Device Retailer License Review

CITY OF COUNCIL BLUFFS
1909373801

Application Information

Legal Ownership Information

Name of sole proprietor, partnership, corporation, LLC, or LLP : CB SMOKE SHOP LLC
Type of ownership : Limited Liability Company
Primary office address : 20 POWER DR STE 6 COUNCIL BLUFFS IA 51501-7701
Legal Ownership Phone : 402-686-9822
Legal Ownership Email : OMAHATOBACCO@GMAIL.COM

Application Information

Sales Permit Number: : 302703725
Location Name : CB SMOKE SHOP LLC
Location Phone Number : 712-796-3868
Location Address : 20 POWER DR STE 6 COUNCIL BLUFFS IA 51501-7701
Location Mailing Address : 4891 F ST OMAHA NE 68117-1406
Renewal : No
Start Date : 02-Jul-2025
End Date : 30-Jun-2026
License Fee : 1,500.00
Types of Sales : Over the Counter
Type of Establishment : Tobacco store
Does this retail location ensure that no person younger than 21 years of age is present or permitted to enter at any time? : Yes

Corporate Officers

Title	Name	Address
Authorized Individual	ALANNSI, BALEEGH	12112 S 48TH ST PAPILLION NE 68133-2899

Decision

Select the decision of whether you approve or deny this permit application.

Iowa Department of Revenue will be issuing a permit number if this application is approved. However, the local authority has the option to also issue a permit number. If the local authority decides to issue a local permit number, it can be entered in the "Local Permit Number" field. Otherwise, only the state-issued permit number will appear on the permit.

Does this retailer hold a valid retail tobacco permit at this location?

Yes	No

Select a Decision

Approve	Deny

Device Retailer License Review

CITY OF COUNCIL BLUFFS
1909373801

Application Information

Legal Ownership Information

Name of sole proprietor, partnership, corporation, LLC, or LLP : GREENSTAR GLASS AND GOODIES INC

Type of ownership : Corporation

Primary office address : 531 VETERANS MEMORIAL HWY COUNCIL BLUFFS IA 51501-8419

Legal Ownership Phone : 712-314-3268

Legal Ownership Email : rossplum@icloud.com

Application Information

Sales Permit Number: : 178027220

Location Name : GREENSTAR GLASS & GOODIES INC

Location Phone Number : 712-828-4449

Location Address : 531 VETS MEMORIAL HWY COUNCIL BLFS IA 51501

Location Mailing Address : 531 VETS MEMORIAL HWY COUNCIL BLUFFS IA 51501-8424

Renewal : No

Start Date : 07-Jul-2025

End Date : 30-Jun-2026

License Fee : 1,500.00

Types of Sales : Over the Counter

Type of Establishment : Alternative nicotine/vapor store

Does this retail location ensure that no person younger than 21 years of age is present or permitted to enter at any time? : Yes

Corporate Officers

Title	Name	Address
Authorized Individual	PLUM, ROSS	104 GOLDEN CIRCLE DR COUNCIL BLUFFS IA 51503-5500

Decision

Select the decision of whether you approve or deny this permit application.

Iowa Department of Revenue will be issuing a permit number if this application is approved. However, the local authority has the option to also issue a permit number. If the local authority decides to issue a local permit number, it can be entered in the "Local Permit Number" field. Otherwise, only the state-issued permit number will appear on the permit.

Does this retailer hold a valid retail tobacco permit at this location?

