

Part A: Producer Information

1. Business Legal Name (individual name if sole proprietor) Ope Brewing Company		
2. Business Name or DBA		3. Agent Name John Onopa
4. FEIN [REDACTED]		5. Wisconsin Seller's Permit Number 456-1030484705-04
6. Wisconsin Producer Permit Number BR-WI-21286		7. Producer Type ☒ Brewery ☐ Winery ☐ Liquor Manufacturer/Rectifier
8. Contact Person's First Name John		9. Last Name Onopa
		10. M.I. P
11. Contact Person's Phone [REDACTED]		12. Contact Person's Email john@opebrewingco.com

Part B: Production Quantity

Note: Check appropriate quantity for permit held (see instructions). If you hold more than one producer permit, check the total aggregate quantity produced for each type of permit. Enter the highest quantity produced in any of the last three calendar years.

Brewery	Manufacturer/Rectifier	Winery
☐ Less than 250 barrels ☒ 250 - 2,499 barrels ☐ 2,500 - 7,499 barrels ☐ 7,500 or more barrels	☐ Less than 1,500 liters ☐ 1,500 - 4,999 liters ☐ 5,000 - 34,999 liters ☐ 35,000 or more liters	☐ Less than 1,000 gallons ☐ 1,000 - 4,999 gallons ☐ 5,000 - 24,999 gallons ☐ 25,000 or more gallons
Calendar year: 2025	Calendar year:	Calendar year:
Quantity: 1895 BBL	Quantity:	Quantity:

Complete only ONE of Part C, D or E.**Part C: Request for Full-Service Retail Sales at the Production Premises**

1. Start Date 07/18/2026		2. Production Premises Address 1932 W. College Ave	
3. City Appleton		4. State WI	5. Zip Code 54914
6. County Outagamie		7. Governing Municipality ☒ City ☐ Town ☐ Village of: <u>Appleton</u>	

Part D: Request for Fixed Full-Service Retail Outlet

1. Are you transferring one fixed full-service retail outlet to a new location? ☐ Yes ☒ No If yes, complete boxes 2 through 9.			
2. Current Outlet Name			
3. Current Outlet Premises Address			
4. City		5. State	6. Zip Code
7. County	8. Governing Municipality ☐ City ☐ Town ☐ Village of: _____		9. Premises Phone Number

Continued →

Part D: Request for Fixed Full-Service Retail Outlet (Cont.)**New Fixed Retail Outlet Information (complete boxes 10 through 23)**

10. Start Date 07/18/2026		11. New Outlet Name Ope! North - Ope Brewing Company	
12. New Outlet Premises Address 1932 W. College Avenue			
13. City Appleton		14. State WI	15. Zip Code 54914
16. County Outagamie	17. Governing Municipality ☒ City ☐ Town ☐ Village of: Appleton		18. Premises Phone Number [REDACTED]
19. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary. Please see Attached description and diagram. Sales will occur in buildings 2, 3 and 4 (once the project is fully complete. There are multiple permits for occupancy) Products will primarily be stored in the cooler (bldg 3), and ea bar. Consumption will occur in buildings 2, 3 and 4 and in between the buildings, on patios, near volleyball courts, on			
20. Will you operate a restaurant on the premises?..... ☐ Yes ☒ No			
21. What alcohol beverages will be offered for sale? (check all that apply) ☒ Beer ☒ Wine ☒ Intoxicating Liquor (other than wine)			
22. What alcohol beverages does the permittee produce? (check all that apply) ☒ Beer ☐ Wine ☐ Intoxicating Liquor (other than wine)			
23. How will customers be served? (check all that apply) ... ☒ Samples ☒ On-premises consumption ☒ Off-premises consumption			

