



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

FEES ARE NON-REFUNDABLE	Date Rec'd <u>10/18/2017</u>
License Fee - \$10.00 per event	Acct. 11030.4322
Investigation Fee + 7.00	Acct. 100.2359
Total Amount Paid <u>17.00</u>	Receipt <u>4748738</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) The Building for Kids				Date Organized 11/01/1992			
Address 100 W College Ave		City Appleton		State WI		Zip 54911	
Person in Charge of Event: Name: Last Bittner, Jarrad N.		First		Middle Initial		Date of Birth 07/02/1988	
Address 601 E Hancock St		City Appleton		State WI		Zip 54911	
Person in charge phone number: 920-734-3226 x11							
President Bittner, Jarrad N.		Last		First		Middle Initial	
Date of Birth 07/02/1988		Male <input checked="" type="checkbox"/>		Female <input type="checkbox"/>			
Address 601 E Hancock St, #20		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		First		Middle Initial	
Date of Birth		Male		Female			
Address		City		State		Zip	

SECTION 2 - EVENT INFORMATION SECTION

Date(s) of Event: Beginning 11 / 4 / 2017				Ending: 11 / 4 / 2017				Hours 6PM AM PM 9PM AM PM							
Please describe the type of event you are going to have: A celebration of our 25 year anniversary - a big birthday party.															
Do you plan to serve food at this event?			No		<input checked="" type="checkbox"/> Yes		If yes, contact the Appleton Health Department. (920.832.6429)								
Location where beer or wine will be sold: Inside our facility.															
Address 100 W College Ave				City Appleton				State WI				Zip 54911			
Are you requesting an "open concept" license? <input checked="" type="checkbox"/> NO Yes						Will minors be present? <input checked="" type="checkbox"/> NO Yes									
Describe actual location and dimensions of area to be licensed - Be precise! Second Floor approximately 10x10						If yes, how will you prevent minors from obtaining alcoholic beverages? Must be 21 or older to attend									

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	Council		Date Issued	Exp. Date	License Number