Yes	No

Select a Decision

Approve	Deny

Device Retailer License Review

CITY OF COUNCIL BLUFFS
1909373801

Application Information

Legal Ownership Information

Name of sole proprietor, partnership, corporation, LLC, or LLP : TFL INC
Type of ownership : Corporation
Primary office address : 202 S 73RD ST OMAHA NE 68114-4616
Legal Ownership Phone : 402-399-5377
Legal Ownership Email : alyssa@megasaver.com

Application Information

Sales Permit Number: : 301506324
Location Name : MEGA SAVER
Location Phone Number : 712-323-7765
Location Address : 1749 W BROADWAY COUNCIL BLUFFS IA 51501-3822
Location Mailing Address : 202 S 73RD ST OMAHA NE 68114-4616
Renewal : No
Start Date : 01-Jul-2025
End Date : 30-Jun-2026
License Fee : 1,500.00
Types of Sales : Over the Counter
Type of Establishment : Convenience store/gas station
Does this retail location ensure that no person younger than 21 years of age is present or permitted to enter at any time? : Yes

Corporate Officers

Title	Name	Address
Authorized Individual	SAMIEV, ABDURASHID	202 S 73RD ST OMAHA NE 68114-4616
Authorized Individual	SAMIEV, KAMOL	202 S 73RD ST OMAHA NE 68114-4616

Decision

Select the decision of whether you approve or deny this permit application.

Iowa Department of Revenue will be issuing a permit number if this application is approved. However, the local authority has the option to also issue a permit number. If the local authority decides to issue a local permit number, it can be entered in the "Local Permit Number" field. Otherwise, only the state-issued permit number will appear on the permit.

Does this retailer hold a valid retail tobacco permit at this location?

Yes	No

Select a Decision

Approve	Deny

Device Retailer License Review

CITY OF COUNCIL BLUFFS
1909373801

Application Information

Legal Ownership Information

Name of sole proprietor, partnership, corporation, LLC, or LLP : TFL INC
Type of ownership : Corporation
Primary office address : 202 S 73RD ST OMAHA NE 68114-4616
Legal Ownership Phone : 402-399-5377
Legal Ownership Email : alyssa@megasaver.com

Application Information

Sales Permit Number: : 178025865
Location Name : MEGA SAVER
Location Phone Number : 712-265-2126
Location Address : 3540 W BROADWAY COUNCIL BLFS IA 51501-3212
Location Mailing Address : 202 S 73RD ST OMAHA NE 68114-4616
Renewal : Yes
Start Date : 01-Jul-2025
End Date : 30-Jun-2026
License Fee : 1,500.00
Types of Sales : Over the Counter
Type of Establishment : Convenience store/gas station
Does this retail location ensure that no person younger than 21 years of age is present or permitted to enter at any time? : Yes

Corporate Officers

Title	Name	Address
Authorized Individual	SAMIEV, ABDURASHID	202 S 73RD ST OMAHA NE 68114-4616
Authorized Individual	SAMIEV, KAMOL	202 S 73RD ST OMAHA NE 68114-4616

Decision

Select the decision of whether you approve or deny this permit application.

Iowa Department of Revenue will be issuing a permit number if this application is approved. However, the local authority has the option to also issue a permit number. If the local authority decides to issue a local permit number, it can be entered in the "Local Permit Number" field. Otherwise, only the state-issued permit number will appear on the permit.

Does this retailer hold a valid retail tobacco permit at this location?

Yes	No

Select a Decision

Approve	Deny

Device Retailer License Review

CITY OF COUNCIL BLUFFS
1909373801

Application Information

Legal Ownership Information

Name of sole proprietor, partnership, corporation, LLC, or LLP	: T.F.G.A., LLC
Type of ownership	: Limited Liability Company
Primary office address	: 3607 9TH AVE COUNCIL BLUFFS IA 51501-5633
Legal Ownership Phone	: 402-399-5377
Legal Ownership Email	: alyssa@megasaver.com

Application Information

Sales Permit Number:	: 178027205
Location Name	: MEGA SAVER
Location Phone Number	: 712-796-3494
Location Address	: 3607 9TH AVE COUNCIL BLFS IA 51501
Location Mailing Address	: 202 S 73RD ST OMAHA NE 68114-4616
Renewal	: Yes
Start Date	: 01-Jul-2025
End Date	: 30-Jun-2026
License Fee	: 1,500.00
Types of Sales	: Over the Counter
Type of Establishment	: Convenience store/gas station
Does this retail location ensure that no person younger than 21 years of age is present or permitted to enter at any time?	: Yes

Corporate Officers

Title	Name	Address
Authorized Individual	SAMIEV, KAMOL	202 S 73RD ST OMAHA NE 68114-4616

Decision

Select the decision of whether you approve or deny this permit application.

