

2020 LIQUOR LICENSE RENEWAL APPLICATION  
SECOND CLASS LICENSE TO SELL MALT AND VINOUS BEVERAGES

9313-003-SECN-001

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License Year Beginning May 1, 2020 ending April 30, 2021

Fee: \$140.00 of which  
\$70.00 is paid to town/city  
\$70.00 is paid to LLC  
Town: 04085 - WINOOSKI

MISREPRESENTATION OF A MATERIAL FACT ON ANY LICENSE APPLICATION SHALL BE GROUNDS  
FOR SUSPENSION OR REVOCATION OF THE LICENSE, AFTER NOTICE AND HEARING

Applicant: Review all of the information presented on this form, indicating any changes in the spaces provided.

Applicant: Twelve Acres, LLC  
Doing Business As:  
Shafer's Market and Deli  
65 Winooski Falls Way  
Winooski VT 05404  
Telephone: (802) 655-5003

Licensee # 9313- 3

Mailing Address:  
65 Winooski Falls Way  
Winooski VT 05404

PLEASE INCLUDE EMAIL ADDRESS: Shafer'smarket@gmail.com

Description of Premises:

Store on the main floor of a multi level building consisting of the space on the south west corner of the building. Located as 65 Winooski Falls Way, situated on the north east corner of the intersection of Cascade Way and Winooski Falls Way in the City of Winooski, Vermont.

Lessor:

HK Central Block Limited  
Winooski VT 05404

Last Enforcement Seminar: 03/28/2019

Filed Articles of Organization: Yes

Date Filed: 03/02/2017

Federal ID Number: 82-1050255

Majority of Members are US Citizens: Yes

ATTACH AN ADDITIONAL SHEET TO THIS APPLICATION NOTING ANY NECESSARY CORRECTIONS OR CHANGES AND UPDATES THAT HAVE OCCURRED DURING THE PAST YEAR.

Limited Liability

Company	Name	Address	Town/City	State	Zip Code
Member	1. Shafer, Adam	2168 River Road	New Haven	VT	05472
Member	2. Shafer, Jennifer	2168 River Road	New Haven	VT	05472

Has any person been convicted or pleaded guilty to any criminal or motor vehicle offense in any court of law (including traffic tickets by mail) during the last year? Yes No

If yes, please attach the following information: Individual's name, court/traffic bureau, offense and date

In the past year has any person held any elective or appointive state, county, city, village or town office in Vermont (See VSA, T.7, Ch.9, Sec. 223)? Yes No

If yes, please attach the following information: Individual's name, office and jurisdiction

Disclosure of Non-profit Organization?: Yes XX No

ALL APPLICANTS MUST COMPLETE AND SIGN

The applicant understands and agrees that the Liquor and Lottery Control Board may obtain criminal history record information from State and Federal record repositories.

I/We hereby certify, under the pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan approved by the Commissioner of Taxes to pay any and all taxes due the State of Vermont as of the date of this application. (VSA, Title 32, Section 3113)

I/We hereby certify that I/We are not under an obligation to pay child support or that I/We are in good standing with respect to child support or are in full compliance with a plan to pay any and all child support payable under a support order. (VSA, Title 15, Section 795)

In accordance with 21 VSA, Section 1378(b), I/We certify, under pains and penalties of perjury, that I/We are in good standing with respect to or in full compliance with a plan to pay any and all contributions or payments in lieu of contributions due to the Department of Employment and Training.

I/We have registered the trade name of these premises with the Secretary of State.

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I/We hereby certify that the information in this application is true and complete.

Dated this 29 day of April, 2020

Signature of authorized agent  
of corporation, company, club or association

Signature of individual or partners

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Edwin Stroh*  
*Angela Stroh*

(Title)

Are you making this application for the benefit of any other party?  Yes  No

LOCAL COMMISSIONER SECTION BELOW

Upon being satisfied that the conditions precedent to the granting of this license as provided in Title 7 of the Vermont Statutes Annotated, as amended, have been fully met by the applicant, the commissioners will endorse their recommendation on the back of the application and transmit it to the Liquor and Lottery Control Board for suitable action thereon, before any license may be granted. For the information of the Liquor and Lottery Control Board, applications shall carry the signature of each individual commissioner registering either approval or disapproval.

APPROVED

DISAPPROVED

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved by Board of Control Commissioners of the City or Town of \_\_\_\_\_.

Total Membership \_\_\_\_\_, \_\_\_\_\_ members present Attest, \_\_\_\_\_, Town Clerk

TOWN OR CITY CLERK SHALL MAIL APPROVED RENEWAL DIRECTLY TO:  
DIVISION OF LIQUOR CONTROL  
13 GREEN MOUNTAIN DRIVE  
MONTPELIER, VT 05602

If application is disapproved, local control commissioners shall notify the applicant by letter.

No formal action taken by any agency or authority of any town board of selectmen or city board of aldermen on a first or second class license application shall be considered binding except as taken or made at an open public meeting. VSA T-1, Sec. 312



**City of Winooski**  
Vermont's Opportunity City

27 West Allen Street  
Winooski, Vermont 05404  
802 655 6410  
winooski.vt.gov

**Restaurant License Application**  
City Clerk's Office

Please submit this application with any related applications (liquor licenses, etc.)  
and a check for \$25.00 (registration fee) to:

City of Winooski  
27 West Allen Street  
Winooski, VT 05404

**Restaurant Information**

Shafer's Market & Deli:  
Name 65 Winooski Falls Way  
Address Winooski VT 05404  
Hours of Operation 7am-7pm (7 days a week)

**Owner Information**

Name(s) Adam Shafer/Jennifer Stocker  
Residential Address 2168 River Rd New Haven VT 05472  
Phone 802-349-4467  
Email Shafermarket@gmail.com

Print Name Adam Shafer Title Owner

Signature [Signature] Date 4/29/2020

