

Item # 8G
Date: 8/12/24

BEER AND/OR LIQUOR RENEWAL CERTIFICATE OF INSPECTION

This application will be on the _____ Council Agenda

Business Name TE Aldermans Phone Number _____

Address _____

Manager's Name _____ Phone Number _____

Address _____

Owners Name _____ Phone Number _____

Address _____

I hereby certify that the premises where the above applicant intends to operate pursuant to a beer or liquor license has been inspected by the undersigned and that on the date of the inspection the premises (conforms/did not conform) to all applicable fire regulations of the City of Nevada and the State of Iowa.

The Fire Department recommends approval denial of a beer or liquor license to this business.

8-7-24
Date

RAIZ
FIRE INSPECTOR AND/OR BUILDING INSPECTOR

COMMENTS/OR REASONS IF DENIED: (Write on back or another sheet if needed)

NOTE: Fire alarm part to arrive this week
will call R. Hutton for public occupancy



State of Iowa

Alcoholic Beverages Division

Applicant

NAME OF LEGAL ENTITY	NAME OF BUSINESS(DBA)	BUSINESS		
PLEIS FARMS, LLC	T.E.ALDERMAN'S			
ADDRESS OF PREMISES	PREMISES SUITE/APT NUMBER	CITY	COUNTY	ZIP
1133 6TH ST	BLDG	NEVADA	STORY	50201
MAILING ADDRESS	CITY	STATE	ZIP	
1029 10TH ST	NEVADA	Iowa	502011912	

Contact Person

NAME	PHONE	EMAIL
MARK PLEIS	6412758002	mark@pleisfarms.com

License Information

LICENSE NUMBER	LICENSE/PERMIT TYPE	TERM	STATUS
	Class C Retail Alcohol License	12 Month	Submitted to Local Authority

TENTATIVE EFFECTIVE DATE	TENTATIVE EXPIRATION DATE	LAST DAY OF BUSINESS
May 1, 2024	Apr 30, 2025	

SUB-PERMITS

Class C Retail Alcohol License

