

Item # 5E
Date: 7/14/25

BEER AND/OR LIQUOR RENEWAL CERTIFICATE OF INSPECTION

This application will be on the July 14, 2025 Council Agenda

Business Name Dollar Fresh 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.

7-7-25
Date

[Signature]
FIRE INSPECTOR AND/OR BUILDING INSPECTOR

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

1) No Proof of Sprinkler inspection
2) Storage Blocking sprinkler riser.
Will address w/ corporate.



State of Iowa

Alcoholic Beverages Division

Applicant

NAME OF LEGAL ENTITY	NAME OF BUSINESS(DBA)	BUSINESS		
HY-VEE, INC.	Hy-Vee Dollar Fresh	(515) 267-2800		
ADDRESS OF PREMISES	PREMISES SUITE/APT NUMBER	CITY	COUNTY	ZIP
1622 Fawcett Parkway		Nevada	Story	50201
MAILING ADDRESS	CITY	STATE	ZIP	
5820 Westown Parkway	West Des Moines	Iowa	50266	

Contact Person

NAME	PHONE	EMAIL
Katie Nylen	(515) 267-2800	knylen@hy-vee.com

License Information

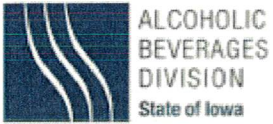
LICENSE NUMBER	LICENSE/PERMIT TYPE	TERM	STATUS
LE0003758	Class E Retail Alcohol License	12 Month	Submitted to Local Authority

TENTATIVE EFFECTIVE DATE	TENTATIVE EXPIRATION DATE	LAST DAY OF BUSINESS
Aug 10, 2025	Aug 9, 2026	

SUB-PERMITS

Class E Retail Alcohol License

PRIVILEGES



State of Iowa

Alcoholic Beverages Division

DRAM CANCEL DATE

OUTDOOR SERVICE EFFECTIVE
DATE

OUTDOOR SERVICE EXPIRATION
DATE

BOND EFFECTIVE DATE

TEMP TRANSFER EFFECTIVE
DATE

TEMP TRANSFER EXPIRATION
DATE

05/14/2021
27,397 sq. ft.

