



# VILLAGE OF FRIENDSHIP

P.O. BOX 206

Soda \$5.00

FRIENDSHIP, WI 53934

Phone (608) 339-3243 FAX: (608) 339-4763

## SODA LICENSE APPLICATION for the Licensing Period of 7/1/26 through 6/30/27

TO THE GOVERNING BODY of the VILLAGE OF FRIENDSHIP, County of ADAMS

CHECK ONE: \_\_\_\_\_ Individual \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation

### Complete A or B:

A. Individual or Partnership:

Full Name (s)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Mailing Address

B. Full Name of Corporation: \_\_\_\_\_

(if different from licensed premises)

All Officers & Directors:

Title

Name

Home Address

Post Office

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

Agent \_\_\_\_\_

### Complete C:

C. Trade Name \_\_\_\_\_ Business Phone ( ) \_\_\_\_\_

Address of Premises \_\_\_\_\_

DATE: \_\_\_\_\_

\_\_\_\_\_  
Individual / Partner / President of Corporation