Part E: Request for Unlimited Transfer Full-Service Retail Outlet

1. Name of Event (if applicable)		
2. Dates of Operation (attach a schedule, if necessary)		3. Hours of Operation
4. Premises Address		
5. City		6. State 7. Zip Code
8. County		9. Governing Municipality ☐ City ☐ Town ☐ Village of:
10. Organizer of Event (if not the named applicant)		11. Email and/or Phone Number for Organizer of Event
12. Organizer Website		13. Event Website
14. Premises Description - Describe the building or buildings and any outside areas where alcohol beverages are produced, sold, stored, or consumed, and related records are kept. Describe all rooms within the building, including living quarters. Authorized alcohol beverage activities and storage of records may occur only on the premises described in this application. Attach a map or diagram and additional sheets if necessary.		
15. On-Site Contact (Last Name, First Name)		16. On-Site Contact Phone 17. On-Site Contact Email
18. Will you operate a restaurant on the premises?..... ☐ Yes ☐ No		
19. What alcohol beverages will be offered for sale? (check all that apply) ☐ Beer ☐ Wine ☐ Intoxicating Liquor (other than wine)		
20. What alcohol beverages does the permittee produce? (check all that apply) ☐ Beer ☐ Wine ☐ Intoxicating Liquor (other than wine)		
21. How will customers be served? (check all that apply) ... ☐ Samples ☐ On-premises consumption ☐ Off-premises consumption		

Part F: Attestation

Who must sign this application?

- sole proprietor
- general partner of a partnership
- corporate officer
- member of an LLC

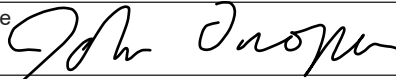
READ CAREFULLY BEFORE SIGNING:

I understand and agree to the following:

- I will not operate this location outside of the dates and times approved by the municipality and Division of Alcohol Beverages.
- I will operate this location according to municipal ordinance and restrictions imposed as a condition of receiving this authorization.
- I will purchase alcohol beverages I do not produce from an authorized source, such as a Wisconsin-permitted wholesaler.
- I will operate this location according to Wisconsin law and administrative regulation including but not limited to: underage restrictions, closing hours, licensed operators, and record keeping requirements.

Further, under penalty of law, I have answered each of the above questions completely and truthfully. I agree that I am acting solely on behalf of the applicant business and not on behalf of any other individual or entity seeking the authorization. Further, I agree that the rights and responsibilities conferred by the authorization, if granted, will not be assigned to another individual or entity. I understand that lack of access to any portion of a premises during inspection will be deemed a refusal to allow inspection. Such refusal is a misdemeanor and grounds for revocation of this authorization. I understand that any authorization issued contrary to Wis. Stats. Chapter 125 shall be void under penalty of Wisconsin law. I further understand that I may be prosecuted for submitting false statements and affidavits in connection with this application, and that any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000 if convicted.

Signature



Date

07/08/2026

Last Name

Onopa

First Name

John

M.I.

P

Title

Owner

Email

john@opebrewingco.com

Phone

**Part G: For Municipal Use Only (Complete if Requesting Authorization in Part D or E)**1. Will the municipality limit the scope of alcohol beverages offered for sale? ☐ Yes ☐ No2. Will the municipality impose any requirements or restrictions for the full-service retail outlet? ☐ Yes ☐ No

