



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

FEEES ARE NON-REFUNDABLE		Date Rec'd <u>6/28/18</u>
License Fee - \$10.00 per event		Acct. 11030.4322
Investigation Fee + 7.00		Acct. 100.2359
Total Amount Paid <u>17.</u>		Receipt <u>4863070</u>

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

The named organization applies for:

- 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 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) Fox Valley Heat Date Organized 8/26/15

Address 313 S. Joseph St. City Appleton State WI Zip 54915

Person in Charge of Event: Name: Last Mueske First Eric Middle Initial S. Date of Birth

Address 313 S. Joseph St. City Appleton State WI Zip 54915 Person in charge phone number:

President Last Mueske First ERIC Middle Initial S. Date of Birth Male Female

Address _____ City _____ State _____ Zip _____

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 08/03/2018 Ending: 08/05/2018 Hours 10:00 AM PM 9:00 AM PM

Please describe the type of event you are going to have: Fastpitch tournament

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: Appleton Memorial Park

Address 1620 Witzke Blvd. City Appleton State WI Zip 54911

Are you requesting an "open concept" license? No Yes Will minors be present? No Yes

Describe actual location and dimensions of area to be licensed - Be precise! Main concessions area 12x12 If yes, how will you prevent minors from obtaining alcoholic beverages? I.D. required and wristbands will be worn.

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 6/26/2018

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

OFFICE OF CITY CLERK
FILED
JUN 28 2018
APPLETON, WISCONSIN