

"meeting community needs
.....enhancing quality of life"

## FEES ARE NON-REFUNDABLE

License Fee - \$10.00 per event investigation Fee + 7.00

Total Amount Paid \_\_\_\_\_\_

Date Rec'd 5/4/23
Acct Code: CLCSPB

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Acct Code: CLCPIF

Receipt 5005~5

## Application for Temporary Class "B" Beer or "Class B" Wine License

*Application MUST be on file for 10 days prior to event, please allow 2-3 weeks for processing*					
The named organization applies for: (Please check one or both)					
A temporary Class "B" license to sell FERMENTED MALT BEVERAGES at picnics or similar gathering under s. 125.26(6) Wis. Stats.					
A temporary "Class B" license to sell WINE at picnics or similar gathering under s. 125.51(10) Wis. Stats. (Limit 2 licenses in a 12 month period)					
SECTION 1 – ORGANIZATION INFORMATION – Answer all questions completely. Please PRINT clearly					
Name of Organization (Bona fide club, lodge or society, veteran's organization or fair association)  Date Organized					
Fox Valley Vietnam Veterans 150c. 7-1983					
Address		City	State	Zip	4
120 N. Morrison St		Appleton	<u>ωŢ</u>	549	52
Person in Charge of Event: Name: Last		First	M. I.	Date of Birth	
Address City State Zip Person in charge phone number: 5495 REDACTED					
				1	
Address 11100 1100 1100 First	<u> Bob</u>	fiddle Initial	Date of Birth REDACTED	Male	Female
Vice President Last First First	λ	City PO etch	State W/		Female
talk	<u> Don "</u>		REDACTED	Male	remate
SLO Claire U/		City Appleto	State W	Zip	4915
Secretary Last Willarms First	Jop.	Middle Initial	Date of Birth REDACTED	Male	Female
Address Call Verne Rd		Pirenasha	State		952
Tréasurer Last Wilhams First	Jue A	Middle Initial	Date of Birth	Male	Female
Address	11	City	State	Zip	
SECTION 2 – EVENT INFORMATION SECTION					
Date(s) of Event: Beginning 08/03/23 Ending: 08/00/23 Hours \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\					
Please describe the type of event you are going to have: FYLL YNUSIC FUSTIVAL OLD HOLD (SUNCAL PUBLIC					
Do you plan to serve food at this event? No Yes If yes, contact the Appleton Health Department. (920.832.6429)					
Location where beer or wine will be sold or served:  LALLY & NO LANGE STAGE					
Address	(11)	City	State	Zip	<u> </u>
Describe actual location and dimensions of area	111	1779 1500		154	111
to be licensed below:- BE PRECISE!	) V	Vill minors be present?		No	(Yes)
FULLY MAIN	II	If yes, how will you prevent minors from obtaining alcoholic			
Stable beverages? whistbands with. D. Drink tickets and lisensed v				au, e.v A Voor	ieruz. Trinida
SECTION 3 – PENALTY SECTION					
This application must be on file in the Office of the City Clerk for at least ten (10) business days prior to granting the license.					
If the event will last more than four (4) days, the application shall be filed 15 days prior to the granting of the license.  This organization also agrees to comply with all laws, resolutions, ordinances and regulations (state, federal or local) affecting the sale of fermented malt beverages if the					
license is granted. The officer(s) of the organization, individually any together, declare under penalties of law that the information provided in this application is true and					
correct to the best of their knowledge and belief.					
Signature of Officer					
FOR OFFICE USE ONLY					
Dept. Approve Deny By		Reason			
Police					
Fire					
Health					
Inspection Date Issued		Eva Data	I Liaguaga Niversi		