3. Describe municipal restrictions indicated in questions 1 or 2 above.

4. Last Name of Municipal Official

5. First Name

6. M.I.

7. Signature of Municipal Official

8. Date

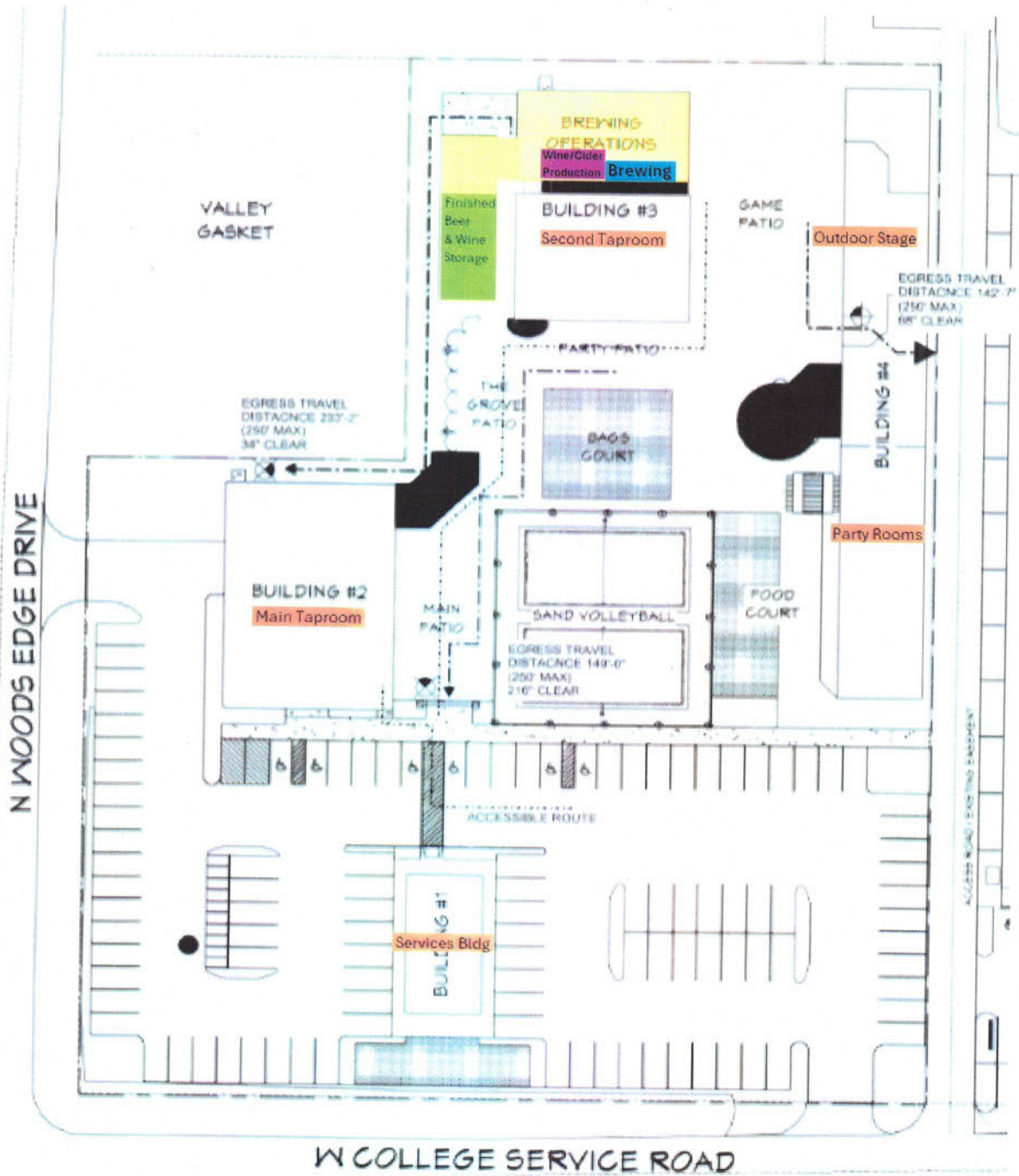
9. Date Application was Filed with Clerk

7/10/2026

10. Date Full-Service Retail Outlet Approved by Governing Body

Ope North Brewery & Winery Site Layout

Operations in the north building, taxpaid finished goods storage in adjoining cooler



Building 1 will be a services building

Dog Wash & nail trimming in the southern half. Three separate rooms with a restroom.

Commercial kitchen with take-out window in the northern half. Closet for utilities.

Building 2 is the main taproom

Restrooms near the SW corner. IT closet, utilities, office and merch storage to the NW corner, full service bar to the NE corner and general seating in the middle areas.

Building 3 is a combination of connected structures.

Beer cooler to the west - storage of finished products in the two southern sections. Utilities and storage in the northern third.

Second taproom with full service bar and banquet seating to the southeast. Restrooms in the northwest corner.

Rooftop patio with open seating areas, and bar service near the southwest corner.

Northern structure houses a one bedroom apartment with living room and bathroom to the northwest corner. General storage and production spaces along the south wall.

Building 4 will include multiple activities / functions including -

Passthrough garage at the north end, connecting to the alley along the east property boundary.

Outdoor stage projecting to the West, to the pickleball courts.

Green Room for bands to the Southeast corner of the stage.

Arcade room south of the green room.

Outdoor giant bobber structure (shaded black) to the west of the main structure, which houses restrooms and a full service bar.

Party room in the southern half of the main structure, generally open, with bar games.

Courtyard - sand volleyball, cornhole, fowling, and pickleball courts.