WOODBURY COUNTY BOARD OF SUPERVISORS AGENDA ITEM(S) REQUEST FORM

	wording for agenda item: Consideration and approval for liquor license for Foot Wedge Lounge, Sloan, Iowa								
	ACTION REQUIRED:								
	Approve Ordinance	Approve Resolution □	Approve Motion ☑						
	Public Hearing	Other: Informational	Attachments 🗹						
1	EXECUTIVE SUMMARY:								
a	·		·						
			_						
	BACKGROUND:								
a									
	FINANCIAL IMPACT:								
	FINANCIAL IMPACT:								
nkr	own at this time	ED IN THE AGENDA ITEM, HAS THE EVIEW BY THE COUNTY ATTORNEY	CONTRACT BEEN SUBMITTED AT LEAST S OFFICE?	ONE WEEK					
nkr	own at this time			ONE WEEK					
nkr	F THERE IS A CONTRACT INVOLVERIOR AND ANSWERED WITH A R			ONE WEEK					
nkr	F THERE IS A CONTRACT INVOLV PRIOR AND ANSWERED WITH A R			ONE WEEK					
nkr	F THERE IS A CONTRACT INVOLV PRIOR AND ANSWERED WITH A R Ves			ONE WEEK					

Approved by Board of Supervisors April 5, 2016.

Office Of The AUDITOR/RECORDER Woodbury County Michelle K. Skaff, Ph.D. Auditor/Recorder/ Commissioner of Elections



Courthouse – Room 103 620 Douglas Sioux City, IA 51101

Phone: (712) 279-6702 Fax (712) 279-6629 miskaff@woodburycountyiowa.gov

To:

Board of Supervisors

From:

Michelle K. Skaff, Auditor & Recorder

Date:

March 12, 2025

Subject:

Liquor License Application for the Foot Wedge Lounge, Sloan, Iowa.

Please approve and receive for signature, an application for a 8-month, Class C Retail Alcohol License (LC) (Commercial), with Outdoor Service privileges, for the Foot Wedge Lounge, Sloan, Iowa. The license would be effective 04/01/25 through 12/01/25.



State of lowa Alcoholic Beverages Division

Applicant

NAME OF LEGAL ENTITY

NAME OF BUSINESS(DBA)

BUSINESS

SLOAN COMMUNITY RECREATION CORPORATION

Foot Wedge Lounge

(712) 490-7034

ADDRESS OF PREMISES

PREMISES SUITE/APT NUMBER

CITY

COUNTY

ZIP

3212 Old Highway 75

Sloan

Woodbury

51055

MAILING ADDRESS

CITY

STATE

ZIP

PO Box 425

Sloan

lowa

51055

Contact Person

NAME

PHONE

EMAIL

Jake Goodin

(712) 490-7034

jake.goodin@goodinins.com

License Information

LICENSE NUMBER

LICENSE/PERMIT TYPE

TERM

STATUS

Class C Retail Alcohol License

8 Month

Submitted to Local Authority

TENTATIVE EFFECTIVE DATE

TENTATIVE EXPIRATION DATE

LAST DAY OF BUSINESS

Apr 1, 2025

Dec 1, 2025

SUB-PERMITS

Class C Retail Alcohol License



State of lowa Alcoholic Beverages Division

PRIVILEGES

Outdoor Service

Status of Business

BUSINESS TYPE

Nonprofit corporation organized under chapter 504.

Ownership

Individual Owners

NAME	CITY	STATE	ZIP	POSITION	% of ownership	U.S. CITIZEN
Jacob Goodin	Sergeant Bluff	lowa	51054	President	0.00	Yes

Insurance Company Information

INSURANCE COMPANY

POLICY EFFECTIVE DATE

POLICY EXPIRATION DATE

Illinois Casualty Co

Apr 1, 2025

Dec 1, 2025

DRAM CANCEL DATE

OUTDOOR SERVICE EFFECTIVE

OUTDOOR SERVICE EXPIRATION

DATE

DATE

BOND EFFECTIVE DATE

TEMP TRANSFER EFFECTIVE

TEMP TRANSFER EXPIRATION

DATE

DATE