Iowa Department of Revenue will be issuing a permit number if this application is approved. However, the local authority has the option to also issue a permit number. If the local authority decides to issue a local permit number, it can be entered in the "Local Permit Number" field. Otherwise, only the state-issued permit number will appear on the permit.

Does this retailer hold a valid retail tobacco permit at this location?

Yes	No

Select a Decision

Approve	Deny

Device Retailer License Review

CITY OF COUNCIL BLUFFS
1909373801

Application Information

Legal Ownership Information

Name of sole proprietor, partnership, corporation, LLC, or LLP	: FROEHLICH, RODNEY
Type of ownership	: Sole Proprietor
Primary office address	: 2034 N 64TH ST OMAHA NE 68104-4714
Legal Ownership Phone	: 712-323-0404
Legal Ownership Email	: froehlich@centurylink.net

Application Information

Sales Permit Number:	: 178026429
Location Name	: PHEROMONES GLASS & GIFTS LLC
Location Phone Number	: 402-913-5386
Location Address	: 1417 W BROADWAY STE B COUNCIL BLFS IA 51501
Location Mailing Address	: 2034 N 64TH ST OMAHA NE 68104-4714
Renewal	: Yes
Start Date	: 01-Jul-2025
End Date	: 30-Jun-2026
License Fee	: 1,500.00
Types of Sales	: Over the Counter
Type of Establishment	: Tobacco store
Does this retail location ensure that no person younger than 21 years of age is present or permitted to enter at any time?	: Yes

Corporate Officers

Title	Name	Address

Decision

Select the decision of whether you approve or deny this permit application.

Iowa Department of Revenue will be issuing a permit number if this application is approved. However, the local authority has the option to also issue a permit number. If the local authority decides to issue a local permit number, it can be entered in the "Local Permit Number" field. Otherwise, only the state-issued permit number will appear on the permit.

Does this retailer hold a valid retail tobacco permit at this location?

Yes	No

Select a Decision

Approve	Deny

Device Retailer License Review

CITY OF COUNCIL BLUFFS
1909373801

Application Information

Legal Ownership Information

Name of sole proprietor, partnership, corporation, LLC, or LLP : JERUSALEM PETROLUM LLC DBA SPEEDY G

Type of ownership : Corporation

Primary office address : 430 S 35TH ST STE 1 COUNCIL BLUFFS IA 51501-3295

Legal Ownership Phone : 402-917-6675

Legal Ownership Email : plusautollc@hotmail.com

Application Information

Sales Permit Number: : 178025299

Location Name : SPEEDY GAS N SHOP

Location Phone Number : 712-256-3473

Location Address : 430 S 35TH ST STE 1 COUNCIL BLFS IA 51501-3295

Location Mailing Address : 430 S 35TH ST STE 1 COUNCIL BLUFFS IA 51501-3295

Renewal : No

Start Date : 01-Jul-2025

End Date : 30-Jun-2026

License Fee : 1,500.00

Types of Sales : Over the Counter

Type of Establishment : Convenience store/gas station

Does this retail location ensure that no person younger than 21 years of age is present or permitted to enter at any time? : No

Does this retail location provide an age-restricted area and ensure that no devices are visible to those under 21 years of age? : Yes

Corporate Officers

Title	Name	Address
Authorized Individual	HALE, ALEX	430 S 35TH ST STE 1 COUNCIL BLUFFS IA 51501-3295
Authorized Individual	FARRA, ALBERT	430 S 35TH ST STE 1 COUNCIL BLUFFS IA 51501-3295

Decision

Select the decision of whether you approve or deny this permit application.

