



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

REQUEST for Alcohol License Premise Amendment

FEES ARE NON-REFUNDABLE	Date Recv'd <u>6/7/23</u>
License Fee \$10.00/event	Acct: CLCAGP
Receipt <u>5187-6</u>	

SECTION 1 – LICENSE INFORMATION

Name of Establishment Fox Cities Performing Arts Center	
Address of Establishment 400 West College Ave. Appleton, WI 54911	
Name of Agent Maria Van Laanen	Phone Number REDACTED

SECTION 2 – PREMISE AMENDMENT

Please describe the change in premises:
A drawing/diagram of the proposed area must also be submitted with this application
 The Fox Cities PAC. will be hosting our annual cookout as a thank you to our Partners support this past year. The event will be taking place on Wednesday, August 16, 2023 from 5:00 PM -7:30 PM. We are planning to host a summer cookout, outdoors at the Center, on our Loading Dock. Traditional Wisconsin Cookout food will be served and a variety of beverages. To allow us to serve alcohol at this event we are requesting a one-day amendment to our liquor license. The space has a capacity of approximately 200 people. On site security will be present. Since the event is on the loading dock and in part of the staff parking lot, the Center will provide additional Handicapped parking in the Center's north parking lot. A drawing of the proposed area is attached.

Is this change Permanent? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	If this is temporary please specify the reason for the amendment: Although this event will be hosted on Center property, it is outside and we will need our liquor license amended for the day to extend outside to this space.
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Please list the date(s) and time(s) that this temporary premise amendment will be utilized:
 The event will be on Wednesday, August 16, 2023 from 5:00p.m. - 7:30p.m.

SECTION 3 – PENALTY NOTICE

I certify that I am familiar with Section 9-52 of the Municipal Code of the City of Appleton and agree that any license granted under this application may be suspended for cause at any time by the Common Council.
 Under penalty of law, I swear that the information provided in this application is true and correct to the best of my knowledge and belief.
 Signature of Applicant:

FOR OFFICE USE ONLY

Department	Approve	Deny	By	Reason
Comm. Dev.				
Finance				
Fire				
Health				
Inspections				
Police				
S&L 07/12/2023	Council 07/19/23	Date Issued	Exp. Date	License Number

