



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

<b>FEES ARE NON-REFUNDABLE</b>	Date Rec'd <u>7/7/21</u>
License Fee - \$10.00 per event	Acct Code: CLCSPB
Investigation Fee + 7.00	Acct Code: CLCPIF
Total Amount Paid <u>17</u>	Receipt <u>2345-1</u>

**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) St. Pius X Catholic Church Date Organized \_\_\_\_\_

Address 500 W Marquette St City Appleton State WI Zip 54911

Person in Charge of Event: Name: Last Schmidt First Toni M. I. F Date of Birth 3/19/72

Address N1769 Shadybrook Ln City Greenville State WI Zip 54942 Person in charge phone number:

President Last Jim First Jugenheimer Middle Initial \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male  Female \_\_\_\_\_

Address 500 W Marquette St City Appleton State WI Zip 54911

Vice President Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Secretary Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Treasurer Last Poudjinski First Kevin Middle Initial \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male  Female \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**SECTION 2 - EVENT INFORMATION SECTION** Friday 3:00pm - Sunday 3:00pm

Date(s) of Event: Beginning 8/13/21 Ending: 8/15/21 Hours 3:00PM @ 3:00PM PM PM

Please describe the type of event you are going to have: Parish picnic w/ music, games and beer tent

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: Enclosed tent on parking lot of church

Address 500 W Marquette St City Appleton State WI Zip 54911

Describe actual location and dimensions of area to be licensed below: - **BE PRECISE!** Tent enclosed, on parking lot of parish

Will minors be present? NOT on property, yes in tent No  Yes

If yes, how will you prevent minors from obtaining alcoholic beverages? Wrist Bands / checking licenses

**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

**FOR OFFICE USE ONLY**

Dept.	Approve	Deny	By	Reason
Police				
Fire				
Health				
Inspection				
S&L				
Date Issued			Exp. Date	License Number