Iowa Department of Revenue will be issuing a permit number if this application is approved. However, the local authority has the option to also issue a permit number. If the local authority decides to issue a local permit number, it can be entered in the "Local Permit Number" field. Otherwise, only the state-issued permit number will appear on the permit.

Does this retailer hold a valid retail tobacco permit at this location?

Yes | No

Select a Decision

Approve | Deny

Local Permit Number (Optional):

Date Permit Was Approved By Council Or Board

09-Jun-2025

Device Retailer License Review

CITY OF COUNCIL BLUFFS
1909373801

Application Information

Legal Ownership Information

Name of sole proprietor, partnership, corporation, LLC, or LLP : VAPEOLOGY SMOKE SHOP LLC

Type of ownership : Limited Liability Company

Primary office address : 1531 2ND AVE COUNCIL BLUFFS IA 51501-3908

Legal Ownership Phone : 402-686-9822

Legal Ownership Email : omahatobacco@gmail.com

Application Information

Sales Permit Number: : 302307821

Location Name : VAPEOLOGY SMOKE SHOP

Location Phone Number : 712-352-0153

Location Address : 1531 2ND AVE COUNCIL BLUFFS IA 51501-3908

Location Mailing Address : 4891 F ST OMAHA NE 68117-1406

Renewal : No

Start Date : 02-Jul-2025

End Date : 30-Jun-2026

License Fee : 1,500.00

Types of Sales : Over the Counter

Type of Establishment : Tobacco store

Does this retail location ensure that no person younger than 21 years of age is present or permitted to enter at any time? : Yes

Corporate Officers

Title	Name	Address
Authorized Individual	NAGI, ABDULMALEK	4891 F ST OMAHA NE 68117-1406

Decision

Select the decision of whether you approve or deny this permit application.

Iowa Department of Revenue will be issuing a permit number if this application is approved. However, the local authority has the option to also issue a permit number. If the local authority decides to issue a local permit number, it can be entered in the "Local Permit Number" field. Otherwise, only the state-issued permit number will appear on the permit.

Does this retailer hold a valid retail tobacco permit at this location?

Yes	No

Select a Decision

Approve	Deny

Device Retailer License Review

CITY OF COUNCIL BLUFFS
1909373801

Application Information

Legal Ownership Information

Name of sole proprietor, partnership, corporation, LLC, or LLP	: BROADWAY SMOKE SHOP LLC
Type of ownership	: Limited Liability Company
Primary office address	: 305 E BROADWAY COUNCIL BLUFFS IA 51503-4415
Legal Ownership Phone	: 402-686-9822
Legal Ownership Email	: omahatobacco@gmail.com

Application Information

Sales Permit Number:	: 309703011
Location Name	: VIP SMOKE SHOP
Location Phone Number	: 712-796-4579
Location Address	: 305 E BROADWAY COUNCIL BLUFFS IA 51503-4415
Location Mailing Address	: 430 CONNER GRANT RD NEW BERN NC 28562-9813
Renewal	: No
Start Date	: 02-Jul-2025
End Date	: 30-Jun-2026
License Fee	: 1,500.00
Types of Sales	: Over the Counter
Type of Establishment	: Tobacco store
Does this retail location ensure that no person younger than 21 years of age is present or permitted to enter at any time?	: Yes

Corporate Officers

Title	Name	Address
Authorized Individual	ALAHDAL, HEITHAM	4891 F ST OMAHA NE 68117-1406

Decision

Select the decision of whether you approve or deny this permit application.

Iowa Department of Revenue will be issuing a permit number if this application is approved. However, the local authority has the option to also issue a permit number. If the local authority decides to issue a local permit number, it can be entered in the "Local Permit Number" field. Otherwise, only the state-issued permit number will appear on the permit.

Does this retailer hold a valid retail tobacco permit at this location?

Yes	No

Select a Decision

Approve	Deny