL PAYROLL:	\$	14,408.47

City Clerk, Sarah Osborn

Mayor, Leah Juarez



VOIDED CHECKS

8-27-24

CHECK #	DATE	PAYOR	AMOUNT
1899	8/14/2024	Jasmine Grinde-Barrera	\$2,040.00

Total: \$ 2,040.00

ltem # 12.

LOCAL GOVERNMENT PROJECT ARPA GRANTS RESOLUTION RESOLUTION 2024-33

Entitled: A RESOLUTION AUTHORIZING SUBMISSION OF AN LOCAL GOVERNMENT PROJECT ARPA GRANTS APPLICATION TO THE STATE LOAN AND INVESTMENT BOARD ON BEHALF OF THE GOVERNING BODY FOR THE CITY OF MILLS

FOR THE PURPOSE OF: Finished water storage tank; COVID/inflationary cost increases

WITNESSETH

WHEREAS, the Governing Body for the City of Mills desires to participate in the LOCAL GOVERNMENT PROJECT ARPA GRANT program to assist in financing this request; and

WHEREAS, the Governing Body for the City of Mills recognizes the need for the request; and

WHEREAS, the Local Government Project ARPA Grant program requires that certain criteria be met, as described in the State Loan and Investment Board's Rules and Regulations governing the program, and to the best of our knowledge this application meets those criteria; and

WHEREAS, if any of the disbursed grant funds are later deemed to not comply with the SLIB criteria or the criteria of the American Rescue Plan Act (ARPA), the grant applicant agrees to repay the ineligible grant funds within 15 days of such finding to the Office of State Lands and Investments.

NOW, THEREFORE, BE IT RESOLVED BY THE GOVERNING BODY OF THE CITY OF MILLS that a grant application in the amount of \$442,260.00 be submitted to the State Loan and Investment Board for consideration at the next Board meeting after application processing to assist in funding the City of Mills Finished Water Storage Tank

BE IT FURTHER RESOLVED, that Sabrina Kemper, Community Development Director and Matt Williams, City Engineer are hereby designated as the authorized representatives of the City of Mills to act on behalf of the Governing Body on all matters relating to this grant application.

1 ASSED , AT I KOVED AND ADOT TED TITS uay of, 202°	PASSED	, APPROVED AND A	DOPTED THIS	day of	, 2024.
--	--------	------------------	--------------------	--------	---------

BY:

Mayor, Leah Juarez

Councilman, Sara McCarthy

Councilman, Cherie Butcher

Councilman, Tim Sutherland

Councilman, Brad Neumiller

ATTEST:

City Clerk

OFFICE OF STATE LANDS AND INVESTMENTS Local Government Project ARPA Grants Certification Statement

WHEREAS, the Governing Body for the

City of Mills

Hereby certifies that the funding being applied for under the LOCAL GOVERNMENT PROJECT ARPA GRANTS program will be used in accordance with all requirements and conditions of the ARPA, 2022 Wyo. Sess. Laws Ch. 50, and this Chapter. If it is determined that the funds were not used as intended, the recipient shall refund disbursed funds to the Office within fifteen (15) Business Day following notification

Furthermore, it is certified that I have read the information on evidence based interventions and project demographic distributions. If my project has either denotation, I have included the requirements and the dollar amount of the total project spending that is allocated towards evidence based interventions and/or project demographic distribution in the verbiage of the project description.

BE IT FURTHER RESOLVED, that

Sabrina Kemper, Community Development Director, N	Mike Coleman,	City Administrator,	Matt Williams,	City	Engineer
(Name and Title of Person(s))					

are hereby designated as the authorized representatives of the City of Mills

to act on behalf of the Governing Body on all matters relating to this grant application.

PASSED, APPROVED AND ADOPTED THIS

	day of			
(Date)		(Month)	(Year)	
		(Si	ignature)	
		Leah Juar	ez, Mills Mayor	
		(Nam	e and Title)	
Attest:				

(Signature) Sarah Osborn, City Clerk (Name and Title)

Cel ¹⁰⁹ or