



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

* Concerts

FEES ARE NON-REFUNDABLE	Date Rec'd <u>5/13/21</u>
License Fee - \$10.00 per event <u>14</u>	Acct. 11030.4322
Investigation Fee + 7.00	Acct. 100.2359
Total Amount Paid <u>147-</u>	Receipt <u>2109-1</u>

Application for Special Class "B" License to Sell Fermented Malt Beverages at Picnics or Gatherings

The named organization applies for:							
<input checked="" type="checkbox"/> A temporary Class "B" license to sell FERMENTED MALT BEVERAGES at picnics or similar gathering under s. 125.26(6) Wis. Stats.							
<input checked="" type="checkbox"/> A temporary Class "B" license to sell WINE at picnics or similar gathering under s. 125.51(10) Wis. Stats. (Limit 2 permits 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) <u>Appleton Downtown Inc.</u>						Date Organized <u>4.2.1993</u>	
Address <u>333 W. College Ave, Ste 100</u>		City <u>Appleton</u>		State <u>WI</u>		Zip <u>54911</u>	
Person in Charge of Event:			Name: Last <u>Stephany</u> First <u>Jennifer</u> Middle Initial <u>L.</u>		Date of Birth <u>●●●●●●</u>		
Address <u>333 W College Ave, Ste 100</u>		City <u>Appleton</u>		State <u>WI</u>		Zip <u>54911</u>	
Person in charge phone number: <u>●●●●●●●●●●</u>							
President Last <u>Johnson</u> First <u>Deb</u> Middle Initial <u>A</u>		Date of Birth <u>●●●●●●</u>		Male		Female <input checked="" type="checkbox"/>	
Address <u>300 W. College Ave</u>		City <u>Appleton</u>		State <u>WI</u>		Zip <u>54911</u>	
Vice President Last <u>Vargosko</u> First <u>Laura</u> Middle Initial <u>E</u>		Date of Birth <u>●●●●●●</u>		Male		Female <input checked="" type="checkbox"/>	
Address <u>4321 N. Ballard Rd</u>		City <u>Appleton</u>		State <u>WI</u>		Zip <u>54919</u>	
Secretary Last <u>King</u> First <u>Lyssa</u> Middle Initial <u>M</u>		Date of Birth <u>●●●●●●</u>		Male		Female <input checked="" type="checkbox"/>	
Address <u>303 N. Onzida St</u>		City <u>Appleton</u>		State <u>WI</u>		Zip <u>54911</u>	
Treasurer Last <u>Lonsway</u> First <u>Steve</u> Middle Initial <u>T</u>		Date of Birth <u>●●●●●●</u>		Male <input checked="" type="checkbox"/>		Female	
Address <u>1004 S. Oldie Onzida St</u>		City <u>Appleton</u>		State <u>WI</u>		Zip <u>54911</u>	
SECTION 2 - EVENT INFORMATION SECTION							
Date(s) of Event: Beginning <u>7/1/21</u> Ending: <u>9/30/21</u> Hours: <u>5:30</u> AM (PM) <u>9:30</u> AM (PM)		<u>(14wks)</u>					
Please describe the type of event you are going to have: <u>Summer music concert series</u>							
Do you plan to serve food at this event?		No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>		If yes, contact the Appleton Health Department. (920.832.6429)			
Location where beer or wine will be sold: <u>Jones Park & Parking Lot</u>							
Address <u>301 W. Lawrence St.</u>		City <u>Appleton</u>		State <u>WI</u>		Zip <u>54911</u>	
Are you requesting an "open concept" license?		No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>		Will minors be present?		No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>	
Describe actual location and dimensions of area to be licensed - Be precise! <u>Full use of Park area</u>				If yes, how will you prevent minors from obtaining alcoholic beverages? <u>Wristband required w/ ID - tickets w/ licensed bartenders.</u>			
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 and 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 <u>Marghan Warner</u>							
FOR OFFICE USE ONLY							
Dept.	Approve	Deny	By	Reason			
Police							
Fire							
Health							
Inspection							
S&L	Council	Date Issued	Exp. Date	License Number			

11-01-09 Reasonable accommodations for persons with disabilities will be made upon request and if feasible.

Return application to: City Clerk, 100 North Appleton Street, Appleton, WI 54911-4799

2021 Heid Music Summer Concert Series COVID-19 Mitigation Plan

1.) Alternate Date(s) N/A

- We will delay our start date to July 1 and run the series through Sept. 30th.

Alternate dates are not guaranteed to be approved

2.) # of Participants:

- Up to 5000 - Attendance will vary based on band and weather.
A typical show is 2000-3000.
- Food Vendors 4
- Volunteers 20
- ADI Staff 2

3.) Describe plans to mitigate the spread of COVID-19 (social distancing, mask wearing, numbers of participants, etc.) *Note: Diagrams, drawings and maps are encouraged

Covid-19 Market Protocols:

1. The first measure we are taking is to move the event to Jones Park for all shows. Jones Park is 5.75 acres plus the parking lot area which we plan to use to further distance our infrastructure to service attendees. Layout drawings attached.
2. Masks or shields will be required for all concert staff, food vendors and volunteers until such time as the City of Appleton Health Department advise us. Each volunteer, staff and food vendor will receive a protection kit with two face shields, 2 masks and defogger.
3. Free masks available for attendees.
4. Keep It Safe Stations: 4 Stations with hand sanitizer, masks and messaging throughout the layout. Messaging: Please help keep all Downtown events safe! Remember to social distance. Wear a mask when in line. Sanitize!
5. Attendees will need to put on their own wristband with our supervision.

4.) Provide ways to keep participants adequately spaced (6 ft. apart) during the event:

1. The layout will use the Jones Park parking lot as shown in attached diagram to spread out food vendors, portable toilets and create a larger bar area to service the attendees. Chalk will be used to create service lines and distancing markers.
2. Additional signage at the food booths, wristband booth and bar with reminders on "Social Distancing" and asking to wear your mask when placing your order.
3. The wristband booth will create a four sided service area to reduce congestion.

5.) How will food/beverages be sold/served safely, in pre-packaged individual servings (if applicable)?

1. Self-serve condiments will be prohibited. Vendors must provide individual use packets.
2. Encourage the sale of prepared pre-packaged food

6.) What steps will be initiated to ensure compliance and accountability of your plan? Please provide the name of the contact person responsible for the COVID-19 mitigation plan compliance:

Jennifer Stephany, Executive Director of Appleton Downtown Inc.

Meghan Warner, Event Coordinator/Farm Market Manager

Sandy Storch, ADI Staff

- Volunteer and Vendor Communication materials will clearly state our policies.
- Concert Staff will promote safe behaviors by communicating clear expectations in opening and mid event announcements from the stage. As well as providing gentle reminders as needed throughout the event.
- Sandwich board signs with safety precautions will be placed with the Keep It Safe Stations points, plus additional signage at the bar, wristband booth and the bathrooms.

Heid Music Summer Concert Series

Jones Park layout

- Wristband Booth: ■
- Keep It Safe Station: KISS ●
- See parking lot attachment



