

Applicant

[Help](#)

Name of Legal Entity : CENTER GROVE ORCHARD INC

Business Name (DBA) : CENTER GROVE ORCHARD INC

Business Type : Corporation

Insurance Company : FARM BUREAU FINANCIAL SERVICES

Premises Address

Street : 32835
610TH AVE

Suite/Apt :

City : CAMBRIDG
E

County : STORY

State : IOWA

ZIP : 50046-
8554

Mailing Address

Street : 32835
610TH AVE

Suite/Apt :

City : CAMBRIDG
E

County : STORY

State : IOWA

ZIP : 50046-
8554

Application Information

Application ID : 0-010-104-204

Application Type : Special Class "C" Retail Alcohol License (BW) Application

Current Stage : Dramshop Review

Effective Date : 15-May-2026

Expiration Date : 14-Jan-2027

Contact Information

Name : SHANNON ZEISER

Phone Number : (515) 383-4354

Email : shannon@centergroveorchard.com

ⓘ Application history that predates November of 2022 is not accessible online. Please make a Public Records Request for this information.

Application History

Application ID	Application Type	Stage	Date
0-010-104-204	Special Class "C" Retail A Dramshop Revie		10-Mar-2026
0-010-104-204	Special Class "C" Retail A New		10-Mar-2026

Ownership

Name : BLACK, STEVEN

% of Ownership : 100.0000

Position :