



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

**REQUEST for
Alcohol License
Premise Amendment**

FEES ARE NON-REFUNDABLE		Date Recv'd <u>6/26/23</u>
License Fee	\$10.00/event	Acct: CLCAGP
Receipt	<u>5369-4</u>	

SECTION 1 – LICENSE INFORMATION

Name of Establishment	<u>MEADE STREET BISTRO</u>		
Address of Establishment	<u>2729 N. MEADE STREET Appleton WI 54911</u>		
Name of Agent	<u>Daniel Hoff / Sony Meyer</u>	Phone Number	<u>920-731-8885</u>

SECTION 2 – PREMISE AMENDMENT

Please describe the change in premises:
A drawing/diagram of the proposed area must also be submitted with this application
Drawing ATTACHED

Is this change Permanent?	If this is temporary please specify the reason for the amendment:
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

Please list the date(s) and time(s) that this temporary premise amendment will be utilized:
TUESDAYS - 4 - 8pm
Wed + Thursdays 11am - 8pm
FRIDAYS - 11am - 9pm
SATURDAYS 11am - 9pm
SUNDAYS - For Spec. Events ONLY

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: Sony Meyer

FOR OFFICE USE ONLY

Department	Approve	Deny	By	Reason
Comm. Dev.				
Finance				
Fire				
Health				
Inspections				
Police				
S&L <u>7-12-23</u>	Council <u>7-19-23</u>	Date Issued	Exp. Date	License Number

